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SCANNED

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. 07/01 2011, and ending For the 2011 calendar year, or tax year beginning 20 12 D Employer identification number C Name of organization THE UNIVERSITY OF PUGET SOUND Check if applicable 91-0564961 Doing Business As Address change Number and street (or P O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 253-879-6110 Initial return 1500 N Warner St CMB 1075 City or town, state or country, and ZIP + 4 Terminated Tacoma, WA 98416-1075 G Gross receipts \$ Amended return H(a) Is this a group return for affiliates? ☐ Yes ☑ No F Name and address of principal officer Ronald R Thomas Application pending H(b) Are all affiliates included? Yes No 1500 N Warner St CMB 1075, Tacoma, WA 98416-1075 if "No," attach a list (see instructions) 501(c)(3) 501(c) (Tax-exempt status: H(c) Group exemption number ▶ Website: ▶ www.pugetsound.edu Form of organization
✓ Corporation
Trust
Association
Other L Year of formation 1888 M State of legal domicile Summary Part I Briefly describe the organization's mission or most significant activities: Education Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 33 Number of independent voting members of the governing body (Part VI, line 1b) 31 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 2,817 Total number of volunteers (estimate if necessary) 6 723 Total unrelated business revenue from Part VIII, column (C), line 12 7a -98,631 Net unrelated business taxable income from Form 990-T, line 34 -111,115 **Current Year** Contributions and grants (Part VIII, line 1h) 12,099,371 23,538,607 Revenue Program service revenue (Part VIII, line 2g) 125,028,422 131,090,687 9 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 5,350,603 5,944,071 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 4.899.995 11 1,846,655 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 162,420,020 12 147,378,391 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 38,508,960 41,836,193 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 65,300,854 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 63,279,538 Professional fundraising fees (Part IX, column (A), line 11e) 0 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ b Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 43,775,177 45,122,576 17 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 145,563,675 152,259,623 19 Revenue less expenses. Subtract line 18 from line 12 . 1,814,716 10,160,397 **Beginning of Current Year End of Year** 508,368,666 506,635,944 20 Total assets (Part X, line 16) 21 109,314,241 112,040,605 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 399,054,425 394,595,339 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here Sherry B Mondou, VP for Finance & Administration Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check I If Paid self-employed **Preparer** Firm's ElN ▶ Firm's name **Use Only** Phone no. Firm's address ▶ ☐ Yes ☐ No

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

Form 9	90 (2011)		Pag
Part			-
1			t III
•	Briefly describe the organization's missi		
	Did the organization undertake any sign	oficant program convices during the vi	ear which were not listed on the
2	prior Form 990 or 990-EZ?		
3	If "Yes," describe these new services or Did the organization cease conductin services?		- · ·
	If "Yes," describe these changes on Sch	nedule O.	
4)(4) organizations and section 4947(a	s three largest program services, as measured a)(1) trusts are required to report the amount ach program service reported.
4a			41,836,193) (Revenue \$ 130,992,056) nington, Puget Sound serves 2,600 students from
	48 states and 20 countries, providing 1,20 social sciences, including graduate progr low student-faculty ratio and places an en professors of the year from the Carnegie	0 classes in more than 50 major areas o ams in education, occupational therapy, nphasis on excellence in teaching. Facul Foundation. An academically rigorous re	f study in the arts, sciences, humanities, and and physical therapy. The college maintains a Ity awards include seven Washington state esidential college, Puget Sound offers a full range
			dy abroad, community service, and leadership ty in its students, faculty, and staff, and fosters
	lifelong relationships with alumni.		

4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$
4d	Other program services (Describe in Sch	edule O.)	
	(Expenses \$ 0 including g		\$ 0)-
40	Total program service expenses	126 225 224	·

Part	Checklist of Required Schedules		T V	l Ma
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	<u> </u>
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	1	
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	1	
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	1	
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	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	ر رائي زوير آ	1) ~	11.7
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		
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	1	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	-	1
	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		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e	1	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
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	1	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	<u> </u>
14 a		14a	✓	
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, Parts I and IV	14b	1	
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 United States? If "Yes," complete Schedule F, Parts II and IV.	15	1	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	✓	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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		1
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		✓_
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		<u></u>

Part	Checklist of Required Schedules (Continued)		1	
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
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	/	
23	Did the organization answer "Yes" to Part VII, Section A, line 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	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	1	·
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		✓
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
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		✓
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		<u>√</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	1	
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b	✓	✓_
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	√	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
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		<u>√</u>
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	1	
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	1	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b	✓	✓
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		✓
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		√
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	/	<u></u>
		Form	990	(2011)

Form **990** (2011)

art				
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 3808			,
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
•	reportable gaming (gambling) winnings to prize winners?	1c		
2a				
Za	1 1		•	
	Statements, med for the culture year of the state of the	2b	1	
b		20		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	√	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	✓	
4a	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, securities account, or other financial	1		
	account)?	4a	✓	
b	If "Yes," enter the name of the foreign country: France	ŀ	ŀ	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		l	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	1	
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a		1
b	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		1
	If "Yes," indicate the number of Forms 8282 filed during the year			<u> </u>
ď	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
e	Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?	7f	-	*
f				
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		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		- 1	
	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		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	\rightarrow	
0	Section 501(c)(7) organizations. Enter:		1	
а	Initiation fees and capital contributions included on Part VIII, line 12		1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]		l	
1	Section 501(c)(12) organizations. Enter:		,	ŧ.
а	Gross income from members or shareholders		. [,
b	Gross income from other sources (Do not net amounts due or paid to other sources		· 1	•
	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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	T		
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	†		-
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note. See the instructions for additional information the organization must report on Schedule O.			
ь	Enter the amount of reserves the organization is required to maintain by the states in which	1	1	
_	the organization is licensed to issue qualified health plans	- 1		
C	Enter the amount of reserves on hand	-		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	\dashv	1
4a h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h	-+	-

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response to any question in this Part VI	See ın	struct	ions.
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	33		
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	*,	,	
ь		31	١.	
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6		✓
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		1
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		✓_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	,		
а	The governing body?	8a	/	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	<u> </u>
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		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve	nue C		- :
		40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		-
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			- 1
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	✓	
14	Did the organization have a written document retention and destruction policy?	14	✓	
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?	14.2		
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b	1	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	7	, ,	٠.:
	with a taxable entity during the year?	16a		✓
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		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed MA, MD, MI, MO, NH, OR, WA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	on 501((c)(3)s	only)
19	☐ Own website ☐ Another's website ☑ Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict and financial statements available to the public during the tax year.	of Inte	rest p	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and record organization: ► Janet S Hallman, (253)879-8620	s of the	•	

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

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

Check this box if neither the organiza	tion nor any relate	d org	aniz	atic	on c	ompe	ensa	ted any currer	t officer, directo	r, or trustee.
				(6	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					e than is boti		Reportable	Reportable	Estimated
	hours per					or/trus		- from I	compensation from related	amount of other
	week (describe	옥둜	Ins	₽	ξ e	BE	Former		organizations	compensation
	hours for	dred dred	1	Officer	g	Bes	1 3	organization	(W-2/1099-MISC)	from the
	related organizations	Individual trustee or director	§		Key employee	8 8	Ι,	(W-2/1099-MISC)		organization and related
	in Schedule	l g	5		yee	g g	ŀ	ļ		organizations
	O)	8	Institutional trustee			Highest compensated employee				
				\vdash	-					
Carl G Behnke										
Board Member	2.3	✓						0	0	
Richard M Brooks '82		١.		١.				ļ		
Board Chair	2.3	✓		✓	<u> </u>		_	0	0	
William M Canfield '76 P'08		_				ł				
Board Member	2.3	<u> </u>			<u> </u>			0	0	C
Mitzi W Carletti '78			1			1		[
Board Member	2.3	✓			L		_	0	0	0
Marvin H Caruthers P'02		_						[
Board Member	2.3	✓	Щ					0	0	
Michael J Corliss '82										
Board Member	2.3	✓			L			0	0	0
Hollis S Dillon '84 JD'88						}				
Board Member	2.3	✓	Ш		<u> </u>		_	0	0	0
Katheleen A Duncan '82			l l							
Board Member	2.3	✓	Щ		L	ļ		0	0	0
Randolph C Foster '74					i					
Board Member	2.3	✓	Ш		L_		lacksquare	0	0	0
Frederick W Grimm '78						ĺ				
Board Member	2.3	✓			_		Щ	0	0	0
Bruce W Hart P'09		'								
Board Member	2.3	✓	Ш			<u> </u>		0	0	0
Matthew M Kelleher '79										
Board Member	2.3	1						0	0	0
Thomas E Leavitt '71 JD'75 P'10										
Board Member	2.3	✓						0	0	0
Gwendolyn H Lillis P'05										
Board Member	2.3	✓						. 0	0	0

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

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

	.,	1			C)				I	
	1	l		-	o, sition					
(A)	(B)	(do r	(do not chec			e than o	one	(D)	(E)	(F)
Name and Title	Average hours per				erson is both an director/trustee)			Reportable compensation	Reportable compensation from	Estimated amount of
	week	⊢—	_	-			-	·	related	other
	(describe hours for	걸	ıst	Officer	€	팔호	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	rect	톭	ğ	1 3	Şest	व्	(W-2/1099-MISC)	(VV-2/1099-MISC)	organization
	organizations	Individual trustee or director	Institutional trustee		Key employee	l ° š		ľ		and related
	ın Schedule O)	uste	1 7		8	B				organizations
	",	•	ê			Highest compensated employee				
			-				-			
Eric Lindgren										
Board Member	2.3	1			L			0	0	0
George E Matelich '78				ļ						
Board Treasurer	2.3	✓		✓	L.	<u> </u>		0	0	0
Janeen Solie McAninch '77 P'06							Ì			
Board Member	2.3	✓		<u> </u>				0	0	0
Kenneth C McGill '61										
Board Member	2.3	✓					l	0	0	0
William C Nelson '69										
Board Member	2.3	✓_						0	0	0
Jill T Nıshi '89										
Board Member	2.3	✓			L			0	0	0
Wade H Perrow '73 P'02										
Board Member	2.3	✓						0	0	0
John C Pierce '65 P'94 P'97										
Board Member	2.3	✓						0	О	0
Robert C Pohlad P'07								:		-
Board Vice Chair	2.3	1		\				0	0	0
Lyle Quasim '70										
Board Member	2.3	✓						0	0	0
Allan D Sapp '78 P'10										
Board Member	2.3	✓						0	0	0
Robert T Shishido '72 P'09										
Board Member	2.3	✓						0	0	0
Gillian Neukom Toledo '94										
Board Member	2.3	✓	L					O	0	0
Barbara S Walker P'05 P'07										
Board Member	2.3	1						О	0	0
										Form 990 (2011)

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

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

(A) Name and Title	(B) Average		ot ch	Pos eck		e than o		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (describe hours for related organizations in Schedule O)	office or directo				Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Guy N Watanabe '75 MBA '76										
Board Member	2.3	✓	lacksquare		L_			0	0	0
William T Weyerhaeuser								1		
Board Member	2.3	\					<u> </u>	0	0	
John A Whalley '64								1		
Board Member	2.3	\						0	0	
Kenneth W Willman '82]									
Board Member	2.3	✓						0	0	0
Ronald R Thomas										
President & Trustee	40	✓		✓				432,141	0	178,941
Kristine M Bartanen										
Academic VP and Dean	40			✓				213,853	0	53,862
David R Beers										
VP for University Relations	40		Ш	✓				232,615	0	66,903
Mary Elizabeth Collins										
Executive Assistant	40			✓				86,531	0	29,496
Katherine W Davis										
AVP for Treasury	40			✓				108,368	0	18,290
Janet S Hallman										
Controller	40			✓				115,672	0	21,379
George H Mills Jr				1						
VP for Enrollment	40			✓	:			179,125	0	27,015
Sherry B Mondou										
VP for Finance and Admin	40			✓				245,655	0	60,522
J Michael Segawa										
Dean of Students	40			✓				139,961	0	22,606
Peter H Greenfield										
Professor	40		<u> </u>	-		✓		224,069	0	26,237

Part VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (c	ontini	ıed)
(A)	(B)	l		Pos	C) iition			(D) ·	(E)		(F)
Name and title	Average hours per	box,	unles	s pe	rson	than of is both or/trus	n an	Reportable compensation	Reportable compensation from		Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individua or directo	Institutional trustee	Officer	_	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organization (W-2/1099-Mi		other compensation from the organization and related organizations
Jacalyn F Royce											
Associate Professor	40				<u> </u>	✓	ļ	170,855		0	13,413
John M Hickey											40.040
AVP Business Services	40	-	\vdash	├─		✓		147,730		0	19,243
William E Morse Jr AVP Technology Services/CTO	40					1		139,640		0	22,290
Mary Turnbuil	1-10							100,010		1	
Instructor	40					1		127,062	L	o	5,347
										\rightarrow	
											-
							-				
						_	\vdash		-		
							_			_	
1b Sub-total								2,563,277		_0	565,544
c Total from continuation sheets to Part d Total (add lines 1b and 1c)			•					2,563,277		0	565,544
Total number of individuals (including but reportable compensation from the organi	not limited	l to th					e) w		ore than \$10		
3 Did the organization list any former of			r tri	uste	20	kev e	eme	olovee or high	est compen	sated	Yes No
employee on line 1a? If "Yes," complete S	Schedule J	for su	ıch .	indı	vidu	ıal					3 🗸
4 For any individual listed on line 1a, is the organization and related organizations individual	sum of repartment of sum of repartment of sum of su	oortab an \$1	ole (50,0	000	nper ? <i>II</i> 	nsatio "Ye:	n a s,"	nd other comp complete Sch	ensation from edule J for 	n the such	
5 Did any person listed on line 1a receive of for services rendered to the organization?									ation or indiv	/idual	5 /
Section B. Independent Contractors											
 Complete this table for your five highest of compensation from the organization. Rep year. 											
(A) Name and business add	ress							(B) Description of se	ervices		(C) Compensation
GLY Construction Inc, PO Box 6728, Bellevue, WA	98008-0728						Co	nst supplies/se	rvices		13,105,206
John Korsmo Construction Co, PO Box 1377, Taco							Co	nst supplies/se	rvices		1,585,265
General Mechanical Inc, 2701 South J St, Tacoma,								ch supplies/ser			587,211
REP Electric Inc, PO Box 11184, Tacoma, WA 9841							$\overline{}$	ct supplies/serv			537,133
2 Total number of independent contracto					mit	ed to		od/Beverage Co		a) - 1 * .	485,791
received more than \$100,000 of compens								61	'-		The state of the s

	Statement of Rev				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1a	Federated campaign	s	1a	0				
ta b c d e f g h	Membership dues .		1b	0	Ì			
c	Fundraising events .		1c	300				
d	Related organizations	s	1d	0	1			
e	Government grants (cor	ntributions)	1e	2,228,357				
f	All other contributions, g	ifts, grants,					İ	
<u> </u>	and similar amounts not in	cluded above	1f	21,309,950			i	
g	Noncash contributions inclu	ded in lines 1a-	-1f: \$	1,727,416				
h	Total. Add lines 1a-1	lf <u>.</u> .		▶	23,538,607			
				ısiness Code				
2a	Education			611310	131,090,687	131,090,687	0	
Ь								
C								
d								
e	***************************************							
f	All other program ser			-	0	0	0	
g					131,090,687	····		
3	Investment income	(including	dividend	s, interest,				
i i	and other similar amo				4,883,136	o	o	4,883,1
4	Income from investmen	· ·		<u> </u>	0	0	0	
5	Royalties			-	0	0	0	
"	noyanioo	(i) Real		(ii) Personal		-		
6a	Gross rents		0	0		1	1	
Ь			0	0		1		•
	Rental income or (loss)		0					
C					0	0	0	
d 7a		(i) Secuntion	es l	(ii) Other	, ,			·····
'a	assets other than inventory				;			1 -
Ь		68,808	8,742	180,014			1	
"	and sales expenses .			450.050			ł	,
1 .	· ·	67,745		182,050				-
C.			2,971	-2,036				1,060.93
d	Net gain or (loss) .		· · <u>· · ·</u>	· · · •	1,060,935	0	0	1,060,93
	Cusas imasma fuam fi	.ndroioina		İ		-		
Oa	Gross income from fu	indraising	_	ŀ)	
	events (not including \$)	<u>5</u>	į		1	· · ·	
1	of contributions reporte			_			1	
1.	See Part IV, line 18 .			0				
b	Less: direct expenses			. 0		· .		
C				nts . ►	0		0	
9a	Gross income from ga					-	į	
	See Part IV, line 19 .			1,879				
b				793				
1 .	Net income or (loss) f			s ▶	1,086	0	0	1,08
10a			1		-		ł	
	returns and allowance		"	0	1		ĺ	
b	Less: cost of goods s			0				
С					0	0	0	
	Miscellaneous R	evenue	Bu	siness Code				
	Loss other endowment in		L	900099	-98,631	0	-98,631	
	Gain other investment			621310	1,944,200	0	0	1,944,20
С				-				
d	All other revenue .				0	0	0	
е	Total. Add lines 11a-	11d		▶	1,845,569			
	Total revenue. See in			F	162,420,020	131,090,687	-98,631	7,889,35

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).

requir	ed to complete columns (B), (C), and (D).				
	Check if Schedule O contains a respon		in this Part IX	<u> </u>	<u> </u>
	ot include amounts reported on lines 6b, 7b, o, 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	9,168	9,168	- 198,	· · · · · · · · · · · · · · · · · · ·
2	Grants and other assistance to individuals in the United States See Part IV, line 22	40,593,357	40,593,357		, ",
3	Grants and other assistance to governments, organizations, and individuals outside the				1
	United States. See Part IV, lines 15 and 16	1,233,668	1,233,668		1 ~
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	2,257,513	683,753	1,145,963	427,797
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	497,773	469,443	28,330	0
7	Other salaries and wages	46,993,209	38,660,868	6,680,806	1,651,535
8	Pension plan accruals and contributions (include			ł	
	section 401(k) and 403(b) employer contributions)	4,990,111	4,184,535	661,138	144,438
9	Other employee benefits	7,255,988	5,719,932	1,220,917	315,139
10	Payroll taxes	3,306,260	2,587,407	573,370	145,483
11	Fees for services (non-employees):			-	
а	Management	0	0	0	0
b	Legal	133,848	4,115	125,839	3,894
С	Accounting	123,485	0	123,485	0
d	Lobbying	4,114	0	4,114	0
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	1,732,881	0	1,732,881	0
g	Other	3,332,140	2,406,576	691,766	233,798
12	Advertising and promotion	1,879,623	995,511	379,255	504,857
13	Office expenses	3,574,589	2,862,661	509,175	202,753
14	Information technology	1,249,876	1,072,001	136,994	40,881
15	Royalties	35,340	27,120	8,220	0
16	Occupancy	3,517,615	1,562,141	1,954,715	759
17	Travel	2,621,552	2,326,540	190,106	104,906
18	Payments of travel or entertainment expenses	-,,-			
	for any federal, state, or local public officials	o	o	o	0
19	Conferences, conventions, and meetings	247.383	213,674	23,003	10,706
20	Interest	2,496,271	2,185,865	280,202	30,204
21	Payments to affiliates	n	2,.55,566	200,202	
22	Depreciation, depletion, and amortization	12,298,593	10,314,255	1,862,412	121,926
23	Insurance	659,330	14,319	645,011	121,320 N
24	Other expenses. Itemize expenses not covered	Lu "nounte" of it	, , , ,	, , ,	
2-7	above. (List miscellaneous expenses in line 24e. If	一个	, -		
	line 24e amount exceeds 10% of line 25, column		-	-	-
	(A) amount, list line 24e expenses on Schedule O.)	±\$ € 1 \$,	ľ	
а	Allocation of plant O & M	0	9,160,079	-9,242,375	82,296
b	Goods purchased for resale	4,931,810	4,931,805	0	
C		3,889,538	3,889,538	0	5
_	Study abroad program exp		122,840		2 624
d	Membership dues	296,463		169,999	3,624
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	2,098,125	94,153	2,003,578	394
25	Joint costs. Complete this line only if the	152,259,623	136,325,324	11,908,904	4,025,395
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)	0	0	0	0

	art X				rage I
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	13,206,122	1	22,966,388
	2	Savings and temporary cash investments	30,406,059	2	18,113,93
	3	Pledges and grants receivable, net	9,633,681	3	9,459,25
	4	Accounts receivable, net	2,046,133	4	1,220,05
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
s	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net	15,729,779	7	14,645,154
Ąŝ	8	Inventories for sale or use	711,708	_	731,166
-	9	Prepaid expenses and deferred charges	2,883,946		2,723,101
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 261,324,873	2,000,540	Ě	2,723,101
	ь	Less: accumulated depreciation 10b 87,589,033	174,928,533	10c	173,735,840
	11	Investments—publicly traded securities	146,167,882	11	143,020,039
	12	Investments - other securities. See Part IV, line 11	109,597,084	12	113,542,400
	13	Investments program-related. See Part IV, line 11		13	
	14	Intangible assets	890,855	14	3,889,031
	15	Other assets. See Part IV, line 11	2,166,884	15	2,589,579
	16	Total assets. Add lines 1 through 15 (must equal line 34)	508,368,666	_	506,635,944
	17	Accounts payable and accrued expenses	17,535,739		15,336,725
	18	Grants payable	55,165		35,010
	19	Deferred revenue	2,916,018		2,911,927
	20	Tax-exempt bond liabilities	62,235,625		60,706,875
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	111,288		110,106
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Lis	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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 D	26,460,406	25	32,939,962
	26	Total liabilities. Add lines 17 through 25	109,314,241	26	112,040,605
ses		Organizations that follow SFAS 117, check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.			
ă	27	Unrestricted net assets	207,339,457	27	212,808,833
Bai	28	Temporarily restricted net assets	90,151,310	28	67,265,645
١	29	Permanently restricted net assets	101,563,658	29	114,520,861
or Fur		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
ا يَو	30	Capital stock or trust principal, or current funds		30	
Š	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
un I	32	Retained earnings, endowment, accumulated income, or other funds		32	
₹				00	204 505 220
Net Assets or Fund Balances	33	Total net assets or fund balances	399,054,425	33	394,595,339

_	4	^
Page.	1	Z

Par	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		<u> </u>		.
1	Total revenue (must equal Part VIII, column (A), line 12)	1		162,42	20,020
2	Total expenses (must equal Part IX, column (A), line 25)	2		152,25	9,623
3	Revenue less expenses. Subtract line 2 from line 1	3		10,16	0,397
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u></u>	399,05	4,425
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-14,61	9,483
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		394,59	5,339
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>	<u> </u>		<u>. </u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_ '	₹} -	•
	If the organization changed its method of accounting from a prior year or checked "Other," exp	olaın	in 🛗		
	Schedule O.		3,7	1/	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		✓
b	Were the organization's financial statements audited by an independent accountant?			✓	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over			ŀ	
	of the audit, review, or compilation of its financial statements and selection of an independent accou				
	If the organization changed either its oversight process or selection process during the tax year, ex	plain	in 📑	. * \	"
	Schedule O.		140	1	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	ar wei	re	,	
	issued on a separate basis, consolidated basis, or both:		İ	1	1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		J	<u> </u>	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	in		
	the Single Audit Act and OMB Circular A-133?		. 3a	/	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		ie 📗		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such at	ıdıts	3b	✓	L
			Fo	rm 990	(2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2011

Open to Public Inspection

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.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Name of the organization

Employer identification number

THE	UNIVERSITY OF P	· · ·	y							564961		
_			arity Status (All orga						instruction	ons.		
The	organization is not	t a private found	ation because it is: (Fo	or lines 1	through '	11, chec	k only one	e box.)				
1	A church, cor	ention of church	ches, or association of	f churche	s describ	ed in se	ction 170	(b)(1)(A)	(i).			
2	✓ A school desc	cribed in <mark>sectior</mark>	n 170(b)(1)(A)(ii). (Atta	ch Sched	iule E.)							
3	☐ A hospital or	a cooperative ho	ospital service organiz	ation des	cribed in	section	170(b)(1)	(A)(iii).				
4		earch organizati ne, city, and sta	ion operated in conjunte:	nction wit	h a hospi	tal descr	ibed in se	ection 17	'0(b)(1)(A)	(iii). Ente	er the	
5		on operated for b)(1)(A)(iv). (Com	the benefit of a colle	ege or un	iversity o	wned or	operated	by a go	overnmen	tal unit o	lescri	bed in
6 7	An organizati	on that normally	rnment or government receives a substantia)(A)(vi). (Complete Pa	al part of					nıt or fror	n the ge	neral	public
8	☐ A community	trust described	in section 170(b)(1)(A	\)(vi). (Co	mplete Pa	art II.)						
9	An organization receipts from support from	on that normally activities relate gross investme	receives: (1) more that to its exempt function to income and unreafter June 30, 1975. S	an 331/39 tions—su elated bu	% of its solution of its solut	upport fr certain e xable in	exceptions come (le	s, and (2 ss sectio) no more	e than 3	31/3%	of its
10 11	An organizati	on organized a	d operated exclusively nd operated exclusively collicly supported organic describes the type of	ely for th	ne benefi describe	t of, to d in sec	perform tion 509(a	the func a)(1) or s	tions of, ection 50	9(a)(2). S		
	a 🗌 Type i	b □	Type II c	□ Туре	III-Funct	onally ir	ntegrated		d [] Type I	II-Oth	er
	other than for or section 509	undation manago (a)(2).	that the organization ers and other than on	e or more	e publicly	support	ted organ	izations	described	l in secti	on 50	9(a)(1)
f		ation_received a check this box	a written determınatio				a Type			oe III su	oporti	ng . 🔲
g	Since August following pers		the organization acce	pted any	gift or co	ontributio	on from a	iny of the	9			
			indirectly controls, eit ody of the supported								Yes	No
	• •	-	on described in (i) abo	_						11g(i	+	
		-	a person described in							11g(li		
h	• •	•	on about the support				• • •	- •		[0,	<u>'</u>	
	Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(lv) is the d	organization sted in your document?	(v) Did the orga	you notify nization in of your port?	organiza (i) organ	Is the tion in col ized in the .S.?		Amount	of
				Yes	No	Yes	No	Yes	No	Ĺ		
(A)												
(B)												
(C)												
(D)												
(E)	- ".	-										

Total

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

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

Section A. Public Support

Colordon year for fineal year beginning in Section 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.)

	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and	(-/					
	membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)				,		
6	Public support. Subtract line 5 from line 4.	-				-	
	on B. Total Support				_		
	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				·		
11	Total support. Add lines 7 through 10						********
12	Gross receipts from related activities, etc. First five years. If the Form 990 is for the					12	n 501(a)(2)
13	organization, check this box and stop her	re	<u></u>				
	on C. Computation of Public Suppor			4(6)		-	9/
14	Public support percentage for 2011 (line 6 Public support percentage from 2010 Sch					15	<u> </u>
15 16a	331/3% support test - 2011. If the organiz	zation did not	check the box	on line 13, and	line 14 is 33¹	/3% or more, c	heck this
	box and stop here. The organization qual						
ь	331/3% support test—2010. If the organicheck this box and stop here. The organic	zation qualifie	s as a publicly	supported org	anization .		. ▶ 🗆
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "fa organization	ets the "facts-a acts-and-circu	and-circumsta mstances" tes	nces" test, che t. The organiza	eck this box ar ation qualifies	nd stop here. E as a publicly si	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat Explain in Part IV how the organization m supported organization	on meets the eets the	facts-and-ci and-circums	rcumstances" tances" test. Ti	test, check th he organizatio	nis box and st n qualifies as a	op here. a publicly
18	Private foundation. If the organization did instructions	d not check a	box on line 13,	16a, 16b, 17a	, or 17b, chec	k this box and	see

Part III	Support Schedule for		

(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.)

Sect	ion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	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						
3	Gross receipts from activities that are not an				Ì		
	unrelated trade or business under section 513			_	ļ		
4	Tax revenues levied for the				ļ		
	organization's benefit and either paid				ł	1	
_	to or expended on its behalf	-				-	
5	The value of services or facilities	Ī					
	furnished by a governmental unit to the organization without charge		İ			1	
e	Total. Add lines 1 through 5				-		
6 7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3	·					
_	received from other than disqualified						
	persons that exceed the greater of \$5,000	ļ					
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	Total Miles And Andrew	学学学	A STATE OF THE STA		学学 次增加为增生	
	line 6.)	The second	THE STATE OF THE S				
	on B. Total Support			 			
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents,	1					
	royalties and income from similar sources .						
ь	Unrelated business taxable income (less						
•	section 511 taxes) from businesses					1	
	acquired after June 30, 1975					İ	
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether					İ	
	or not the business is regularly carried on						
12	Other income. Do not include gain or	[1	
	loss from the sale of capital assets						
40	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the		's first, secon	d, third, fourth	, or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop he	re <u>.</u> .				· · · · ·	▶ 🔲
	on C. Computation of Public Suppor						
15	Public support percentage for 2011 (line 8	,	•			15	%
16	Public support percentage from 2010 Sch			<u> </u>	<u></u>	16	<u>%</u>
	on D. Computation of Investment Inc			.l 10	(0)	1471	
17	Investment income percentage for 2011 (17	%
18 10-	Investment income percentage from 2010 331/3% support tests—2011. If the organi					18 331a%	and line
19a	17 is not more than 33½%, check this box						
ь	331/3% support tests—2010. If the organiz					_	
D	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did				-		

art IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
		,

SCHEDULE C (Form 990 or 990-EZ)

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.

OMB No 1545-0047
2011
Open to Public

Inspection

Department of the Treasury Internal Revenue Service

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

- 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.
- 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.

		that have NOT filed Form 5768 (election			
If the	organization answered "Ye	s" to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-	EZ, Part V, line 35c (Proxy T	ax), then
		anizations: Complete Part III.			
Name	of organization			Employer ide	ntification number
	JNIVERSITY OF PUGET SO				91-0564961
		ne organization is exempt und			organization.
1		the organization's direct and indire			
2	Political expenditures .				§
3	Volunteer hours				***************************************
Part	I-B Complete if th	e organization is exempt und	ler section 501	(c)(3).	
1	Enter the amount of any	excise tax incurred by the organiz	ation under section	on 4955 ▶ 🤄	B
2	Enter the amount of any	excise tax incurred by organizatio	n managers unde	er section 4955 🕨 🧐	6
3		ed a section 4955 tax, did it file Fo			
4a	Was a correction made?				🗌 Yes 🔲 No
b	If "Yes," describe in Part			<u>.</u>	
Part	I-C Complete if th	e organization is exempt und	er section 501	(c), except section 501	(c)(3).
1	Enter the amount direc	tly expended by the filing organization	zation for section	n 527 exempt function	
					;
2	Enter the amount of the	filing organization's funds contrib	outed to other or	ganizations for section	
	•	ivities			;
3		expenditures. Add lines 1 and 2			
	line 17b				
4	Did the filing organization	n file Form 1120-POL for this year	?		Yes No
5	Enter the names, addres	ses and employer identification nu	mber (EIN) of all s	section 527 political organi	izations to which the filing
	organization made paym	ents. For each organization listed,	enter the amount	paid from the filing organ	ization's funds. Also enter
	the amount of political co	ontributions received that were pro	mptly and directly	y delivered to a separate p	political organization, such
	as a separate segregated	fund or a political action committe	ee (PAC). If addition	onal space is needed, prov	de information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(u) Hamo	(5) / (33/33)	(0, 2	filing organization's	contributions received and
				funds If none, enter -0	promptly and directly delivered to a separate
		<u>}</u>		İ	political organization if
					none, enter -0-
(1)					•
					
(2)					
	•	<u> </u>		<u> </u>	
(3)					
				<u> </u>	
(4)					
				<u> </u>	
(5)					
				ļ	
(6)					
)	

Sched	ule C (Form 990 or 990-EZ) 2011					Page 2
	Complete if the organization section 501(h)).					
A	Check ▶ ☐ if the filing organization be	ongs to an af	filiated group (ar	nd list in Part IV	each affiliated gro	oup member's
	name, address, EIN, exper					
в	Check ► ☐ if the filing organization che			trol" provisions a	ipply.	
	Limits on Lobb			_	(a) Filing	(b) Affiliated
	(The term "expenditures" me				organization's totals	group totals
1a	Total lobbying expenditures to influence	public opinion	(grass roots lobby	ring)	0	
b	Total lobbying expenditures to influence	a legislative bo	ody (direct lobbying	g)	4,113	
C	Total lobbying expenditures (add lines 1a	a and 1b) .			4,113	
d	Other exempt purpose expenditures .				152,255,510	
е	Total exempt purpose expenditures (add	l lines 1c and 1	d)		152,259,623	
f	Lobbying nontaxable amount. Enter columns.				1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not over \$500,000		nount on line 1e.			
	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 of	ver \$1,500,000.	• '	1
	Over \$17,000,000	\$1,000,000.			4 4	- 4
g		% of line 1f)			250,000	
h					0	
i	Subtract line 1f from line 1c. If zero or les				0	
j	If there is an amount other than zero reporting section 4911 tax for this year?	on either line		I the organization		Yes No
	4-Ye (Some organizations that ma columns below. S	de a section 5	Period Under Sec 01(h) election do ctions for lines 2a	not have to comp	plete all of the five age 4.)	•
	Lobbying	Expenditures	During 4-Year Av	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total

	Lobby	ring Expenditures I	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column (e))		% .7			6,000,000
С	Total lobbying expenditures	242	3,416	2,605	4,113	10,376
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
е	Grassroots ceiling amount (150% of line 2d, column (e))		, , ,		-	1,500,000
f	Grassroots lobbying expenditures	o	0	o	0	0

Schedule C (Form 990 or 990-EZ) 2011

Part		Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forn	5768	}
For	ach "Vo	s" response to lines 1a through 1i below, provide in Part IV a detailed description		a)		(b)
		ng activity.	Yes	No	A	mount
1	legislat	the year, did the filing organization attempt to influence foreign, national, state or local ion, including any attempt to influence public opinion on a legislative matter or dum, through the use of:				
а		pers?	<u> </u>	<u> </u>		
b c		aff or management (include compensation in expenses reported on lines 1c through 1i)? advertisements?	_			
ď		s to members, legislators, or the public?				
е	_	tions, or published or broadcast statements?				
f		to other organizations for lobbying purposes?				
g		contact with legislators, their staffs, government officials, or a legislative body?				
h		demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i		ctivities?				
j	Total. A	add lines 1c through 1i				
2a	Did the	activities in line 1 cause the organization to be not described in section 501(c)(3)?	L			
b	If "Yes,	" enter the amount of any tax incurred under section 4912				
c d		" enter the amount of any tax incurred by organization managers under section 4912 . ing 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 501(c)(6).)(5),	or se	ction	
						Yes No
1	Were s	ubstantially all (90% or more) dues received nondeductible by members?			1	
2		organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the	organization agree to carry over 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 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Ol answered "Yes.")(5), (} (b)	or se Part	ction III-A, I	line 3, is
1 2	Section	ssessments and similar amounts from members	of	1		
а	Current	year	•	2a		
b	Carryov	ver from last year	•	2b		
C	Total			2c		
3	Aggreg	ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues.		3		
4	excess	es were sent and the amount on line 2c exceeds the amount on line 3, what portion of does the organization agree to carryover to the reasonable estimate of nondeductible lobby itical expenditure next year?		4		
5	-	amount of lobbying and political expenditures (see instructions)		5		
Pari		Supplemental Information				
Comp	lete this	part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; lete this part for any additional information.	art II	I-A; ar	d Part	II-B, line
Sched	ule C, Pa	rt II-A, Line 1c - In addition to the lobbying amounts reported on line 1c, the university paid \$78,4 les, as well as other departmental membership dues, to organizations that may have performed l				on hahalf
of its	nembers	hip. These organizations are 501(c)(3) organizations which are exempt under section 6033(e) from	n hav	ing to	report	to its
	ership th on this r	e portion of dues that are allocable to political or lobbying activities. As such, the university doe eturn.		nave t	nis info	rmation to

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 ,

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

THE U	NIVERSITY OF PUGET SOUND		91-0564961
Par	Organizations Maintaining Dono	r Advised Funds or Other Similar Fu	inds or Accounts. Complete if the
	organization answered "Yes" to Fo	orm 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and		
	funds are the organization's property, subject	-	
6	Did the organization inform all grantees, dor	lors, and donor advisors in writing that gr	ant funds can be used
	only for charitable purposes and not for the conferring impermissible private benefit?		
Dov		ete if the organization answered "Yes	"to Form 990 Part IV line 7
Par	Purpose(s) of conservation easements held be		to Form 990, Fart IV, line 7.
1	Preservation of land for public use (e.g., r		of an historically important land area
	Protection of natural habitat	· _	of a certified historic structure
	Preservation of open space		or a porting finatorio directaro
2	Complete lines 2a through 2d if the organization	ion held a qualified conservation contribut	tion in the form of a conservation
_	easement on the last day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements .		2a
b	Total acreage restricted by conservation ease	ements	2b
С	Number of conservation easements on a cert		
đ	Number of conservation easements include	ed in (c) acquired after 8/17/06, and no	t on a
	historic structure listed in the National Regist		
3	Number of conservation easements modified	, transferred, released, extinguished, or te	rminated by the organization during the
	tax year ►		
4	Number of states where property subject to o		amostica bandlina of
5	Does the organization have a written poliviolations, and enforcement of the conservations		
_	Staff and volunteer hours devoted to monitor		
6	Starr and volunteer nours devoted to monitor	ing, inspecting, and emorcing conservation	in easements during the year
7	Amount of expenses incurred in monitoring, i	nepecting, and enforcing conservation eas	sements during the year
•	►\$	inspecting, and emorcing conservation cal	someths during the year
8	Does each conservation easement reported	on line 2(d) above satisfy the requirements	of section 170(h)(4)(B)
•			
9	In Part XIV, describe how the organization re	ports conservation easements in its revenu	
_	balance sheet, and include, if applicable, the		
	organization's accounting for conservation ea	asements.	
Part	III Organizations Maintaining Collection	ctions of Art, Historical Treasures, o	or Other Similar Assets.
	Complete if the organization answer	ered "Yes" to Form 990, Part IV, line 8	•
1a	If the organization elected, as permitted und		
	works of art, historical treasures, or other s		
	public service, provide, in Part XIV, the text o		
b	If the organization elected, as permitted un		
	works of art, historical treasures, or other s		education, or research in furtherance of
	public service, provide the following amounts		. •
	(i) Revenues included in Form 990, Part VIII,	iine i	450
9	(ii) Assets included in Form 990, Part X If the organization received or held works of		
2	following amounts required to be reported un		
а	Revenues included in Form 990, Part VIII, line		
b	Assets included in Form 990, Part X		· · · · • • • • • • • • • • • • • • • •

Par	Organizations Maintaining									
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and oth	er reco	ords, chec	k any of t	he follov	wing that are a	significa	nt us	e of its
а	✓ Public exhibition		d	✓ Loan	or exchan	ge prog	rams			
b	✓ Scholarly research		е	✓ Other	Teachin	g materia	al & curricula K	12, tours		
С	✓ Preservation for future generations									
4	Provide a description of the organizati XIV.	on's collections ar	nd expl	ain how t	hey furthe	r the org	ganization's ex	empt pur	pose	in Pari
5	During the year, did the organization	solicit or receive d	lonatior	ns of art,	historical 1	treasure	s, or other sim	ilar		
	assets to be sold to raise funds rather	than to be maintaii	ned as	part of the	e organiza	tion's co	ollection? .	. 🗆	Yes [☑ No
Par	t IV Escrow and Custodial Arra	ngements. Com	plete	if the org	anization	answe	red "Yes" to I	orm 99	0, Pa	rt IV,
	line 9, or reported an amount									
1a					or contribu	itions or	other assets	not		
	included on Form 990, Part X?							. 🗆	Yes [No
b	If "Yes," explain the arrangement in Pa	rt XIV and complet	te the fo	ollowing to	able:					
		•		Ū				Amount		
С	Beginning balance					10	:			
ď	Additions during the year					1d	i İ			
e	Distributions during the year					1e				
f	Ending balance					1f			-	
2a	Did the organization include an amount							<u></u>	Yes [□ No
	If "Yes," explain the arrangement in Pa		(/, III K	, , ,		• • •			, 03 [
Par			tion ar	newered	"Ves" to	Form 9	90 Part IV lir	e 10		
ras	Endownient Funds. Comple	(a) Current year		or year	(c) Two year		(d) Three years ba		ur year	s hack
4	Paramana of wareholders						•	E -100 - 8.5	1. 1 Ace	NO.
1a	Beginning of year balance	251,291,450		7,690,667		505,393	244,480,0	20100 443	140 (700 t	
b	Contributions	12,282,078		5,125,849	7,	418,474	6,736,6	34	サカハ	1
С	Net investment earnings, gains, and							10.2	1	100
	losses	-419,040	4	1,969,501	28,	616,915	-42,356,4	76		
d	Grants or scholarships	5,345,834		6,020,356	5,	580,841	4,945,6	74		
e	Other expenditures for facilities and								3	1y
	programs	5,473,621		5,161,501	5,	853,911		76		3 . 3
f	Administrative expenses	1,867,401		2,312,710	2,	415,363		08		
g	End of year balance	250,467,632	25	1,291,450	217,	690,667	195,505,3	93		
2	Provide the estimated percentage of th	e current year end	balanc	e (line 1g	, column (a	a)) held a	as:			
а	Board designated or quasi-endowment									
b	Permanent endowment ► 64.									
С	Temporarily restricted endowment ▶									
	The percentages in lines 2a, 2b, and 2d		%.							
За	Are there endowment funds not in the			zation tha	t are held	and adi	ministered for t	the		
	organization by:	•	J						Yes	No
	(i) unrelated organizations							3a(i	_	
	<u></u>				, , , ,			3a(ii		1
ь	If "Yes" to 3a(ii), are the related organiz		 nuired c	n Schedi	 B2			3b	4	
4	Describe in Part XIV the intended uses						· · · · ·	. 05	——	
Pari										
rai						(0)	Nancon I I	(40.0)	ale vale	
	Description of property	(a) Cost or othe (investmen			r other basis her)	de	Accumulated preciation	(a) BC	ook valu	
1a	Land		315,000		10,728,624	**			11,04	43,624
b	Buildings		198,952	2	10,332,313		74,118,382		136,4	12,883
c	Leasehold improvements		0		0		0			0
d	Equipment		0		18,844,761		9,117,731		9,72	27,030
е	Other		0		20,905,223		4,352,920		16,5	52,303
Total.	Add lines 1a through 1e. (Column (d) mu	st equal Form 990), Part)				•			35,840
										

Part VII Investments—Other Securities	. See Form 990, Part X,	line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely-held equity interests	0	
(3) Other Endowment hedge funds	39,877,146	End-of-Year Market Value
(A) Endowment private equity	23,121,743	End-of-Year Market Value
(B) Endowment private RE, LPs & REITs	21,025,115	End-of-Year Market Value
(C) Endowment natural resources LPs		End-of-Year Market Value
(D) Endowment trusts with external trustees	2,529,423	End-of-Year Market Value
(E) Investment in subsidiary	7,728,426	End-of-Year Market Value
(F)		
(G)		
(H)		
(1)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	113,542,400	
Part VIII Investments—Program Related		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)	···	
(8)	<u>-</u>	
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	4 V 1 45	
Part IX Other Assets. See Form 990, Pa	IT X, IINE 15.	(b) Book value
	ij Description	(b) BOOK Value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9) (10)		
Total. (Column (b) must equal Form 990, Part X, co	ol. (B) line 15.)	
Part X Other Liabilities. See Form 990,		
1. (a) Description of liability	(b) Book value	4.4
(1) Federal income taxes		The state of the s
(2) Unrealized loss on interest rate swaps	16,052,086	And the state of t
(3) Government advances for student loans	12,827,213	The state of the s
(4) Liabilities under split-interest agreements	2,390,970	
(5) Asset retirement obligation	1,610,719	
(6) Capital lease obligations	58,974	
(7)		
(8)		
(9)		
(10)		
(11)		· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	32,939,962	- J .
2 FIN 48 (ASC 740) Footpote In Part VIV provide		be ergenization's financial etatements that we are to the

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Par	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Staten	nents	S
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	162,420,020
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	152,259,623
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	10,160,397
4	Net unrealized gains (losses) on investments	4	-6,140,670
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV.)	8	-10,182,082
9	Total adjustments (net). Add lines 4 through 8	9	-16,322,752
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-6,162,355
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	r Ref	
1	Total revenue, gains, and other support per audited financial statements	1	124,674,503
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	+	**
а		o	
b	Donated services and use of facilities	0	· .
С	Recoveries of prior year grants	o 📜	:`
đ	Other (Describe in Part XIV.)		,,,
е	Add lines 2a through 2d	2€	-41,277,237
3	Subtract line 2e from line 1	3	165,951,740
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а		o	
b	Other (Describe in Part XIV.)	0	
C	Add lines 4a and 4b	40	-3,531,720
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Part		er R	eturn
1	Total expenses and losses per audited financial statements	1	130,837,857
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1. ,:	;
а	Donated services and use of facilities	<u>o</u>	.
b	Prior year adjustments	<u>o</u> ,	<u>.</u> :
С	Other losses	5	
d	Other (Describe in Part XIV.)	6	
e	Add lines 2a through 2d	2e	19,855,471
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	100	* I
а		<u>o</u>	· 1
b	Other (Describe in Part XIV.)	7	<u>-</u>
C	Add lines 4a and 4b		41,277,237
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	152,259,623
	XIV Supplemental Information .		
Compl	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;	art l'	V, lines 1b and 2b;
	line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also con	plete	this part to provide
•	Iditional information.		
	ule D, Part III, Line 4 - The Slater Museum of Natural History: The Slater Museum of Natural History, which		
univer	sity's campus in Thompson Hall, provides one of the region's significant repositories for bird, mammal, re	:ptile,	amphibian and plant

university's campus in Thompson Hall, provides one of the region's significant repositories for bird, mammal, reptile, amphibian and plant specimens from the Pacific Northwest. The museum serves as resource for students, researchers, artists and educators alike. The museum plays a significant role in the university's biology program and is used by schools throughout the south Puget Sound area. Thousands of K-12 students are exposed to the museum's collections through curriculum kits that go into the schools or museum tours. Exhibits to be installed this summer will further strengthen the museum's role as a resource for community groups, for educational programming, museum-based excursions. The Collins Memorial Library: The unique collections of the Collins Memorial Library cover a broad range of topics, formats and periods. The library's many unique materials include artists' books, manuscript collections, photographs, rare books, and materials that document local and regional history and art. The collections provide educational and research resources for

students, faculty, and staff and support the university's commitment to teaching, learning, civic engagement and diversity.

Part XIV - Supplemental Information (Continued)

organizations in which students, faculty, or staff participate. These organizations are legally separate from the university and are funded from sources independent of the university
Schedule D, Part V, Line 4 - The university's endowment includes donor-restricted endowment and funds designated by the Board of Trustees to function as endowment (quasi-endowment). The university's donor-restricted endowment was created through the generosity of
generations of donors who requested that their gifts be invested for a period of time or in perpetuity to provide resources to support the university's mission. The university's quasi-endowment was created by the Board of Trustees through their designation of unrestricted
bequests and careful stewardship of other unrestricted resources. The purpose of the endowment is to provide ongoing financial support for the university's annual operations. The university recognizes that support for current operations must be consistent with the long-term
growth of the endowment. Over time the university's goal is to grow the endowment through prudent investment and through the addition of new gifts, while providing steadily growing support to university programs across generations.
·
Schedule D, Part X, Line 2 - Schedule D, Part X, Line 2 - The university had no unrecognized tax benefits that would have required an adjustment to its net assets, and no unrecognized tax benefits at June 30, 2012. In general the university is no longer subject to U.S.
federal and state income tax examinations by tax authorities before its fiscal year ended June 30, 2006.
Schedule D, Part XI, Line 8 - Actuarial adjustment and other changes (\$8,477,813), investment gain from subsidiary \$400,180, dividend income received from subsidiary \$(\$2,104,449).
Schedule D, Part XII, Line 2d - Student financial aid expense (\$41,277,237).
Schedule D, Part XII, Line 4b - Net losses and income on endowment investments, net of distributions (\$5,635,376) and dividend received from subsidiary \$2,104,449 and fundraising and gaming expense (\$793).
Schedule D, Part XIII, Line 2d - Actuarial adjustments and other changes \$8,477,813, net losses and income on endowment investments, net of distributions \$5,654,620, gains from subsidiary (\$400,180), and fundraising and gaming expense \$793.
Schedule D, Part XIII, Line 4b - Student financial aid expense \$41,277,237.
•
······································

SCHEDULE E (Form 990 or 990-EZ)

Schools

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

➤ Attach to Form 990 or Form 990-EZ.

2011

Department of the Treasury Internal Revenue Service

Open to Public Inspection

OMB No 1545-0047

Name of the organization THE UNIVERSITY OF PUGET SOUND Employer identification number 91-0564961

F all	<u> </u>			
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			NO
2	bylaws, other governing instrument, or in a resolution of its governing body?	1	✓	
	brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	1	
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	1	
	The university publishes its nondiscriminatory policy towards students annually in a newspaper under guidelines set forth in Rev Proc 75-50, 1975-2 CB 587 Section 4.03. The university also includes this nondiscriminatory statement in publications dealing with student admissions, programs, and scholarships.	3		
4 a	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	1	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	1	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	1	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	√	
5	Does the organization discriminate by race in any way with respect to:			
а	Students' rights or privileges?	5a		
b	Admissions policies?	5b		-
С	Employment of faculty or administrative staff?	5c		/
d	Scholarships or other financial assistance?	5d		1
e	Educational policies?	5e		1
f	Use of facilities?	5f		1
g	Athletic programs?	5g		1
h	Other extracurricular activities?	5h		✓
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	1	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		✓
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II.	7		

Page	2

Part II	6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).
Schedule E	, Part I, Line 6 - The university receives funding from the federal government to support student workstudy and financial aid,
including: f	ederal Pell Grant Program, Teacher Education Assistance for College and Higher Education (TEACH Grants), Federal tal Educational Opportunity Grants, Federal Work-Study Program, and Federal Perkins Loan Program. Federal research grants
Supplemen	een received directly or indirectly from the following federal agencies: National Science Foundation, National Aeronautics and
Space Adm	inistration, National Endowment for the Humanities, Department of Health and Human Services / National Institutes of Health,
Department	of Commerce / National Oceanic and Atmospheric Administration, United States Department of Agriculture/U.S. Forest
	partment of the Interior, Fish and Wildlife Service. Other grants received from federal agencies include the Institute of Museum
and Library	Services.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 2011 Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization

THE UNIVERSITY OF PUGET SOUND 91-0564961 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the ✓ Yes □ No For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (c) Number of (b) Number of offices in the (f) Total expenditures for and investments (a) Region (d) Activities conducted in (e) If activity listed in (d) is region (by type) (e.g., fundraising, program services, investments, a program service, describe specific type of service(s) in region employees, agents, and region independent in region grants to recipients located in the region) contractors in region (1) Sch F, Stmt 1 (2) (3) (4)(5) (6)(7) (8) (9) (10)(11)(12)(13)(14)(15)(16) (17)За Sub-total Total from continuation sheets to Part I c Totals (add lines 3a and 3b) 43,888,227

Page 2

Schedule F (Schedule F (Form 990) 2011
Part II	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000
	Dart II can be dunlicated if additional enace is needed

-	(a) Name of organization	(b) IRS code section and EIN	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash	(g) Amount of non-cash	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV,
		(if applicable)				disbursement	assistance		appraisal, other)
Ξ	,	, ,	Sch F, Stmt 2						
<u>8</u>	,	-							
(3)									
(4)									
(2)		·							
(9)									
3									
(8)					0				
(6)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
46									

by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter Enter total number of other organizations or entities က

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011

Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance (1) Sch F, Stmt 3 Part III Ø ගු ₹ <u>(5</u> 9 ε <u>®</u> <u>6</u> <u>9</u>

Schedule F (Form 990) 2011		
		(18)
-		(17)
		(16)
		(15)

(11)

(12)

(13)

(14)

P	a	n	A	

Part	V	Foreign Forms		
1	the c	the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926).	✓ Yes	□ No
2	may Rece	the organization have an interest in a foreign trust during the tax year? If "Yes," the organization be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and eipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	☑ No
3	the c	the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To ain Foreign Corporations. (see Instructions for Form 5471)	✓ Yes	□ No
4	qual Infor	the organization a direct or indirect shareholder of a passive foreign investment company or a field electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, mation Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing It. (see Instructions for Form 8621)	☐ Yes	☑ No
5	the d	the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain ign Partnerships. (see Instructions for Form 8865)	✓ Yes	□ No
6	"Yes	the organization have any operations in or related to any boycotting countries during the tax year? If ," the organization may be required to file Form 5713, International Boycott Report (see Instructions orm 5713)	✓ Yes	□ No

Part V

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Schedule F, Part I, Line 2 - Student financial aid grants: All students seeking need based financial assistance are required to complete the							
FAFSA. Eligibility, or need, is determined through federal methodology and resulting Expected Family Contribution as set against standard cost of attendance. Need based aid is awarded based on federal and/or state eligibility requirements and institutional aid is awarded							
according to institutional policy. Amounts of aid awarded are in compliance with governing regulations or institutional policy. In compliance							
with Title IV regulations, total and from all sources cannot exceed need or the annual cost of tuition, regardless of the level of need. Aid							
awards are posted to student accounts as an offset to semester charges. Institutional policy prohibits the release or refund of aid to							
students unless total charges for the semester have been paid.							
Schedule F, Part I, Line 3 - The university's financial statements are accounted for on an accrual basis of accounting. As such, the							
expenditures reported by region in column (f) are accounted for on an accrual basis of accounting and do not include expenditures that were accrued in a prior reporting period. Under the university's current accounting procedure, indirect and direct expenses associated with							
certain activities outside the United States are not separately tracked and therefore not included in column (f). Also included in column (f) is the book value of investments (\$41,761,882) that may not represent current year expenditures.							
Schedule F, Part III - The number of recipients reported in column (c) were actual numbers obtained from the university's Student Financial Services. This department keeps a record of cash grants and the recipients.							

Schedule F, Part V, Statement 1

Form: Schedule F

Page: 1

Line Number Part I Line 3

Accounts and Activities Outside the United States

		Offices	Employees	Total
Region Activities Services	Central America and the Canbbean Grantmaking	0	0	33,925
Region Activities Services	East Asia and the Pacific Grantmaking	0	0	743,994
Region Activities Services	Europe (including Iceland and Greenla Grantmaking	nd)0	0	314,010
Region Activities Services	South America Grantmaking	0	0	28,200
Region Activities Services	North America (including Canada and Mexico, but not the United States) Grantmaking	0	0	113,539
Region , Activities Services	Europe (including iceland and Greenla Program Services Study Abroad Program	nd) 1	1	199,366
Region Activities Services	East Asia and the Pacific Program Services Study Abroad Program	0	0 .	350,831
Region Activities Services	South Asia Program Services Study Abroad Program	0	0	241,837
Region Activities Services	East Asia and the Pacific Program Services Study Tours	0	0	40,539
Region Activities Services	East Asia and the Pacific Program Services Faculty travel to conferences and professional meetings	0	0	19,653
Region Activitles Services	Europe (including Iceland and Greenlai Program Services Faculty travel to conferences and professional meetings	nd) 0	0	28,377
Region Activities Services	North America (including Canada and Mexico, but not the United States) Program Services Faculty travel to conferences and	0	0	10,504
Region Activities Services	professional meetings Russia and the newly independent State Program Services Faculty travel to conferences and professional meetings	es 0	0	1,570
Region Activities Services	Central America and the Caribbean Investments	0	0	41,761,882
	Total:	1	1	43,888,227

Schedule F, Part V, Statement 2

Form Schedule F

Page 2

Line Number. Part II Line 1

THE UNIVERSITY OF PUGET SOUND 91-0564961

Grants To Organization Outside US

		Cash Grant	Non-Cash Assistance
Region	North America (including Canada and Mexico, but not the United	113,539	0
	States) •		
Grant	Research		
Cash Disbursement	Check		
Non-Cash Assistance			
Valuation			

Line Number Part III

THE UNIVERSITY OF PUGET SOUND 91-0564961

Grants To Individuals Located Outside US

		Recipients	Cash Grant	Non-Cash Assistance
Assistance	Financial aid grants posted to each	2	. 33,925	
	student's Puget Sound account when			
	students were studying abroad that term			
Region	Central America and the Caribbean			
Cash Disbursement	Aid posted to student's account held at university			
Non-Cash Assistance				
Valuation		···		
Assistance	Financial aid grants posted to each	61	699,291	
	student's Puget Sound account when			
	students were studying abroad that term			
Region	East Asia and the Pacific			
Cash Disbursement	Aid posted to student account held at university			
Non-Cash Assistance	·			
Valuation				
Assistance	Financial aid grants posted to each	28	314,010	
	student's Puget Sound account when			
	students were studying abroad that term			
Region	Europe (including Iceland and Greenland)		
Cash Disbursement	Aid posted to student account held at			
	university			
Non-Cash Assistance				
Valuation				
Assistance	Financial aid grants posted to each	3	28,200	
	student's Puget Sound account when			
	students were studying abroad that term			
Region	South America			
Cash Disbursement	Aid posted to student account held at			
	university			
Non-Cash Assistance				
Valuation		· · · · · · · · · · · · · · · · · ·	·- ·- ·-	
Assistance	Fellowship grant to student when student	1	41,252	
	was studying abroad that term			
Region	East Asia and the Pacific			
Cash Disbursement	Wire transfers and Checks			
Non-Cash Assistance				
Valuation				
Assistance	Travel grants for student exchange	2	3,451	
	program			
Region	East Asia and the Pacific			
Cash Disbursement	Purchase of airline tickets			
Non-Cash Assistance				
Valuation				

SCHEDULE (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

Open to Publi Inspection

% □ (h) Purpose of grant **Employer identification number** 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. ✓ Yes 91-0564961 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance (d) Amount of cash grant Part II can be duplicated if additional space is needed (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance (p) EIN THE UNIVERSITY OF PUGET SOUND 1 (a) Name and address of organization Name of the organization (1) Sch I, Stmt 1 Part Part II 8 9 (10) € © 9 E Ξ 12 3 ල

Schedule I (Form 990) (2011)

Cat. No. 50055P

-

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	י ביי ייי כביי בי ביקרווסמיסם יו מכניונים יו סקמסט ים ווססמסמי	Second Second				
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Studer	1 Student Financial Aid Grants	2615	40.263.571			
2 Studer	2 Student Research Grants	180	212.300			
3 Facult	3 Faculty Research Grants	23	24,726			
4 Other	4 Other Student Grants and Allocations	169	106,160			
ro.						
9						
7						
Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	e this part to pro	vide the information	required in Part I,	line 2, and any other add	itional information.

is awarded according to institutional policy. Amounts of aid awarded are in compliance with governing regulations or institutional policy. In compliance with Title IV regulations, total aid research proposed. Student grant awards are generally paid by check and faculty grant awards are transferred to an institutional account from which funds are paid in reimbursement of resulting Expected Family Contribution as set against standard cost of attendance. Need based aid is awarded based on federal and/or state eligibility requirements and institutional aid Schedule I, Part I, Line 2 - All students seeking need based financial assistance are required to complete the FAFSA. Eligibility, or need, is determined through federal methodology and actual expenditures which must be substantiated. All research grants require a final report and faculty research grants additionally require a financial accounting. Other Student Grants accordance with established written criteria and eligibility guidelines. Proposal applications are reviewed and awards are granted based on the quality, feasibility and merits of the Institutional policy prohibits the release or refund of aid to students unless total charges for the semester have been paid. Research Grants are awarded to students and faculty in from all sources cannot exceed need or the annual cost of tuition, regardless of the level of need. Aid awards are posted to student accounts as an offset to semester charges. and Allocations include awards, prizes and other payment to students in recognition of academic and leadership achievements.

Schedule I, Part IV, Statement 1

THE UNIVERSITY OF PUGET SOUND 91-0564961

Form: Schedule !

Page 1

Line Number Part II

Description of Grants and Other Assistance to Governments and Organizations in the United States

Amount of cash grant Amount of non-cash assistance

9,168

Name and address University of Washington

4333 Brooklyn Ave NE

Box 359472

Seattle, WA 98195

EIN

91-6001537

IRC code section Method of valuation Description of noncash assistance

Purpose of grant

Faculty research sub-award.

SCHEDULE J (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate Instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE UNIVERSITY OF PUGET SOUND

Employer identification number

91-0564961

Part	Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a. Complete Part III to p	rovided any of the following to or for a person listed in Form provide any relevant information regarding these items.			
		✓ Housing allowance or residence for personal use			
	☐ Travel for companions	Payments for business use of personal residence			· ·
	☐ Tax indemnification and gross-up payments	Health or social club dues or initiation fees	1.730	. ÇÇ4.≥	
	☐ Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)	, 'e ¹⁵ 2.	Art 1/5	·-
	_ , , ,		3.g '		
b	If any of the boxes on line 1a are checked, did t	he organization follow a written policy regarding payment			'
	or reimbursement or provision of all of the ex	penses described above? If "No," complete Part III to			
	explain		1b	✓	
2	Did the organization require substantiation prior to	reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Directo	r, regarding the items checked in line 1a?	2	✓	
			١, ١	٠,	
3	Indicate which, if any, of the following the filing org	anization used to establish the compensation of the			,
	organization's CEO/Executive Director. Check all the	hat apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of t				i
	✓ Compensation committee	✓ Written employment contract	'		
	Independent compensation consultant	☑ Compensation survey or study			í
	Form 990 of other organizations	Approval by the board or compensation committee			ļ
		D. 43/11 Continue A. Parada middle consent to the filling		,	
4		Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:	1	4-		
a	Receive a severance payment or change-of-control		4a	,	✓
b	Participate in, or receive payment from, a supplem		4b 4c	✓	
С	Participate in, or receive payment from, an equity-		40		
	if "Yes" to any of lines 4a-c, list the persons and pl	rovide the applicable amounts for each item in Part III.	,		
	Only section 501(c)(3) and 501(c)(4) organization	ne must complete lines 5–9		-	
5	For persons listed in Form 990, Part VII, Section A,	line 1a, did the organization pay or accrue any		1	
9	compensation contingent on the revenues of:	The ra, and the organization pay or abordo any			
а	The organization?		5a		
b	Any related organization?		5b		1
•	If "Yes" to line 5a or 5b, describe in Part III.		 -		<u> </u>
6	For persons listed in Form 990, Part VII, Section A,	line 1a, did the organization pay or accrue any	'		1
•	compensation contingent on the net earnings of:				
а	The organization?		6a		/
b	Any related organization?		6b		<u> </u>
	If "Yes" to line 6a or 6b, describe in Part III.				
7		n A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes,"	describe in Part III	7		✓
8	Were any amounts reported in Form 990, Part VII, I	paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in	Regulations section 53.4958-4(a)(3)? If "Yes," describe		ŀ	
	ın Part III		8		✓
9		low the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?		9		

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

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 applicable column (D) and (E) amounts for that inclinidual

(B) Breakdown of W-2 and/or 1099-MISC compensation	5	(B) Breakdown of W-2	W-2 and/or 1099-MIS	and/or 1099-MISC compensation	(C) Bettrement and	a, applicable column	The Table of columns	
(A) Name		(i) Base	(ii) Bonus & incentive	(iii) Other	other deferred	(U) Nontaxable benefits	(E) lotal of columns (B)(i)–(D)	(F) Compensation reported as deferred in
		compensation	compensation	compensation				prior Form 990
Kristine M Bartanen	ε	206.966	000 5	1 887	41 544	13 173	268 570	0
-	Ξ	0			0	0	0	0
David R Beers	8	231,115	0	1,500	38,053	29,524	300,192	0
2	Ξ	0	; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		0	0	0	0
George H Mills Jr	8	177,625	0	1,500	21,315	6,243	206,683	0
8	3	0)) } } 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0	0	0	0
Sherry B Mondou	ε	243,741	0	1,914	46,546	14,756	306,957	0
4	€	0	0		0	0	0	0
J Michael Segawa	6	138,461	0	1,500	16,646	6,413	163,020	
5	(3)	0	0		0	0	0	0
Ronald R Thomas	8	430,641	0	1,500	165,732	24,974	622,847	0
9	Ξ	0	0		0	0	0	0
Peter H Greenfield	8	49,303	0	174,766	6,181	771,02	250,427	0
7	(ii)	0	0		0	0	0	0
Jacalyn F Royce	(1)	34,409	0	136,446	4,544	9,074	184,473	
8	(3)	0			0	0	0	
John M Hickey	ω	146,434	0	1,296	17,572	2,181	167,483	0
6	(ii)	0			0	0	0	
William E Morse Jr	(1)	138,344	0	1,296	16,601	6,062	162,303	0
10	(ii)	0			0	0	0	
	(i)							
11.	(ii)							
	€							
12	(ii)							
	(1)							
13	€							
	8							
14	3							
	€							
15	3							
	€							
16	<u>E</u>							
							Sci	Schedule J (Form 990) 2011

Pari III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information

by the president for living quarters has been estimated and is included in the amounts reported in Form 990, Part VII, Column (F); and in Form 990, Schedule J, Part II, Column (D). No university; (2) circumstances sometimes call for the president to return to campus without notice, or to remain on campus when a trip was planned, and first or business-class travel best Schedule J, Part I, Line 1a - First-class or charter travel: The president is the only position reported in Form 990, Part VII for which the university paid or reimbursed business or first-class business or first-class on flights of two hours or more. This provision is made for several reasons: (1) business or first-class travel allows for the most flexibility to accommodate a travel provided for the convenience of the university, under IRS rules it is not taxable to the president. As required by IRS Form 990 instructions, the value of the portion of the residence used schedule that must frequently be altered, often at the last minute to accommodate donors' schedules, add critical meetings, or to take advantage of other strategic opportunities for the accommodates these changing conditions; and (3) the Board of Trustees wishes the president to be at his or her best performance representing and seeking funding for the university residence where he regularly holds university events. Because the president accepts this requirement as a condition of employment, the residence is on university premises, and it is travel. The university did not utilize chartered flights for air travel. Extensive travel is required of the position of president and s/he is encouraged by the Board of Trustees to travel during often grueling travel itineraries for meetings frequently critical to the institution's well-being. The president is required to live on campus in the university-owned president's person reported in Form 990, Part VII received a housing allowance.

the actuarial value of the faculty early retirement and career change plan and the postretirement medical plan: Ronald R Thomas (\$135,993), Sherry B Mondou (\$16,996), David R Beers Schedule J, Part I, Line 4 - Line 4b. Persons who participated in a supplemental nonqualified retirement plan, including a reasonable estimate of their potential share of the increase in (\$9,763) and Kristine M Bartanen (\$15,840). Persons who received payment from a supplemental nonqualified retirement plan: Peter H Greenfield (\$174,766) and Jacalyn F Royce

Schedule J, Part II - Nontaxable benefits reported in Column (D) for Peter H Greenfield include dependent tuition benefits from Linfield College, an unrelated organization through the University of Puget Sound's participation in the national Tuition Exchange, Inc. scholarship program.

SCHEDULE K (Form 990) THE UNIVERSITY OF PUGET SOUND

Name of the organization Department of the Treasury Internal Revenue Service

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 Part VI.

▶ See separate instructions.

OMB No. 1545-0047

Open to Public

Inspection

Employer identification nu

91-0564961

▶ Attach to Form 990.

(i) Pooled financing Yes No ĝ (h) On behaff of issuer Yes No ۵ Yes ŝ (g) Defeased Yes ş To advance refund outstanding WHEFA revenue bonds O (f) Description of purpose renovation of campus facilities Finance the construction and Yes 0 0 0 0 0 0 0 2001 ŝ 8 Φ Yes 30,000,000 22,360,966 0 0 2008 (e) Issue price ş 4 Yes (d) Date issued 06/30/2006 06/30/2006 Does the organization maintain adequate books and records to support the 939781WU0 939781WT3 (c) CUSIP# Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? (b) Issuer EIN 91-1306482 91-1306482 Has the final allocation of proceeds been made? Working capital expenditures from proceeds Capital expenditures from proceeds Credit enhancement from proceeds Washington Higher Education Facilities **B** Authority (WHEFA) Capitalized interest from proceeds Washington Higher Education Facilities Amount of bonds legally defeased Year of substantial completion . Gross proceeds in reserve funds Proceeds in refunding escrows. Issuance costs from proceeds **Private Business Use** final allocation of proceeds? Amount of bonds retired Other unspent proceeds Total proceeds of issue Other spent proceeds. (a) Issuer name **Bond Issues Proceeds** Authority (WHEFA) Part II Part III Part S ဖ œ O 12 5 16 က 4 2 F 4 5 O 17

Schedule K (Form 990) 2011

Cat. No. 50193E

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Yes

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Yes

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Yes

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Yes

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

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bond-financed property?.

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

which owned property financed by tax-exempt bonds? .

(Continued)
S Use
Business Use
Private Busines
Part III

		A		8	8)	S		۵
За	3a Are there any management or service contracts that may result in private	Yes	No	Yes	No	Yes	٥N	Yes	Ŷ
	business use of bond-financed property?		`						
q	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?								
ပ	Are there any research agreements that may result in private business use of								
	bond-financed property?	>							
ס	d If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
	outside counsel to review any research agreements relating to the financed property?	`							
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 as a								i
	result of unrelated trade or business activity carried on by your organization,								
	another section 501(c)(3) organization, or a state or local government ▶		%0		%		%		%
9	Total of lines 4 and 5		%0		%		%		%
7	Has the organization adopted management practices and procedures to	,							
	ensure the post-issuance compliance of its tax-exempt bond liabilities?	•							

Part IV Arbitrage

		4		8		၁			
_	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of	Yes	No	Yes	N _O	Yes	%	Yes	S S
	Arbitrage Rebate, been filed with respect to the bond issue?		>		`				
8	Is the bond issue a variable rate issue?	`		>					
(0)	3a Has the organization or the governmental issuer entered into a qualified	-							
	hedge with respect to the bond issue?	>		>					
	b Name of provider	The Bank of NY Mellon The Bank of NY Mellon	Y Mellon	The Bank of	NY Mellon				
	c Term of hedge		30.3		22.5				:
	d Was the hedge superintegrated?		,		<i>></i>				
	e Was the hedge terminated?		`		`				
4	4a Were gross proceeds invested in a guaranteed investment contract (GIC)? .	/			,				
	b Name of provider	Trinity Plus Funding Co	unding Co						
	c Term of GIC		2.1						
	d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .	<i>/</i>							
3	Were any gross proceeds invested beyond an available temporary period? .		`		`				
9	Did the bond issue qualify for an exception to rebate?	,			,				

art V Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations

Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions) Part VI

Schedule K, Part V - Stef and Jody to prepare.

Schedule K (Form 990) 2011					Page 3
	Part VI - Suppl	emental Inform	nation (Continu	ued)	
		•			••••
		••••••			
				•	
			•••		

					<u>.</u>
				•••••••••••••••••••••••••••••••	•••••
-			•••••		••••••
	**				
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SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

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

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

OMB No 1545-0047

Open To Public

Name of the organization

(10)

Employer identification number

THE	UNIVERSITY OF PUGET SOUND							91-0	05649	61		
Pa	Excess Benefit Transactions (Complete if the organization and	section swered	501(c)(3 "Yes" o	3) and section 501(c)(n Form 990, Part IV,	(4) organi line 25a d	zations only or 25b, or Fo). orm 99	0-EZ,	Part	V, line	40b.	
1	(a) Name of disqualified person				(h) Descri	otion of transac	tion				(c) Con	ected?
	(a) Name of disqualified person				(b) Descrip						Yes	No
(1)		•									L	
(2)												
(3)												
(4)												
(5)												
(6)								<u> </u>		_		
2	Enter the amount of tax imposed o		-	_		persons at	_	ne ye				
_	under section 4958						• •	!	S \$			
3	Enter the amount of tax, if any, on lin	e 2, abo	ove, rein	noursed by the organ	lization			'	> \$			
Do	rt II Loans to and/or From Interest	ed Por	rone									
Fa	Tt II Loans to and/or From Interest Complete if the organization and	swered	"Yes" o	n Form 990, Part IV.	line 26, o	r Form 990-	EZ, Pa	rt V. I	ne 38	3a.		
		1		(c) Original	T	alance due	Ĭ	lefault?		proved	(g) W	
	(a) Name of interested person and purpose		to or from anization?	principal amount	(0)	alarice due	(0) 111 0	ielault?	by bo	oard or	agreer	
	,								comm	nittee?		
		То	From				Yes	No	Yes	No	Yes	No
(1)												
(2)					L					L		
(3)												
(4)		<u></u>			<u> </u>							
(5)			<u> </u>									
(6)			ļ		ļ		<u> </u>					
(7)		Ļ	ļļ		ļ		 					
(8)		Ļ	<u> </u>		ļ		 					
(9)		<u> </u>	<u> </u>		<u> </u>		ļ					
(10)		1			1		 	l		<u> </u>		
ota					·		<u> </u>		<u> </u>	1.	` `.	»`
Par	t III Grants or Assistance Benefiting Complete if the organization ans				line 27.							
	(a) Name of interested person	(b) Re	elationship	between interested person organization	n and the	(c)	Amount	and typ	oe of a	ssistan	се	
(1)	Student financial assistance	Studer	nt financi	ial assistance		13,000, Mer	it scho	larship				
(2)		Ī										
(3)		-										
(4)		L										
(5)												
(6)												
(7)												
(8)	·	<u> </u>						,				
(9)		1				ł						

	(Form 990 or 990-EZ) 2011					Page
Part IV	Business Transactions Involve Complete if the organization are	ring Interested Persons. Iswered "Yes" on Form 990), Part IV, line 28a, 2	28b, or 28c.		
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organi reve	
			. .		Yes	No
	Schedule L, Part V, Statement 1	<u> </u>				<u> </u>
(2)		-				├
(3) (4)			- · · · - · -			├
(5)						┢╾
(6)			-		1	-
(7)						一
(8)						
(9)						
(10)						<u> </u>
Part V	Supplemental Information Complete this part to provide a	dditional information for ros	noncos to question	e on Schodulo I. (soo instructio	ne)	
	Complete this part to provide a	dulional information for res	sponses to question	is on schedule E (see instructio	115).	

	·					
				•		
		•				

Schedule L, Part V, Statement 1

Form Schedule L

Page[.] 2

Line Number Part IV

THE UNIVERSITY OF PUGET SOUND 91-0564961

Description of Business Transactions Involving Interested Persons

		Amount of transaction
Name	Nancy Beers	36,222
Relationship with organization	Family member of nontrustee officer employed by university as	
	Programs and Records Specialist	
Description of transaction	Compensation	
Sharing Of Revenues	No	
Name	Mary Thomas	28,330
Relationship with organization	Family member of officer employed by the university as Special	
	Associate to the Chair of the Board	
Description of transaction	Compensation	
Sharing Of Revenues	No	

SCHEDULE M (Form 990)

Noncash Contributions

2011

Department of the Treasury Internal Revenue Service

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

➤ Attach to Form 990.

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OMB No 1545-0047

Name of the organization
THE UNIVERSITY OF PUGET SOUND

Employer identification number

91-0564961

Pari	Types of Property				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art-Works of art	✓	· 1		Estimated FMV
2	Art—Historical treasures				25tmatod 1 m
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household	 			
3	goods	,		4.400	Fair-and FRAV
_		✓	i	1,486	Estimated FMV
6	Cars and other vehicles				<u> </u>
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded	→	80	1,690,502	Market Value
10	Securities—Closely held stock .				
11	Securities—Partnership, LLC,				
	or trust interests			·	
12	Securities-Miscellaneous				
13	Qualified conservation				
	contribution—Historic		ľ		
	structures				
14	Qualified conservation				
	contribution—Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts	1			
			-		
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► (Equip & supplies	✓	9		Estimated FMV
26	Other ► (Gift Certificates	✓	26		Value of Certificates
27	Other ► (Event Tickets		10	984	Value of Tickets
_28	Other ► (<u> </u>
29	Number of Forms 8283 received				
	which the organization completed	Form 8283	, Part IV, Donee Acknowled	igement	29 0
					Yes No
30a	During the year, did the organizat	ion receive	by contribution any prope	rty reported in Part I, lines	; 1-28 that
	it must hold for at least three year				
	used for exempt purposes for the	entire holdi	ng period?		· · · 30a ✓
b	If "Yes," describe the arrangement	in Part II.			
31	Does the organization have a		tance policy that requires	s the review of any nor	n-standard
	contributions?	-	· ·		31 🗸
32a	Does the organization hire or use	third parti	es or related organizations	s to solicit, process, or se	
	~_	-			
h	If "Yes," describe in Part II.	· · ·			
33	If the organization did not report an	amount in	column (c) for a type of pro-	nerty for which column (a) is	s checked
~	describe in Part II.	amount in	colorini (c) for a type of proj	porty for winor column (a) h	2 33333

Part	and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
	M, Part I - Column B - The number of contributions represents a combination of the number of items received and the number of one received. For publicly traded securities, the number represents each gift of stock and not the number of shares received.
	M, Part I, Line 32b - The university utilizes third parties, such as brokers, auctioneers, or dealers, to assist in cost-effective of securities and real and tangible property, as appropriate, and to maximize the net gift received. The university has no related
	ons that perform this function.
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011

Open to Public Inspection

91-0564961

Department of the Treasury Internal Revenue Service Name of the organization

THE UNIVERSITY OF PUGET SOUND

Employer identification number

Form 990, Part VI, Section A, Line 2 - 1) Michael J Corliss, Board member, and Carl G Behnke, Board Member, business relationships 2) Michael J Corliss, Board member, and George E Matelich, Board Member, business relationships 3) Michael J Corliss, Board member, and Matthew M Kelleher, Board Member, business relationships 4) Carl G Behnke, Board member, and George E Matelich, Board Member, business relationships.

Form 990, Part VI, Section B, Line 11b - The preparation and review process for The University of Puget Sound's Form 990 and required schedules is designed to produce a complete and accurate return filed on time with the IRS. The Form 990 and required schedules are prepared by qualified staff from audited financial statement data or from data provided by university personnel responsible for preparing or maintaining such information. The form and required schedules are subjected to three levels of review before they are filed with the IRS.

Two non-trustee financial officers (the controller, who is a CPA and the chief financial officer) review the form and required schedules against supporting source documentation. The Form 990 and required schedules, along with interpretive commentary are provided to each voting member of the Board of Trustees (university's governing body). Any changes identified during review are made and confirmed by a non-trustee financial officer before the Form 990 and required schedules are filed with the IRS. The filed Form 990 and required schedules are reviewed annually by the Audit Committee of the Board of Trustees. Additionally, the Compensation Committee of the Board of Trustees conducts an annual review of compensation-related disclosures in the Form 990 and required schedules.

Form 990, Part VI, Section B, Line 12c - Annually, non-trustee officers and the Board of Trustees meet compliance requirements with a Conflict of Interest questionnaire and the office of the Secretary of the Board of Trustees monitors and manages responses.

Form 990, Part VI, Section B, Line 15 - The university follows the rebuttable presumption of reasonableness procedures identified in Treasury Regulation section 53.4958-6, which require the following three conditions to be met: 1. All elements of compensation (compensation arrangements) are approved in advance by an authorized body which is the governing body, a committee of the governing body or other parties authorized by the governing body of the organization who do not have a conflict of interest with respect to the compensation arrangements. 2. Prior to making the determination, the authorized body obtains and relies upon appropriate data as to comparability. 3. The authorized body adequately documents the basis for its determination regarding compensation arrangements concurrently with making the decision. The procedures were used in determining the fiscal year 2011-2012 compensation of the president (CEO), other officers or key employees. This process is regularly undertaken for each such person anytime his/her compensation changes.

Form 990, Part VI, Section C, Line 19 - The governing documents and conflict of interest policy will be available upon request, subject to approval by the Chair of the Board of Trustees. The financial statements of the university are available on the website and a paper format is available upon request.

Form 990, Part VII, Section A, Line 1a - Column (B) Average hours per week: 40 hours reflect a full-time position; typically actual hours significantly exceed 40. Column (D) Reportable compensation from the organization: Compensation reported for Peter H Greenfield includes his teaching contract and early retirement benefits. Compensation reported for Jacalyn F Royce includes her teaching contract and early retirement benefits. Compensation reported for Mary Turnbull includes her teaching contract and transition compensation.

Column (F) Estimated amount of other compensation from the organization: Benefits reported for Kristine M Bartanen include a reasonable estimate of the potential share of the increase in the actuarial value of the faculty early retirement and career change plan and the postretirement medical plan. Benefits reported for David R Beers include dependent tuition benefits. Benefits reported for Peter H Greenfield include dependent tuition benefits from Linfield College, an unrelated organization through the University of Puget Sound's participation in the national Tuition Exchange, Inc. scholarship program.

Form 990, Part X, Line 3 - The amount shown on Line 3, Pledges and grants receivable, net, Column A, Beginning of the year, of \$9,633,681, was shown on Line 4, Accounts receivable, net, in the 2010 Form 990, Part X. This amount should have been reported on Line

Supplemental Information (Continued)

3 instead, so we are correctly reporting this amount on Line 3, Column A. The incorrect placement of this amount on the 2010 Form 990 did not affect any of the supporting schedules, total assets, or any other information in the return.
Form 990, Part X, Line 4 - The amount shown on Line 4, Accounts receivables, net, Column A, Beginning of the year, of \$2,046,133, was shown on Line 3, Pledges and grants receivable, net, in the 2010 Form 990, Part X. This amount should have been reported on Line 4
instead, so we are correctly reporting this amount on Line 4, Column A. The incorrect placement of this amount on the 2010 Form 990 did not affect any of the supporting schedules, total assets, or any other information in the return.
Form 990, Part XI, Line 5 - Actuarial adjustment and other changes (\$8,477,813) and unrealized losses (\$6,141,670)

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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OMB No. 1545-0047

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

Related Organizations and Unrelated Partnerships

▼ See separate instructions. ▶ Attach to Form 990.

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Ø	•

Open to Public Inspection

Employer identification number

(f)
Direct controlling
entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) 91-0564961 Ş 380,452 (e) End-of-year assets o Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Total income (c)
Legal domicile (state or foreign country) Š (b) Pnmary activity Accept, manage and liquidate real estate (a)Name, address, and EIN of disregarded entity 600 University Street Suite 3600, Seattle, WA 98101 THE UNIVERSITY OF PUGET SOUND (1) Rainier Heights Holdings LLC Part Part II 9 9 ଷ €

9

(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 status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	2(b)(13)
						Yes	ž
(1) Northwest Academic Computing Consortium Inc (84-1172799) 3203 SE Woodstock Blvd STE 326, Portland, OR 97202-8199	Develop and use advanced technology	OR	501(c)3	11e Type 1	N/A		>
(2)							
(6)							
(4)							
(5)							
(6)							
(7)							

Schedule R (Form 990) 2011

Cat. No. 50135Y

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

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.

Frimary activity	Legal domicile	Predominant	Are all partners	artners	Share of	Share of	Disproportionate	tionate Coc	Code V-UBI	General or		Percentage
			section 501(c)(3) organizations?	ton (3) ations?	total income	end-of-year assets	allocat	ons? amou of Sc (Fc	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		ownership
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	Form 990) 2011 Page
Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
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Schedule R, Part VII, Statement 1

Form Schedule R

Page 2

Line Number Part IV

THE UNIVERSITY OF PUGET SOUND 91-0564961

Description of Related Organizations Taxable as a Corporation or Trust

-		Share of total income	Share of end-of- year assets	Percentage ownership
Name and EIN	CVI GVF Holdings 13 Ltd	538,550	7,475,708	100%
Address	PO Box 309GT Ugland House S Church St			
	Georgetown, KY1-1104, Cayman Islands			
Primary activity	Hold endowment investments			
State or foreign country	Cayman Islands			
Direct controlling entity	N/A			
Type of entity	C			
Name and EIN	Chantable Remainder Trusts (19)			
Address	1500 N Warner St CMB 1075			
	Tacoma, WA 98416			
Primary activity	Beneficial Interest			
State or foreign country	WA			
Direct controlling entity	N/A			
Type of entity	Τ			
Name and EIN	Chantable Lead Annuity Trusts (2)			
Address	1500 N Warner St CMB 1075			
	Tacoma, WA 98416			
Primary activity	Beneficial Interest			
State or foreign country	WA			
Direct controlling entity	N/A			
Type of entity	Т			



Return to: Missouri Attorney General's Office Attention: Consumer Protection PO Box 899 Jefferson City, MO 65102

MISSOURI ATTORNEY GENERAL CHRIS KOSTER

573-751-3321 ago.mo.gov

CHARITA	BLE ORGANIZATION INFOR	MATION			
LEGAL NAM	The University of Puget S	ound			
CONTACT P	PERSON Jody Putman		TITLE	or of Financial Reporting	and Tax
	1500 N. Warner St. #1075				
MAILING ADDRESS	ADDRESS				
ADDITESS	Tacoma			WA	98416-1075
	CITY			STATE	ZIP
PHONE (2	253) 879 — 6110	E-MAIL investments@pu	igetsound.edu		
ORGANIZAT	TION'S WEB SITE ADDRESS	www.pugetsound.edu			
Please do no provide org	TION DESCRIPTION (25 WOR ot include the name of the org ganization descriptions for eac ted institution of higher learning	h member organization.	tion. Federations must		ıdy leadıng to
the grantin	g of recognized degrees.				
					
FINANCI	AL INFORMATION				
Please prov (Federation	vide information from your mons ns must provide an administrat	ist recent IRS Form 990. Live cost percentage for each n	nember organization.)		
Administrati	RATIVE COST PERCENTAGE ive cost is defined as the manager d on IRS Form 990. It includes pa re used for program services	(based on total expenses for ti ment, general and fundraising exp syments to affiliates, except to th	penses of the applicant	10.5%	
Financial in	oformation is for the organizati	on's fiscal year beginning	07-01-11 and ending (MM-DD-YY)	06-30-12 (MM-DD-YY)	
TOTAL REVI	ENUE \$ 162,420,020	TOTAL EXPENSES \$	152,259,623	TOTAL PROGRAM SERVICE EXPENSES	\$ 136,325,324

This certification form must be completed by an authorized agent of the applicant organization. Eligibility criteria not checked will be presumed uncertifiable.

Atta Conf NAME C	chment 1 irmation OF APPLICANT dersigned here se statement in The United	- State of Washington, Secretary of State Registration for year ended May 31, 2012. The University of Puget Sound CORGANIZATION The University of Puget Sound Eby certifies that the information on this form is true and accurate, and further, acknownade is punishable by fine and/or imprisonment under Section 575.060 of the Revise niversity of Puget Sound by: DATE	owledges that
Atta Conf NAME C	chment 1 irmation OF APPLICANT dersigned here se statement in.	- State of Washington, Secretary of State Registration for year ended May 31, 2012. The University of Puget Sound ORGANIZATION The University of Puget Sound eby certifies that the information on this form is true and accurate, and further, acknown and is punishable by fine and/or imprisonment under Section 575.060 of the Revise	owledges that
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certif	ied copy of th	g with the charity's Form 990 or financial statements (if a Form 990 is not filed he certificate of good standing or most recent annual report the charity filed with the arity's state — should be mailed to the address found at the top of this form.	
6		ary of State's Office or comparable agency in the organization's state.	
	/ I hereb	by certify that the organization is duly registered with the Missouri Attorney General's O	ffice and the
6	7	by certify that an annual report of the organization's activities is made available to the $\mathfrak g$	general public
4	/ I hereb Missou	by certify that the services provided by the applicant organization are accessible to residuri.	dents of
3Y		by certify that the organization's administrative cost percentage indicated previously in the percentage for the latest reporting year.	nis application
		by certify the information provided in the organization description is accurate, and I authormation on the Attorney General's Web site.	norize use of
2		canning of Section 501(C)(S) of the 0.3. Internal Revenue Code and any relevant state in	
1	the me	by certify that the applicant organization listed below is a non-profit, tax-exempt organiza eaning of Section 501(c)(3) of the U.S. Internal Revenue Code and any relevant state la	

Charities Program • 801 Capitol Way S • PO Box 40234 • Olympia, WA 98504-0234
Phone: 360-725-0378 • Fax: 360-664-4250 • E-mail: charities@sos wa.gov
Web Address: www.sos.wa.gov/charities

May 25, 2012

University Of Puget Sound, The 1500 North Warner, #1075 TACOMA, WA 98416

Registration Number: 5499

Dear University Of Puget Sound, The,

The registration documents submitted on behalf of University Of Puget Sound, The under Washington's Charitable Solicitations Act, RCW 19.09, have been received and filed.

Registration is required annually. The organization's renewal documents will be due on or before May 31, 2013. A reminder postcard will be sent to the mailing address on file for the organization approximately 60 days prior to the due date. Failure to receive the postcard shall not excuse the organization from renewing on time. If needed, the organization can download a *Charitable Organization Registration / Renewal* form from the Charities Program website at any time.

Any changes to the organization's registration information (e.g. name, address, telephone number, etc.) must be reported to the Charities Program in writing within 30 days; an *Amendment* form is provided for this purpose on the Charities Program website.

Charitable organizations and any commercial fundraisers soliciting on their behalf are required to disclose certain information at the point of solicitation; a summary of these disclosures is available on the Charities Program website.

If University Of Puget Sound, The uses a commercial fundraiser to solicit or receive funds in Washington State, a Fundraising Service Contract Registration Form, a copy of the contract agreement and a \$20 filing fee must be submitted to the Charities Program before fundraising activities begin. This form is available on the Charities Program website.

All of the forms mentioned above are available at http://www.sos.wa.gov/charities/charities forms.aspx

Please contact our office at charities@sos.wa.gov or (360) 725-0378 if you have any questions.

Sincerely,

Chárities Program

Office of the Secretary of State

Charity Confirmation Letter/Rev 8/2011

This confirmation letter is the organization's proof of current registration. Please retain a copy for your records. A replacement confirmation letter can be purchased online at http://www.sos.wa.gov/charities/letter.aspx or obtained directly from the Charities Program for a \$5 fee.