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DLN: 93493134021203

Form **990**

Department of the Treasury

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)

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

2011

Open to Public
Inspection

	Revenue		<u> </u>		·	Inspection				
		2011 calendar year, or tax year beginning 07-01-2011 C Name of organization	and ending 06-30-20:	12	D Employer id	entification number				
_	eck ıf a _l dress ch	MOREHOUSE COLLEGE			58-05662					
_	me chai	Doing Business As		— 	E Telephone n					
_	tial retui				(404)681-	-2800				
_		830 WESTVIEW DDIVE SW	ed to street address) Room/s	uite	G Gross receipts	s \$ 197,611,224				
_	rmınated 									
_	iended i	ATLANTA, GA 30314								
Ap	plication	pending								
		F Name and address of principal officer DR ROBERT FRANKLIN PRESIDENT			s a group retur					
		830 WESTVIEW DRIVE SW		affiliat	es?	┌ Yes				
		ATLANTA,GA 30314		H(b) Are all	affiliates inclu	ded?				
- T-						t (see instructions)				
[la	x-exem	pt status	4947(a)(1) or 527	H(c) Group	o exemption n	umber 🟲				
J W	ebsite	:► WWW MOREHOUSE EDU								
∢ For	m of org	anization Corporation Trust Association Other		L Year of for	mation 1867	M State of legal domicile GA				
Pa	rt I	Summary								
	1 E	Briefly describe the organization's mission or most sign	nıfıcant actıvıtıes							
		MOREHOUSE COLLEGE'S MISSION IS TO DEVELO								
ņ		.EADERSHIP AND SERVICE IN ADDITION, IT ASS BLACK PEOPLE	UMES SPECIAL RESPO	NSIBILITY FO	RIEACHING	I HE HISTORY OF				
2	-									
Ĕ	-									
Governance					=0/ 6 /					
	1	Check this box 🔭 if the organization discontinued its			1	1				
Acuvilles &	1	Number of voting members of the governing body (Part			3	36				
į	1	Number of independent voting members of the governing to the control of the governing to the control of the con		•	4	35				
3	1	otal number of individuals employed in calendar year			5	1,414				
1	1	otal number of volunteers (estimate if necessary) .			6	35				
		otal unrelated business revenue from Part VIII, colui			7a	-197,912				
	Б	Net unrelated business taxable income from Form 990	-1, line 34	l n.:	7b	-201,162				
		Contributions and marks (Borth VIII June 11)			Year	Current Year				
9	8	Contributions and grants (Part VIII, line 1h)		24,147,736 53,891,886	27,622,628					
Ravenue	9	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3,4		5,568,836	54,248,058 9,357,115					
歪	10 11	Other revenue (Part VIII, column (A), lines 5, 6d, 8e		21,148,144	22,124,164					
	12	Total revenue—add lines 8 through 11 (must equal F		21,140,144	22,124,104					
		12)		1	04,756,602	113,351,965				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		22,134,812	24,337,364				
	14	Benefits paid to or for members (Part IX, column (A)	, line 4)		0	0				
ø	15	Salaries, other compensation, employee benefits (Pa	art IX, column (A), lines		45,642,347	45,993,692				
38e	160	5-10) Professional fundraising fees (Part IX, column (A), li								
Expenses	16a				23,484 26,7					
Д	b	Total fundraising expenses (Part IX, column (D), line 25) ▶3,54	•	-	40.010.730	45 204 547				
	17 18	Other expenses (Part IX, column (A), lines 11a-11c Total expenses Add lines 13-17 (must equal Part I			49,918,720 45,394,54					
	19	Revenue less expenses Subtract line 18 from line 1			117,719,363 115,752,3 -12,962,761 -2,400,3					
~ <i>c</i> c	15	Nevenue less expenses Subtract line 10 non line 1	2		of Current	-2,400,358				
net Assets or Fund Balances					ear	End of Year				
3 THE	20	Total assets (Part X, line 16)		3	23,371,854	307,907,235				
2 E	21	Total liabilities (Part X, line 26)			84,239,770	79,353,238				
	22	Net assets or fund balances Subtract line 21 from li	ne 20	2	39,132,084	228,553,997				
Pa	rt II	Signature Block								
now		ties of perjury, I declare that I have examined this return, and belief, it is true, correct, and complete. Declaration of		er) is based on a						
Sigr		Signature of officer								
Her	е	SHEILA JACOBS INTERIM VP BUSINESS & FINANCE								
		Type or print name and title			1					
		Preparer's	Date	Check if self-	Preparer's taxp	ayer identification number				
Paid		signature	employed •	(See manuchon	. ,					
	arer's	Firm's name (or yours KPMG LLP			EIN Þ					
Jse	Only	If self-employed), address, and ZIP + 4 300 North Greene Street Suite 400			CIIN F					
		Greensboro, NC 27401			Phone no 🕨 (336) 275-3394				
		GIECHSDOIO, NC 2/401			ī					

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

CONDUCTING RESEARCH AND OTHER ACADEMIC PROGRAMS FOR THE BENEFIT OF ITS STUDENT BODY AND THE GENERAL PUBLIC

Total program service expenses►\$

4d

(Expenses \$

- Other program services (Describe in Schedule O)

 - including grants of \$

80.067.807

) (Revenue \$

Form 990 (2011)

	Part TV	Checklist of	Required	Schedule
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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)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
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? If "Yes," complete Schedule C, Part II	4	Yes	
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		No
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 temporarily restricted endowments, permanent endowments, or quasi-endowments? 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? If "Yes," complete Schedule D, Part VI.	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	
	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		N o
	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		N o
	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		No
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	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
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, Part 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 ? If "Yes," complete Schedule F, Part III and IV	16		No
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? <i>If</i> "Yes," complete Schedule G, Part I	17	Yes	
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	Yes	
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		N o
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. All Form 990 filers that operated one or more hospitals must attach audited financial statements	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		No
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 questions 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	Yes	
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	Yes	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
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		No
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		No
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			
	<i>IV</i>	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 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 Ma	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? If "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	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	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 $2 \cdot \cdot \cdot \cdot$	35b		No
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		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	Yes	
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	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 623			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
С	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
l a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities			
	account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	· · · -			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
ā	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
h	organization solicit any contributions that were not tax deductible?			
U	were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
-	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
-	,			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	,		NI -
_	Contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
.		0		
, _	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 49662	00		
	Did the organization make any taxable distributions under section 4966?	9a 9b		
D LO	Section 501(c)(7) organizations. Enter	3 0		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12			
ט	facilities			
L 1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
-	year			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
C	Enter the aggregate amount of reserves on hand 13c			
L4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
_				

Part VI 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	ection A. Governing Body and Management							
			Yes	No				
	Enterphysical Control of Control of the Control of							
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?							
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		No				
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		No				
6	Did the organization have members or stockholders?	6		No				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No				
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		No				
	ection B. Policies (This Section B requests information about policies not required by the Internal							
Re	evenue Code.)							
			Yes	No				
	Did the organization have local chapters, branches, or affiliates?	10a		No				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete 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 the Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give	401	v					
_	rise to conflicts?	12b	Yes					
	In Schedule O how this was done	12c	Yes					
13	Did the organization have a written whistleblower policy?	13	Yes					
14	Did the organization have a written document retention and destruction policy?	14		No				
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					
b	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	Yes					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its							
_	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		No				
Se	ection C. Disclosure	_						
17								
12	Section 61.04 requires an organization to make its Form 1.023 (or 1.024 if applicable), 990, and 990-T (501/c)							

18 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 made these available. Check all that apply

Own website Another's website V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► MS SHEILA JACOBS VP BUS 830 WESTVIEW DR SW ATLANTA, GA 30314

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

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, or 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 or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and			
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

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

per unless person is both week an officer and a organization (Worganizations (describe director/trustee) 2/1099-MISC) (W- 2/1099- organizations (Worganizations (Worganization									(F) Estima amount o compens from to organizat relat	ited f other sation the on and				
	Highest compensated employee Key employee Officer Institutional Trustee or director Schedule										organiza			
See A	dditional Data Table											\dashv		
												\top		
												+		
												+		
												\dagger		
1b	Sub-Total					•		>	I			1		
c	, and the second									358,068				
2	Total number of individuals (incl	udıng but not lın	nited to	those	e lıs) who	o receive	, ,	ın			,
	\$100,000 of reportable compen	sation from the	organız	atıon i	- 27									
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sci					eye •	mploy •	ee, d	or highest	compens	ated employee	3	Yes	No No
4	For any individual listed on line organization and related organiz											4	Yes	
5										or individual for	5		No	
Section B. Independent Contractors														
	ction b. Independent con	tractors				Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.								
	Complete this table for your five \$100,000 of compensation from	highest comper n the organizatio rear									ng with			
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper n the organizatio	n Repo							year endı			(C Comper	
GEOR 805B	Complete this table for your five \$100,000 of compensation from or within the organization's tax y Nar GIA POWER COMPANY RALPH DAVID ABERNATHY BLVD	highest comper n the organizatio rear (A)	n Repo						calendar	year endı	ng with (B)		Comper	
GEOR 805B ATLAN FOLLE BOOK ATLAN	Complete this table for your five \$100,000 of compensation from or within the organization's tax y Name of the second se	highest comper n the organizatio rear (A)	n Repo						calendar	year endi Desc	ng with (B)		Comper 1	isation
GEOR 805B ATLAN FOLLE BOOK ATLAN GCA I 1350 CLEVI	Complete this table for your five \$100,000 of compensation from or within the organization's tax y Nar GIA POWER COMPANY RALPH DAVID ABERNATHY BLVD UTA, GA 30310 ETT HIGHER EDUCATION GROUP STORE 598 830 WESTVIEW DRIVE UTA, GA 30314 EDUCATION SERVICES INC EUCLID AVE STE 1500 ELAND, OH 44115	highest comper n the organizatio rear (A)	n Repo						calendar	Desc	(B) ription of services		Comper 1	,859,541
GEOR 805B ATLAN FOLLE BOOK ATLAN GCA I 1350 CLEVI SKINI 5028 STON	Complete this table for your five \$100,000 of compensation from or within the organization's tax y Name of the company of the compensation of the company of the compensation of the comp	highest comper n the organizatio rear (A)	n Repo						calendar	Desc UTILITIES BOOKSTORE	(B) ription of services SERVICES		Comper 1 1	,859,541 ,327,781
GEOR 805B ATLAN FOLLE BOOK ATLAN GCA I 1350 CLEVI SKINI SODE PO BO	Complete this table for your five \$100,000 of compensation from or within the organization's tax y Name of the company of the compensation of the company of the compensation of the comp	highest comper n the organizatio rear (A)	n Repo						calendar	Desc UTILITIES BOOKSTORE	(B) ription of services SERVICES		Comper 1 1 1	,859,541 ,327,781 ,226,217

Part V	4 * * *	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
まま	1a	Federated campaigns 1a					
亞美	ь	Membership dues 1b					
చ్	С	Fundraising events 1c	385,529				
£a ≝a	d	Related organizations 1d					
ਨੂ≅		Government grants (contributions) 1e	16,346,763				
£ 55	e						
atio er	f	All other contributions, gifts, grants, and 1f similar amounts not included above	10,890,336				
들듯	g	Noncash contributions included in					
Contributions, gifts, grants and other similar amounts		lines 1a-1f \$					
ರ್.	h	Total. Add lines 1a-1f	· · · •	27,622,628			
a)			Business Code				
Ž	2a	TUITION AND FEES	900099	54,248,058	54,248,058		
<u>9</u> .	ь			- 1,2 11,111	,,		
Æ.							
Š	C						
<u>.</u>	d						
Ξ	e		l				
Program Serwce Revenue	f	All other program service revenue					
<u>چ</u>	_	Total Addings 25, 25		E4 340 0E0			
	g 3	Total. Add lines 2a-2f		54,248,058			
	3	Investment income (including dividen		1,337,340		-197,912	1,535,252
	_	and other similar amounts) Income from investment of tax-exempt bond	⊢	1,337,340		157,512	1,333,232
	4			0			
	5	Royalties		0			
	_	(ı) Real	(II) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	С	Rental income					
	d	or (loss) Net rental income or (loss)					
	"	(i) Securities	(II) Other				
	7a	Gross amount 91,900,428	(II) O their				
		from sales of assets other					
		than inventory					
	Ь	Less cost or 83,880,653 other basis and					
		sales expenses					
	С	Gain or (loss) 8,019,775					
	d	Net gain or (loss)	▶ [8,019,775			8,019,775
Other Revenue	8a	Gross income from fundraising events (not including \$385,529 of contributions reported on line 1c)					
ъ		See Part IV, line 18					
Φ.	 _	a	26,300				
둦	b	Less direct expenses b	378,606 events ►	-352,306			-352,306
J	C	Net income or (loss) from fundraising	events F	-332,300			-332,300
	9a	Gross income from gaming activities See Part IV, line 19 a					
	ь	Less direct expenses b					
	С	Net income or (loss) from gaming acti	vities	0			
	10a	Gross sales of inventory, less returns and allowances .					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of inv	entory 🟲	О			
		Miscellaneous Revenue	Business Code				
	11a	AUXILIARY SERVICES	900099	19,877,645	19,877,645		
	ь	OTHER INCOME	900099	2,598,825			2,598,825
		- THER INCOME	 	, , :-			, , ==
	C	All ables a services					
	ď	All other revenue					
		Total. Add lines 11a-11d		22,476,470			
	12	Total revenue. See Instructions .	•	113,351,965	74,125,703	-197,912	11,801,546

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX

C	heck if Schedule O contains a response to any question in this Part IX	<u></u>			
	ot include amounts reported on lines 6b, o, 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 United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	24,337,364	24,337,364		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,298,663	544,620	754,043	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	32,920,933	24,601,933	6,593,412	1,725,588
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,384,919	1,024,840	290,833	69,246
9	Other employee benefits	7,947,245	2,488,666	5,257,862	200,717
10	Payroll taxes	2,441,932	764,687	1,615,571	61,674
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	187,485		187,485	
c	Accounting	392,400	125	392,275	
d	Lobbying	53,363		53,363	
e	Professional fundraising See Part IV, line 17	26,720			26,720
f	Investment management fees	827,150		827,150	
g	Other	0			
12	Advertising and promotion	198,773	35,063	85,273	78,437
13	Office expenses	3,621,741	2,590,458	772,201	259,082
14	Information technology	184,579	22,917	161,662	
15	Royalties	0			
16	Occupancy	4,902,414	3,691,656	1,210,758	
17	Travel	3,092,693	2,359,021	534,316	199,356
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	31,026	5,502	9,312	16,212
20	Interest	2,141,762		2,141,762	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	4,784,087	4,033	4,780,054	
23	Insurance	1,006,333	3,917	1,002,416	
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	PROFESSIONAL FEES	6,425,976	2,728,363	3,146,359	551,254
b	FOOD SERVICE	4,578,009	4,464,284	36,637	77,088
c	EQUIP RENTAL AND MAINTENANCE	3,401,902	1,836,402	1,378,379	187,121
d	UNIVERSITY CENTER EXPENSES	3,005,593	2,753,144	252,449	
e					
f	All other expenses	6,559,261	5,810,812	652,513	95,936
25	Total functional expenses. Add lines 1 through 24f	115,752,323	80,067,807	32,136,085	3,548,431
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				000 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 12.684.587 5.147.361 2 2 Savings and temporary cash investments 3 5,461,300 7,155,546 4.873.273 5.610.557 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 5 0 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 0 6 2,548,839 2,394,845 7 0 8 9 1,195,341 9 1.323.841 Prepaid expenses and deferred charges 10a 228.103.556 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 75,425,710 b Less accumulated depreciation 154,546,295 10c 152,677,846 53,820,722 11 37,731,591 11 88,241,497 95,865,648 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 0 0 14 14 15 0 15 323,371,854 307,907,235 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 10,728,138 17 9,209,334 17 Accounts payable and accrued expenses . 18 18 19 3,478,699 19 2,963,283 20 49.992.008 20 47.978.249 21 21 0 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 0 22 23 Secured mortgages and notes payable to unrelated third parties . . . 18.515.875 23 17,625,148 24 Unsecured notes and loans payable to unrelated third parties 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 1,525,050 25 1,577,224 D 26 84,239,770 26 79,353,238 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 95,116,238 27 Unrestricted net assets 87,617,594 75,867,413 28 71,393,264 28 Temporarily restricted net assets Fund 29 68, 148, 433 29 69,543,139 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 Total net assets or fund balances 239.132.084 33 228.553.997 34 Total liabilities and net assets/fund balances 323.371.854 307.907.235

Pal	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		113,3	351,96
2	Total expenses (must equal Part IX, column (A), line 25)	2			752,32
3	Revenue less expenses Subtract line 2 from line 1	3		-2,4	100,35
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		239,1	132,08
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-8,1	177,72
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		228,5	553,99
Pai	The contains a response to any question in this Part XII		•	୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
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 taudit, 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 in Schedule O		2 c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated 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?		За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the readily or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

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As Filed Data -

DLN: 93493134021203

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization MOREHOUSE COLLEGE

Department of the Treasury Internal Revenue Service

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.

Employer identification number

							58-0566			
Part I		Public Charity Sta				•		instruction	S	
_		rivate foundation becaus								
1		ention of churches, or a				b)(1)(A)(i)	•			
2 🔽		ibed in section 170(b)(
3		cooperative hospital se								
4		arch organization opera e, city, and state	ited in conjur	nction with	a hospital des	scribed in s e	ection 170(b)	(1)(A)(iii).	Enter the	
5	=	n operated for the benef	_	e or univers	sity owned or	operated by	a governme	ntal unit des	cribed in	
_	• •	(1)(A)(iv). (Complete F	•							
6	A federal, state	e, or local government o	r governmen	tal unit des	scribed in sect	tion 170(b)((1)(A)(v).			
7	described in	n that normally receives (1)(A)(vi) (Complete F		al part of it	s support fron	n a governm	nental unit or	from the ger	neral public	
8		rust described in sectio		(A)(vi) (C)	omplete Part I	T)				
9		that normally receives					rihiitions me	mhershin fea	es and aross	:
,	=	ctivities related to its e					•	•		
		n gross investment inco								
	• •	_				•		L (ax) II O III D	usillesses	
		organization after June								
.0 .1 □		n organized and operate								,
,	one or more pu	n organized and operate blicly supported organiz scribes the type of sup I b Type 1	zatıons desci portıng orgar	ribed in sec nization and	ction 509(a)(1	l) or sectior es 11e thro	n 509(a)(2) : ugh 11h	See section		heck
e f g	other than foun section 509(a) If the organizat check this box Since August 1	7, 2006, has the organ	ther than one	or more po	ublicly suppor	ted organiza	ations descri pe II or Type	bed in section	on 509(a)(1)	or
	following person wh	ns ? o directly or indirectly (controls eith	er alone or	rtogether with	nersons de	scribed in (ii)	Yes	No
		the governing body of t			_	. разана ша	(g(i)	
		mber of a person descr			Lacion				g(ii)	
		itrolled entity of a perso) above?				y(iii)	
h		owing information about							5 ()	
••	Flovide the foli	owing information about	ctile support	eu organiza	acion(s)					
(i) Namo suppo organiz	e of (ii) erted EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	organization in col (i) listed in vour governing		(v) Did you notify the organization in col (i) of your support?		(vi Is t organiza col (i) or in the	he ation in ganized	(vii) A moun suppo	t of
		instructions))	Yes	No	Yes	No	Yes	No		
			1			1	1			
				1						
otal			1			1				

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su			1		Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶ □
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (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 persons 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) 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 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 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 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. 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

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

33 1/3% support tests-2010. 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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test							
Explanation								

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493134021203

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527

> ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	ì
MOREHOUSE COLLEGE	

Employer identification number

58-0566205

Part I-A	Complete if	the organization i	<u>s exempt under se</u>	ction 501(c) o	or is a section 527	⁷ organization.

- in opposition to candidates for public office in Part IV Political expenditures
- 3 Volunteer hours

art I-B	Complete	<u>if the org</u>	ganization i	s exemp	<u>t under</u>	section	501(c)(3	<u>3).</u>

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made?
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. Soon over \$1,000,000 Fig. Soon ov			expenses, and share of excess lob	bying expenditures)		_	•	
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Diver \$500,000 Diver \$500,000 Diver \$500,000 but not over \$1,000,000 Diver \$1,000,000 but not over \$1,000,0	3	Check	ıf the filing organization checked bo	ox A and "limited contro	ol" provisions app	ly	1	1
(The term "expenditures" means amounts paid or incurred.) Ital Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but			Limits on Lobbying	Expenditures			(a) Filing	(b) Affiliated
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S100,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 The lobbying nontaxable amount is: Not over \$500,000 Over \$1,000,000 Over \$1,000,00					l.)		Organization's Totals	Group Totals
b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,7000,000 Over \$1,000,000 but not over \$1,7000,000 S225,000 plus 15% of the excess over \$1,000,000 Over \$1,7000,000 Over \$1,7000,000 F17,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$1,7000,000 F17,000,000 S1,000,000 F17,000,000 F17,000,		-			1 \		100013	Totals
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Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,000,000 Over \$1,500,000 but not over \$1,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 S1,000,000 Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- Subtract line 1f from line 1c If zero or less, enter -0- If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount	f		nontaxable amount Enter the amount	from the following table	in both			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,00		If the an	ount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Section \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Not over \$5	500,000	20% of the amount on li	ne 1e			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount		Over \$1,00	0,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount								
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i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount								
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount					organization file	Form 4720 re	portina	
(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	election under section 501(h)).

	· · · · · · · · · · · · · · · · · · ·	(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		53,363
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV			
j	Total lines 1c through 1i			53,363
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
LOBBYING	, ,	THE ORGANIZATION HIRED A CONSULTANT, MWW GROUP INC, WHICH LOBBIES THE FEDERAL GOVERNMENT AND GEORGIA LEGISLATURE ON VARIOUS LEGISLATIVE INITIATIVES AND GRANTS

DLN: 93493134021203

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Supplemental Financial Statements

Open to Public

ntema	al Revenue Service ► Attach to	Form 990. ► See separate instructions.		Inspect	ion
	me of the organization REHOUSE COLLEGE		Employer ide	entification numbe	r
110	KENOOSE COLLEGE		58-056620	5	
Pa	ort I Organizations Maintaining Donor	Advised Funds or Other Similar F	unds or Acc	ounts. Complet	e if the
	organization answered "Yes" to Form 9	(a) Donor advised funds	(b) Fund	s and other accou	ntc
1	Total number at end of year	(a) Donor advised funds	(b) Fulla	s and other accoun	IILS
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 ad	Lucore in writing that the accete held in dor	l or advised		
	funds are the organization's property, subject to the	e organization's exclusive legal control?		☐ Yes	☐ No
6	Did the organization inform all grantees, donors, an used only for charitable purposes and not for the be conferring impermissible private benefit			e Tyes	□ No
Pa	rt II Conservation Easements. Complete	e if the organization answered "Yes" t	o Form 990 I		,
1 2	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreation protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualeasement on the last day of the tax year	organization (check all that apply) ation or pleasure)	n historically im certified histori	portantly land area	a
	easement on the last day of the tax year		Held	at the End of the	Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easemen	ts	2b		
c	Number of conservation easements on a certified h	nistoric structure included in (a)	2c		
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d		
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terminate	ed by the organi	zation during	
	the taxable year 🛌		_	_	
4	Number of states where property subject to conser	vation easement is located 🕨			
5	Does the organization have a written policy regarding enforcement of the conservation easements it hold	ing the periodic monitoring, inspection, han	dling of violatio	ns, and \(\tau \text{Yes}	┌ No
6	Staff and volunteer hours devoted to monitoring, in	specting and enforcing conservation easem	nents during the	e year ►	
7	A mount of expenses incurred in monitoring, inspec	ting, and enforcing conservation easement	s during the yea	ar	
•	▶ \$				
8	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	e 2(d) above satisfy the requirements of sec	ction	┌ Yes	┌ No
9	In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text o the organization's accounting for conservation ease	f the footnote to the organization's financia			
Par	Tt III Organizations Maintaining Collection Complete if the organization answered	ions of Art, Historical Treasures,	or Other Sir	nilar Assets.	
1a	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its f	AS 116, not to report in its revenue stateme Id for public exhibition, education or resear	ch in furtherand		e,
b	If the organization elected, as permitted under SFA historical treasures, or other similar assets held fo provide the following amounts relating to these iter	r public exhibition, education, or research i			
	(i) Revenues included in Form 990, Part VIII, line	1	► \$	5	
	(ii) Assets included in Form 990, Part X			2,48	
2	If the organization received or held works of art, his following amounts required to be reported under SF				
а	Revenues included in Form 990, Part VIII, line 1		▶ \$		

b Assets included in Form 990, Part X

Par	311 Organizations Maintaining Co	<u>llections of Art</u>	t, His	toric	al Tre	eası	ıres, or (<u> </u>	<u>r Similar Ass</u>	ets (co.	ntınued)
3	Using the organization's accession and othe items (check all that apply)										
а	Public exhibition		d	Γ	Loan o	rexc	hange prog	rams	3		
ь	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ıın hov	v they	further	the	organızatıo	n's ex	xempt purpose ın		
5	During the year, did the organization solicity assets to be sold to raise funds rather than to									Yes	ア No
Pai	t IV Escrow and Custodial Arrang	ements. Compl	ete ıf	the o	rganız	atıo			es" to Form 99	0,	
	Part IV, line 9, or reported an ar										
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?					ions	or other as	sets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng ta	ble		r		T -		
_							ŀ		Amo	unt	
C	Beginning balance						-	1c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance						l	1f	_	_	
2a	Did the organization include an amount on Fo		e 21?							Yes	│ No
b	If "Yes," explain the arrangement in Part XI\				1.115.4						
Pa	rt V Endowment Funds. Complete	(a)Current Year		were Prior Ye			Form 990 wo Years Bac			(e) Four Y	ears Back
1a	Beginning of year balance	139,825,050	(5)		125,728	(0)	90,311,4	_	116,094,870	(C) our i	cars baci
ь	Contributions	1,539,405		1,3	319,901		6,598,2	64	1,504,669		
c	Investment earnings or losses	-5,037,841		25,2	292,733		28,634,6	04	-21,179,659		
d	Grants or scholarships	5,795,910		5,7	724,293		5,418,6	21	6,108,399		
e	Other expenditures for facilities	1,098,246		1,1	189,019						
	and programs										
f	Administrative expenses	120 122 150		400.6	205.050		100 105 -		22 244 424		
g	End of year balance	129,432,458		139,8	325,050		120,125,7	28	90,311,481		
2	Provide the estimated percentage of the year		as								
а	Board designated or quasi-endowment 🕨	7 950 %									
b	Permanent endowment 🕨 52 680 %										
C	Term endowment ► 39 370 %										
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	ation 1	that a	re held	and a	administere	d for	the	Yes	No
	(i) unrelated organizations								3a(i)		No
	(ii) related organizations								3a(ii)		No
b	If "Yes" to $3a(II)$, are the related organization								3b		
4	Describe in Part XIV the intended uses of th										
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	90, Pa	rt X,	line 10	<u>0.</u>					
	Description of property				ost or ot (investm		(b)Cost or o basis (othe		(c) Accumulated depreciation	(d) Boo	k value
1 a	Land						20,53	2,387		20	,532,387
b	Buildings						169,08	5,121	62,249,221	106	,835,900
C	Leasehold improvements										
d	Equipment						38,48	6,048	13,176,489	25	,309,559
е	Other								1		

Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)

152,677,846

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1.	
(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 one of your market false
(2)Closely-held equity interests		
(3)Other (A) PRIVATE EQUITY FUNDS	31,562,227	F
(B) REAL ASSET FUNDS	7,823,509	F
(C) COMMINGLED FUNDS	7,458,707	F
(D) HEDGE FUNDS	17,207,072	F
(E) HIGH YIELD TRUST FUNDS	14,804,064	F
(F) CASH AND CASH EQUIVALENTS	17,010,069	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13)		
(a) Descrip		(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 (a) Description of Liability	, line 25. (b) A mount	
Federal Income Taxes	(B) Amount	
ASSET RETIREMENT OBLIGATIONS	1,577,224	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)		

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	113,351,965
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	115,752,323
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-2,400,358
4	Net unrealized gains (losses) on investments	4	-8,177,729
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	-8,177,729
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-10,578,087
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	80,836,872
2	Amounts 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		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	-8,177,729
3	Subtract line 2e from line 1	3	89,014,601
4	Amounts 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		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	24,337,364
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	113,351,965
<u>Pari</u> 1	Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial	s per	91,414,959
1	statements	1	91,414,939
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d	_	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	91,414,959
4	Amounts 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	_	
b	Other (Describe in Part XIV)	4	
С	Add lines 4a and 4b	4c	24,337,364
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	115,752,323
Par	t 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, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
ART COLLECTIONS	SCHEDULE D, PART III, LINE 4	MAINTAINING AN ART COLLECTION BY THE ORGANIZATION SERVES COLLEGE, COMMUNITY, STATE, AND NATIONAL AUDIENCES BY COLLECTING, PRESERVING, PRESENTING, AND INTERPRETING THE WORK OF ARTISTS THE ORGANIZATION ENCOURAGES AESTHETIC AND CRITICAL AWARENESS BY ENGAGING IN RESEARCH, SCHOLARSHIP, AND COMMUNITY OUTREACH, AND THE DEVELOPMENT OF PUBLICATIONS, EXHIBITIONS, AND EDUCATION PROGRAMS THROUGH THESE VARIED ACTIVITIES, THE ART COLLECTION PROVIDES A FORUM FOR ART, ARTISTS, AND AUDIENCES WHICH ENHANCES THE LIFE OF THE ORGANIZATION AND COMMUNITY AND BRINGS NATIONAL ATTENTION TO THE ORGANIZATION
ENDOWMENT FUND USES	SCHEDULE D, PART V	The College follows the provisions of ASC Subtopic 958-205, Presentation of Financial Statements relative to its endowment The College has interpreted the Uniform Prudent Management of Institutional Funds Act (UPMIFA or the Act), as adopted in Georgia, as providing among other things, expanded flexibility by allowing the College, subject to a standard of prudence, to spend from an endowment fund without regard to the book value of the corpus of the fund. This flexibility under UPMIFA allows an expenditure that reduces the book value of the corpus of an endowment fund below its book value, which was previously not allowed. THE CURRENT SPENDING POLICY USED FOR THE ENDOWMENT FUND IS UP TO 5% OF THE ENDING BALANCE IN THE FUND, MEASURED ON THE LAST DAY OF THE PRIOR THREE FISCAL YEARS. THE ENDOWMENT FUND SPENDING IS USED AT THE DISCRETION OF THE BOARD OF TRUSTEES TO FURTHER THE ORGANIZATION'S MISSION.
ASC 740 DISCLOSURE	SCHEDULE D, PART X	The College is recognized as an organization exempt from federal income taxes under Section 501(a) of the Internal Revenue Code (the Code) as an organization described in Section 501(c)(3) whereby only unrelated business income, as defined by Section 512(a) of the Code, is subject to federal income tax. The College's management has reviewed its tax positions and determined that it does not have material uncertain tax positions that should be reflected in the financial statements for 2012
OTHER RECONCILING ITEMS	SCHEDULE D, PART XII, LINE 4B AND PART XIII, LINE 4B	STUDENT AID \$24,337,364

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OMB No 1545-0047

2011

ZUTT

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service ►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.

Schools

Inspection

Name of the organization MOREHOUSE COLLEGE

Employer identification number

	58-0566205			
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	
	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
c	basis? Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	4b	Yes	
А	with student admissions, programs, and scholarships? Copies of all material used by the organization or on its behalf to solicit contributions?	4c 4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II	- 	165	
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		No
	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? If you answered "Yes" to either line 6a or line 6b, explain on Part II	6b		No
7	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 pondiscrimination? If "No." explain on Part II.	_	Vas	

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
RACIALLY NONDISCRIMINATORY POLICY	SCHEDULE E, LINE 3	MOREHOUSE COLLEGE PUBLISHES ITS NONDISCRIMINATORY POLICIES IN NUMEROUS DOCUMENTS OF THE COLLEGE INCLUDING THE SCHOOL CATALOG, STUDENT HANDBOOK REGISTRATION POSTERS, AND NEWSPAPER ADVERTISEMENTS
FINANCIAL ASSISTANCE FROM A GOVERNMENT AGENCY	SCHEDULE E, LINE 6A	STUDENTS RECEIVED \$5,437,705 FROM THE FEDERAL PELL GRANT PROGRAM AND \$36,281,705 FROM THE FEDERAL DIRECT STUDENT LOAN PROGRAM FOR THE CURRENT FISCAL YEAR IN ADDITION, VARIOUS FEDERAL, STATE AND LOCAL GRANTS HAVE BEEN RECEIVED TO SUPPORT THE PROGRAMS OF MOREHOUSE COLLEGE

Schedule E (Form 990 or 990-EZ) 2011

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DLN: 93493134021203

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

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.

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public

Internal Revenue Service	Attach to Form 990 or Form 990-EZ. See separate instructions.	Inspection
Name of the organization		Employer identification number
MOREHOUSE COLLEGE		
		58-0566205

Part I	Fundraising Activities.	Complete if the organization	answered "Yes" to F	orm 990, Part IV, line 17.

- Indicate whether the organization raised funds through any of the following activities. Check all that apply
- ✓ Mail solicitations
- ✓ Internet and e-mail solicitations
- Phone solicitations ✓ In-person solicitations

- e Solicitation of non-government grants
 - Solicitation of government grants
 - ▼ Special fundraising events
- Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

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 Form 990-EZ filers are not required to complete this table

(i) Name and address of ındıvıdual or entity (fundraıser)	(ii) Activity	fundrais custo cont	(iii) Did fundraiser have custody or control of contributions?		(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
RH BOLTON	GALA CONSULTANT		No	411,829	26,720	385,109
-						
Total			>	411,829	26,720	385,109

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Gross receipts Less Charitable contributions Gross income (line 1 minus line 2) Cash prizes Non-cash prizes Rent/facility costs Food and beverages Entertainment Other direct expenses	(a) Event #1 CANDLE GALA (event type) 411,829 385,529 26,300		(c) Other Events 0 (total number)	(d) Total Events (Add col (a) through col (c)) 411,829 385,529 26,300
Less Charitable contributions	(event type) 411,829 385,529 26,300			col (c)) 411,829 385,529
Less Charitable contributions	411,829 385,529 26,300		(total number)	385,529
Less Charitable contributions	385,529 26,300			385,529
contributions	26,300			
minus line 2) Cash prizes Non-cash prizes Rent/facility costs Food and beverages Entertainment				26,300
Non-cash prizes Rent/facility costs Food and beverages Entertainment	158,014			
Rent/facility costs Food and beverages Entertainment	158,014			
Food and beverages	158,014	I		
B Entertainment				158,014
Other direct expenses .				
	220,592	2		220,592
Direct expense summary Add line	es 4 through 9 ın column	(d)		(378,606)
Net income summary Combine lin	nes 3 and 10 in column (d)		-352,306
Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Gross revenue				
Cash prizes				
Non-cash prizes				
Rent/facility costs				
Other direct expenses				
Volunteer labor	┌ Yes	Г Yes	Г Yes	
 Direct expense summary Add lines 	s 2 through 5 in column (d)	•	()
Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	🛌	
nter the state(s) in which the organiza	tion operates gaming ac	tivities		
s the organization licensed to operate	gaming activities in each	h of these states?		· Fyes Fno
in s f	Cash prizes	Cash prizes	Gross revenue	Gross revenue Cash prizes Non-cash prizes Rent/facility costs Other direct expenses Volunteer labor

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3			
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No			
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity					
	formed to administer charitable (gamıng?		· · · · F Yes F	- No			
13	Indicate the percentage of gamii	ag activity operated in		1 1				
a				13a				
b								
14		f the person who prepares the organiza		<u> </u>				
	Name ►							
	Address ►							
	revenue?	ntract with a third party from whom the			- No			
	amount of gaming revenue retained by the third party 🟲 \$							
С	If "Yes," enter name and address	S						
	Name 🟲							
	Address ►							
16	Gaming manager information							
	Name 🟲							
	Gaming manager compensation I	\$ \$						
	Description of services provided	>						
17 a		Employee er state law to make charitable distribu		· · ·	- No			
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-			
_		activities during the tax year > \$		hadala C /				
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see				
	Identifier	ReturnReference	Explana	tion				
		•	•					

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Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

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

OMB No 1545-0047

2011

DLN: 93493134021203

Open to Public Inspection

Name of the organization Employer identification number MOREHOUSE COLLEGE 58-0566205 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other)

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Pa	art 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 AND STUDENT AID	1482	24,337,364		N/A	N/A

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

Identifier	Return Reference	Explanation
GRANT SUBSTANTIATION	SCHEDULE I, PART I, LINE 2	THE ORGANIZATION FOLLOWS FEDERAL, STATE AND INSTITUTIONAL GUIDELINES AND METHODOLOGIES FOR DETERMINING ELIGIBILITY AND AWARDING OF NEED-BASED FINANCIAL AID FOR MERIT-BASED GRANTS, THE ORGANIZATION AWARDS THE GRANTS IN COMPLIANCE WITH THE STIPULATIONS OF THE UNDERLYING GOVERNING INSTRUMENT (I E DONOR ENDOWMENT AGREEMENTS, AND OTHER DONOR DOCUMENTATION) THE ORGANIZATION MAINTAINS DETAILED RECORDS OF COMPLIANCE FOR ALL GRANTS DISPERSED Assistance to Morehouse College students in the form of scholarships are awarded for the purpose of aiding with the cost of attending the university, I e for tuition, housing, and meals Scholarships are based on academic achievement, need, and other donor requirements such as location of residence Morehouse College has criteria for the eligibility requirements needed to award a scholarship

Compensation Information

DLN: 93493134021203

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

МО	REHOUSE COLLEGE			
D۵	Tt I Questions Regarding Compensation 58-0566205			
	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		1 00	
	First-class or charter travel Housing allowance 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 services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	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?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Village of the following the organization uses to establish the compensation of the organization which is the compensation of the organization uses to establish the compensation uses the organization uses the org			
	Form 990 of other organizations Approval by the board or compensation committee			
	, Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 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 organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
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 $5and 6$? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations			

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns		
		(i) Base (ii) Bonus & (iii) Other reportable compensation compensation		reportable	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) DR ROBERT FRANKLIN	(I) (II)	338,000 0	0	0 0	20,280 0	50,325 0	408,605 0	0	
(2) WELDON JACKSON	(I)	224,540 0	0	0	6,736 0	9,722 0	240,998 0	0	
(3) JOHN WILLIAMS	(I) (II)	168,146 0	0	0	10,089 0	7,596 0	185,831 0	0	
(4) PHILLIP HOWARD	(I)	160,518 0	0	0	9,631 0	7,265 0	177,414 0	0	
(5) WILLIS SHEFTALL	(I)	156,045 0	0	0	9,363 0	7,140 0	172,548 0	0	
(6) WILLIAM BYNUM	(I) (II)	160,080 0	0	0	9,605 0	7,364 0	177,049 0	0	
(7) JOHN HAYNES	(I) (II)	143,638 0	0	0	8,618 0	6 ,6 2 5 0	158,881 0	0	
(8) ANDRE BERTRAND	(I) (II)	160,000 0	0	0	9,600 0	7,361 0	176,961 0	0	
(9) ROBYN CRITTENDEN	(I) (II)	160,000 0	0 0	0 0	9,600 0	7,361 0	176,961 0	0	
(10)SHEILA JACOBS	(I) (II)	140,000 0	0	0 0	8,400 0	6,607 0	155,007 0	0	
(11) GWENDOLYN SYKES	(I) (II)	200,286	0	0	12,017	8,884	221,187		

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

Identifier	Return Reference	Explanation
CERTAIN BENEFITS PROVIDED		A HOUSE IS PROVIDED TO THE PRESIDENT, AT THE CONVENIENCE OF THE EMPLOYER AS A CONDITION OF EMPLOYMENT THE ESTIMTED VALUE WAS NOT INCLUDED IN TAXABLE INCOME
COMPENSATION OF THE TOP MANAGEMENT OFFICIAL	PART I, LINE 3	PRESIDENT/CEO'S COMPENSATION 1 ANNUALLY THE PRESIDENT ESTABLISHES HIS PERFORMANCE GOALS IN CONSULTATION WITH THE COMPENSATION COMMITTEE AND THE BOARD OF TRUSTEES 2 ANNUALLY THE PRESIDENT REVIEWS HIS PROGRESS ON THOSE GOALS WITH THE COMPENSATION COMMITTEE WHO DOCUMENTS A PERFORMANCE REVIEW WITH THE PRESIDENT 3 PERIODICALLY, THE COMPENSATION COMMITTEE PERFORMS A COMPARATIVE REVIEW OF THE PRESIDENT'S COMPENSATION AGAINST THE ORGANIZATION'S PEER INSTITUTIONS 4 PERIODICALLY AND IN CERTAIN CASES (I E THE ARRIVAL OF A NEW PRESIDENT), AN OUTSIDE COMPENSATION CONSULTANT MAY ADVISE THE COMPENSATION COMMITTEE ON PRESIDENTIAL COMPENSATION 5 BASED ON THE ABOVE, THE COMPENSATION COMMITTEE ESTABLISHES THE PRESIDENT'S COMPENSATION FOR THE FOLLOWING YEAR 6 THE COMPENSATION COMMITTEE THEN RENEWS THE PRESIDENT'S CONTRACT FOR AN ADDITIONAL TERM AT THE NEW COMPENSATION LEVEL
SUPPLEMENTAL NONQUALIFIED PLAN	PART I, LINE 4	THE ORGANIZATION HAS A 457(B) DEFERRED COMPENSATION PLAN, LIMITED TO MANAGEMENT OR HIGHLY COMPENSATED EMPLOYEES PURSUANT TO THE SCHEDULE J INSTRUCTIONS THE LINE IS MARKED "NO" THE DEFERRED COMPENSATION IS INVESTED WITH TIAA-CREF AND IS CONSIDERED THE ORGANIZATION'S PROPERTY UNTIL THE EMPLOYEE WITHDRAWS THE FUNDS THE NON-VESTED AMOUNTS ARE INCLUDED IN THE DEFERRED COMPENSATION OF THE EMPLOYEE AND THE FOLLOWING INDIVIDUAL RECEIVED PAYMENTS ASSOCIATED WITH THE PLAN ROBERT FRANKLIN

Schedule J (Form 990) 2011

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

OMB No 1545-0047

DLN: 93493134021203

2011

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number

	e of the organization REHOUSE COLLEGE												ation num	ıber	
										5 8	8-0566	205			
Pa	Part I Bond Issues (a) Issuer Name (b) Issuer EIN (c) CUSIP # (d) Date Issued		(e) Issue Pri	ıce	(f) Description of Purpose		(g) Defeased		Beh			Pool incing			
										Yes	No	Yes	No	Yes	No
Α	DEVELOPMENT AUTHORITY OF FULTON COUNTY 58-1506878 000359900 05-31-2007				45,300,			ND BONDS A	AND	х			х		х
Pa	rt III Proceeds				_								1		
_	A mount of bonds retired				Α.			Е	3		С			D	
1	A mount of bonds defeased				+	6,644,	-								
2	Total proceeds of issue					5,370,	_								
3	Gross proceeds in reserve fun				4	5,649,	-								
4							0	<u> </u>							
5						1,048,295									
6	Proceeds in refunding escrow				2	22,015,192									
7	Issuance costs from proceeds				-	410,649									
8	Credit enhancement from proc					0									
9	Working capital expenditures f						0								
10	Capital expenditures from prod	ceeds			2	22,175,049									
11	O ther spent proceeds						0								
12	O ther unspent proceeds						0								
13	Year of substantial completion	າ 			201										
					Yes	No	'	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as part				Х										
15						Х									
16	6 Has the final allocation of proceeds been made?			X											
17	Does the organization maintai allocation of proceeds?	n adequate books a	nd records to supp	port the final	X										
Pai	rt IIII Private Business U	lse													
					A A			B			C	NI-		D	
					Yes	No	-	Yes	No	Yes	_	No	Yes		No

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Par	Private Business Use (Continued)										
				A		В	C			D	
2-	Are there any management or service contracts that may result in private	husinass I	Yes	No	Yes	No	Yes	No	Yes	No	
3a 	use?			Х							
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?										
С	Are there any research agreements that may result in private business us financed property?	se of bond-		х							
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper										
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 %		•				•	
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth 501(c)(3) organization, or a state or local government			0 %							
6	Total of lines 4 and 5			0 %							
7	Has the organization adopted management practices and procedures to er post-issuance compliance of its tax-exempt bond liabilities?	nsure the	Х								
Par	t IV Arbitrage						I				
		А			В		С		D		
_	Hac a Form 9039-T. Arbitrago Pobato, Viold Poduction and	Yes	No	Yes	No	Y	es	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?		X								
2	Is the bond issue a variable rate issue?	1	X								
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		х								
	Name of provider	0									
	Term of hedge										
d	Was the hedge superintegrated?										
e	Was a hedge terminated?										
4a	Were gross proceeds invested in a GIC?		Х								
ь	Name of provider	0					•				
	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		×								
6	Did the bond issue qualify for an exception to rebate?		Х								

Part VI Supplemental Information

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

	Ident if ier	Return	Explanation
ĺ		Reference	
	PART II, LINE	0	THE PART I, COLUMN (E) ISSUE PRICE DOES NOT AGREE WITH THE PART II, LINE 3 TOTAL PROCEEDS OF ISSUE DUE TO THE INCLUSION OF
	3		INTEREST AND OTHER INVESTMENT EARNINGS ON THE PROCEEDS
i			

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DLN: 93493134021203

OMB No 1545-0047

Open to Public Inspection

(Form 990)

Department of the Treasury

Internal Revenue Service

SCHEDULE M

▶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 MOREHOUSE COLLEGE

Employer identification number

				L	58-0566205			
Pa	rt I Types of Property	1		<u> </u>				
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d contribution	etermı	_	
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	6	109,508	FMV			
	Securities—Closely held stock .			,				
	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic							
14	structures							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
	Archeological artifacts							
25	O ther ▶ ()							
26	O ther ▶()							
	O ther ▶()							
28	O ther ► ()							
29	Number of Forms 8283 received for which the organization compl				29			
	for which the organization compl	eteu roiiii d	5265, Part IV, Dollee ACKI	iowiedgement			Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I lines	1-28 that it		163	110
	must hold for at least three year							
	for exempt purposes for the enti					302		No
ь	If "Yes," describe the arrangement					30a		
31	Does the organization have a gif			review of any non-standard	contributions?	31		No
32a	Does the organization hire or us	e third parti	es or related organizations	to solicit, process, or sell i	non-cash			_
	contributions?		· · · · · · · · ·			32a	Yes	
b	If "Yes," describe in Part II							
	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

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.

Identifier	Return Reference	Explanation
USE OF THIRD PARTIES	, ,	WHEN WORKS OF ART ARE RECEIVED, THE ORGANIZATION UTILIZES AN INDEPENDENT APPRAISER TO DETERMINE THE FAIR MARKET VALUE THE ORGANIZATION USES THIRD PARTY BROKERS TO PROCESS AND/OR SELL DONATED SECURITIES

Schedule M (Form 990) 2011

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to 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.

Open to Public Inspection

Name of the organization MOREHOUSE COLLEGE

Employer identification number

58-0566205

ldentifier	Return	Explanation
	Reference	· ·
AUDITED FINANCIAL STATEMENT	FORM 990, PART IV, LINE 12 AND PART XI LINES 2 AND 3	THE ORGANIZATION RECEIVES AN ANNUAL FINANCIAL STATEMENTS AUDIT, IN ACCORDANCE WITH GAAP, REVIEWED BY AN INDEPENDENT AUDITOR ADDITIONALLY, AN AUDIT AS SET FORTH IN THE SINGLE AUDIT ACT AND OMB CIRCULAR A-133 HAS BEEN CONDUCTED AS A RESULT OF A FEDERAL AWARD
BOARD REVIEW OF FORM 990	FORM 990, PART VI, SECTION B, LINE 11	THE ORGANIZATION'S INDEPENDENT ACCOUNTANT PREPARED THE CURRENT YEAR TAX RETURN AND THIS WAS REVIEWED PRIOR TO FILING BY THE ORGANIZATION'S MANAGEMENT AND THE AUDIT AND EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES A COPY OF THE FINALIZED FORM 990 WAS PROVIDED TO THE COMPLETE BOARD OF TRUSTEES ON A SECURED WEBSITE PRIOR TO FILING
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, LINE 12	THE ORGANIZATION REQUIRES ALL BOARD MEMBERS TO CONFIRM THEY ARE IN COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY EACH YEAR THROUGH AN AFFIRMATION OF COMPLIANCE WITH THE POLICY THROUGH EMAIL OR SOME OTHER ACCEPTABLE COMMUNICATION MEDIUM
PROCESS FOR DETERMINING COMPENSATION	FORM 990, PART VI, SECTION B, LINE 15	PRESIDENT/CEO'S COMPENSATION 1 ANNUALLY THE PRESIDENT ESTABLISHES HIS PERFORMANCE GOALS IN CONSULTATION WITH THE COMPENSATION COMMITTEE AND THE BOARD OF TRUSTEES 2 ANNUALLY THE PRESIDENT REVIEWS HIS PROGRESS ON THOSE GOALS WITH THE COMPENSATION COMMITTEE WHO DOCUMENTS A PERFORMANCE REVIEW WITH THE PRESIDENT 3 PERIODICALLY, THE COMPENSATION COMMITTEE PERFORMS A COMPARATIVE REVIEW OF THE PRESIDENT'S COMPENSATION AGAINST THE ORGANIZATION'S PEER INSTITUTIONS 4 PERIODICALLY AND IN CERTAIN CASES (I E THE ARRIVAL OF A NEW PRESIDENT), AN OUTSIDE COMPENSATION COMPENSATION CONSULTANT MAY ADVISE THE COMPENSATION COMMITTEE ON PRESIDENTIAL COMPENSATION 5 BASED ON THE ABOVE, THE COMPENSATION COMMITTEE ESTABLISHES THE PRESIDENT'S COMPENSATION FOR THE FOLLOWING YEAR 6 THE COMPENSATION COMMITTEE DOCUMENTS THE REASONS FOR ESTABLISHING THE NEW COMPENSATION AMOUNT 7 THE COMPENSATION COMMITTEE THEN RENEWS THE PRESIDENT'S CONTRACT FOR AN ADDITIONAL TERM AT THE NEW COMPENSATION LEVEL OTHER OFFICERS MOREHOUSE COLLEGE HAS A POLICY FOR REVIEW AND APPROVAL FOR OFFICER AND KEY EMPLOYEE COMPENSATION
JOINT VENTURES	FORM 990, PART VI, SECTION B, LINE 16	THE ORGANIZATION INVESTS IN PARTNERSHIPS THAT MAY BE CONSTRUED TO BE JOINT VENTURES THE ORGANIZATION HAS ENACTED ADEQUATE SAFEGUARDS FOR ITS PARTNERSHIP INVESTMENTS TO ENSURE THAT THESE ACTIVITIES DO NOT JEOPARDIZE THE ORGANIZATION'S EXEMPT STATUS
GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS (ARTICLES OF INCORPORATION AND ANY SUBSEQUENT AMENDMENTS) ARE AVAILABLE TO THE PUBLIC ON THE GEORGIA SECRETARY OF STATE WEBSITE. ALL RELEVANT GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC
OTHER CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	UNREALIZED LOSSES (8,177,729)

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DLN: 93493134021203

2011

OMB No 1545-0047

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization MOREHOUSE COLLEGE				Employer i	dentification number		
Part I Identification of Disregarded Entities (Comp	ete ıf the organızatı	on answered "Yes	" on Form 990, Pa		0.5		
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (stat or foreign country)		(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during to	zations (Complete the tax year.)	ıf the organızatıoı	n answered "Yes"	on Form 990, P	art IV, line 34 becaus	e it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity statu (if section 501(c)(3	(f) Direct controlling entity	Section 5 conti	(g) 512(b)(13 trolled nization
(1) HOWARD THURMAN EDUCATIONAL TRUST						Yes	No
830 WESTVIEW DR STE 109-7	SUPPORT	GA	501(C)(3)		9 NA		No
ATLANTA, GA 30314 94-6109302						<u> </u>	
For Privacy Act and Paperwork Reduction Act Notice, see the Instruction	ons for Form 990.	Cat No 5	0135Y	1	Schedule R (F	orm 990)) 2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line	e 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	, ·	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No	
												i

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Рптагу activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

Part		s" on Form 990, Par	T IV, line 34, 35, 3	35A, Or 36.)	Yes	No
	ote. Complete line 1 if any entity is listed in Parts II, III or IV		TT TV2		res	NO
	ng the tax year, did the organization engage in any of the following transactions with one or more related organ	nizations listed in Parts	S 11-1V /	4-		NI-
	eceipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a 1b	1	No No
	Gift, grant, or capital contribution to related organization(s)			1b 1c		No
	iff, grant, or capital contribution from related organization(s)			1d		No
	oans or loan guarantees to or for related organization(s)			1u 1e	_	No
e L	oans or loan guarantees by related organization(s)			16	+	110
f S	ale of assets to related organization(s)			1f		No
	urchase of assets from related organization(s)			1g		No
	xchange of assets with related organization(s)			1h		No
	Lease of facilities, equipment, or other assets to related organization(s)					
						No
j L	ease of facilities, equipment, or other assets from related organization(s)			1 <u>j</u>		No
-	erformance of services or membership or fundraising solicitations for related organization(s)			1k		No
	erformance of services or membership or fundraising solicitations by related organization(s)			11		No
m S	haring of facilities, equipment, mailing lists, or other assets with related organization(s)			1m	,	No
n S	haring of paid employees with related organization(s)			1n		No
o F	eimbursement paid to related organization(s) for expenses			10		No
p F	eimbursement paid by related organization(s) for expenses			1 p		No
q	ther transfer of cash or property to related organization(s)			1 q		No
r C	ther transfer of cash or property from related organization(s)			1r		No
2 I	the answer to any of the above is "Yes," see the instructions for information on who must complete this line, ii	ncluding covered relati	onships and transact	cion thresholds		
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determing Involved		unt
1) 2)						
2)						
3)						
4)						
5)						
6)		1		I		

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	or	(e) Are all partners section 501(c)(3) ganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtionate allocations		(i) Code V—UBI amount in box 20 of Schedule K- 1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
(1) STRATEGIC INTERNATIONAL EQUITY TRUST 1001 19TH STREET NORTH 16TH FLOORARLINGTON, VA 222091722 36-7045715	INVESTMENTS	VA	Excluded		No	3,486,057	23,840,202		No	0		No	17 797 %

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 58-0566205

Name: MOREHOUSE COLLEGE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per	Posi t			/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	l wook	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	
DR ROBERT FRANKLIN PRESIDENT	40 0	Х		Х				338,000	0	70,605	
MRS BILLYE AARON TRUSTEE	1 0	Х									
DR CHARLES G ADAMS TRUSTEE	1 0	Х									
DR BENJAMIN A BLACKBURN TRUSTEE	1 0	Х									
MR DAN T CATHY TRUSTEE	1 0	Х									
MR WILLIE J DAVIS TRUSTEE	1 0	Х									
MR BORIS DOBRIJEVIC TRUSTEE	1 0	Х									
MR J ALEXANDER M DOUGLAS JR TRUSTEE	1 0	Х									
JUDGE JEROME FARRIS TRUSTEE	1 0	Х									
MR MICHAEL GATEWOOD TRUSTEE	1 0	Х									
GENERAL JAMES R HALL TRUSTEE	1 0	Х									
DR MICHAEL HODGE TRUSTEE	1 0	Х									
DR KEITH HOWARD TRUSTEE	1 0	Х									
MR CHARLES H JAMES III TRUSTEE	1 0	Х									
DR MAE C JEMISON TRUSTEE	1 0	Х									
MR DALE E JONES TRUSTEE	1 0	Х									
MR DONALD R KNAUSS TRUSTEE	1 0	Х									
MR MICHAEL LAWSON TRUSTEE	1 0	Х									
MR WILLIAM M LEWIS JR TRUSTEE	1 0	Х									
DR BRYANT MARKS TRUSTEE	1 0	Х									
MR STRIVE MASIYIWA TRUSTEE	1 0	Х									
MR CHARLES D MOODY TRUSTEE	1 0	Х									
REV DR OTIS MOSS JR TRUSTEE	1 0	Х									
REV OTIS MOSS III TRUSTEE	1 0	Х									
MR CLINTON L STEVENSON TRUSTEE	1 0	Х									

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours		(ition that a		y)	_		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
MR JOHN L THORNTON TRUSTEE	1 0	Х										
MR RALPH DE LA VEGA TRUSTEE	1 0	X										
DR JOHN A WALLACE TRUSTEE	1 0	X										
DR DORTHY COWSER YANCY TRUSTEE	1 0	Х										
AMBASSADOR ANDREW YOUNG TRUSTEE	1 0	Х										
MR ANRE WASHINGTON TRUSTEE	1 0	Х										
MR ROBERT C DAVIDSON JR TRUSTEE	1 0	Х						0		0		
MR ROBERT J LEVIN TRUSTEE	1 0	Х						0		0		
MR KEVIN MCGEE TRUSTEE	1 0	Х						0		0		
MR JIM MOSS TRUSTEE	1 0	Х						0		0		
MR AVERY MUNNINGS TRUSTEE	1 0	Х						0		0		
WELDON JACKSON SR VP ACADEMIC AFFAIRS	40 0			×				224,540	0	16,458		
DIANE ALEXANDER AVP INFORMATION TECHNOLOGY	40 0			x				115,525	0	12,616		
PHILLIP HOWARD VP, OFFICE INST ADVANCEMENT	40 0			×				160,518	0	16,896		
WILLIS SHEFTALL INTERIM PROVOST/SR VP ACADEMIC	40 0			×				156,045	0	16,503		
WILLIAM BYNUM VP STUDENT SERVICES	40 0			×				160,080	0	16,969		
ANDRE BERTRAND VP CAMPUS OPERATIONS	40 0			х				160,000	0	16,961		
ROBYN CRITTENDEN GENERAL COUNSEL	40 0			X				160,000	0	16,961		
SHEILA JACOBS INTERIM VP BUS AND FIN /CFO	40 0			х				140,000	0	15,007		
RALPH JOHNSON AVP/CHIEF PROCUREMENT OFFICER	40 0			х				130,000		14,030		
RUBYE BYRD AVP ACADEMIC AFFAIRS	40 0			х				124,033		13,446		
RENARDO HALL AVP/DEAN OF MEN	40 0			х				105,000		11,588		
PAMELA WESTON AVP HUMAN RESOURCES	40 0			х				115,000		12,565		
ANN WATTS AVP ACADEMIC AFFAIRS	40 0			х				124,033		13,375		
GWENDOLYN SYKES VP BUSINESS & FINANCE/CFO	40 0			×				200,286		20,901		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensation Limptor Coop, and Lindopensation Continues Co												
(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
JOHN WILLIAMS PROFESSOR	40 0					х		168,146	0	17,685		
JOHN HAYNES PROFESSOR	40 0					х		143,638	0	15,243		
JOHN HALL PROFESSOR	40 0					х		123,961		13,368		
TEHERAN MILLS DEAN RESEARCH & SPONSORED PRG	40 0					Х		118,500		12,907		
KATHELEEN JOHNSON EXEC ASST TO PRESIDENT	40 0					х		130,268		13,984		