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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)

OMB No 1545-0047

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

Open to Public Inspection

Α	For the	2010 calendar year, or tax year beginning JUL 1, 2010 and e	nding J	UN 30, 2011							
В	Check if applicable	C Name of organization		D Employer identific	ation number						
	Addre-	EASTERN WASHINGTON UNIVERSITY FOUNDATI	ON								
	Name chang			91-1019819							
L	Initial return	, ,	Room/suite	E Telephone number							
	Termir ated	102 HARGKEAVES HALL		509-3	<u>359-6890</u>						
L	Ameno return	City or town, state or country, and ZIP + 4		G Gross receipts \$	12,654,055.						
_	Application	(CHENEI, WA 33004		H(a) Is this a group re							
F Name and address of principal officer MICHAEL WESTFALL for affiliates?											
SAME AS C ABOVE H(b) Are all affiliates included? X Yes No											
_		empt status $X 501(c)(3) $ 501(c) ( ) $\checkmark$ (insert no.) $\checkmark$ 4947(a)(1) or	r 5 <u>2</u> 7	If "No," attach a	list. (see instructions)						
		te: > WWW.EWU.EDU/FOUNDATION	<del></del>	H(c) Group exemption							
	Form of art I	organization: X Corporation	L Year	of formation: 1977 M	State of legal domicile: WA						
ģ	1	Briefly describe the organization's mission or most significant activities $\ \underline{ ext{THE}} \ \underline{ ext{E}}$									
در از Activities & Governance		<u>UNIVERSITY FOUNDATION (FOUNDATION), A NON</u>									
ern	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispose	ed of more	than 25% of its net as							
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	24						
ৰ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	24						
ies	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	0						
4ctivit	6	Total number of volunteers (estimate if necessary)		6	40						
S to	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.						
∍	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.						
>				Prior Year	Current Year						
e S	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	2,291,871.	1,933,499.						
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.						
e e	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		658,073.	428,948.						
'		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		201,796. 3,151,740.	82,048.						
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		463,874.	2,444,495. 495,059.						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		403,874.	495,059.						
"	1	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.						
Ses	162	Professional fundraising fees (Part IX, column (A), line 11e)	-	0.	0.						
Expenses	.   .OB	Total fundraising expenses (Part IX, column (D), line 25)  50, 90	19 -	•							
Ж	11/	Other expenses (Part IX Column (A) Lines 11a-11d, 11f-24f)		1,082,964.	2,062,781.						
	18	Total expenses. Add Irres 13-17 (must equal fart [X, column (A), line 25)		1,546,838.	2,557,840.						
	19	Revenue less expenses & btract line 18 from line 12		1,604,902.	-113,345.						
jō	<u> </u>	F=	Be	ginning of Current Year	End of Year						
sets	20	Total assets (Part X, Infect 6) FEB 1 7 2012		18,382,861.	21,251,688.						
Sec.	21	Total assets (Part X, line 16) FEB 1 7 2012		336,795.	884,636.						
Net Assets or	22	Net assets or fund balances, Subtract tine 21 from line 20		18,046,066.	20,367,052.						
Р	art II	Signature Block									
Un	der pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	ents, and to the best of my	knowledge and belief, it is						
tru	e, correc	t, and complete. Declaration of preparery other than officer) is based on all information of while	ch preparer	has any knowledge.							
		- Mallian	<u> </u>								
Sign Signature of officer Date											
Here MICHAEL WESTFALL , EXECUTIVE DIRECTOR  Type or print name and title											
		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN						
Paid JOHN P. BJORKMAN JOHN P. BJORKMAN 01/30/12 self-employed											
Pre	parer	Firm's EIN									
Use Only Firm's address 601 WEST RIVERSIDE, SUITE 700											
		SPOKANE, WA 99201-0622		Phone no. 5	<u>09-363-6300</u>						
Ma	ıy the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No						
032	001 02-2	2-11 LHA For Paperwork Reduction Act Notice, see the separate instruction	ns.		Form <b>990</b> (2010)						

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2010) EASTERN WASHINGTON UNIVERSITY FOUNDATION 91-1019819 Page 2
Par	t III   Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission.
	· · · · · · · · · · · · · · · · · · ·
	THE EASTERN WASHINGTON UNIVERSITY FOUNDATION (FOUNDATION), A
	NON-PROFIT CORPORATION, WAS ESTABLISHED IN 1977 UNDER WASHINGTON LAW
	TO IDENTIFY, PROMOTE, RECEIVE, AND MANAGE ALL PRIVATE GIFTS FROM
	INDIVIDUALS, CORPORATIONS, FOUNDATIONS, AND ASSOCIATIONS TO EASTERN
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
	If "Yes," describe these changes on Schedule O.
	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
	(Code: ) (Expenses \$ 2,189,626. including grants of \$ 495,059. ) (Revenue \$ 2,248,000.)
	ADVANCE THE TEACHING, RESEARCH AND PUBLIC SERVICE ENDEAVORS OF EWU BY
	GENERATING PRIVATE CONTRIBUTIONS TO SUPPLEMENT THE INSTITUTION'S STATE
	AND FEDERAL REVENUES FOR CAPITAL, OPERATION, AND STUDENT ASSISTANCE
	NEEDS.
	FUNCTION AS THE OFFICIAL UNIVERSITY ORGANIZATION IN PLANNING,
	INITIATING, DIRECTING AND COORDINATING ALL POSSIBLE EFFORTS IN PURSUIT
	OF GIFT SUPPORT FROM PRIVATE SOURCES.
	PROVIDE THE SPECIALIZED PROFESSIONAL EXPERIENCE, KNOWLEDGE AND
	EXPERTISE TO ASSIST UNIVERSITY SCHOOLS AND PROGRAMS, DONORS AND
	RECIPIENTS WHEREVER NEEDED TO FINALIZE A GIFT PLAN OR A SOLICITATION
4b	(Code) (Expenses \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services. (Describe in Schedule O)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 2,189,626.
	Form <b>990</b> (2010)
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		7	
_	If "Yes," complete Schedule A		X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		3,5
	public office? If "Yes," complete Schedule C, Part I	3_		X
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? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to	5		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			1
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
Ŭ	Schedule D, Part III	8	х	
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		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	Х	
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, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
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	X	ļ
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		X
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	X	<u> </u>
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			37
	Schedule D, Parts XI, XII, and XIII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	406	х	
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	_	Х
13	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144		-
-	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	1710		<u></u>
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
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 United States? If "Yes," complete Schedule F, Parts III and IV	16		х
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	17		х
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	X	L
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		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b	<u> </u>	$oldsymbol{ol}}}}}}}}}}}}}}}}}}$
		Eorm	agn	(2010

Part IV Checklist of Required Schedules (continued)

			Yes	No
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		X
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	<u>X</u>	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and formsr officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u> </u>
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 through 24d and complete	04-		v
	Schedule K If "No", go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
	any tax-exempt bonds?  Did the exemptation set of an "on behalf of" yeaver for bonds cutetonding at any time during the year?	24c 24d		$\vdash$
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	<b>24</b> u		<del></del>
ZSa	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
U	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		X
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		X
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		X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С				
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	7,5	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			<b>.</b>
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	31		x
20	If "Yes," complete Schedule N, Part I	31	ļ	<u>^</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	_52_		1
33	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
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		х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	-	Х
а				
-	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	1		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		]	
	If "Yes," complete Schedule R, Part V, line 2	_36		X
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	<u> </u>	X
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	X	<u> </u>
		Form	990	(2010)

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Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

	Check if Schedule O contains a response to any question in this Part VI				X				
Sec	tion 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	la	24						
b	Enter the number of voting members included in line 1a, above, who are independent	<u> b                                    </u>	24						
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	L	Х				
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		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990	) was filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's asset	s?	5		X				
6	Does the organization have members or stockholders?	•	6		X				
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	pers of the	Ĭ						
	governing body?		_7a		X				
b	Are any decisions of the governing body subject to approval by members, stockholders, or other perso	ns?	7b		Х				
8	Did the organization contemporaneously document the meetings held or written actions undertaken du	ring the year							
	by the following:								
а	The governing body?		8a	X					
b	Each committee with authority to act on behalf of the governing body?		8b	_ X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	enue Code.)							
				Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?		10a		X				
b	If "Yes," does the organization have written policies and procedures governing the activities of such ch	apters, 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?								
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								
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise								
	to conflicts?		12b	X					
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	es," describe							
	in Schedule O how this is done		12c	X					
13	Does the organization have a written whistleblower policy?		13	X					
14	Does the organization have a written document retention and destruction policy?		14	X					
15	Did the process for determining compensation of the following persons include a review and approval to	y independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official		15a	X					
b	Other officers or key employees of the organization		15b	X					
	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	nt with a							
	taxable entity during the year?		16a	1	X				
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	ate its participation							
	ın joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organ	zation's							
	exempt status with respect to such arrangements?		16b	<u> </u>					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ►WA								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (5	501(c)(3)s only) availa	able for						
	public inspection. Indicate how you make these available. Check all that apply.								
	Own website X Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, cor	iflict of interest polic	y, and fina	ancial					
	statements available to the public.								
20	State the name, physical address, and telephone number of the person who possesses the books and	records of the organ	nization.	<b>-</b>					
	THE ORGANIZATION - 509-359-6890								
	102 HARGREAVES HALL, CHENEY, WA 99004								
			Form	990	(2010)				

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

### 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 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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- 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

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average		Position			1		Reportable	Reportable	Estimated
3.000 0.000	hours per	(cl	(check all that app				ly)	compensation	compensation	amount of
	week	į						from	from related	other
	(describe hours for	trustee or director				ted		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	ste	ruste		a	bensa	ŀ	(W-2/1099-MISC)	(11 2) 1000 (11100)	organization
	organizations	la t	nonal		ploye	tcom /ee		,		and related
	in Schedule O)	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
GORDON BUDKE	<del>                                     </del>	-	_	-						
DIRECTOR	1.00	X						0.	0.	0.
DANIEL CARPER										
DIRECTOR	1.00	X						0.	0.	0.
STEVE DAHLSTROM										
IPC	1.00	X		X				0.	0.	0.
MIKE EKINS					1					
DIRECTOR	1.00	X	<u> </u>		<u> </u>	<u> </u>		0.	0.	0.
ARLENE FISHER										
DIRECTOR	1.00	X						0.	0.	0.
CURT FULLER							Ì			
DIRECTOR	1.00	X						0.	0.	0.
BRENDAN GENTHER										
DIRECTOR	1.00	X						0.	0.	0.
LIONEL GREENWOOD				1						
DIRECTOR	1.00	X	<u> </u>					0.	0.	0.
OTTO GUARDADO						ŀ				
DIRECTOR	1.00	X						0.	0.	0.
CYNTHIA HAMBY							1			
DIRECTOR	1.00	X						0.	0.	0.
JIM KENSOK				l						
TREASURER	1.00	X		X				0.	0.	0.
KEVIN LINN				İ						
DIRECTOR	1.00	X	<u> </u>	<u> </u>	ļ			0.	0.	0.
JACK LUCAS										
SECRETARY	1.00	X		X	<u> </u>			0.	0.	0.
JOANNE MCKAY				ŀ						_
DIRECTOR	1.00	X	<u> </u>	<u> </u>	<u> </u>	<u> </u>	ļ	0.	0.	0.
SUSAN MEYER										
DIRECTOR	1.00	X	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
KRIS MIKKELSEN		1						_	_	1 .
BOT REPRESENTATIVE	1.00	X	<u> </u>	X	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
ROB NEILSON								_	_	_
CHAIR	1.00	X						0.	_0.	0. Form <b>990</b> (2010)

032007 12-21-10

Description of services	Compensation		
	Description of services		

Total number of independent contractors (including but not limited to those listed above) who received more than

Form **990** (2010)

\$100,000 in compensation from the organization

Part VIII Statement of Revenue (D) Revenue (C) (A) (B) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 1933499 similar amounts not included above 1f 513,732 Q Noncash contributions included in lines 1a-1f \$ 1933499 h Total. Add lines 1a-1f Business Code Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 313,460 313,460. other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties (i) Real (II) Personal 6 a Gross Rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory 10,289,291 b Less: cost or other basis and sales expenses 10,173,803 c Gain or (loss) 115488. 115,488. 115,488. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See 117805 Part IV, line 18 b Less, direct expenses 82,048 82,048. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less. cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a d All other revenue e Total. Add lines 11a-11d 510,996. 2444495. Total revenue. See instructions.

032009

### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

	All other organizations must comp	I) and 501(c)(4) organizat ilete column (A) but are i			).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in			· · · · · · · · · · · · · · · · · · ·	<del></del>
_	the U.S. See Part IV, line 22	495,059.	495,059.		
3	Grants and other assistance to governments,		250,0050		
	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				
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				
8	Pension plan contributions (include section 401(k)				_
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	40,934.		40,934.	
b	Legal .				
С	Accounting	17,320.		17,320.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	52,553.		52,553.	
g	Other	19,777.		19,777.	10.056
12	Advertising and promotion	18,956.		2 601	18,956.
13	Office expenses	9,162.		3,601.	5,561.
14	Information technology	53,775.		53,775.	
15	Royalties	1 670		1 670	
16	Occupancy	1,678. 2,123.		1,678.	2,123.
17	Travel	2,123.			2,143.
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials Conferences, conventions, and meetings	33,241.		33,241.	
19 20	Interest	38,012.		38,012.	
21	Payments to affiliates	30,012.		30,012.	
22	Depreciation, depletion, and amortization	8,394.		8,394.	
23	Insurance	9,089.		9,089.	
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.)			3,003.	
а	PROGRAM SUPPORT	1,634,113.	1,634,113.		
b	PRESIDENT'S FUND	45,054.	45,054.		
c	BAD DEBT	32,577.		32,577.	
d	MEALS & ENT	24,269.			24,269.
е	MINI-GRANT PROGRAM	13,990.	13,990.		
f	All other expenses	7,764.	1,410.	6,354.	
25	Total functional expenses. Add lines 1 through 24f	2,557,840.	2,189,626.	317,305.	50,909.
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				5 900 (aata)

Pai	t X	Balance Sheet	-			<del></del>
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		3,232,172.	1	3,530,574.
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net	1,053,769.	3	819,054.	
	4	Accounts receivable, net		500.	4	<u> </u>
	5	Receivables from current and former officers, di				
		employees, and highest compensated employee		į		
		of Schedule L			5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)), persons described in section 4958(c	)(3)(B), and contributing			
		employers and sponsoring organizations of sect	on 501(c)(9) voluntary			
Ø		employees' beneficiary organizations (see instru	ctions)		6	<u> </u>
Assets	7	Notes and loans receivable, net			7	
As	8	Inventories for sale or use .			8	
	9	Prepaid expenses and deferred charges		19,486.	9	20,198.
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a 321,888			044 544
	b	Less accumulated depreciation	10b 110,374	219,908.		211,514.
	11	Investments - publicly traded securities	11 105 100	11	12 602 005	
	12	Investments - other securities. See Part IV, line		11,195,109.	12	13,683,895.
	13	Investments - program-related. See Part IV, line		13		
	14	Intangible assets	2 ((1 017	14	2 000 452	
	15	Other assets See Part IV, line 11		2,661,917.	15	2,986,453.
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	18,382,861.	16	21,251,688.
	17	Accounts payable and accrued expenses		174,387.	17	61,614.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20 21	Tax-exempt bond liabilities  Escrow or custodial account liability. Complete	Part IV of Sahadula D		20	
Liabilities	22	Payables to current and former officers, director			21	
ij	22	highest compensated employees, and disqualifi				
Ë		of Schedule L	ed persons Complete Fait II		22	
	23	Secured mortgages and notes payable to unrela	ated third parties	17,877.	23	674,530.
	24	Unsecured notes and loans payable to unrelate	·	1,1011.	24	0/1/3300
	25	Other liabilities Complete Part X of Schedule D	a tima parties	144,531.	25	148,492.
	26	Total liabilities. Add lines 17 through 25		336,795.		884,636.
		Organizations that follow SFAS 117, check he	ere X and complete			002/000
ý		lines 27 through 29, and lines 33 and 34.				
nce.	27	Unrestricted net assets		-1,328,042.	27	-330,160.
alai	28	Temporarily restricted net assets		4,478,440.		5,184,551.
g p	29	Permanently restricted net assets		14,895,668.		15,512,661.
Ë		Organizations that do not follow SFAS 117, c	heck here 🕨 🔲 and	<u> </u>		
<u> </u>		complete lines 30 through 34.	•			
sts	30	Capital stock or trust principal, or current funds			30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ed			31	
λA	32	Retained earnings, endowment, accumulated in			32	
ž	33	Total net assets or fund balances		18,046,066.		20,367,052.
	34	Total liabilities and net assets/fund balances	· 	18,382,861.	34	21,251,688.

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

3b

### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

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

2010

Open to Public Inspection

Name of the organization Employer identification number 91-1019819 EASTERN WASHINGTON UNIVERSITY FOUNDATION Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is. (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E.) 3 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 5 X 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 33 1/3% 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 33 1/3% 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.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 a Type I Type II c \_\_\_\_ Type III - Functionally integrated d \_\_\_\_ 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? a A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Y<u>es</u> No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (vi) Is the organization in col. (iii) Type of (iv) Is the organization (v) Did you notify the (i) Name of supported (vii) Amount of (ii) EIN organization in col. (i) listed in your organization in col. organization support (i) organized in the (described on lines 1-9 (i) of your support? laovernina document? above or IRC section (see instructions)) Yes

032021 12-21-10

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

# Schedule A (Form 990 or 990-EZ) 2010 EASTERN WASHINGTON UNIVERSITY FOUNDATION91-1019819 Page 2 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.)

Sec	ction A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
1	Gifts, grants, contributions, and									
	membership fees received. (Do not									
	ınclude any "unusual grants.")	2,922,118.	2,053,897.	1,604,237.	2,291,871.	1,933,499.	10,805,622.			
2	Tax revenues levied for the organ-									
	ızatıon'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						<del></del>			
4	Total. Add lines 1 through 3	2,922,118,	2,053,897.	1,604,237,	2,291,871.	1,933,499.	10,805,622.			
5	The portion of total contributions									
	by each person (other than a		Ï							
	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 line 4						10,805,622,			
	ction B. Total Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total			
7	Amounts from line 4	2,922,118,	2,053,897.	1,604,237.	2,291,871.	1,933,499.	10,805,622,			
8	Gross income from interest,						, , , , , , , , , , , , , , , , , , , ,			
	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources	327,545.	494,103.	354,977.	249,454.	313,460.	1,739,539,			
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						1			
	assets (Explain in Part IV)									
11	Total support. Add lines 7 through 10						12,545,161.			
	Gross receipts from related activities.	etc (see instruction	ons)			12 1	,134,787.			
	First five years. If the Form 990 is for	,	•	d. fourth, or fifth ta	ax vear as a sectio					
	organization, check this box and stop	•		-,	, ,		ightharpoons			
Se	ction C. Computation of Publ	ic Support Pe	rcentage							
14	Public support percentage for 2010 (	line 6, column (f) di	vided by line 11, o	column (f))		14	86.13 %			
	Public support percentage from 2009		•	.,,		15	87.70 %			
16a	33 1/3% support test - 2010.If the o	organization did not	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this bo				
	stop here. The organization qualifies	•					$\triangleright x$			
b	33 1/3% support test - 2009.If the o		-		line 15 is 33 1/3%	or more, check th				
	and stop here. The organization qual						▶□			
17a	10% -facts-and-circumstances tes	• •			13, 16a, or 16b, a	nd line 14 is 10%	or more,			
	and if the organization meets the "fac									
	meets the "facts-and-circumstances"			·			ightharpoonup			
۲	10% -facts-and-circumstances tes	-	•		-	7a, and line 15 is	10% or			
•	more, and if the organization meets t	_								
	organization meets the "facts-and-cir-				-		•			
18			=		-		ıs 🕌			
<u></u>	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions  Schedule A (Form 990 or 990-EZ) 2010									

032022 12-21-10

# Schedule A (Form 990 or 990-EZ) 2010 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

Section A. Public Support			,			·-
Calendar 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 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						•
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						-
furnished by a governmental unit to						
the organization without charge						
5 Total. Add lines 1 through 5				-		
7a Amounts included on lines 1, 2, and						<del> </del>
3 received from disqualified persons						
b Amounts 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						
8 Public support (Subtract line 7c from line 6) ection B. Total Support		ŀ		.l		
<del></del>		T	T	T	T	F
lendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
Amounts from line 6						
Da Gross income from interest, dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
Net income from unrelated business						
activities not included in line 10b, whether or not the business is						1
regularly carried on						
2 Other income Do not include gain						
or loss from the sale of capital assets (Explain in Part IV)						
3 Total support (Add lines 9, 10c, 11, and 12)						
4 First five years, If the Form 990 is for t	the organization	's first, second, thu	rd. fourth, or fifth t	ax vear as a secti	on 501(c)(3) organi	zation.
check this box and stop here	3		_,, <u>.</u>			<b>▶</b>
ection C. Computation of Public	Support Pe	ercentage				
5 Public support percentage for 2010 (lin			column (f))		15	Ç
6 Public support percentage from 2009		•	***		16	Ç
ection D. Computation of Invest					1	-
7 Investment income percentage for 201			•		17	(
Investment income percentage from 20			(-,,		18	
Pa 33 1/3% support tests - 2010. If the c			on line 14 and lin	e 15 is more than	<del></del>	
more than 33 1/3%, check this box and	-		· ·			<b>▶</b>
b 33 1/3% support tests - 2009. If the o						and
line 18 is not more than 33 1/3%, chec	_					
mio to is not more than 35 1/3/6, thet	m uno box and \$	stop liere. The orga	anzanon quannes	as a publicly sup	porteu organization	<b>'</b>

### **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.

2010
Open to Public Inspection

Name of the organization

Employer identification number

	EASTERN WASHINGTON					101981	9
Par	t I Organizations Maintaining Donor Advise	ed Funds o	r Other Similar Fund	is or Ac	counts. Co	nplete if the	
	organization answered "Yes" to Form 990, Part IV, Iin	e 6.					
	•	(a) Do	nor advised funds	(b)	Funds and ot	her accounts	;
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in	writing that the	e assets held in donor adv	used funds			
_	are the organization's property, subject to the organization's	-				Yes	No
6	Did the organization inform all grantees, donors, and donor a	_		e used on	ılv		
_	for charitable purposes and not for the benefit of the donor of		•		•		
	impermissible private benefit?				·	Yes	□ No
Par		ganization ans	wered "Yes" to Form 990.	Part IV, III	ne 7.		
1	Purpose(s) of conservation easements held by the organizat			•			
•	Preservation of land for public use (e.g., recreation or e	•	Preservation of an h	nstorically	important land	d area	
	Protection of natural habitat	· · · · · · · · · · · · · · · · · · ·	Preservation of a ce	•	•		
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a quali	fied conservat	on contribution in the form	n of a con	servation ease	ment on the	last
_	day of the tax year				oo, ration oao		
	day of the tax your			Г	Held at th	e End of the T	ay Vear
а	Total number of conservation easements			r	2a	0 2.114 07 1.110 1.1	<u> </u>
h	Total acreage restricted by conservation easements				2b		
c	Number of conservation easements on a certified historic sti	nucture include	ad in (a)		2c		
4	Number of conservation easements included in (c) acquired		` '		20		
u	listed in the National Register	alter o/17700,	and not on a mistoric struc	,	2d		
3	Number of conservation easements modified, transferred, re	aleased extina	uiched or terminated by t	_		ne tay	
Ü	year	neasea, exting	district, or terminated by t	no organiz	ation during ti	ic tax	
4	Number of states where property subject to conservation ea	sement is loca	ated >				
5	Does the organization have a written policy regarding the pe		·	– of			
•	violations, and enforcement of the conservation easements		ing, moposition, name ing c			Yes [	No
6	Staff and volunteer hours devoted to monitoring, inspecting,		conservation easements	during the	e vear 🕨		
7	Amount of expenses incurred in monitoring, inspecting, and	_		-			
8	Does each conservation easement reported on line 2(d) abo				·		
Ū	and section 170(h)(4)(B)(ii)?	vo satisfy the	equilibrile or doction 17		‴	Yes [	□ No
9	In Part XIV, describe how the organization reports conservat	tion easements	s in its revenue and expen	se statem	ent and balan		
•	include, if applicable, the text of the footnote to the organization						•
	conservation easements	tion 5 inancia	i statemento triat desembe	o the orge	inization 5 acc	ounting for	
Pai		of Art. Histo	orical Treasures, or	Other S	imilar Asse	ts.	
	Complete if the organization answered "Yes" to Form	-	•				
1a	If the organization elected, as permitted under SFAS 116 (A)		· · · · · · · · · · · · · · · · · · ·	ement and	d balance shee	t works of ar	 t,
	historical treasures, or other similar assets held for public ex	• •	·				
	the text of the footnote to its financial statements that descri			·			
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to rei	oort in its revenue stateme	ent and ba	lance sheet w	orks of art. his	storical
_	treasures, or other similar assets held for public exhibition, e	,					
	relating to these items	,			,	- · · · · · · · · · · · · · · · · · · ·	
	(i) Revenues included in Form 990, Part VIII, line 1				<b>▶</b> \$		
	(ii) Assets included in Form 990, Part X				<b>S</b>	196,	942.
2	If the organization received or held works of art, historical tre	easures, or oth	er sımılar assets for fınand	cial gain. n			
_	the following amounts required to be reported under SFAS			, P			
а	Revenues included in Form 990, Part VIII, line 1	- , 500)			<b>▶</b> \$		
b	Assets included in Form 990, Part X				<b>\$</b>		
	· ·				· <del>· · · · · · · · · · · · · · · · · · </del>		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051 12-20-10

Schedule D (Form 990) 2010

Sche	dule D (Form 990) 2010 EASTERN	WASHINGTO	N_UNIVERSI	TY FOUN	DATI	ON 9	1-10	19819	Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tre	easures, or	r Othe	r Simila	r Asse	<b>ts</b> (contin	ued)
3	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items								
	(check all that apply)								
а	X Public exhibition	d	X Loan or excl	nange progran	ns				
b									
С	X Preservation for future generations		<del></del>			-			
4	Provide a description of the organization's co	ellections and explain	n how they further th	ne organizatioi	n's exer	npt purpos	se in Parl	XIV.	
5	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be ma							Yes	X No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "Y	es" to	Form 990,	Part IV, I	ıne 9, or	
	reported an amount on Form 990, Par								_
1a	Is the organization an agent, trustee, custodi	an or other intermed	ary for contribution	s or other ass	ets not	ıncluded			
	on Form 990, Part X?		•					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table.						
	· · · · · ·	·	-					Amount	
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?	_				Yes	□ No
	If "Yes," explain the arrangement in Part XIV.			•	_				
Par	t V Endowment Funds. Complete if	f the organization an	swered "Yes" to Fo	rm 990, Part I\	V, line 1	0.			
		(a) Current year	(b) Prior year	(c) Two years	back	(d) Three ye	ars back	(e) Four y	ears back_
1a	Beginning of year balance	11,035,562.	10,618,785.	12,408	199.				
b	Contributions	411,782.	309,478.	910	906.				
С	Net investment earnings, gains, and losses	2,047,041.	108,054.	-2,662	200	·			
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	0.	755.	38	120.				
f	Administrative expenses								
g	End of year balance	13,494,385.	11,035,562,	10,618	785.				
2	Provide the estimated percentage of the year	r end balance held a	s'	-	-				
а	Board designated or quasi-endowment		_%						
b	Permanent endowment ► 88.00	%	_						
С	Term endowment ▶ 12.00	%							
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administer	ed for th	ne organiza	ation	_	
	by·							\	Yes No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	X
b	If "Yes" to 3a(II), are the related organizations	s listed as required o	n Schedule R?					3b	
4	Describe in Part XIV the intended uses of the								
Par	t VI Land, Buildings, and Equipm	ent. See Form 990	, Part X, line 10.						
	Description of investment	(a) Cost or o	ther (b) Cost	or other	(c) A	cumulate	d	(d) Book	value
		basis (investr	nent) basis	(other)	dep	reciation			
1a	Land		3	5,250.				35	,250.
b	Buildings								
С	Leasehold improvements								
d	Equipment								
е	Other		28	6,638.		110,37	74.	176	,264.
Takal	Add lines to through to (Column (d) must o	000 Dart	V == (D) /== 1	0(-1)		·		211	51 <i>/</i>

Schedule D (Form 990) 2010

Schedule D (Form 990) 2010 EASTERN WAS	HINGTON UNIVE	RSITY FOUNDATI	<u>ON 91-1</u>	1019819	Page 3
Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12.		hod of valuation		
(a) Description of security or category (including name of security)	(b) Book value		l-of-year marke		
(1) Financial derivatives				<del>.</del>	
(2) Closely-held equity interests			<del></del>		
(3) Other					
(A) PUBLICLY TRADED	12 502 005				
(B) SECURITIES	13,683,895.	END-OF-YEAR	MARKET '	VALUE	
(C)					<del></del>
(D)				<del></del>	
(E)			·-		
(F)		· <del>-</del>			<del></del>
(G)			· <del></del>	_	
(H)				_	
(I)	12 602 005				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶ Part VIII Investments - Program Related. S	ee Form 990, Part X, line 13				
(a) Description of investment type	(b) Book value		hod of valuation I-of-year marke		
(1)					
(2)					
(3)					
				<del>_</del>	
(5)					
(6)					
(7)					
(8)			<u></u>		
(9)					
(10)					
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)					
Part IX Other Assets. See Form 990, Part X, line					
	Description			(b) Book va	
(1) TRUSTS				2,796,	
(2) ART COLLECTION				196,	942.
(3) ACCRUED INVESTMENT INCOME	<u> </u>				10.
(4) DUE TO/FROM OTHER FUNDS		·			,000.
(5)					
(6)	······			_	
	· · · · · · · · · · · · · · · · · · ·		<u> </u>	<del>-</del>	
(8)	<del></del>				
(9)					
(10)				0.006	450
Total. (Column (b) must equal Form 990, Part X, col (B) lin Part X Other Liabilities. See Form 990, Part X	e 15) , line 25.		<u>▶</u>	2,986	,453.
1. (a) Description of liability		(b) Amount			
(1) Federal income taxes					
(2) ANNUITIES PAYABLE		148,492.			
(3)					
(4)					
(5)					
(8)					
(9)					
(10)					
Total, (Column (b) must equal Form 990, Part X, col (B) lin	e 25)	148,492.			
FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote FIN 48 (ASC 740)	to the organization's financial statem	ents that reports the organization's li	ability for uncertain	tax positions under	
032053 12-20-10				dule D (Form 9	90) 2010

	t XI Reconciliation of Change in Net Assets from Form 990 to				1019819	Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			· ·
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		· · · · · · · · · · · · · · · · · · ·	
4	Net unrealized gains (losses) on investments		4	<del></del>		
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 through 8		9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	10	10			
	t XII Reconciliation of Revenue per Audited Financial Statemen			Return		
1	Total revenue, gains, and other support per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.					
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b		1		
c	Recoveries of prior year grants	2c		1		
d	Other (Describe in Part XIV.)	2d		1		
	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1					
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b		1		
	Add lines 4a and 4b	40.]		4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5		
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expe	nses per		rn	
1	Total expenses and losses per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a		<b> </b>		
b	Prior year adjustments	2b		<b>」</b>		
С	Other losses	2c				
d	Other (Describe in Part XIV)	2d		-		
е	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1		1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b		<b>↓</b>		
С	Add lines 4a and 4b			4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5		
	t XIV Supplemental Information					
X, line	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III as 2, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compart XIII, LINE 4: TO PROVIDE A VISUAL ART EXE	lete this part to pro	vide any ad	Iditional	Information.	4, Part
QUZ	ALITY TO THE STUDENT BODY, FACULTY AND COMM	MUNITY THR	OUGH I	EXHI	BITION (	OR
LOZ	AN					
PAI	RT X, LINE 2: MANAGEMENT HAS EVALUATED THE	FOUNDATIO	NS TAX	K PO	SITIONS	
ANI	CONCLUDED THAT THE FOUNDATION HAD TAKEN I	NO UNCERTA	IN TAX	K PO	SITIONS	
THA	AT REQUIRE ADJUSTMENT TO THE FINANCIAL STAT	TEMENTS TO	COMPI	TA M	ITH THE	<u>-</u>
PRO	OVISIONS OF THIS GUIDANCE OR THAT WOULD JEC	OPARDIZE T	HE FOU		TIONS TA	
032054	<u>.                                    </u>				, 0	, 10

Schedule D (	Form 99 <b>Suppl</b> e	0) 2010 ement	al Infor	EAS?	CERN WA	SHING	TON U	JNIVER	SITY	FOUN	DATI	ON91-	10198	19 Pag	<u> 1e 5</u>
EXEMPT	STAT	rus.	WITH	FEW	EXCEPT	IONS,	THE	FOUND	OITA	IS	NO I	ONGER	SUBJ	ECT I	<u>'O</u>
INCOME	TAX	EXA	MINAT	IONS	BY TAX	AUTH	ORIT	ES FO	R YEA	ARS B	EFOF	RE 200	6.		
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#### **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Open To Public Inspection

Schedule G (Form 990 or 990-EZ) 2010

Name of the organization

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

Employer identification number EASTERN WASHINGTON UNIVERSITY FOUNDATION 91-1019819 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Internet and email solicitations Solicitation of government grants g X Special fundraising events Phone solicitations C In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or X No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? \_ Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid to (or retained by) (i) Name and address of individual (iv) Gross receipts (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

LHA Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2010 EASTERN WASHINGTON UNIVERSITY FOUNDATION 1-1019819 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than \$5,000 (b) Event #2 (a) Event #1 (c) Other events (d) Total events EVENT (add col (a) through REVENUE AUCTION col (c)) (event type) (event type) (total number) 87,779 19,816 10,210 117,805. 1 Gross receipts 2 Less Charitable contributions 87,779. 19,816. 10,210. 117,805. Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses Rent/facility costs 7 Food and beverages 8 Entertainment 35,757. 35,757. Other direct expenses 35,757 10 Direct expense summary. Add lines 4 through 9 in column (d) 82,048. 11 Net income summary. Combine line 3, column (d), and line 10 Part III | Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor No Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities. a is the organization licensed to operate gaming activities in each of these states? b If "No," explain. 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? \_ Yes b If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2010

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Sch	nedule G (Form 990 or 990-EZ) 2010 EASTERN WASHINGTON UNIVERSITY FOUNDATION 1-1	<u>.01981</u>	9 Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity operated in:		
а	The organization's facility	13a	%
	o An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	•		
	Name		
	Traine P		
	Address ▶		
	Address		
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
	of "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
L,			
	of gaming revenue retained by the third party > \$		
C	If "Yes," enter name and address of the third party		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	<del></del>		
	Director/officer Employee Independent contractor		
	Mandatory distributions.		
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	L Yes	L∐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year > \$		
Pa	art IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii)	and (v), an	d Part III.
	lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also complete this part to provide any additional information		
_		. (000	

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% X Employer identification number 91-1019819 Open to Public OMB No 1545-0047 Inspection (h) Purpose of grant or assistance 2010 ☐ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed ame and address of organization (b) EIN (c) IRC section or government (c) EIN (d) Amount of cash grant assistance or government (c) EIN (d) Amount of cash grant assistance other) Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. EASTERN WASHINGTON UNIVERSITY FOUNDATION General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part Partl N

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Schedule I (Form 990) (2010)

032101 01-13-11

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Enter total number of other organizations

Enter total number of section 501(c)(3) and government organizations

(f) Description of non-cash assistance 91-1019819 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (d) Amount of non-cash assistance EASTERN WASHINGTON UNIVERSITY FOUNDATION 495,059 (c) Amount of cash grant (b) Number of recipients 321 (a) Type of grant or assistance Schedule I (Form 990) (2010) CASH SCHOLARSHIPS Part IV Part III

Page 2

				Schedule I (Form 990) (2010)
				30
				032102 01-13-11

### SCHEDULE M (Form 990)

Department of the Treasury

### **Noncash Contributions**

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047

91-1019819

**Open to Public** Inspection

Internal Revenue Service Name of the organization

EASTERN WASHINGTON UNIVERSITY FOUNDATION

Attach to Form 990. **Employer identification number** 

Part I Types of Property (a) (b) (c) (d) Number of Noncash contribution Check if Method of determining contributions or amounts reported on applicable noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art 2 Art - Historical treasures 3 Art - Fractional interests 4 Books and publications 5 Clothing and household goods Cars and other vehicles 6 7 Boats and planes Intellectual property 8 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles 19 Food inventory 20 Drugs and medical supplies Taxidermy 21 22 Historical artifacts 23 Scientific specimens Archeological artifacts 24 100,471. COST 25 Other ( TOOLS X (SOLAR RECEIVE) Other X 1 100,160. COST 26 X 1 (GIFT PACKS 27,100. COST 27 Other 5,000. Other ( BOOKS X COST 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for Х the entire holding period? 30a b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Х 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? X 32a b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

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### **SCHEDULE O**

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

EASTERN WASHINGTON UNIVERSITY FOUNDATION

Employer identification number 91-1019819

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ESTABLISHED IN 1977 UNDER WASHINGTON LAW TO IDENTIFY, PROMOTE, RECEIVE,
AND MANAGE ALL PRIVATE GIFTS FROM INDIVIDUALS, CORPORATIONS,
FOUNDATIONS, AND ASSOCIATIONS TO EASTERN WASHINGTON UNIVERSITY
(UNIVERSITY).
THE FOUNDATION IS THE CATALYST AND CONDUIT THROUGH WHICH GIFTS AND
ENDOWMENT INCOME FLOW TO PROVIDE IMMEDIATE AND LONG-TERM SUPPORT FOR
THE UNIVERSITY AND ITS PROGRAMS. THUS, THE FOUNDATION IS A TOOL THROUGH
WHICH PRIVATE SUPPORT IS RAISED AND MANAGED FOR THE SOLE BENEFIT OF
EWU.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
WASHINGTON UNIVERSITY (UNIVERSITY).
THE FOUNDATION IS THE CATALYST AND CONDUIT THROUGH WHICH GIFTS AND
ENDOWMENT INCOME FLOW TO PROVIDE IMMEDIATE AND LONG-TERM SUPPORT FOR
THE UNIVERSITY AND ITS PROGRAMS. THUS, THE FOUNDATION IS A TOOL THROUGH
WHICH PRIVATE SUPPORT IS RAISED AND MANAGED FOR THE SOLE BENEFIT OF
EWU.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
PLAN.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
ADVANCE THE TEACHING, RESEARCH AND PUBLIC SERVICE ENDEAVORS OR EWU BY
GENERATING PRIVATE CONTRIBUTIONS TO SUPPLEMENT THE INSTITUTION'S STATE
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2010) 032211 01-24-11

40,288.

Schedule O (Form 990 or 990-EZ) (2010)

DISTRIBUTION FROM TRUST

: Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization  EASTERN WASHINGTON UNIVERSITY FOUNDATION	Employer identification number 91-1019819
INTERFUND TRANSFER	-7,578.
TOTAL TO FORM 990, PART XI, LINE 5	2,434,331.
·	
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