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DLN: 93493129014972

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2010

2010

OMB No 1545-0047

Open to Public
Inspection

► The organization may have to use a copy of this return to satisfy state reporting requirements

A For	the :	2010 ca	lendar year, or tax year begir	nning 07-01-2010 and ending 06-30-20)11		
		pplicable	C Name of organization	-		D Employe	er identification number
┌ Addr	ess ch	nange	THE UNIVERSITY OF THE SOUTH			62-047	5697
┌ Nam	e cha	nge	Doing Business As			E Telephor	ne number
┌ Initia	ıl retu	rn	Number and street (or P.O. box	If mail is not delivered to street address)	Room/suite		98-1349
┌ _{Tem}	nınate	d	735 UNIVERSITY AVE	ii maii is not delivered to street addressy	Room, suite	(331)3	
☐ Ame	nded	return	City or town, state or country, a	nd ZIP + 4		G Gross rec	eipts \$ 122,282,951
┌ _{Appl}	ication	pending	SEWANEE, TN 373831000				
			F Name and address of p	orincipal officer	H(a) Is th	nis a group return for a	affiliates? Yes No
			JOHN M MCCARDELL JR 735 UNIVERSITY AVE				
			SEWANEE, TN 3738310	00		all affiliates includ	
						'No," attach a l oup exemption	ist (see instructions)
I Tax	-exem	npt status	▼ 501(c)(3)	◀ (insert no)	H(c) 31	oup exemption	number P
J We	bsite	e:► HTT	P //WWW SEWANEE EDU				
			Corporation Trust Associa	ation Other ►	L Year of	formation 1857	M State of legal domicile TN
Par	t I	Sumi	mary				
		•	escribe the organization's mis IEDULE O	sion or most significant activities			
<u>3</u>	-						
Governance	-						
를	2 (Check th	is hox 🛏 if the organization	discontinued its operations or dispose	d of more than	25% of its ne	t assets
3			,	erning body (Part VI, line 1a)		1 2 3 % OT ILS THE	1
× 6			-	rs of the governing body (Part VI, line 1			
Activities &				in calendar year 2010 (Part V, line 2a)		. 5	
돌			mber of volunteers (estimate	, , , , , ,			
Ş				n Part VIII, column (C), line 12		7	
				e from Form 990-T, line 34		7	· ·
					P	rior Year	Current Year
	8	Contrib	outions and grants (Part VIII	, line 1h)		16,545,255	
욜	9			, line 2g)		76,227,285	
Reveni	10	-	•	mn (A), lines 3, 4, and 7d)		6,996,402	
걆	11			A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,553,230	
	12			11 (must equal Part VIII, column (A), l	ine	101 000 171	122 222 251
\rightarrow						101,322,172	
	13			art IX, column (A), lines 1-3)		19,779,479	
	14			t IX, column (A), line 4) oyee benefits (Part IX, column (A), lines			0
\$	15	10)	s, other compensation, emplo	byee benefits (Part 1X, Column (A), lines	. 5-	43,976,881	44,948,670
<u>8</u>	16a	Profess	sional fundraising fees (Part I	X, column (A), line 11e)		(0
Expenses	b	Total fur	ndraising expenses (Part IX, column	(D), line 25) •2,032,424			
	17), lines 11a-11d, 11f-24f)		33,359,382	35,818,591
	18	Total e	xpenses Add lines 13-17 (r	nust equal Part IX, column (A), line 25)		97,115,742	103,182,652
	19	Revenu	ue less expenses Subtract lu	ne 18 from line 12		4,206,430	19,100,299
\$ 8 \$					Beginn	ing of Current	End of Year
Net Assets or Fund Balances	20	Totala	ssats (Part Y line 16)			Year 493,949,523	
d B	21					60,785,513	
2 E	22			ct line 21 from line 20	_	433,164,010	
Pari			ature Block		<u> </u>	,	,,
Under	penal dge a	ties of pe	erjury, I declare that I have exar	nined this return, including accompanying te. Declaration of preparer (other than offi			
		****	**			2012-05-08	
Sign			ture of officer		l	Date	
Here			H SUTHERLAND ASSISTANT TREASU	RER			
	Т	<u> </u>	or print name and title	Danas and an and tree		Check if self-	
ь		Print/Type preparer's	name	Preparer's signature	Date	employed •	_ PTIN
Paid		Firm's nam	ne P CROSSLIN & ASSOCIATES PC				Firm's EIN 🕨
Prepa Use O		Fırm's add	ress 2525 WEST END AVE SUITE	1100			Phone no • (615) 320-
0 3 0 0	y		NASHVILLE, TN 37203				5500

May the IRS discuss this return with the preparer shown above? (see instructions) .

▼Yes No

Form	990 (2010)					Page
Par		of Program Servedule O contains a res		lishments uestion in this Part III		৮
1	Briefly describe the	organization's missio	n			
SEE	SCHEDULE O					
2	Did the organization the prior Form 990 c	•		ervices during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," describe th	ese new services on S	chedule O			
3				nt changes in how it co		┌ Yes ┌ No
	If "Yes," describe th	ese changes on Scheo	dule O			
4	Section 501(c)(3) a	nd 501(c)(4) organıza	tions and secti	_	largest program services by ire required to report the amo service reported	•
	(Code) (Expenses \$	56,322,234	ıncludıng grants of \$	22,408,588) (Revenue \$	57,629,334)
	SEE SCHEDULE O	, (====================================	,,	g g +	, , , (,,,
4b	(Code) (Expenses \$	11,207,473	including grants of \$	6,803) (Revenue \$	1,974,629)
	SEE SCHEDULE O					
<u></u>	(Code) (Expenses \$	12,970,626	including grants of \$	0) (Revenue \$	18,683,063)
	SEE SCHEDULE O					. , ,

) (Revenue \$

621,879)

Form **990** (2010)

Other program services (Describe in Schedule O) See also Additional Data for Description

85,148,369

4,648,036 including grants of \$

4d

4e

(Expenses \$

Total program service expenses►\$

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🖘	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Νο
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νο
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Parts III and IV</i> .	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

Enter the number reported in Box 3 of Form 1996. Enter-0- if not applicable be finished number of Forms W-20 included in line 1.8 Enter-0- if not applicable 1.0 c Did the organization comply with backup withholding rules for reportable owners and reportable of the organization comply with backup withholding rules for reportable owners and reportable of the organization for insight of the organization in the organization organization in the organization organization in secretical problems of the organization organization in the organization organization in secretical problems or organization in secretical organization in the organization organi		Check if Schedule O contains a response to any question in this Part V	. .		
be interest the number of Forms W-20 included in line 1a. Enter-0- if not applicable Could the organization combly with backup withholding rules for reportable payments to vendors and reportable garnon (garnbing) withing to place withholding rules for reportable payments to vendors and reportable garnon (garnbing) withing to the calculation of the calc				Yes	No
be inter the number of Forms W-20 included in line. 1a Enter-0- if not applicable. Did the organization comply with beckup withholding rules for reportable asyments to remote and reportable garing (asyming) winnings to pure winners? Enter the number of amplyyeas reported on Farm W-3, incontrol of Wage and Tay Carlot (and the Carlot of	•				
but the organization comply with backup withholding rules for reportable paymests to vendors and reportable gaming (pambling) winnings to ginze winners? It is the complete of the provided of form within the year covered by the gaming (pambling) winnings to ginze winners? It is least one is reported on the 24, did the organization file all required federal employment tax returns? Note: if the payment increase and 2 is greater than 250, you may be recurred to e-five (see instructions) Did the organization file as a form 990-T for this year? If "No," provide an explanation in Schedule 0. At any time dump the calendar year, did the organization have an interest in, or a significant or other financial accounts in a foreign country. PSP If "Yes," extend the arms of the foreign country. PSP If "Yes," extend the arms of the foreign country. PSP See instructions for falling requirements for referr To P 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization as party to a prohibited tax shalter transaction at any time during the last year? Does the organization have account growing the responsibility of the property of the organization than the vast or is a porty to a prohibite tax shalter transaction? Ell "Yes," and the organization in that it vast or is a porty to a prohibite tax shalter transaction? Does the organization have acround gross receipts that are normally greater than \$100,000 and did the organization have an explained with every solitorial and accounts. If "Yes," and the organization in matry the denor of the value of the goods or services provided. Do the organization country the property for the value of the goods or services provided. Do the organization country they exer, pay premiums, directly or indirectly, on a personal benefit contract? To be the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To be the organization received a contribution of cars, books, avalance, or other vehicles, did the organization in th	b		-		
parmog (sambling) winnings to price winner? Let the the unbert of employees reported on Form W-3, Transmitted of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this 2 1,707 If sale least one is reported on line 2a, did the organization file all inquired federal amployment tax returns? 2b. Vesi Medic. If the sum of lines 2 and 2 ta is greated than 250, you may be required to e-file. (See in structions) Did the organization have unreleted business gross income of \$1,000 or more during the vasor? Medic. If the sum of lines 2 and 2 ta is greated than 250, you may be required to e-file. (See in structions) Did the organization have unreleted business gross income of \$1,000 or more during the vasor? At any time during the calendar year, did the organization files an interest in, yor a signature or other sutherity accounts of the forming requirements of the form T.O. F.O2.2.1, Report of Foreign Dank and Financial Accounts At any time during the calendar year, did the organization have a bathax account; accounts? We see the organization is partly to a prohibited tax shelter transaction at any time during the tax year? So In the variety is line 5 and 5, but the organization that it was on is a partly to a prohibited tax shelter transaction? By If Year, a this transmit on Form 10 F.O2.2.1, Report of Foreign Dank and Financial Accounts We see the organization in partly the organization file from 886-17. So In the organization of the organization file organization with the surface of the partly of the organization of the partly of the organization with the variety of the organization with the variety of the organization of the		1b 0			
Either than number of employees reported on Farm W-3, Transported of Viago and Tax Statements field for the called not year ending with no within the value covered by this 2a 1,700 by the statement of the first contributions of the statement of	C		1c	Yes	
is the time of the organization in the law organization file all required fideral employment tax returns 2 b for the organization file all and 2 is greater than 250, you may be required to e-file (see instructions). Due the organization has unrelated business gross income of \$1,000 or more during the year? 3a 00 3a 0					
Mote. If the sum of lines is and 2 as greater than 250, you may be required to e-file (see instructions) Mote. If the sum of lines is a and 2 as greater than 250, you may be required to e-file (see instructions) But the organization have unrealed business great in summore of 51,000 or more during the year? At any time during the calendar year, did the organization have an unterest in, or a signature or other authority over, if instruction as count in a foreign country (such as a bank account, security?). At any time during the calendar year, did the organization have an unterest in, or a signature or other authority over, if instruction as country. At any time during the calendar year, did the organization have an unterest in, or a signature or other authority over, if instructions for filing requirements for form TO F 90-221, Report of foreign Bank and Financial Accounts. Was the organization and arty to a prohibited tax shelter transaction at any time during the tax year? 55			,		
Note, If the sum of lines 1s and 2 is greater than 250, you may be required to e-file (see instructions) Dut the organization have unrelated business gross income of \$1,000 or more during the year? If If Yes, the sit filed a Form 990-T for this year? If You, provide an explanation in Schedule 0. At any time during the calendar year, did the organization have an interest in, on a signature or other authority account? If If Yes, the sit filed a Form 990-T for this year? If You, provide an explanation in Schedule 0. At any time during the calendar year, did the organization have an interest in, on a signature or other authority account? If If Yes, the sit the name of the foreign country, 952 See instructions for filing frequencements for Form TD F90-22 I, Report of Foreign Bank and Finencial Accounts Was the organization in party to a prohibited tax shelter transaction at eny time during the tax year? Did any taxable party notify the organization file Form 8880-17 Did she organization and party to a prohibited tax shelter transaction? If If Yes, the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? If If Yes, the thin organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? If If Yes, the thin organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? If If Yes, the thin organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? If If Yes, the thin may receive deductible contributions under section 170(c). If If Yes, the thin may receive deductible contributions under section 170(c). If If Yes, the thin may receive deductible contributions under section 170(c). If Yes is the organization self, explaining, or otherwise dispose of tangible presonal property for which it was required to the Form 2002? If Yes is the organization is t	b		-		
Does the arganization have unrelated business gross income of \$1,000 or more during the year? year? At any time during the calendar year, die this organization have an interest in, or a signature or other authority organization account in a foreign country (security as beat Naccount, securities account, or other financial accounts in foreign country (securities). If Year, "enter the name of the foreign country ►5P See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization a party to a prohibited tax shalter transaction at any time during the tax year? So Miles Mi		Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
Virves The set in field a Form 990 - T for this year? If 'No,' provide an explanation on Schedule 0 3b					
At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a hand-cale account in a foreign country (such as a bank account, securities account, or other financial accounts?) If Y'ea, 'relate the name of the foreign country (such as a bank account, securities account, or other financial accounts accounts?) If Y'ea, 'relate the name of the foreign country (such as a bank account, securities account, or other financial accounts accounts?) Was the organization a party to a prohibited tax sheller transaction at any time during the tax year? Do id any taxable party notify the organization file it was or is a party to a prohibited tax sheller transaction? If Y'ea,' fold the organization flore form 8381-7 (so the organization flore) If Y'ea,' fold the organization flore that were not tax deductible? If Y'ea,' fold the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If Y'ea,' fold the organization notify the donor of the value of the goods or services provided? If Y'ea,' did the organization notify the donor of the value of the goods or services provided? If Y'ea,' did the organization notify the donor of the value of the goods or services provided? If Y'ea,' did the organization notify the donor of the value of the goods or services provided? If Y'ea,' did the organization file a form \$202? If Y'ea,' did the organization file a form \$202? If Y'ea,' did the organization file year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If y'ea,' for the organization file year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If y'ea,' for the organization file year, pay premiums, directly or indirectly, on a personal benefit contract? If y'ea,' for the organization file year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If y'ea,' for the organization			3a		N
over, a financial account in a foreign country (such as a bank account, secunties account, or other financial accounts) ### 17	Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
### A Page 1 ### A Page 2 ### A Page 3 ##					
Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? So If "Yes" to line \$5 or \$5 b, did the organization that it was or is a party to a prohibited tax shelter transaction? Does the organization have annual gross receipts that are normally greater than \$1.00,000, and did the organization solicit any contribution that were not tax deductible? Does the organization have annual gross receipts that are normally greater than \$1.00,000, and did the organization solicit any contributions that were not tax deductible? Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and general solicits and the payor? Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and general solicits and the payor? Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and general solicits and the payor? Did the organization receive any otherwise dispose of tangible personal property for which it was required to file form \$828.2 to the organization solicit any funds, directly or indirectly, to pay premiums on a personal benefit contract? To did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To get the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To get the organization receive and a contribution of qualified intellectual property, did the organization file a form 1098-07. Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations. Did the organization make any taxable distribution to a donor, didnor advised, or related p			4a	Yes	
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Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was			
_	filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		N o
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		N o
Se	ction B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		100	
	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			

State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Forms		Relighest compensated miployee Key employee Officer Institutional Trustee or director		organization (W- organizations 2/1099-MISC) (W- 2/1099-MISC)		compensation from the organization and related organizations		
See Additional Data Table										
-										
			<u> </u>							

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		_											
	(A) Name and Title A verage hours per		Posi t	tion ((che		II		(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estima amount o compens	ited fother
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	,	from t organizati relati organiza	:he on and ed
See Addı	tional Data Table												
							1				+		
											+		
											+		
							-				-		
											+		
1b 5	Sub-Total					•	٠	Þ					
	Total from continuation sheets						•						
	Total (add lines 1b and 1c) .							•	2,383,376		0		573,376
	otal number of individuals (incli 100,000 in reportable compens					ted	above) who	received more tha	n			
												Yes	No
	nd the organization list any forr n line 1a? <i>If</i> "Yes," complete Sch									ated employee	3		No
0	or any individual listed on line 1 rganization and related organiza ndividual										4	Yes	
5 D	id any person listed on line 1a ervices rendered to the organiz		-				-		-		5	1 es	N o
	tion R. Independent Cont											•	

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CHAMBLISS BAHNER & STOPHEL 2 UNION SQ CHATTANOOGA, TN 37402	LEGAL	602,393
CAPLEY & HOUSTON 131 BRANDI WAY WINCHESTER, TN 37398	CONSTRUCTION	346,032
CAMBRIDGE ASSOC POB 10317 UNIONDALE, NY 11556	INVESTMENT ADVISOR	323,949
STORBECKPIMENTEL 1400 PROVIDENCE RD MEDIA, PA 19063	EXECUTIVE SEARCH FIRM	267,507
SANITATION DEPT POB 22 MONTEAGLE, TN 37356	TRASH REMOVAL	241,121
2 Total number of independent contractors (including but not limited to those listed above \$100,000 in compensation from the organization ►8) who received more than	

						ge 9
Statement of Revenu			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	1
embership dues	. 1b . 1c . 1d . 1e and 1f es 1a-1f \$	521,541 12,550,767 1,817,311	13,072,308			
		611310 611310 611310	18,683,063 2,596,508	18,683,063		
ross Rents ess rental expenses ental income (loss)	g dividends, interest	(II) Personal	· ·		-244,140	8,456,70 1,655,83
ross amount om sales of sets other an inventory ss cost or her basis and les expenses ain or (loss) et gain or (loss)	(i) Securities 20,433,340 20,433,340	(II) O ther	20,433,340			20,433,34
contributions reported on lee Part IV, line 18	ne 1c) a b draising events tivities See Part IV, line 19 . a b ning activities a b	Business Code				
	elated organizations	embership dues 1b Indicating events 1c Islated organizations 1d Inveriment grants (contributions) Ie other contributions, gifts, grants, and if initial amounts not included above moresh contributions included in lines 1a-1f \$ Intion & FEES IX SALES & SERVC III other program service revenue In other program service revenue In other similar amounts)	embership dues	Intervenue Int	Addressed companys . 1a Indersted companys . 1b Indersted companys . 1c Indersted . 1,817,211 Indersted	Total revenue Patents Continue Patents Patents Continue Patents Continue Patents Continue Patents Continue Patents Continue Patents Continue Pa

	990 (2010)				Page 10
Part					
	Section $501(c)(3)$ and $501(c)(4)$ organizations mus II other organizations must complete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		Скрепзез	денетат ехрепаса	Скрепзез
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	22,415,391	22,415,391		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	, ,			
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,299,364	926,862	1,282,204	90,298
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	32,140,638	25,721,133	5,312,577	1,106,928
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,032,127	2,412,690	619,437	
9	Other employee benefits	5,401,735	4,188,572	810,758	402,405
10	Payroll taxes	2,074,806	1,623,403	451,403	
а	Fees for services (non-employees) Management				
ь	Legal	539,917	26,088	513,829	
с	Accounting	42,250	5,150	37,100	
d	Lobbying	·			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	1,872,657		1,872,657	
g	Other	9,615,035	8,551,584	 	90,779
12	Advertising and promotion	484,685	316,283	 	2,077
13	Office expenses	1,563,641	1,138,140	 	161,816
14	Information technology	1,108,361	648,446	 	7,601
15	Royalties	23,939	,	23,939	·
16	Occupancy	970,997	859,067	+	28,797
17	Travel	2,401,164	1,822,924	 	57,537
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	_, ,			
19	Conferences, conventions, and meetings	261,880	222,659	38,051	1,170
20	Interest	1,139,845	1,139,845		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,123,686	3,649,091	474,595	
23	Insurance	658,525	401,196	251,633	5,696
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	RENEWALS & REPLACEMENTS	4,405,747	3,222,773	1,164,406	18,568
ь	UTILITIES	2,999,484	2,939,521	59,963	
С	FOOD	1,746,751	1,285,820	419,135	41,796
d	MISC	1,394,587	1,271,718	122,869	
e	EQUIP RENTAL, MAINT	465,440	360,013	88,471	16,956
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	103,182,652	85,148,369	16,001,859	2,032,424
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			2,314,724	1	5,103,295
	2	Savings and temporary cash investments			48,220,262	2	58,598,737
	3	Pledges and grants receivable, net			35,334,690	3	40,575,793
	4	Accounts receivable, net			871,851	4	791,546
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L			97,933	5	43,978
	6	Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B), and contributing e sponsoring organizations of section 501(c)(9) voluntary emploorganizations (see instructions)	ers, and				
ste		Schedule L				6	
Assets	7	Notes and loans receivable, net			3,051,209	7	2,860,977
4	8	Inventories for sale or use			476,827	8	412,482
	9	Prepaid expenses and deferred charges			454,473	9	422,698
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	207,473,747			
	ь	Less accumulated depreciation	10b	71,889,326	133,732,478	10 c	135,584,421
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11			263,209,989	12	291,881,212
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets			6,185,087	14	5,957,518
	15	Other assets See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			493,949,523	16	542,232,657
	17	Accounts payable and accrued expenses .			9,168,000	17	7,351,604
	18	Grants payable				18	
	19	Deferred revenue			1,684,940	19	1,657,987
	20	Tax-exempt bond liabilities			42,242,937	20	40,270,012
je S	21	Escrow or custodial account liability Complete Part IV of Schedu	le D			21	
abilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lia		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	•		7,689,636	25	7,160,244
	26	Total liabilities. Add lines 17 through 25			60,785,513	26	56,439,847
Ş		Organizations that follow SFAS 117, check here ▶ 🔽 and com	plet e l	lines 27			
ĐQ.		through 29, and lines 33 and 34.					
lar	27	Unrestricted net assets			160,588,550		173,198,768
Fund Balance	28	Temporarily restricted net assets			140,091,057		174,618,544
nd	29	Permanently restricted net assets			132,484,403	29	137,975,498
		Organizations that do not follow SFAS 117, check here F a	nd con	nplet e			
or		lines 30 through 34.					
3£	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other f	unds		400 (3.5)	32	105 700 015
Net	33	Total net assets or fund balances			433,164,010		485,792,810
	34	Total liabilities and net assets/fund balances			493,949,523	34	542,232,657

Pal	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		122,2	282,951
2	Total expenses (must equal Part IX, column (A), line 25)	2			.82,652
3	Revenue less expenses Subtract line 2 from line 1	3		19,1	.00,299
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		433,1	.64,010
5	Other changes in net assets or fund balances (explain in Schedule O)	5		33,5	528,501
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		485,7	92,810
Pai	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain i				
	Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ıssued			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ne	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	required	3b	Yes	

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization THE UNIVERSITY OF THE SOUTH

62-0475697 Reason for Public Charity Status (All organizations must complete this part.) See instructions organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizat col (i) list your gove docume	e ion in ted in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizat col (i) orga	on in anized	(vii) A mount of support	
		instructions))	Yes	No	Yes	No	Yes No			
 Total										

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

11g(iii)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	dider rate III. If the	organización i	ans to quanty t	maci the tests	iisted below, pie	case complet	c raic III.
S	ection A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from						
Ü	line 4						
S	ection B. Total Support	1				I	
	endar year (or fiscal year beginning						
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
-	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activities	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,
	check this box and stop here	_	r		•	. , . , -	▶ ┌॔
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14	
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15	
							
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec	
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor	. -
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶
r/a	10%-facts-and-circumstances test-						ın.
	is 10% or more, and if the organization made			•			
	in Part IV how the organization mee	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1
ט	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat			•		<u>-</u>	clv
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	ETY ▶ ¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

Software ID: Software Version:

EIN: 62-0475697

Name: THE UNIVERSITY OF THE SOUTH

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per		tion (that a	che				(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
THE RT REV HENRY N PARSLEY JR BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV JOHN MCKEE SLOAN BOARD MEMBER	2 00	Х						0	0	0		
THE REV SUSAN SLOAN BOARD MEMBER	2 00	Х						0	0	0		
W CHARLES MAYER III BOARD MEMBER	2 00	Х						0	0	0		
CORNELIA HEFLIN BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV LARRY R BENFIELD BOARD MEMBER	2 00	×						0	0	0		
THE REV MARY CRAIG CARUTHERS BOARD MEMBER	2 00	Х						0	0	0		
LINDA WALKER BOARD MEMBER	2 00	Х						0	0	0		
PAN ADAMS-MCCASLIN BOARD MEMBER	2 00	X						0	0	0		
THE RT REV J NEIL ALEXANDER CHANCELLOR	2 00	×						0	0	0		
THE REV SHARON L HIERS BOARD MEMBER	2 00	Х						0	0	0		
STEVE BURNETT BOARD MEMBER	2 00	X						0	0	0		
JOHN FORD BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV JOHN W HOWE DD BOARD MEMBER	2 00	Х						0	0	0		
THE REV STEPHEN CLIFTON BOARD MEMBER	2 00	×						0	0	0		
PARKER BAUER BOARD MEMBER	2 00	×						0	0	0		
FRANK B GUMMEY III BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV PHILIP M DUNCAN II BOARD MEMBER	2 00	Х						0	0	0		
THE REV JOHN H RIGGIN BOARD MEMBER	2 00	Х						0	0	0		
ERIC STEVENSON BOARD MEMBER	2 00	×						0	0	0		
AMY HAMILTON BOARD MEMBER	2 00	×						0	0	0		
THE RT REV JAMES M STANTON BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV PAUL E LAMBERT BOARD MEMBER	2 00	Х						0	0	0		
THE REV ROBERT M CORLEY BOARD MEMBER	2 00	Х						0	0	0		
DAN WILSON BOARD MEMBER	2 00	X						0	0	0		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours	Posi t	tion (that a	che				(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other		
	per week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
ORRIN HARRISON III BOARD MEMBER	2 00	X						0	0	0		
THE RT REV CLIFTON DANIEL III BOARD MEMBER	2 00	Х						0	0	0		
THE REV ROBERT ALVES BOARD MEMBER	2 00	×						0	0	0		
ROBERT OVERMAN BOARD MEMBER	2 00	Х						0	0	0		
DANIEL STROUD BOARD MEMBER	2 00	X						0	0	0		
THE RT REV GEORGE DIBRELL YOUNG III BOARD MEMBER	2 00	х						0	0	0		
THE REV TAYLOR DINSMORE BOARD MEMBER	2 00	Х						0	0	0		
ROBERT G NORRED JR BOARD MEMBER	2 00	×						0	0	0		
LEE PHILLIPS BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV SAMUEL JOHNSON HOWARD BOARD MEMBER	2 00	Х						0	0	0		
THE REV DR NANCEE MARTIN- COFFEY BOARD MEMBER	2 00	Х						0	0	0		
BLUCHER B LINES BOARD MEMBER	2 00	X						0	0	0		
PAMELA JORDAN ANDERSON BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV C WALLIS OHL BOARD MEMBER	2 00	Х						0	0	0		
THE REV MICHAEL CALDWELL BOARD MEMBER	2 00	Х						0	0	0		
CATHERINE WEHLBURG BOARD MEMBER	2 00	Х						0	0	0		
SHERRI GLASER BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV SCOTT A BENHASE BOARD MEMBER	2 00	Х						0	0	0		
THE VERY REV ROBERT FAIN BOARD MEMBER	2 00	Х						0	0	0		
WILLIAM R BRUCE BOARD MEMBER	2 00	Х						0	0	0		
DEBORAH THOMAS BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV TERRY ALLEN WHITE BOARD MEMBER	2 00	Х						0	0	0		
THE VERY REV MARK BOURLAKAS BOARD MEMBER	2 00	Х						0	0	0		
JAMES MCGINLEY MAC JEFFERSON BOARD MEMBER	2 00	Х						0	0	0		
LESLIE NEWMAN BOARD MEMBER	2 00	Х						0	0	0		

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per	Posi t	((tion (hat a	che	')		ı	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
THE RT REV STACY SAULS BOARD MEMBER	2 00	Х						0	0	0		
THE REV MICHAEL CORKY CARLISLE BOARD MEMBER	2 00	Х						0	0	0		
ADDISON HOSEA BOARD MEMBER	2 00	Х						0	0	0		
ROBERT ROSS BOARD MEMBER	2 00	х						0	0	0		
THE RT REV MORRIS K THOMPSON JR BOARD MEMBER	2 00	Х						0	0	0		
THE REV RALPH HOWE JR BOARD MEMBER	2 00	х						0	0	0		
EDWARD F HAROLD BOARD MEMBER	2 00	Х						0	0	0		
DREW BROACH BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV DUNCAN M GRAY III BOARD MEMBER	2 00	Х						0	0	0		
THE REV DAVID ELLIOTT BOARD MEMBER	2 00	Х						0	0	0		
SCOTT DAVIS BOARD MEMBER	2 00	Х						0	0	0		
MARGARET MCLARTY BOARD MEMBER	2 00	×						0	0	0		
THE RT REV GEORGE WAYNE SMITH BOARD MEMBER	2 00	Х						0	0	0		
THE REV LLEWELLYN M HEIGHAM JR BOARD MEMBER	2 00	Х						0	0	0		
JUDITH LYNN BANDY STUPP BOARD MEMBER	2 00	Х						0	0	0		
JACK LAULESS BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV MICHAEL BRUCE CURRY BOARD MEMBER	2 00	Х						0	0	0		
THE REV BRAD SMITH BOARD MEMBER	2 00	Х						0	0	0		
ANN WINDON CRAVER BOARD MEMBER	2 00	Х						0	0	0		
JONATHAN ENGRAM BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV J SCOTT MAYER BOARD MEMBER	2 00	Х						0	0	0		
THE REV PATRICIA G RUSSELL BOARD MEMBER	2 00	Х						0	0	0		
DON GRIFFIS BOARD MEMBER	2 00	Х						0	0	0		
SALLY MANNING BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV MARK J LAWRENCE BOARD MEMBER	2 00	Х						0	0	0		

Compensated Employees, and Independent Contractors													
(A) Name and Title	(B) Average hours per		tion (that a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation			
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations			
THE REV DR JOHN MACREADIE BARR	2 00	×						0	0	0			
BOARD MEMBER	2 00	^						0	0	0			
WILLIAM CLARKSON BOARD MEMBER	2 00	Х						0	0	0			
ELIZABETH LEWIS BOARD MEMBER	2 00	х						0	0	0			
THE RT REV LEOPOLD FRADE BOARD MEMBER	2 00	х						0	0	0			
THE REV RICHARD J AGUILAR BOARD MEMBER	2 00	Х						0	0	0			
EDMUND T HENRY III BOARD MEMBER	2 00	Х						0	0	0			
ALYSON CROUCH HARDIN BOARD MEMBER	2 00	Х						0	0	0			
THE RT REV DR DABNEY T SMITH BOARD MEMBER	2 00	Х						0	0	0			
THE REV KYLE BENNETT BOARD MEMBER	2 00	Х						0	0	0			
HEATHER M WHELAN BOARD MEMBER	2 00	Х						0	0	0			
DAVID DUNN-RANKIN BOARD MEMBER	2 00	х						0	0	0			
THE RT REV JOHN BAUERSCHMIDT BOARD MEMBER	2 00	Х						0	0	0			
THE REV LEIGH SPRUILL BOARD MEMBER	2 00	Х						0	0	0			
H E ED MILLER JR BO A RD MEMBER	2 00	Х						0	0	0			
W A PETE STRINGER BOARD MEMBER	2 00	Х						0	0	0			
THE RT REV C ANDREW DOYLE BOARD MEMBER	2 00	Х						0	0	0			
THE RT REV DENA A HARRISON BOARD MEMBER	2 00	Х						0	0	0			
THE REV WILLIAM C TREADWELL BOARD MEMBER	2 00	Х						0	0	0			
WILLIAM A GAGE JR BOARD MEMBER	2 00	Х						0	0	0			
SANDRA PRATT WILKENS BOARD MEMBER	2 00	Х						0	0	0			
THE RT REV ANDREW WALDO BOARD MEMBER	2 00	Х						0	0	0			
THE REV NICHOLAS M BEASLEY BOARD MEMBER	2 00	Х						0	0	0			
MILDRED LEE TANNER BOARD MEMBER	2 00	Х						0	0	0			
BETSY SNOWDEN JOHNSON BOARD MEMBER	2 00	Х						0	0	0			
THE RT REV DR DON E JOHNSON BOARD MEMBER	2 00	×						0	0	0			

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per	Posi t	tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
THE REV SENTER CROOK BOARD MEMBER	2 00	Х						o	0	0		
BRUCE STEINHAUER BOARD MEMBER	2 00	Х						0	0	0		
ROBERT D GOOCH JR BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV GARY R LILLIBRIDGE BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV DAVID MITCHELL REED BOARD MEMBER	2 00	Х						0	0	0		
THE REV SEAN MALONEY BOARD MEMBER	2 00	Х						0	0	0		
JULIE CARSON BOARD MEMBER	2 00	Х						0	0	0		
PAGE WILSON BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV D BRUCE MACPHERSON BOARD MEMBER	2 00	Х						0	0	0		
THE REV PAUL MARTIN BOARD MEMBER	2 00	Х						0	0	0		
ANDREA MARIE PETROSH BOARD MEMBER	2 00	Х						0	0	0		
FRANCIS FOOTE MANNING BOARD MEMBER	2 00	Х						0	0	0		
THE RT REV G PORTER TAYLOR BOARD MEMBER	2 00	Х						0	0	0		
THE REV LAWRENCE BRITT BOARD MEMBER	2 00	Х						0	0	0		
BILL STIEFEL JR BOARD MEMBER	2 00	Х						0	0	0		
KEMPER WILLIAMS BROWN BOARD MEMBER	2 00	Х						0	0	0		
MARGARET MANKIN BARTON BOARD MEMBER	2 00	Х						0	0	0		
JULIAN BIBB BOARD MEMBER	2 00	Х						0	0	0		
JAY FAIRES BOARD MEMBER	2 00	Х						0	0	0		
THE REV EMILY BARR RICHARDS BOARD MEMBER	2 00	Х						0	0	0		
SCOTT THOMPSON BOARD MEMBER	2 00	Х						0	0	0		
ELIZABETH FINCH BOARD MEMBER	2 00	Х						0	0	0		
HAROLD RAHN BOARD MEMBER	2 00	Х						0	0	0		
GREGG ROBERTSON BOARD MEMBER	2 00	Х						0	0	0		
DAVID SHIPPS BOARD MEMBER	2 00	Х						0	0	0		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A) Name and Title	(B) Average hours per		tion (che	′)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
THE REV DORIS WESTFALL BOARD MEMBER	2 00	Х						0	0	0
ELLIOTT HARRIGAN BOARD MEMBER	2 00	Х						0	0	0
JACK B HOBSON JR BOARD MEMBER	2 00	Х						0	0	0
CRAIG LAINE BOARD MEMBER	2 00	Х						0	0	0
THE REV MICHAEL SULLIVAN BOARD MEMBER	2 00	Х						0	0	0
KATHRYN INGRAM THOMPSON BOARD MEMBER	2 00	Х						0	0	0
BERT WHITE BOARD MEMBER	2 00	Х						0	0	0
CYNTHIA S CRYSDALE BOARD MEMBER	2 00	Х						0	0	0
NANCY BERNER BOARD MEMBER	2 00	Х						0	0	0
SCOTT H WILSON BOARD MEMBER	2 00	Х						0	0	0
CARRIE HARPER RYAN BOARD MEMBER	2 00	Х						0	0	0
PETER WONG BOARD MEMBER	2 00	Х						0	0	0
JOHN MCCARDELL VICE CHANCELLOR & PRESIDENT	40 00			х				235,081	0	69,481
JOHN GATTA DEAN OF THE COLLEGE	40 00			х				175,056	0	18,011
LINDA LANKEWICZ PROVOST	40 00			х				170,959	0	24,429
JERRY FORSTER VP FOR FINANCE & ADMINISTRATION	40 00			х				158,924	0	49,546
DONNA PIERCE LEGAL COUNSEL	40 00			x				147,165	0	47,696
JETT FISHER VP-UNIVERSITY RELATIONS	40 00			х				141,227	0	108,333
WILLIAM STAFFORD DEAN OF SCHOOL OF THEOLOGY	40 00			х				119,195	0	40,707
ERIC HARTMAN DEAN OF STUDENTS	40 00			х				113,439	0	22,560
PAUL WILEY SECRETARY	40 00			х				96,647	0	21,054
LEE ANN AFTON DEAN OF ADMISSION	40 00			х				86,144	0	9,991
JOEL CUNNINGHAM PROFESSOR	40 00					х		313,206	0	43,968
EUGENE PRUNTY PROFESSOR & CONF DIRECTOR	40 00					х		172,729	0	33,536
FREDERICK CROOM PROFESSOR	40 00					х		160,147	0	34,965

(A) Name and Title	(B) Average hours per week	P Individual trustee or director	-	pply	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
YASMEEN MOHIUDDIN PROFESSOR	40 00				х		150,616	0	20,554
JOHN REISHMAN PROFESSOR	40 00				х		142,841	0	28,54

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

) (Expenses \$ 4,648,036 including grants of \$ 0) (Revenue \$ (Code RESEARCH - WHILE OUTSTANDING TEACHING IS THE PRIMARY FOCUS OF THE FACULTY'S WORK WITH BOTH UNDERGRADUATE AND GRADUATE STUDENTS, THE COMPLEMENTARY NATURE OF RESEARCH THAT INFORMS INSTRUCTION AND CREATES NEW KNOWLEDGE IS INTEGRAL TO THE FACULTY'S SCHOLARLY LIFE AT THE UNIVERSITY THE PUBLICATION OF BOOKS AND OF ARTICLES IN REFEREED JOURNALS, ALONG WITH PRESENTATIONS TO PROFESSIONAL CONFERENCES IN THE ACADEMIC DISCIPLINES. ARE A SIGNIFICANT PART OF TENURE AND PROMOTION CONSIDERATIONS, AND EACH YEAR AN IMPRESSIVE ARRAY OF SCHOLARLY WORK IS PRODUCED BY THE FACULTY, SUPPORTED BY A PROGRAM OF SABBATICAL LEAVE FOR JUNIOR AND SENIOR FACULTY ALIKE IN 2010-11. MEMBERS OF THE FACULTY WERE AWARDED NEARLY \$780.836 IN NATIONAL AND INTERNATIONAL GRANTS SUPPORTING RESEARCH IN THE VISUAL ARTS, HISTORY, AND CHEMISTRY PERHAPS MORE SIGNIFICANTLY. FACULTY ACROSS THE DISCIPLINES INVOLVE STUDENTS IN THEIR RESEARCH WHILE ALSO CREATING OPPORTUNITIES FOR STUDENTS TO CONDUCT ORIGINAL RESEARCH OF THEIR OWN DURING THE ACADEMIC YEAR OR THE SUMMER MUCH OF THE WORK IS COORDINATED THROUGH AN OFFICE OF UNDERGRADUATE RESEARCH WHICH PROMOTES CLOSE FACULTY-STUDENT INTERACTION IN RESEARCH. AND ALSO COORDINATES ACCESS TO THESE OPPORTUNITIES OPERATION AND MAINTENANCE OF PLANT - THE UNIVERSITY OWNS AND MAINTAINS MORE THAN 100 BUILDINGS WITH A TOTAL OF ALMOST 1.5 MILLION SOUARE FEET FOR ACADEMIC INSTRUCTION, STUDENT SERVICES, AND RESIDENCE HALLS THIRTY-FOUR OF THESE ARE RESIDENCE HALLS, INCLUDING SEVERAL FOREIGN LANGUAGE HOUSES, A COMMUNITY ENGAGEMENT HOUSE AND A GREEN HOUSE, WHERE STUDENTS LIVE IN AN INTENTIONAL COMMUNITY FOCUSED ON SUSTAINABLE LIVING AN ADDITIONAL 136 UNIVERSITY STRUCTURES (WITH ANOTHER 337,306 SQUARE FEET) ARE USED AS RENTAL HOUSING, PRIMARILY FOR MEMBERS OF FACULTY AND STAFF THE OLDEST UNIVERSITY BUILDING DATES TO 1866, THE NEWEST WAS COMPLETED IN 2011 APPROXIMATELY 80 PERCENT OF CAMPUS BUILDINGS (INCLUDING RESIDENCE HALLS AND ACADEMIC BUILDINGS) HAVE WIRELESS INTERNET ACCESS ALL BUILDINGS HAVE WIRED CONNECTIVITY THE BUILDINGS OF THE UNIVERSITY ARE CONSTRUCTED PRIMARILY OF NATIVE SANDSTONE, MUCH OF IT QUARRIED FROM THE UNIVERSITY'S DOMAIN THE PREDOMINANT ARCHITECTURAL STYLE IS GOTHIC, A REMINDER OF SEWANEE'S TIES TO THE MEDIEVAL UNIVERSITIES OF ENGLAND AND EUROPE IN THE PAST DECADE. NEW CONSTRUCTION AND RENOVATION OF ACADEMIC AND RESIDENTIAL FACILITIES HAVE CREATED AN ATTRACTIVE ENVIRONMENT FOR LEARNING AND LIVING SOME KEY CAMPUS FACILITIES INCLUDE *SPENCER HALL, WHICH OPENED IN 2008, ADDING 47,000 SOUARE FEET TO THE UNIVERSITY'S SCIENCE TEACHING AND RESEARCH FACILITIES IT GREATLY EXPANDED CLASSROOMS AND LABORATORIES FOR ENVIRONMENTAL SCIENCE AND CHEMISTRY. WHILE ALSO CREATING SPACE FOR A NEW BIOCHEMISTRY MAJOR ENVIRONMENTALLY SENSITIVE AND CERTIFIED FOR LEADERSHIP IN ENERGY AND ENVIRONMENTAL DESIGN (LEED) SILVER, THE BUILDING'S FACADE BLENDS WITH THE GOTHIC ARCHITECTURE OF SEWANEE'S MAIN ACADEMIC OUADRANGLE WHILE ITS INTERIORS ARE MODERN AND OPEN, CONDUCIVE TO "SCIENCE IN SIGHT" DESIGN *SNOWDEN HALL. WHICH REOPENED IN 2010 AFTER A RENOVATION AND EXPANSION THAT MORE THAN DOUBLED ITS SIZE, FEATURES NEW LABS, CLASSROOMS, RESOURCE ROOMS, RESEARCH SPACE, AND FACULTY OFFICES FOR THE STUDY OF FORESTRY, GEOLOGY, AND ENVIRONMENTAL SCIENCES EXPECTED TO BE THE UNIVERSITY'S FIRST LEED GOLD BUILDING, SNOWDEN'S GREEN FEATURES INCLUDE SOLAR PANELS (THE FIRST LARGE-SCALE INSTALLATION ON CAMPUS), RE-USE OF THE BUILDING'S EXISTING WOOD PANELING, ENERGY-EFFICIENT WINDOWS, LOCAL AND RECYCLED MATERIALS, AND THE UNIVERSITY'S FIRST STORMWATER MANAGEMENT PRACTICES THE RENOVATION STRENGTHENS THE BASE OF TECHNICAL SUPPORT - CLASSROOM AND LAB WORK AND ANALYSIS - THAT SNOWDEN PROVIDES FOR THE RESEARCH AND TEACHING DONE IN THE FIELD USING THE RESOURCES OF THE DOMAIN *FOWLER SPORT AND FITNESS CENTER. BUILT IN 1994 AND USED BY THE UNIVERSITY AND COMMUNITY MEMBERS ALIKE, IS THE CENTERPIECE OF THE UNIVERSITY'S ATHLETIC FACILITIES *MCCLURG DINING HALL, BUILT IN 2001 COMPLETELY OF NATIVE SANDSTONE, WITH 42,000 SOUARE FEET AND THE CAPACITY TO SERVE 1,500 DINERS *TENNESSEE WILLIAMS CENTER. A UNIOUE. STATE-OF-THE-ART TEACHING THEATER FOR STUDENTS AND FACULTY OF SEWANEE'S DEPARTMENT OF THEATRE ARTS *JESSIE BALL DUPONT LIBRARY, WITH PRINCIPAL LIBRARY HOLDINGS NUMBERING MORE THAN 730,000 VOLUMES, AND EXTENSIVE ELECTRONIC DATABASES AND ONLINE JOURNALS FOR STUDENTS, FACULTY, AND STAFF *ALL SAINTS' CHAPEL, COMPLETED IN 1957 FOR THE CELEBRATION OF THE 100TH ANNIVERSARY OF THE UNIVERSITY, WHICH SITS AT THE CENTER OF CAMPUS

efile GRAPHIC print - DO NOT PROCESS

As Filed Data

DLN: 93493129014972

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization THE UNIVERSITY OF THE SOUTH 62-0475697 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts

Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year

Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be

used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space

Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Total number of conservation easements

Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a)

Number of conservation easements included in (c) acquired after 8/17/06

Held at the End of the Year 2a 2 2b 3,208 00 2c

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year ► _____

Number of states where property subject to conservation easement is located 🛌

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨

A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ __

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Par	t IIII Organizations Maintaining Co	llections of Art,	His	torica	al Trea	asures, or (Othe	r Similar As	sets (co	ontinued)
3	Using the organization's accession and other items (check all that apply)	records, check any	of th		_	_			ion	
а	Public exhibition		d	Γι	Loan or e	exchange prog) rams			
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	ollections and explain	n how	v they 1	further t	he organizatio	n's ex	kempt purpose i	n	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								_ Yes	√ No
Par	Part IV, line 9, or reported an an						ed "Y	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermed	diary	for cor	ntrıbutıo	ns or other as	sets	not J	_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the fo	ollow	ing tab	ole	1				
								Am	ount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					ſ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV									
Pa	rt V Endowment Funds. Complete	f the organization	ans	wered	d "Yes"	to Form 990	, Pai	•	1	
		(a)Current Year	(b	Prior Ye	ear	(c)Two Years Ba	ck	(d) Three Years Back	(e)Four Y	ears Back
1a	Beginning of year balance	272,487,483		246,0	098,443	313,206,	187			
b	Contributions	5,033,969		11,2	241,702	6,418,	592			
С	Investment earnings or losses	54,223,352		28,4	121,915	-60,013	,539			
d	Grants or scholarships	5,698,947		5,4	198,353	5,593,	100			
е	Other expenditures for facilities and programs	7,336,318		7,7	776,224	7,919,	,697			
f	Administrative expenses									
g	End of year balance	318,709,539		272,4	187,483	246,098,	.443			
2	Provide the estimated percentage of the yea	r end balance held as	5							
а	Board designated or quasi-endowment 🕨	20 000 %								
b	Permanent endowment 🕨 80 000 %									
c	Term endowment ►									
3a	Are there endowment funds not in the posses	ssion of the organiza	tion t	that ar	e held aı	nd admınıstere	ed for	the		
	organization by								Yes	No
	(i) unrelated organizations			•				3a(-	N
h	(ii) related organizations		• on C		 la D2		•	3a(i	- 	No.
4	Describe in Part XIV the intended uses of th	·						30	<u>' </u>	<u>L</u>
	t VI Investments—Land, Buildings					Part X line	10			
	Description of investment			(a) Co	ost or othe investmer	er (b) Cost or o	other	(c) Accumulated depreciation	(d) Bo	ok value
1a	Land				1,635,4	25 10,92	8,247		1	2,563,672
	Buildings		•		196,7			41,340,378		0,474,535
	Leasehold improvements				-,,			, ,	<u> </u>	. ,
	Equipment					41,67	7,566	30,548,948	1	1,128,618
	Other					- 	7,596		+	1,417,596

135,584,421

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of the of year market value
(2)Closely-held equity interests		
(3)O ther	100 550 550	_
(A) EQUITIES	190,668,560	F
(B) BONDS	77,514,404	F
(C) CASH VALUE OF LIFE INSURANCE	1,150,795	F
(D) ASSETS HELD IN OUTSIDE TRUSTS	22,547,453	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	291,881,212	
Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin		
(a) Descrip	tion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	(D) / / insum	
REFUNDABLE ADVANCES	2,740,983	
POSTRETIREMENT BENEFIT OBLIGATIONS	4,419,261	
Total (Column (h) should agent France 200 S. 1.V. 1.15) / S.F.		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	7,160,244	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	122,282,95
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	103,182,65
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	19,100,299
4	Net unrealized gains (losses) on investments	4	33,528,50
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	33,528,50
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	52,628,800
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Retu	ırn
1	Total revenue, gains, and other support per audited financial statements	1	133,396,62
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	12,986,33
3	Subtract line 2e from line 1	3	120,410,29
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 1,872,657		
Ь	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	1,872,65
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	122,282,95
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	80,767,82!
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	(
3	Subtract line 2e from line 1	3	80,767,82!
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,872,657]	
b	Other (Describe in Part XIV)]	
c	Add lines 4a and 4b	4c	22,414,82
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	103,182,65

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Ident if ier	Return Reference	Explanation
DESCRIPTION OF HOW ORGANIZATION REPORTS CONSERVATION EASEMENTS	PART II, LINE 9	CONSERVATION EASEMENT(S) ARE NOT REFLECTED IN THE BALANCE SHEET, INCIDENTAL EXPENSES REFERENCED IN SCHEDULE D PART II, LINE 7 FLOW THROUGH ON THE STATEMENT OF ACTIVITIES
	PART III, LINE 1A	THE UNIVERSITY DOES NOT INCLUDE EITHER THE COST OR THE VALUE OF ITS COLLECTIONS ON THE STATEMENT OF FINANCIAL POSITION, NOR DOES IT RECOGNIZE GIFTS OF COLLECTION ITEMS AS REVENUES IN THE STATEMENT OF ACTIVITIES THE PROCEEDS FROM ITEMS DISPOSED OF ARE REPORTED AS INCREASES IN THE APPROPRIATE CLASS OF NET ASSETS IN THE STATEMENT OF ACTIVITIES CONTRIBUTED WORKS OF ART, HISTORICAL TREASURES, AND SIMILAR ASSETS THAT ARE NOT ADDED TO COLLECTIONS ARE REPORTED AS ASSETS HELD FOR SALE ON THE STATEMENTS OF FINANCIAL POSITION AT THEIR FAIR MARKET VALUES AT THE DATE OF THE GIFT
	PART III, LINE 4	THE UNIVERSITY COLLECTS WORKS OF ART, HISTORICAL TREASURES, AND SIMILAR ASSETS WHICH REFLECT THE HISTORY OF THE INSTITUTION AND/OR SUPPORT ITS EDUCATIONAL PURPOSE THE COLLECTIONS ARE MAINTAINED FOR PUBLIC EXHIBITION, EDUCATION AND RESEARCH IN FURTHERANCE OF PUBLIC SERVICE RATHER THAN FOR FINANCIAL GAIN COLLECTIONS ARE PROTECTED, KEPT UNENCUMBERED, CARED FOR, AND PRESERVED AS A MATTER OF POLICY, THE PROCEEDS OF ITEMS IN COLLECTIONS THAT ARE SOLD ARE USED TO ACQUIRE OTHER ITEMS FOR COLLECTIONS
DESCRIPTION OF INTENDED US OF ENDOWMENT FUNDS	E PART V, LINE 4	ENDOWMENT FUNDS ARE HELD IN PERPETUITY AND THE EARNINGS ARE USED FOR PURPOSES DESIGNATED BY DONORS IN GIFT AGREEMENTS THESE PURPOSES INCLUDE, BUT ARE NOT LIMITED TO STUDENT FINANCIAL AID, INTERNSHIPS, FACULTY SUPPORT, FACILITIES, MAINTENANCE, AND OPERATIONS
PART XII, LINE 2D - OTHER ADJUSTMENTS		SCHOLARSHIP EXPENSE NETTED AGAINST TUITION REVENUE ON FINANCIAL STATEMENTS -20,542,170
PART XIII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIP EXPENSE NETTED AGAINST TUITION REVENUE ON FINANCIAL STATEMENTS 20,542,170
		PART X, LINE 2 THE UNIVERSITY ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A MORE LIKELY THAN NOT THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER EXAMINATION BY THE APPLICABLE TAXING AUTHORITY IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A CUMULATIVE PROBABILITY ASSESSMENT THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS TAX POSITIONS FOR THE UNIVERSITY INCLUDE, BUT ARE NOT LIMITED TO, THE TAX EXEMPT STATUS AND DETERMINATION OF WHETHER INCOME IS SUBJECT TO UNRELATED BUSINESS INCOME TAX, HOWEVER, THE UNIVERSITY HAS DETERMINED THAT SUCH TAX POSITIONS DO NOT RESULT IN AN UNCERTAINTY

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Schools

►Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

► Attach to Form 990 or Form 990-EZ.

2010

Open to Public Inspection

Name of the organization THE UNIVERSITY OF THE SOUTH Employer identification number

	62-0475697			
Pa	rtI		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
ь	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a	<u> </u>	Νo
b	Admissions policies?	5b		Νo
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		Νo
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	or No. 1.30 13 30, 1373 2 6 5 307, covering factor hondiscrimination. If 140, explain on Factor	7	Yes	

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE UNIVERSITY DRAWS A LARGE PERCENTAGE OF ITS STUDENTS FROM A LARGE GEOGRAPHIC SECTION THE UNIVERSITY FOLLOWS A RACIALLY NONDISCRIMINATORY POLICY AND INCLUDES APPROPRIATE STATEMENTS IN ITS RECRUITING, ADMISSIONS, AND SCHOLARSHIP BROCHURES AND CATALOGUES
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	FUNDS FOR FINANCIAL AID TO STUDENTS ARE RECEIVED FROM THE U.S. DEPARTMENT OF EDUCATION FOR COLLEGE WORK STUDY, SUPPLEMENTAL EDUCATION OPPORTUNITY GRANTS, PELL, ACG, AND SMART GRANTS PERKINS LOANS CONTINUE TO BE DISBURSED FROM THE REVOLVING LOAN FUND

Schedule E (Form 990 or 990-EZ) 2010

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As Filed Data -

DLN: 93493129014972

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

to Part I

c Totals (add lines 3a and 3b)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions. Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

	UNIVERSITY OF THE SOUTH				Employer ruene	in leation number
· · · L	ONIVERSITY OF THE SOUTH				62-0475697	
Pa	General Informatio "Yes" to Form 990, Pa			the United States. C	complete if the organiz	ation answered
L	For grantmakers. Does the assistance, the grantees' elimentees the grantees assistance?	organization i gibility for the	maıntaın recor grants or ass	istance, and the select	ion criteria used to awa	
2	For grant makers. Describe in Pa United States	art V the organı	zatıon's procedı	ires for monitoring the us	e of grant funds outside tl	he
3	Activites per Region (Use Part	V ıf addıtıonal s	space is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region of independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	SOUTH ASIA	0	5	PROGRAM SERVICE	INSTRUCTION	112,319
	EAST ASIA & THE PACIFIC	0	5	PROGRAM SERVICE	INSTRUCTION	99,765
	EUROPE	1	10	PROGRAM SERVICE	INSTRUCTION	521,686
	RUSSIA	0	2	PROGRAM SERVICE	INSTRUCTION	52,102
	CENTRAL AMERICA & THE	0	3	PROGRAM SERVICE	INSTRUCTION	39,04
	CENTRAL AMERICA & THE CARIBBEAN			INVESTMENTS		32,030,000
2-	Sub-total	1	. 25			32,854,913
	Total from continuation sheets		23			32,854,913

32,854,913

Part	Part IV, lı	ne 15, for any					plete if the organizate received more than		
	a) Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nun tax-exempt by	hber of reciple the IRS, or fo	ent organizations lis or which the grante	ted above that are i e or counsel has pro	ecognized as chari ovided a section 50:	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	 as . ▶	
3	Enter total nun	nber of other o	organizations or en	tities					(Form 990) 2010

Schedule F (Form 990) 2010 Page **3** Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed. (a) Type of grant or (c) Number of (d) A mount of (e) Manner of cash (b) Region (f) A mount of (g) Description (h) Method of of non-cash valuation assistance recipients cash grant disbursement non-cash (book, FMV, assistance assistance appraisal, other) 38,550 CREDIT TO 21 SCHOLARSHIP SOUTH ASIA STUDENTS' ACCOUNTS RECEIVABLE SCHOLARSHIP EAST ASIA/PACIFIC 2 4,700 CREDIT TO STUDENTS' ACCOUNTS RECEIVABLE EUROPE/ICELAND/GREENLAND SCHOLARSHIP 16 179,517 CREDIT TO STUDENTS' ACCOUNTS RECEIVABLE SCHOLARSHIP CENTRAL AMERICA 8 3,090 CREDIT TO STUDENTS' & CARIBBEAN ACCOUNTS RECEIVABLE

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Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)</i>	<u> </u>	Yes	Γ	N
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	N
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	굣	Yes	Г	N
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	✓	Yes	Г	N
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	<u>~</u>	N
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	<u>ত</u>	N

Schedule F (Form 990) 2010

Schedule F (Form 990) 2010

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 SCHOLARSHIP AWARDS ARE CREDITED TO THE STUDENTS' ACCOUNTS RECEIVABLE AT THE UNIVERSITY OF THE SOUTH CREDIT IS APPLIED DIRECTLY AGAINST TUITION AND FEES CHARGED TO THE STUDENT FOR SUMMER ABROAD PROGRAMS AND ONE SEMESTER ABROAD PROGRAM

ldentifier	Return Reference	Explanation
OTHER INFORMATION	SCHEDULE F, PART V	SCHEDULE F, PART IV, LINE 1 THE UNIVERSITY WAS A TRANSFEROR OF CASH TO 5 DIFFERENT FOREIGN CORPORATIONS (INVESTMENTS) DURING THE TAX YEAR & COMPLETED THE FORMS 926

ldentifier	Return Reference	Explanation
OTHER INFORMATION	SCHEDULE F, PART V	SCHEDULE F, PART IV, LINE 3 THE INVESTMENT AMOUNT WAS NOT HIGH ENOUGH TO RENDER THE FILING OF FORM 5471

ldentifier	Return Reference	Explanation
OTHER INFORMATION	SCHEDULE F, PART V	SCHEDULE F, PART IV, LINE 4 THE UNIVERSITY IS AN INVESTOR IN ONE OF MORE "PASSIVE FOREIGN INVESTMENT COMPANIES" ("PFICS") THE UNIVERSITY DID NOT RECEIVE ANY TAXABLE DISTRIBUTIONS FROM ANY OF THE PFICS DURING FISCAL YEAR 2011 FORM 8621 IS NOT BEING FILED PURSUANT TO IRS GUIDANCE SET FORTH IN REG SEC 1 1291-1(E)

Schedule F (Form 990) 2010

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DLN: 93493129014972 OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspect ion Employer identification number

THE UNIVERSITY OF THE SOUTH						62-0475697	
Part I General Information 1 Does the organization maintain the selection criteria used to a	records to substant ward the grants or as	nate the amount of the					✓ Yes
2 Describe in Part IV the organiz	zation's procedures fo	or monitoring the use o	f grant funds in the Unite	ed States			
Form 990, Part IV, lir duplicated if additional	ne 21 for any recip	nent that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
2 Enter total number of section 5	01(c)(3) and govern						
3 Enter total number of other org							

Part III	Grants and Other Assistance to Individuals in the United States.	Complete if the organization	answered "Yes" to Form 99	0, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	-		

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS - STUDENTS ENROLLED AT THE UNIVERSITY OF THE SOUTH	1109	22,415,391			

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
PROCEDURE FOR	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 MERIT-BASED SCHOLARSHIPS & NEED-BASED SCHOLARSHIPS AWARDED TO
MONITORING GRANTS		ENROLLED STUDENTS ARE CREDITED TO THE STUDENTS' ACCOUNT TO COVER TUITION & FEES GRADE REPORTS
IN THE U S		ARE GENERATED FOR EACH TERM & EACH INDIVIDUAL STUDENT IS REVIEWED TO INSURE THEY ARE MAKING
		SATISFACTORY ACADEMIC PROGRESS TO MAINTAIN THEIR GRANT/SCHOLARSHIP FUNDING NOTIFICATIONS
		ARE SENT BY THE DEAN OF THE COLLEGE TO ALERT DEPARTMENTS OF WITHDRAWALS ALSO, FINANCIAL AID
		RUNS ENROLLMENT REPORTS EACH TERM TO CHECK THE NUMBER OF CREDIT HRS FOR EACH STUDENT OUR
		THIRD PARTY SOFTWARE IS ALSO CODED TO PREVENT THE CREDIT OF FUNDS TO A STUDENT WITHOUT
		ENROLLED HRS

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DLN: 93493129014972

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

For certain Officers, Directors, Trustees, Key Employees, and Highest

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization **Employer identification number** THE UNIVERSITY OF THE SOUTH 62-0475697 Part I Questions Regarding Compensation

				Yes	Νo	
1a	Check the appropiate box(es) if the organization provided any of the fo 990, Part VII, Section A, line 1a Complete Part III to provide any rel					
	First-class or charter travel	llowance or residence for personal use				
	Travel for companions Payments	for business use of personal residence				
	Tax idemnification and gross-up payments Health or	social club dues or initiation fees				
	Discretionary spending account Personal	ervices (e g , maid, chauffeur, chef)				
b	If any of the boxes in line 1a are checked, did the organization follow a reimbursement orprovision of all the expenses described above? If "No	II a a manufactor Donate TTT to a constant	1b	Yes		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?					
3	Indicate which, if any, of the following the organization uses to establis organization's CEO/Executive Director Check all that apply					
	·	nployment contract				
		tion survey or study				
	Form 990 of other organizations Approval	by the board or compensation committee				
4	During the year, did any person listed in Form 990, Part VII, Section A or a related organization	, line 1a with respect to the filing organization				
а	Receive a severance payment or change-of-control payment from the	rganization or a related organization?	4a		Νo	
ь						
c	Participate in, or receive payment from, an equity-based compensation	arrangement?	4c		Νο	
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable	e amounts for each item in Part III				
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines!	-9.				
5	For persons listed in form 990, Part VII, Section A, line 1a, did the org compensation contingent on the revenues of					
а	The organization?		5a		Νo	
b	Any related organization?		5b		Νo	
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line 1a, did the orgon compensation contingent on the net earnings of	anization pay or accrue any				
а	The organization?		6a		Νο	
b	Any related organization?		6b		Νo	
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III				No	
8	Were any amounts reported in Form 990, Part VII, paid or accured pur subject to the initial contract exception described in Regs section 53 in Part III		8		Νο	
9	If "Yes" to line 8, did the organization also follow the rebuttable presursection 53 $4958-6(c)$?	nption procedure described in Regulations	9			

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	
		(i) Base compensation	(ii) Bonus & incentive compensation	incentive reportable		benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) JOHN MCCARDELL	(ı) (ıı)	227,301	- 1	1	35,625	34,160	304,866	o
(2) JOHN GATTA	(ı) (ıı)	174,660 0	0		5 17,461 0	1,041	1 193,558)
(3) LINDA LANKEWICZ	(ı) (ıı)	170,197 0	0		2 17,811			j
(4) JERRY FORSTER	(ı) (ıı)	158,834 0	0	90	16,725		8 208,957 0 0	ر م
(5) DONNA PIERCE	(ı) (ıı)	146,907 0	_		3 15,278 0	32,896	6 195,339 0 0))
(6) JETT FISHER	(ı) (ıı)	141,089		11	13,496	95,262	2 249,985	ر ن
(7) WILLIAM STAFFORD	(ı) (ıı)	118,799 0	- 1	396 0	30,466	10,729	9 160,390))
(8) JO EL CUNNINGHAM	(ı) (ıı)	286,375 0	0	/	. 36,750	7,710	357,666	ر نا
(9) EUGENE PRUNTY	(ı) (ıı)	172,333 0		1	26,318	7,709	206,756)
(10) FREDERICK CROOM	(ı) (ıı)	159,385 0			25,274		2 195,593 0 0	ر عاد
(11) YASMEEN MOHIUDDIN	(ı) (ıı)	150,277 0		339 0	13,902			ر اد
(12) JOHN REISHMAN	(ı) (ıı)	142,417 0		1	21,927		171,808	<u> </u>
(13)			1	[
(14)	 '	†		· ·				
(15)				1				
(16)		†	1	· · · · · · · · · · · · · · · · · · ·	1		†	

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	1A	THE UNIVERSITY REQUIRES THE VICE-CHANCELLOR TO OCCUPY THE ON-CAMPUS RESIDENCE PROVIDED FOR HIM CERTAIN SERVICES ARE PROVIDED WITH THE RESIDENCE SUCH AS A CUSTODIAN THE PORTION OF THE STRUCTURE ALLOCABLE TO THE PERSONAL LIVING QUARTERS AND THE RELATED SERVICES FOR SUCH QUARTERS ARE INCLUDED IN HIS NON-TAXABLE BENEFITS REPORTED ON SCHEDULE J PART II, COLUMN (D)

Schedule J (Form 990) 2010

DLN: 93493129014972

Open to Public

Inspection

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

Capital expenditures from proceeds

Other spent proceeds

10

11

Department of the Treasury Internal Revenue Service Name of the organization

THE UNIVERSITY OF THE SOUTH

Part I Bond Issues

explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

Employer identification number

62-0475697

	Dona 1334C3																		
	(a) Issuer Name	(b) Issuer EIN	suer EIN (c) CUSIP # (d) Date Issued (e) Issue Price (f) Description of Pur		f) Description of Purpose		(f) Description of Purpose		feased	Beh)On alf of suer		Pool ncing						
								Yes	No	Yes	No	of finan No Yes	No						
A	FRANKLIN CO HEALTH&EDU FACILITIES BOARD	52-1282324	0353325S1	12-01-2005	13,200,000	ACADE	ACADEMIC BLDG&DORM RENOV		ADEMIC BLDG&DORM RENOV		ADEMIC BLDG&DORM RENOV		CADEMIC BLDG&DORM RENOV		х		х		х
В_	FRANKLIN CO HEALTH&EDU FACILITIES BOARD	52-1282324	NONEAVAIL	07-01-2009	14,400,000	BOND REDEMI	BOND REDEMPT/ACADBLDG REN		х		Х		Х						
-																			
Pa	rt III Proceeds																		
					Α		В		С										
1	A mount of bonds retired																		
2	A mount of bonds legally defe	ased																	
3	Total proceeds of issue				13,2	13,200,000 14,400,000													
4	Gross proceeds in reserve fu	nds																	
5	Capitalized interest from proc	eeds																	
6	Proceeds in refunding escrow	1																	
7	Issuance costs from proceeds				87,167	46,887													
8	Credit enhancement from pro	ceeds																	
9	Working capital expenditures from proceeds																		

12	Other unspent proceeds								
13	Year of substantial completion	20	2008		2010				
		Yes	Yes No		No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		Х	х					
15	Were the bonds issued as part of an advance refunding issue?		Х		Х				
16	Has the final allocation of proceeds been made?	х		х					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	х		Х					
Par	Private Business Use								

	1111 dtc Business osc								
			A	I	В		С)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		х				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X				

13,200,000

14,400,000

Part III Private Business Use (Continued)

			4		В	С			D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		х		х				
ь	Are there any research agreements that may result in private business use of bond-financed property?		х		х				
С	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	Х		x					
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %				
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 %					
6	Total of lines 4 and 5		0 %		0 %				
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х					

Part IV Arbitrage

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	×		Х					
2	Is the bond issue a variable rate issue?		Х	Х					
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		x		х				
b	Name of provider		1		1				
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?	Х			Х				
ь	Name of provider	TRANSAMER OCCIDENTA							
С	Term of GIC	1 7000	0000000						
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	х							
5	Were any gross proceeds invested beyond an available temporary period?		Х		х				
6	Did the bond issue qualify for an exception to rebate?		х		х				

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Ident if ier	Return Reference	Explanat ion

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OMB No 1545-0047

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2010

Open to Public Inspection

Internal Revenue Service	Inspection
Name of the organization THE UNIVERSITY OF THE SOUTH	Employer identification number
	62-0475697

Part I Excess Benefit Tran Complete if the organizat									ne 40b	
										orrected?
1 (a) Name of disqu	Janneu	person		(b) Desc	ription	oftrans	action		Yes	No
2 Enter the amount of tax impose							ear unde	r		
section 4958							. •	* \$ ——		
3 Enter the amount of tax, if any,	on line	2, abov	e, reimbursed by the	e organization .			•	· \$		
Part II Loans to and/or F	rom 1	nteres	sted Persons							
Complete if the organiz				, Part IV , line 26 ,	or Form	n 990-E	Z, Part V	, line 38	a	
· · · · · ·							(f)	•		
(a) Name of interested person and		(b) Loan to or from the (c)Or			(e) I			Approved		en
purpose	organiz	zation?	principal amount	(d)Balance due	default?	ult?	by board or committee?		agreement?	
	То	From	-		Yes	No	Yes	No	Yes	No
(1) JERRY FORSTER-EMPLOYEE										
EDUCATION		X	28,061	16,837		Νo	Yes		Yes	
(2) JERRY FORSTER-FAMILY										
EDUCATION	ļ	X	18,000	9,250		No	Yes		Yes	
(3) JETT FISHER-FAMILY			24.264	16.224		N -	,, , ,		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
EDUCATION (A) PAUL WILEY EMPLOYEE	1	X	24,264	16,324		No	Yes		Yes	
(4) PAUL WILEY-EMPLOYEE EDUCATION		l x	35,000	28,000		No	Yes		Yes	
	1	 	33,000			1	+		1	
Total	'		> \$	70,411						
Part IIII Grants or Assistan	ce Be	nefittii	ng Interested P	ersons.			•			
Complete If the orga	nızatıo	n answ	<u>ered "Yes" on For</u>	m 990, Part IV	, line 2	27.				
(a) Name of interested pers	on	(b)	Relationship betwe	•	son	(c) A m	ount of a	rant or tv	pe of assis	tance
			and the org	anızatıon		(0)/////	- Iounic or g	idile or cy	pc 01 u3313	- Carree
(1)										21 1 5 0
(2)										31,159
\~/										81,000
										•

Part TV Bus	iness Transact	tions Involving T	nterested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization	m answered res on	101111 330, 1 arc 1 v , 111	10 200, 200, 01 20C.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sha organiz reven	atıon's
	organization			Yes	No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

xplanat ion
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Schedule L (Form 990 or 990-EZ) 2010

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization THE UNIVERSITY OF THE SOUTH

Employer identification number 62-0475697

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining of amounts		ontribut	ion
1	Art—Works of art	Х	4	0	N/A			
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications	Χ		275,286	APPRAISAL			
5	Clothing and household	Х						
good		- ''			N/A			
_	Cars and other vehicles .	Х	2	20,000	APPRAISAL			
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded	Х	84	678,385	QUOTED STOCK PI	RICES	<u> </u>	
	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution—Historic structures							
14	Q ualified conservation							
	contribution—Other	.,						
	Real estate—Residential .	Х	1	790,000	APPRAISAL			
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies							
	Taxidermy		4	^	N. /A			
	Historical artifacts	X	1	U	N/A			
	Scientific specimens							
	Archeological artifacts .	Х	2					
25	Other ► (HORSES) ATHLETIC							
26	Other ► (EQUIPMENT)	x	3	12,640	INVOICE			
	Other ► (FURNITURE)	Х	2		APPRAISAL			
	Other (MISCELLANEOUS)	Х	6		N/A			
29	Number of Forms 8283 received by	the org	anızatıon durıng the tax yea	r for contributions				
	for which the organization complete	d Form 8	3283, Part IV, Donee Ackn	owledgement	29			5
					_		Yes	No
30a	During the year, did the organizatio	n receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three years fr	om the o	late of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the entire h	nolding p	erıod [?]			30a		No
b	If "Yes," describe the arrangement	ın Part I	I					
31	Does the organization have a gift ac	ceptano	e policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use the contributions?	nırd partı 	es or related organizations	to solicit, process, or sell i	non-cash	32a		Νο
Ь	If "Yes," describe in Part II				ļ			
33	If the organization did not report re	venuesı	n column (c) for a type of p	roperty for which column (a) is checked.			
-	describe in Part II		(-//F/- F	. ,	,			

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Ret urn Reference	Explanation
NON REPORTING OF REVENUE	,	REVENUES ARE NOT RECOGNIZED FOR NON-CASH CONTRIBUTIONS (GIFTS-IN-KIND) WHEN THE RELATED ASSET IS NOT RECOGNIZED ON THE BALANCE SHEET

Schedule M (Form 990) 2010

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DLN: 93493129014972

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Open to Public Inspection

Name of the organization THE UNIVERSITY OF THE SOUTH **Employer identification number**

62-0475697

ldentifier	Return Reference	Explanation
ORGANIZATION MISSION STATEMENT	990 PARTS I & III, LINE 1	THE UNIVERSITY OF THE SOUTH IS AN INSTITUTION OF THE EPISCOPAL CHURCH DEDICATED TO THE PURSUIT OF KNOWLEDGE, UNDERSTANDING, AND WISDOM IN CLOSE COMMUNITY AND IN FULL FREEDOM OF INQUIRY, AND ENLIGHTENED BY CHRISTIAN FAITH IN THE ANGLICAN TRADITION, WELCOMING INDIVIDUALS FROM ALL BACKGROUNDS, TO THE END THAT STUDENTS BE PREPARED TO SEARCH FOR TRUTH, SEEK JUSTICE, PRESERVE LIBERTY UNDER LAW, AND SERVE GOD AND HUMANITY THE COLLEGE OF ARTS AND SCIENCES IS COMMITTED TO THE DEVELOPMENT OF THE WHOLE PERSON THROUGH A LIBERAL ARTS EDUCATION OF THE HIGHEST QUALITY OUTSTANDING STUDENTS WORK CLOSELY WITH DISTINGUISHED AND DIVERSE FACULTY IN A DEMANDING COURSE OF HUMANE AND SCIENTIFIC STUDY THAT PREPARES THEM FOR LIVES OF ACHIEVEMENT AND SERVICE PROVIDING RICH OPPORTUNITIES FOR LEADERSHIP AND INTELLECTUAL AND SPIRITUAL GROWTH, WHILE GROUNDING ITS COMMUNITY ON A PLEDGE OF HONOR, SEWANEE ENABLES STUDENTS TO LIVE WITH GRACE, INTEGRITY, AND A REVERENT CONCERN FOR THE WORLD THE SCHOOL OF THEOLOGY EDUCATES WOMEN AND MEN TO SERVE THE BROAD WHOLE OF THE EPISCOPAL CHURCH IN ORDAINED AND LAY VOCATIONS THE SCHOOL DEVELOPS LEADERS WHO ARE LEARNED, SKILLED, INFORMED BY THE WORD OF GOD, AND COMMITTED TO THE MISSION OF CHRIST'S CHURCH, IN THE ANGLICAN TRADITION OF FORMING DISCIPLES THROUGH A COMMON LIFE OF PRAYER, LEARNING, AND SERVICE SEWANEE'S SEMINARY EDUCATION AND WORLD-WIDE PROGRAMS EQUIP PEOPLE FOR MINISTRY THROUGH THE GIFT OF THEOLOGICAL REFLECTION IN COMMUNITY

Internation	D- 4-	Familiary 41
ldentifier	Return Reference	Explanation
SERVICE	FORM 990, PART III, LINE 4A	INSTRUCTION. THE COLLEGE OF ARTS AND SCIENCES OFFERS A CHALLENGING AND STIMULATING PROGRAM IN THE LIBERAL ARTS WITH AN EMPHASIS ON MASTERY OF FUNDAMENTAL DISCIPLINES DEGREE REQUIREMENTS ARE RISOROUS AND EXTENSIVE, AND INCLUDE COMPREHENSIVE EXAMINATIONS IN MAJOR AREAS OF STUDY MORAL AND SPIRITUAL VALUES AREA VITAL PART OF THE DUCATIONAL EXPERIENCE AT SEMANCE, BOTH IN AND OUT OF THE CLASS STOOM WHILE NON-SECTRAIN IN ITS TEACHING AND RECRUING OF STUDENTS AND FACULTY, THE COLLEGE CLAMS TIS EPISCOPAL HERITAGE AND UNDERSTANDS THAT FAITH AND REASON ARE MUTUALLY SINGENIES. THE CONSECTATION IN THE CLUEGE OF ARTS AND SCIENCES IS AMED AT DEVELOPING THE INTELLECT AND CHARACTER OF ITS STUDENTS TO PREPARE THEM FOR LIVES OF SERVICE AND LEADERSHIP THE CORE CLARROUGH REPRESENTS THE ACCULTY'S VISION OF THE KNOWLEDGE, DEAS, AND VALUES AROUND WHICH THE LIBERAL EDUCATION IS STRUCTURED A STUDENT AT SEWANEE IS EXPECTED TO GROW AND MATURE AS A HUMAN BEING, CAPABLE OF RATIONAL ANALYSIS AND MORAL DISCERNMENT AND ABLE TO GIVE EFFECTIVE EXPRESSION TO HIS OR HER DEAS SEWANEES CURRICULUM CHALLENGES WHILE IT EDUCATES THE HIGH EXPECTATIONS PLACED ON STUDENTS ARE BALANCED WITH THE FACULTY'S COMMINIONENT TO PRESONAL ATTENTION AND ENCOLAGEMENT REGARDLESS OF MAJOR, SEWANEE STUDENTS DEVELOP THE ABILITY TO RESEARCH, ANALYZE, SOLVE ROBLEMS, AND EXPRESS THEMSELVES ONCE DESCRIBED BY THE NEW YORK TIMES AS A "BIT OF OXFORD IN TENNESSEE". SEWANEE HAS AN IMPRESSIVE RECORD OF ACADEMIC ACHEWISH. THE RISK SEWANEE HAS AN IMPRESSIVE RECORD OF ACADEMIC EXPERIENCE THE UNIVERSITY A LISO CONCENTRATIONS ALLOW STUDENTS TO TALLOR THERE OWN ACADEMIC EXPERIENCE. THE UNIVERSITY A LISO CONCENTRATIONS ALLOW STUDENTS TO TALLOR THERE OWN ACADEMIC EXPERIENCE. THE UNIVERSITY A LISO CONCENTRATIONS ALLOW STUDENTS TO TALLOR THERE OWN ACADEMIC EXPERIENCE. THE UNIVERSITY A LISO CONCENTRATIONS ALLOW STUDENTS TO TALLOR THERE OWN ACADEMIC EXPERIENCE. THE UNIVERSITY A LISO CONCENTRATIONS ALLOW STUDENTS TO TALLOR THERE OWN ACADEMIC EXPERIENCE. THE UNIVERSITY A LISO CONCENTRATIONS ALLOW

ldentifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	FORM 990, PART III, LINE 4B	STUDENT SERVICES - UNDERGRADUATE STUDENTS AT SEWANEE ARE INDEPENDENT-MINDED AND HIGH ACHIEVING, ATTRACTED TO THE UNIVERSITY BY THE PROSPECT OF INTENSE INTELLECTUAL ENGAGEMENT WITH FACULTY AND PEERS AND THE OPPORTUNITY TO MAKE MEANINGFUL CONTRIBUTIONS TO THE COMMUNITY AND THE BROADER WORLD TO THOSE ENDS, A WIDE RANGE OF CO-CURRICULAR ACTIVITIES ARE AVAILABLE TO INCULCATE AND DEVELOP THE IMPETUS FOR LEADERSHIP MORE THAN 110 CLUBS, ORGANIZATIONS, AND SOCIAL GROUPS PROVIDE INTERACTION AMONG THE MEMBERS OF THE UNIVERSITY AND THE SEWANEE COMMUNITY ABOUT 60 PERCENT OF THE STUDENT BODY JOINS FRATERNITIES OR SORORITIES MORE THAN HALF OF SEWANEE STUDENTS ARE ACTIVE IN SOME TYPE OF COMMUNITY SERVICE, AND STUDENTS SERVE ON THE SEWANEE STUDENTS ARE ACTIVE IN SOME TYPE OF COMMUNITY SERVICE, AND STUDENTS SERVE ON THE SEWANEE VOLUNTEER FIRE DEPARTMENT AND THE SEWANEE EMERGENCY MEDICAL SERVICE SQUADS SERVICE IS AN IMPORTANT PART OF MANY STUDENTS' EXPERIENCE AT SEWANEE THERE ARE NEARLY TWO DOZEN SERVICE ORGANIZATIONS ON CAMPUS, ALL STUDENT-LED EACH YEAR, MORE THAN 100 STUDENTS USE THEIR SPRING BREAK TO SERVE OTHERS IN PLACES SUCH AS HAITI, JAMAICA, ECUADOR, MIAMI, NEW YORK CITY, AND NEW ORLEANS THE UNIVERSITY'S VERSION OF HABITAT FOR HUMANITY, KNOWN AS HOUSING SEWANEE, IS NOW IN 1TS 18TH YEAR AND HAS COMPLETED MORE THAN 15 HOUSES FOR RESIDENTS IN SEWANEE AND FRANKLIN COUNTY THE UNIVERSITY HAS 11 MENS, 12 WOMEN'S, AND 1 COED VARSITY SPORT, INCLUDING FOOTBALL, MEN'S AND WOMEN'S LACROSSE, AND THE EQUESTRIAN PROGRAM MORE THAN HALF OF THE UNDERGRADUATES PARTICIPATE IN INTRAMURAL SPORTS INCLUDING FLOOR HOCKEY, INDOOR SOCCER, AND BASKETBALL NUMEROUS CLUB LEVEL SPORTS, INCLUDING A VERY POPULAR ROWING PROGRAM AND RUGBY, HAVE MET WITH SUCCESS IN COMPETITION WITH OTHER INSTITUTIONS. THE SEWANEE OUTING PROGRAM WAS FOUNDED TO GIVE STUDENTS GUIDED PARTICIPATION IN OUTDOOR ACTIVITIES BOTH ON AND OFF THE DOMAIN, INCLUDING ROCK CLIMBING, RAPPELLING, MOUNTA IN BIKING, CANOEING, AND KAYAKING IT OFFERS STUDENTS THE CHANCE TO EXPLORE THE OUTDOOR TRI

PROGRAM SERVICE STATEMENT HOUSING AND AUXILIARY SERVICES - SUPPORT SERVICES FOR STUDENTS, FACULTY AND STAFF ARE DESIGNED AND OPERATED TO COMPLEMENT AND STRENGTHEN THE INSTRUCTIONAL PROGRAMS OF THE UNIVERSITY ALL UNDERGRADUATE STUDENTS, EXCEPT MARRIED STUDENTS AND THOSE LIVING AT HOME WITH THER FAMILIES, LIVE IN UNIVERSITY - APPROVED HOUSING, PRIMARILY COLLEGE RESIDENCE HALLS IN KEEPING WITH THE PHILOSOPHY OF BUILDING COMMUNITY AMONG THE STUDENTS BODY, STUDENTS ARE NOT ASSIGNED TO RESIDENCE HALLS ACCORDING TO CLASS, FRATERNITY OR SORORITY AFFILIATION, ATHLETICS, OR ACADEMIC DEPARTMENT STUDENTS CHOOSE FROM AMONG COED OR SINGLE-SEX HALLS, SUBSTANCE-FREE HOUSING IS THE CHOICE AMONG A STEADY NUMBER OF STUDENTS THERE ARE SEVERAL FOREIGN LANGUAGE HOUSES, AND A "GREEN HOUSE," WHERE STUDENTS LIVE IN AN INTENTIONAL COMMUNITY FOCUSED ON SUSTAINABLE LIVING THEMATIC RESIDENTIAL CHOICES WITHIN RESIDENCE HALLS INCLUDE SPACES FOR STUDENTS INTERESTED IN PERFORMING ARTS, COMMUNITY SERVICE AND OTHER ACTIVITIES LIVING LEARNING COMMUNITIES ARE THEME-BASED RESIDENCE HALLS WHERE FIRST-YEAR STUDENTS EXPERIENCE CO-CURRICULAR AND SOCIAL OPPORTUNITIES THAT COMPLEMENT THE CLASSROOM EXPERIENCE PARTICIPATION, WHICH IS VOLUNTARY, CONNECTS STUDENTS AND FACULTY AND ISOME FFECT ON RETENTION, ACADEMIC PERFORMANCE, AND STUDENT CONDUCT A SOPHISTICATED AND COMPOSTED AND CARE IS TAKEN TO EXPERSES SOCIAL RESPONSIBILITY IN THE PI IRCHASE OF EFOOD AND IN	ldentifier	Return Reference	Explanation
THE CONSUMPTION OF ENERGY NEEDED TO PREPARE IT AND TO WASH UTENSILS AND DISHWARE	SERVICE	PART III,	DESIGNED AND OPERATED TO COMPLEMENT AND STRENGTHEN THE INSTRUCTIONAL PROGRAMS OF THE UNIVERSITY ALL UNDERGRADUATE STUDENTS, EXCEPT MARRIED STUDENTS AND THOSE LIVING AT HOME WITH THEIR FAMILIES, LIVE IN UNIVERSITY -APPROVED HOUSING, PRIMARILY COLLEGE RESIDENCE HALLS IN KEEPING WITH THE PHILOSOPHY OF BUILDING COMMUNITY AMONG THE STUDENT BODY, STUDENTS ARE NOT ASSIGNED TO RESIDENCE HALLS ACCORDING TO CLASS, FRATERNITY OR SORORITY AFFILIATION, ATHLETICS, OR ACADEMIC DEPARTMENT STUDENTS CHOOSE FROM AMONG COED OR SINGLE-SEX HALLS, SUBSTANCE-FREE HOUSING IS THE CHOICE AMONG A STEADY NUMBER OF STUDENTS THERE ARE SEVERAL FOREIGN LANGUAGE HOUSES, AND A "GREEN HOUSE," WHERE STUDENTS LIVE IN AN INTENTIONAL COMMUNITY FOCUSED ON SUSTAINABLE LIVING THEMATIC RESIDENTIAL CHOICES WITHIN RESIDENCE HALLS INCLUDE SPACES FOR STUDENTS INTERESTED IN PERFORMING ARTS, COMMUNITY SERVICE AND OTHER ACTIVITIES LIVING LEARNING COMMUNITIES ARE THEME-BASED RESIDENCE HALLS WHERE FIRST-YEAR STUDENTS EXPERIENCE CO-CURRICULAR AND SOCIAL OPPORTUNITIES THAT COMPLEMENT THE CLASSROOM EXPERIENCE PARTICIPATION, WHICH IS VOLUNTARY, CONNECTS STUDENTS AND FACULTY ADVISORS IN AREAS OF THEIR INTELLECTUAL INTERESTS AND ENGAGES STUDENTS IN MEANINGFUL RELATIONSHIPS AND EXPERIENCES RESEARCH INDICATES THAT THE LIVING-LEARNING COMMUNITIES ARE HAVING A SALUTARY EFFECT ON RETENTION, ACADEMIC PERFORMANCE, AND STUDENT CONDUCT A SOPHISTICATED AND COMPREHENSIVE DINING SERVICES OPERATION ENSURES THAT AN ARRAY OF HEALTHY FOOD CHOICES IS AVAILABLE TO STUDENTS SOME FOOD ITEMS ARE PRODUCED BY LOCAL GROWERS, FOOD WASTE IS COMPOSTED, AND CARE IS TAKEN TO EXERCISE SOCIAL RESPONSIBILITY IN THE PURCHASE OF FOOD AND IN

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE AUDIT COMMITTEE OF THE BOARD OF REGENTS REVIEWS THE 990 IN DETAIL THE COMMITTEE THEN PROVIDES THE BOARD OF REGENTS COPIES FOR CONSIDERATION BEFORE FILING

ldentifier	Return Reference	Explanation	
	FORM 990, PART VI, SECTION B, LINE 12C	IN ACCORDANCE WITH THE UNIVERSITY'S CONFLICT OF INTEREST POLICY, THE POLICY AND CONFLICT DISCLOSURE FORMS SHALL BE CIRCULATED ANNUALLY BY MEMBERS OF THE EXECUTIVE OFFICE'S STAFF TO TRUSTEES, REGENTS, OFFICERS, AND OTHERS DESIGNATED BY THE VICE CHANCELLOR THE COMPLETED DISCLOSURE FORMS SHALL BE REVIEWED BY LEGAL COUNSEL OR HER/HIS DESIGNEE FOR THE PURPOSES OF MONITORING COMPLIANCE WITH THE POLICY AND DETERMINING WHAT ACTION, IF ANY, IS NEEDED REGARDING DISCLOSED CONFLICTS	

Identifier	Return Reference	Explanation
	SECTION B, LINE 15	THE EXECUTIVE COMMITTEE OF THE BOARD OF REGENTS REVIEWS POLICIES AND PRACTICES FOR EXECUTIVE COMPENSATION TO ENSURE THEY ARE GENERALLY CONSISTENT WITH SURVEY DATA FROM COMPARABLE INSTITUTIONS FOR COMPARABLE POSITIONS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST GOVERNING DOCUMENTS ARE ALSO AVAILABLE AT HTTP //ABOUT SEWANEE EDU/TRUSTEES/DOCUMENTS

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 33,528,501