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## **Return of Organization Exempt From Income Tax**

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

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

Open to Public Inspection

OMB No 1545-0047

	<u> </u>	or the	lpha 2012 calendar year, or tax year beginning $$ JUN $$ $$ JUN $$ $$ $$ $$ $$ 2 $$ $$ $$ and $$ $$	ending M	AY 31, 201	13			
	Вс	heck if	C Name of organization		D Employer ider	ntification number			
		Addre	MARS HILL UNIVERSITY						
	X	Name chang			56-	-0554207			
		]Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone nun	nber			
		Termii ated	F.O. BOX 570		828	3-689-1111			
		Ameno return	City, town, or post office, state, and ZIP code		G Gross receipts \$	51,639,125.			
	L	Application pendir	MARS HILL, NC 20734		H(a) is this a group return				
			F Name and address of principal officer, DAN LUNSFORD		for affiliates?				
			SAME AS C ABOVE empt status:	r 527	H(b) Are all affiliates				
			empt status: X 501(c)(3) 501(c) ( ) ( (insert no.) 4947(a)(1) o te: ► WWW • MHU • EDU	1 327	H(c) Group exemp	h a list. (see instructions)			
			organization: X Corporation Trust Association Other ▶	I Year		2 M State of legal domicile: NC			
		rt'l'	Summary	12.00	01701111211011; = 0 2	- TW Olake or logar commence			
		1	Briefly describe the organization's mission or most significant activities: THE C	RGANI	ZATION IS	A PRIVATE			
	Governance		LIBERAL ARTS COLLEGE OFFERING PROGRAMS LEA						
	r	2	Check this box   if the organization discontinued its operations or dispose	ed of more	than 25% of its net	1			
₩.	Š	3	Number of voting members of the governing body (Part VI, line 1a)			3 36			
2014	∞ ব		Number of independent voting members of the governing body (Part VI, line 1b)		-	4 36			
4	ies		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		_ }	5 1271 6 36			
-	ctivities		Total number of volunteers (estimate if necessary)			4 504			
	₹	l	Total unrelated business revenue from Part VIII, column (C), line 12  Net unrelated business taxable income from Form 990-T, line 34	3000	_ 1 -	7a 1,504. 7b 0.			
MAY	$\dashv$		1		121	Current Year			
		8	Contributions and grants (Part VIII, line 1h)  Program service revenue (Part VIII, line 2g)  Investment income (Part VIII, column (A), lines 3, 4, and 7d)	( 3 A AA	5,433,662				
<del></del>	E E		Program service revenue (Part VIII, line 2g)		33,592,155				
Ż	Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1773	82, <u>8</u> 81,912	2,114,932.			
SCANNED	۳	11	Investment income (Part VIII, column (A), lines 3, 4, and 7d)  Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,854,611				
Ø	_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		43,762,340				
			Grants and similar amounts paid (Part IX, column (A), lines 1·3)		13,918,262				
			Benefits paid to or for members (Part IX, column (A), line 4)	-	12,057,723	0. 3. 12,874,568.			
	ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  Professional fundraising fees (Part IX, column (A), line 11e)	-		0.			
	Expenses		Total fundraising expenses (Part IX, column (D), line 25)  1,119,15	3.		<del></del>			
	찘		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		14,681,005				
			Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		40,656,990				
			Revenue less expenses. Subtract line 18 from line 12		3,105,350	2,137,453.			
	Assets or Balances				ginning of Current Ye				
	ssets	20	Total assets (Part X, line 16)	1	04,275,968				
	智		Total liabilities (Part X, line 26)		36,494,628				
	23 P3		Net assets or fund balances. Subtract line 21 from line 20		67,781,340	74,510,812.			
	******		Ities of perjury, I declare that I have examined this return, including accompanying schedules	and stateme	inter and to the best of	f my knowledge and helief it is			
			it, and complete. Declaration of preparer (other than officer) is based on all information of whi			iny knowledge and belief, it is			
	,		-Valik I Ille	от рубрато	4-1	3-14			
	Sigr	1	Signature of other Communication (Communication)		Date				
	Here	е	NEIL TILLEY, VP-FINANCE						
			Type or print name and title						
			Print/Type preparer's name  Preparer's signature	L .	Date Check	<b>└</b>			
	Paid		JANICE A. RATICA			mployed P00358837			
	Prep Use		Firm's name CHERRY BEKAERT LLT  Firm's address 1111 METROPOLETAN AVE. STE. 1000		Firm's EIN	<u> 56-0574444</u>			
	USE	Uniy	CHARLOTTE, NC 28204		Phone no.	704-377-1678			
	—— Mav	the If	RS discuss this return with the preparer shown above? (see instructions)		T CHOICE HO.	X Yes No			
		11 12-1		ns.		Form 990 (2012)			

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

••			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	}		
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part III	5		X_
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		X
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		X
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	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.		<b>*</b> 2	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII .	12a	X	
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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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		_X_
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		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form 990-(2012) MARS HILL UNIVERSITY

Part V Checklist of Required Schedules (continued)

12 100	Continues			
••			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 17 If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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	Х	
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c	1	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	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			
	·	25b		х
26	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	200		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	20		
27				
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member	07		х
00	of any of these persons? If "Yes," complete Schedule L, Part III	27	### .	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1		
	instructions for applicable filing thresholds, conditions, and exceptions):			X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00.		Х
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	^	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
	contributions? If "Yes," complete Schedule M	30_		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			37
	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			37
	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 301.7701-37 If "Yes," complete Schedule R, Part I	33		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	<del></del>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		l	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	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		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (	(2012)

Form 990 (2012) MARS HILL UNIVERSITY 56-0554207 <u>Page</u> **5** Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response to any question in this Part V Yes No 81 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 1271 filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b 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? За X 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 X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a b If "Yes," enter the name of the foreign country: ▶ CAYMAN ISLANDS See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5с 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit X any contributions that were not tax deductible as chantable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). a 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 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c d If "Yes," indicate the number of Forms 8282 filed during the year 7d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 76 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 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 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a 9b b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter × × × × a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Car. 14 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a 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 Section 501(c)(29) qualified nonprofit health insurance issuers. a 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. b Enter the amount of reserves the organization is required to maintain by the states in which the

14a

X

13h

organization is licensed to issue qualified health plans

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

c Enter the amount of reserves on hand

MARS HILL UNIVERSITY 56-0554207

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 th	•	•	'No" re	spons	e				
••	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See ın	structions							
	Check if Schedule O contains a response to any question in this Part VI		· _ · · · · · · · · · · · · · · · · · ·			X				
Sec	tion A. Governing Body and Management									
					Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	36	77.	47.	53				
	If there are material differences in voting rights among members of the governing body, or if the governing			,						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			،بيڌ	~, ~					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	36	7 -	~					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	ny other							
	officer, director, trustee, or key employee?			2		X				
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision							
	of officers, directors, or trustees, or key employees to a management company or other person?		•	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was	filed?	4	Х					
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		X				
6	Did the organization have members or stockholders?			6		X				
7a										
,	more members of the governing body?	ро		7a		Х				
<b>h</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ackhal	dere or	, a		<del></del> -				
U	persons other than the governing body?	OCKI IOI	uers, or	7b		х				
_		r by the	following	10 2/27		N. SA				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	u by trie	ionowing.	*********	X					
a	The governing body?			8a	X					
р	Each committee with authority to act on behalf of the governing body?	-11		8b	Λ					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	cned a	tne			v				
C	organization's mailing address? If "Yes." provide the names and addresses in Schedule O			9		<u> </u>				
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)							
					Yes	No X				
	Did the organization have local chapters, branches, or affiliates?			10a						
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	37					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	y before	e filing the form?	11a	Х	-1237				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			<u>-</u>		·X:				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? $y = y$	es," de	escribe		.,					
	ın Schedule O how this was done		•	12c	X					
13	Did the organization have a written whistleblower policy?			13	X					
14	Did the organization have a written document retention and destruction policy?		•	14	X	_				
15	Did the process for determining compensation of the following persons include a review and approva	l by inc	lependent		-	-3/2.				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					لــــــا				
	The organization's CEO, Executive Director, or top management official			15a	X	<u> </u>				
b	Other officers or key employees of the organization			15b	X					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					- ;				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	nent w	th a							
	taxable entity during the year?			16a	-	X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its p	articipation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ızatıon	's							
	exempt status with respect to such arrangements?			16b						
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ▶ NC									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Section	on 501(c)(3)s only) av	/aılable	;					
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain	ın Sch	nedule O)							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	nflict o	f interest policy, and	financ	al					
	statements available to the public during the tax year.									
20	State the name, physical address, and telephone number of the person who possesses the books an	d reco	rds of the organization	on. 🕨						
	R. NEIL TILLEY, CPA - 828-689-1100									
	100 ATHLETIC STREET, MARS HILL, NC 28754									

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- 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 organization n	or any related	orga	nıza	tion	con	npen	sate	ed any current officer, d	rector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do		Pos heck		l than d	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss per	rson i	s both	an	compensation	compensation	amount of
	week	$\vdash$	ceran	oao	recto	r/ous	(ee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	p io	<u>8</u>			age g		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ruster	trus		<u> </u>	nagu L		(***271099****1600)		and related
	below	dualt	tiona	_	튙	st co	<u>.</u>			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			o.g
(1) JUSTUS M. AMMONS	1.00							-	-	
MEMBER		X					L	0.	0.	0.
(2) JOHN S. AYERS	1.00	]								
MEMBER		Х						0.	0.	0.
(3) PAULINE R. BETHEA	1.00									
MEMBER		X						0.	0.	0.
(4) BRUCE W. BOYLES, JR.	1.00									
MEMBER		X				L		0.	0.	0.
(5) RONALD O. BROWN	1.00	]								
MEMBER		X						0.	0.	0.
(6) MAX E. BURGIN	1.00	1					İ			
MEMBER		X						0.	0.	0.
(7) MARK CABANISS	1.00									
MEMBER		X					L	0.	0.	0.
(8) M. KYLE CARVER	1.00	]		İ						
MEMBER		X						0.	0.	0.
(9) JERRY H. CATES	1.00	]								
MEMBER		X						0.	0.	0.
(10) DANIEL G. CHRISTIAN	1.00	]								
MEMBER		Х						0.	0.	0.
(11) TROY L. DAY	1.00									-
MEMBER		X						0.	0.	0.
(12) SALLY P. DUYCK	1.00									
MEMBER		X						0.	0.	0.
(13) CAROLYN H. FERGUSON	1.00									
MEMBER		X						0.	0.	0.
(14) JEAN S. FREEMAN	1.00									
MEMBER		X				ļ		0.	0.	0.
(15) EUGENE HOLDWAY	1.00									
MEMBER		<u>  x</u>	L				L	0.	0.	0.
(16) HAROLD H. HUGHES	1.00									
MEMBER		X			L			0.	0.	0.
(17) ROGER H. JACKSON	1.00									
MEMBER		X	L					0.	0.	0.
232007 12-10-12										Form 990 (2012)

Name and title	Part VII Section A. Officers, Directors (A)	(B)			(C	<b>&gt;</b> )			(D)	(E)	(F)
Company   Comp		hours per	box,	not cl	Posi neck r ss per	tion nore t son is	than c s both	an	Reportable	Reportable compensation	Estimated amount of
MEMBER		(list any hours for related organizations below line)	$\vdash$					Í	the organization	organizations	compensation from the organization and related
1.00   MEMBER	· · ·	1.00	:								
MEMBER       X       0.       0.       0         (20) BRENT B. KINCAID       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (21) RONALD F. MARTIN       1.00       X       0.       0.       0.         MEMBER       X       0.       0.       0.       0         (22) ROBERT L. MERRILL       1.00       X       0.       0.       0         MEMBER       X       0.       0.       0         (23) F. TIMOTHY MOORE       1.00       X       0.       0.       0         MEMBER       X       0.       0.       0       0         (24) BRENDA G. NASH       1.00       X       0.       0.       0         MEMBER       X       0.       0.       0       0         (25) W. HAROLD NEWMAN       1.00       X       0.       0.       0         MEMBER       X       0.       0.       0       0         (26) J. KENNETH SANFORD       1.00       0.       0.       0.       0         MEMBER       X       0.       0.       0.       0       0         1b Sub-total			X						0.	0.	U
MEMBER       X       0.       0.       0         (21) RONALD F. MARTIN       1.00       X       0.       0.       0         MEMBER       X       0.       0.       0       0         (22) ROBERT L. MERRILL       1.00       X       0.       0.       0         MEMBER       X       0.       0.       0       0         (23) F. TIMOTHY MOORE       1.00       X       0.       0.       0         MEMBER       X       0.       0.       0       0         (24) BRENDA G. NASH       1.00       0.       0.       0       0         MEMBER       X       0.       0.       0       0       0         (25) W. HAROLD NEWMAN       1.00       0.       0.       0<	· •	1.00	х						0.	0.	0
Carronald F. Martin   1.00	(20) BRENT B. KINCAID	1.00									
MEMBER         X         0.         0.         0           (22) ROBERT L. MERRILL         1.00         0.         0.         0           MEMBER         X         0.         0.         0           (23) F. TIMOTHY MOORE         1.00         X         0.         0.         0           MEMBER         X         0.         0.         0         0           (24) BRENDA G. NASH         1.00         X         0.         0.         0         0           (25) W. HAROLD NEWMAN         1.00         X         0.         0.         0         0           (26) J. KENNETH SANFORD         1.00         X         0.         0.         0         0           MEMBER         X         0.         0.         0	MEMBER		X						0.	0.	0
(22) ROBERT L. MERRILL       1.00       X       0.0.0       0.0       0         MEMBER       X       0.0.0       0.0       0       0         (24) BRENDA G. NASH       1.00       0.0.0       0.0       0       0       0         (25) W. HAROLD NEWMAN       1.00       0.0.0       0	(21) RONALD F. MARTIN	1.00									
MEMBER	MEMBER		X						0.	0.	0
MEMBER       X       0.       0.       0         (24) BRENDA G. NASH       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (25) W. HAROLD NEWMAN       1.00       0.       0.       0.         MEMBER       X       0.       0.       0.         (26) J. KENNETH SANFORD       1.00       X       0.       0.       0.         MEMBER       X       0.       0.       0.       0         1b Sub-total       D.       0.       0.       0.       0.         0 Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)       505,986.       0.       36,049	•	1.00	x						0.	0.	0
(24) BRENDA G. NASH       1.00         MEMBER       X         (25) W. HAROLD NEWMAN       1.00         MEMBER       X         (26) J. KENNETH SANFORD       1.00         MEMBER       X         1b Sub-total       D.         c Total from continuation sheets to Part VII, Section A       D.         d Total (add lines 1b and 1c)       505,986.         0.       36,049		1.00	х						0.	0.	0
(25) W. HAROLD NEWMAN       1.00         MEMBER       X         (26) J. KENNETH SANFORD       1.00         MEMBER       X         1b Sub-total       0.0.0         c Total from continuation sheets to Part VII, Section Add Incl       505,986.0         0.36,049	(24) BRENDA G. NASH	1.00									
MEMBER         X         0.         0.         0           (26) J. KENNETH SANFORD         1.00         0.         0.         0           MEMBER         X         0.         0.         0           1b Sub-total         D.         0.         0.         0           c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)         D.         505,986.         0.         36,049	MEMBER		X						0.	0.	0
MEMBER         X         0.         0.         0           1b Sub-total         ▶         0.         0.         0           c Total from continuation sheets to Part VII, Section A         ▶         505,986.         0.         36,049           d Total (add lines 1b and 1c)         ▶         505,986.         0.         36,049	• • •	1.00	Х						0.	0.	0
1b Sub-total       0. 0         c Total from continuation sheets to Part VII, Section A       505,986. 0. 36,049         d Total (add lines 1b and 1c)       505,986. 0. 36,049	(26) J. KENNETH SANFORD	1.00									
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  505,986.  0. 36,049  505,986.  0. 36,049	MEMBER		Х								
d Total (add lines 1b and 1c) 505,986. 0. 36,049	1b Sub-total										
	c Total from continuation sheets to P	Part VII, Section A				-					
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable							<u> </u>		<del></del>		36,049
	compensation from the organization										Yes No

Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

X

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes." complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
H&M CONSTRUCTION	CONSTRUCTION	
P.O. BOX 16589, ASHEVILLE, NC 28816	SERVICES	4,572,805.
CHARTWELLS		, ,
P.O. BOX 91337, CHICAGO, IL 60693	FOOD SERVICES	2,352,597.
KREUGER INTERNATIONAL	LIBRARY REFERENCE	
P.O. BOX 204576, DALLAS, TX 75320-4576	MATERIALS	279,983.
PATLA STRAUS ROBINSON & MOORE PA TRUST P.O. BOX 7625, ASHEVILLE, NC 28802	ATTORNEY FEES	247,961.
JJC, LLC		
305 A AIRPORT ROAD, ARDEN, NC 28704	REAL ESTATE LEASING	135,352.
2 Total number of independent contractors (including but not limited to those \$100,000 of compensation from the organization ▶ 8	listed above) who received more than	

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2012)

		Check if Schedule O conta	ains a response t	o any question i	n this Part VIII				<u>L_J</u>
		A AMERICAN STREET	and the state of		(A) Total reven	ue	(B) Related or	(C) Unrelated	(D) Revenue excluded
	,			~ **	10121101011	00	exempt function	business	from tax under sections 512,
1,25		Section 2		· · · · · · · · · · · · · · · · · · ·			revenue	revenue	513, or 514
र्घ ध	1 a	Federated campaigns	1a		a An Mail			" · " / " " (1)	
s, Grants Amounts	ŧ	Membership dues	1b					£ , , .	
	•	Fundraising events	1c		<i>;</i> '		* *		
Gifts, ilar Ar	c	Related organizations	1d					ا ماران	
s, a	•	Government grants (contributi	ons) 1e	1,988,143.	JAN GOE	-4.5	- J. Mir. W. C. W.	Str. JAK X	
Contributions, and Other Sim	f	All other contributions, gifts, grant	ts, and			,~**			
the state		similar amounts not included above	/e <b>1f</b>	3,191,770.		ĹŽ			94
Ēά	ç	Noncash contributions included in lines	1a-1f \$	353,853.					
Sag	ŀ	Total. Add lines 1a-1f		<b></b>	5,179,	913.			
				Business Code	1979 - 19	* * * *			
g,	2 2	TUITION AND FEES		900099	28,855,	953.	28,855,953.		
ے ج	t	RESIDENCE HALLS		900099	4,573,	056.	4,573,056.		
Se	(	CAFETERIA INCOME		900099	3,677,	774.	3,677,774.		
Program Service Revenue	(	AUXILIARY REVENUE		900099	1,014,	214.	1,014,214.		
og. B	•								
٦	f	All other program service reve	nue						
		Total. Add lines 2a-2f		<u> </u>	38,120,	997.			en very
	3	Investment income (including	dıvıdends, ıntere	st, and					
		other similar amounts)		<b>&gt;</b>	395,	441.	_		395,441.
	4	Income from investment of tax	exempt bond p	roceeds					. <u> </u>
	5	Royalties .		<b></b>					
			(i) Real	(iı) Personal		j	<b>T</b>		
	6 a	Gross rents .	14,529.			1			
	t	Less rental expenses .	0.						
	C	Rental income or (loss)	14,529.						
	C	Net rental income or (loss)			14,	529.			14,529.
	7 a	Gross amount from sales of	(i) Securities	(iı) Other	z · . ` `	- 3			
		assets other than inventory	6,650,000.			· .			
	k	Less cost or other basis				ا درگراه اولان از اه	\$ . ~ ~	· · · · · · · · · · · · · · · · · · ·	
ı		and sales expenses	4,906,510.	23,999.	e E		-, ,	-	· · · ·
İ		Gain or (loss)	1,743,490.	-23,999.	26. /S	<del>. 1</del> -4	La Maria	· · ·	
I		Net gain or (loss)		<u> </u>	1,719,	491.			1,719,491.
<u>a</u>	8 a	Gross income from fundraising	g events (not		* ~ <u>~</u>	~ ·-	ار الله الله الله الله الله الله الله ال	in Acc	- ', ,
<u> </u>		including \$	of		* 5		* *	\$\$. \$\displays{2}\	, ,,
) S		contributions reported on line	1c). See					,	
Other Reven		Part IV, line 18	a .		2		• -		~ - `
히		Less: direct expenses	b		<u> </u>				
-		: Net income or (loss) from fund	=	<b>_</b>		-		£	~
l	9 a	Gross income from gaming ac						-	
- 1		Part IV, line 19	a		• .		`,		
		Less: direct expenses	b			<b>-</b> -	***************************************		
l		Net income or (loss) from gam		<b>_</b> _					-
l	10 a	Gross sales of inventory, less		674 612	*				
ł		and allowances	a	634,612.					1
		Less: cost of goods sold	b		634	612		·	624 612
}		Net income or (loss) from sales		Durain as a Call	634,	J12.			634,612.
}	4.4	Miscellaneous Revenue OTHER INCOME	8	Business Code 900099	643,	633	642,129.	1,504.	
			<del></del>		043,		042,129.	1,304.	
	t								
ļ		: I All other revenue							<del></del>
l		Total. Add lines 11a-11d		L	643,	633			1
	12	Total revenue. See instructions.			46,708,		38,763,126.	1,504.	2,764,073.

# Form 990 (2012) MARS HILL UNIVERSITY Part IX Statement of Functional Expenses

Sect	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).  Check if Schedule O contains a response to any question in this Part IX										
		(A)	(B)	(C)	(D)						
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses						
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				The major of the state of						
2	Grants and other assistance to individuals in			CONTRACTOR STATES	A - Jank						
-	the United States. See Part IV, line 22	16,453,897.	16,453,897.								
2		10,433,037.	10,133,037.	100 M	210 Park 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
3	Grants and other assistance to governments,										
	organizations, and individuals outside the										
	United States. See Part IV, lines 15 and 16			Est of the state o	1.145* 2.50*C#886.0 V4						
4	Benefits paid to or for members				7X-19 11 178-11 1						
5	Compensation of current officers, directors,	000 005	00 505	100 100							
	trustees, and key employees	288,995.	89,595.	199,400.							
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages	9,692,431.	7,712,452.	1,303,681.	676,298.						
8	Pension plan accruals and contributions (include										
_	section 401(k) and 403(b) employer contributions)	476,126.	372,167.	71,699.	32,260.						
9	Other employee benefits	1,688,824.	1,320,081.	254,316.	114,427.						
10	Payroll taxes	728,192.	569,196.	109,657.	49,339.						
	Fees for services (non-employees):	, 20, 202	303,130.								
11											
	Management .										
	Legal										
	Accounting										
d	Lobbying	-	STORY TO THE PLANT OF THE PARTY	* #* - José 21 - 51 *** A. * * * *							
е	Professional fundraising services. See Part IV, line 17										
f	Investment management fees		<del></del>								
g	Other. (If line 11g amount exceeds 10% of line 25,										
	column (A) amount, list line 11g expenses on Sch O.)	426,648.	92,740.	325,263.	8,645.						
12	Advertising and promotion .	383,564.	188,280.	130,263.	65,021.						
13	Office expenses	1,226,219.	678,493.	476,947.	70,779.						
14	Information technology	178,616.	15,513.	156,789.	6,314.						
15	Royalties										
16	Occupancy										
17	Travel	731,033.	582,795.	110,289.	37,949.						
18	Payments of travel or entertainment expenses	•	•								
.0	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings										
20	Interest .	1,013,786.	1,013,786.								
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	864,964.	662,852.	202,112.							
23	Insurance	648,976.	526.	648,450.							
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)	***	· •	~ *							
	amount, list line 24e expenses on Schedule O.)	7 716 075	7 716 075	<u></u>							
а	AUXILIARY EXPENSES	7,716,075.	7,716,075.	245 262							
b	PLANT ALLOCATION	1,048,801.	803,732.	245,069.	4 050						
С	EQUIP RENTAL & MAINTENA	386,901.	218,345.	167,298.	1,258.						
d	OTHER EXPENSES	308,004.	232,956.	18,185.	56,863						
е	All other expenses	309,111.	16,428.	292,683.							
<u>25</u>	Total functional expenses. Add lines 1 through 24e	44,571,163.	38,739,909.	4,712,101.	1,119,153						
26	Joint costs. Complete this line only if the organization										
	reported in column (B) joint costs from a combined										
	educational campaign and fundraising solicitation.										
	Check here if following SOP 98-2 (ASC 958-720)										
				-	Farm 990 (2012						

Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 6.847.722. 9,051,836. 1 Cash - non-interest-bearing 3,620,174. 4,785,419. 2 Savings and temporary cash investments 2 349,191. 280,611. 3 Pledges and grants receivable, net 3 662,627. 573,650. 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other 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 instr). Complete Part II of Sch L 6 2,333,987. 7 1,663,449. 7 Notes and loans receivable, net 379,249. 385,529. 8 8 Inventories for sale or use 207,162. 302,482. Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 78,069,280. basis. Complete Part VI of Schedule D 10a 46,943,450. 31,125,830. 40,424,423 10b b Less: accumulated depreciation 10c 11 Investments - publicly traded securities 11 49,319,853. 50,437,867. 12 12 Investments - other securties. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 131,580. 124,317. Other assets. See Part IV, line 11 15 15 104,275,968. 114,548,610. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 2,704,429. 3,534,852. Accounts payable and accrued expenses 17 17 18 Grants payable 18 413,331. 435,397. 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 28,795,919. 32,118,083. Secured mortgages and notes payable to unrelated third parties 23 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 4,580,949. 25 3,949,466. Schedule D 36,494,628. 40,037,798. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here 

X
and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 13,833,149. 14,554,283. Unrestricted net assets 27 10,194,453. 28 14,723,321. Temporarily restricted net assets 43,753,738. 45,233,208. 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 67,781,340. 74,510,812. 33 33 Total net assets or fund balances 104,275,968. 114,548,610. Total liabilities and net assets/fund balances 34

Form	990 (2012) MARS HILL UNIVERSITY	56-	0554207	Pa	ge <b>12</b>
Pai	rt XI Reconciliation of Net Assets	-			
··	Check if Schedule O contains a response to any question in this Part XI				X
					_
1	Total revenue (must equal Part VIII, column (A), line 12)	1	46,708	3,6	16.
2	Total expenses (must equal Part IX, column (A), line 25)	2	44,571		
3	Revenue less expenses. Subtract line 2 from line 1	3	2,137		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	67,781		
5	Net unrealized gains (losses) on investments	5	2,758	3,2	<u>45.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,833	3,7	<u>74.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,	<b>i</b>			
	column (B))	10	74,510	),8	<u>12.</u>
Pai	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			Y SÍZ	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Э.			, 'i
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Wheney & V.	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	-5°5		
	separate basis, consolidated basis, or both:		,	78 J. E.,	,
	Separate basis Consolidated basis Both consolidated and separate basis		\$33		:,3%
b	Were the organization's financial statements audited by an independent accountant?		2b	X	77 VY
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			E.A.
	consolidated basis, or both:				No.
	X Separate basis Consolidated basis Both consolidated and separate basis		(1987) (1987) (1987)	in t	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	1	460	45.5° 4'

review, or compilation of its financial statements and selection of an independent accountant?

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

Act and OMB Circular A-133? . .

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

За

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

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

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

OMB No 1545-0047

2012

Open to Public

Inspection

Name of the organization

.....

Employer identification number

MARS HILL UNIVERSITY 56-0554207 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated \_\_ Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11a(iii

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section	(iv) Is the c in col. (i) In governing	sted in your	organizati	notify the ion in col. support?	(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
		(see instructions))	Yes	No	Yes	No	Yes	No	
			:						
									-
otal									

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

Provide the following information about the supported organization(s).

Schedule A (Form 990 or 990-EZ) 2012

h

Pa	support Schedule for	Organizations	Described in	Sections 170(l	o)(1)(A)(iv) and	170(b)(1)(A)(vi)	
٠,٠	(Complete only if you checke	d the box on line 5	, 7, or 8 of Part I o	r if the organization	n failed to qualify u	nder Part III. If the o	rganization
	fails to qualify under the tests	s listed below, plea	se complete Part I	11.)			
Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to					į	
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to					į	
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions	idal Company		Fig. 1. Militar.			
	by each person (other than a						
	governmental unit or publicly			3		~ .	
	supported organization) included			14	100		
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)	The state of the s		Market 1 Comment			
	Public support. Subtract line 5 from line 4	REGIONAL I					
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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	. 4	, s		*.		
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thire	d, fourth, or fifth ta	x year as a sectior	501(c)(3)	
	organization, check this box and sto	p here					<u>    ▶                                </u>
	ction C. Computation of Publ						
	Public support percentage for 2012 (			olumn (f))		14	%
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2012. If the	_			14 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies		-				▶□
b	33 1/3% support test - 2011. If the	organization did no	ot check a box on !	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check this	box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			▶□
17a	10% -facts-and-circumstances test	- 2012. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	ınd line 14 is 10% or	more,
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check th	is box and stop h	i <mark>ere.</mark> Explain in Pa	rt IV how the organiz	zation
	meets the "facts-and-circumstances"	test. The organizat	tion qualifies as a p	oublicly supported	organization		
t	10% -facts-and-circumstances test	t - 2011. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is 10	)% or
	more, and if the organization meets the	he "facts-and-circui	mstances" test, ch	eck this box and	stop here. Explair	in Part IV how the	

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

# Schedule A (Form 990 or 990-EZ) 2012 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Calo	ction A. Public Support						
valt	endar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Gifts, grants, contributions, and			, , , , , , , , , , , , , , , , , , , ,	<u> </u>		
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that					1	
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to	ĺ					
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to					1	
	the organization without charge						
6	Total. Add lines 1 through 5						
	a 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 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)	1 5 7 7 7	7 ° 5,1 6,1	<b>54.13.4</b> .8	44 195	i in and a cont	
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources			,			
t	Unrelated business taxable income				ļ		
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	Net income from unrelated business						
	Net income from unrelated business activities not included in line 10b,						
	Net income from unrelated business						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain						
11 12 13	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	the organization's	s first, second, thin	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiza	tion,
11 12 13	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12)	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiza	tion,
11 12 13 14	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for			d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiza	tion,
11 12 13 14 Sec	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for check this box and stop here	c Support Per	centage	·	ax year as a section	on 501(c)(3) organiza	tion, ►□
11 12 13 14 Sec 15 16	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2012 (Public support percentage from 2011)	c Support Per ine 8, column (f) di Schedule A, Part	rcentage vided by line 13, c	·	ax year as a section	· · · · · · · · · · · · · · · · · · ·	<u>▶</u> □
11 12 13 14 Sec 15 16	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here  ction C. Computation of Public	c Support Per ine 8, column (f) di Schedule A, Part	rcentage vided by line 13, c	·	ax year as a section	15	<b>▶</b> □
11 12 13 14 Sec 15 16	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public support percentage for 2012 (Public support percentage from 2011 ction D. Computation of Investigation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation in the public support percentage from 2011 ction D. Computation in the public support percentage from 2011 ction D. C	c Support Per ine 8, column (f) di Schedule A, Part stment Income	rcentage vided by line 13, c III, line 15 e Percentage	olumn (f))	ax year as a section	15	% %
11 12 13 14 Sec 15 16 Sec 17	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2012 (Public support percentage from 2011 ction D. Computation of Investigation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation of Investigation in the public support percentage from 2011 ction D. Computation in the public support percentage from 2011 ction D. Computation in the public support percentage from 2011 cti	ic Support Per ine 8, column (f) di Schedule A, Part stment Income 012 (line 10c, colur	rcentage vided by line 13, c III, line 15 Percentage mn (f) divided by lin	olumn (f))	ax year as a section	15 16	% %
11 12 13 14 Sec 15 16 Sec 17 18	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage for 2012 (Public support percentage from 2011 ction D. Computation of Investing Public Support percentage from 2011 ction D. Computation of Investing Public support percentage for 2012 (Investment income percentage for 2012)	ic Support Per ine 8, column (f) di Schedule A, Part stment Income 012 (line 10c, colur 2011 Schedule A,	rcentage vided by line 13, c III, line 15 Percentage mn (f) divided by line Part III, line 17	olumn (f)) ne 13, column (f))		15 16 17 18	% % %
11 12 13 14 Sec 15 16 Sec 17 18	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage from 2011 ction D. Computation of Investment income percentage from	ic Support Per ine 8, column (f) di Schedule A, Part stment Income 012 (line 10c, colur 2011 Schedule A, organization did r	rcentage vided by line 13, c III, line 15 Percentage mn (f) divided by line Part III, line 17 not check the box	olumn (f)) le 13, column (f)) on line 14, and line	e 15 is more than :	15 16 17 18 33 1/3%, and line 17	% % %
11 12 13 14 Sec 15 16 Sec 17 18 19a	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for check this box and stop here ction C. Computation of Public Public support percentage from 2011 (Public support percentage from 2011 ction D. Computation of Investment income percentage from 2011 investment income percentage from 2013 1/3% support tests - 2012. If the	ine 8, column (f) di Schedule A, Part Stment Income 012 (line 10c, colur 2011 Schedule A, organization did r and stop here. The	rcentage vided by line 13, c III, line 15 Percentage mn (f) divided by line Part III, line 17 not check the box of	olumn (f)) le 13, column (f)) on line 14, and lini fies as a publicly	e 15 is more than s supported organiz	15 16 17 18 33 1/3%, and line 17	% % % % % % % % %
11 12 13 14 Sec 15 16 Sec 17 18 19a	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here  ction C. Computation of Public Public support percentage for 2012 (Public support percentage from 2011 ction D. Computation of Investing Investment income percentage from a 33 1/3% support tests - 2012. If the more than 33 1/3%, check this box and stop here	ine 8, column (f) di Schedule A, Part Stment Income 12 (line 10c, colur 2011 Schedule A, organization did r nd stop here. The	rcentage vided by line 13, c Ill, line 15 Percentage rnn (f) divided by line Part Ill, line 17 riot check the box of erganization qual mot check a box on	olumn (f)) ne 13, column (f)) on line 14, and line fies as a publicly line 14 or line 19:	e 15 is more than s supported organiz a, and line 16 is m	15 16 17 18 33 1/3%, and line 17 action ore than 33 1/3%, and	% % % % % % % % %

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

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

2012
Open to Public Inspection

Name of the organization

MARS HILL UNIVERSITY

Employer identification number 56-0554207

Pa	t 🔯 Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or A	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 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 donor advisors in v	writing that the assets held in donor advised ful	nds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor of	r donor advisor, or for any other purpose confe	erring
	impermissible private benefit?		Yes No
Pai	Conservation Easements. Complete if the org	panization answered "Yes" to Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of an historic	ally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form of a c	conservation easement on the last
	day of the tax year.		Committee of the Commit
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	· ·	2c
d	Number of conservation easements included in (c) acquired a	fter 8/17/06, and not on a histonc structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the orga	nization during the tax
_	year >		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per	- · · · · · · · · · · · · · · · · · · ·	
_	violations, and enforcement of the conservation easements it		Yes No
6 7	Staff and volunteer hours devoted to monitoring, inspecting, a Amount of expenses incurred in monitoring, inspecting, and e	-	
8	Does each conservation easement reported on line 2(d) above		
Ü	and section 170(h)(4)(B)(ii)?	s satisfy the requirements of section 170(ii)(4)(t	Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense state	
•	include, if applicable, the text of the footnote to the organizat		•
	conservation easements		gainzation o accounting to
Pai	Collections Maintaining Collections of	Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statement a	and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furtherance of	f public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	pes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement and t	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of public se	ervice, provide the following amounts
	relating to these items:		-
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X	<del></del>	<b>▶</b> \$
2	If the organization received or held works of art, historical treat	asures, or other similar assets for financial gain,	, provide
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items.	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X	· · · ·	<b>&gt;</b> \$

Sche		LL UNIVERS					0554207 Page 2
Par	t;III: Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or C	other S	imilar Ass	sets (continued)
3.	Using the organization's acquisition, accession	on, and other record	s, check any of the	following that are	e a signi	ficant use of	its collection items
	(check all that apply)						
а	Public exhibition	d		change programs	S		
b	Scholarly research	е	e Other				
С	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain	n how they further t	he organization's	s exempt	t purpose in l	Part XIII.
5	During the year, did the organization solicit o	r receive donations o	of art, historical trea	sures, or other s	ımılar as	sets	
	to be sold to raise funds rather than to be ma						Yes No
Par	TIV Escrow and Custodial Arrang	gements. Comple	ete if the organization	on answered "Ye	s" to Fo	rm 990, Part	IV, line 9, or
	reported an amount on Form 990, Par	rt X, line 21.					
1a	Is the organization an agent, trustee, custodia	an or other intermed	lary for contribution	s or other assets	s not incl	luded	
	on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fol	lowing table:				
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
е	Distributions during the year			_		1e	
f	Ending balance					1f	
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?		•		Yes No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided in Part	XIII		
	Endowment Funds. Complete I						-
		(a) Current year	(b) Prior year	(c) Two years b		Three years t	oack (e) Four years back
1a	Beginning of year balance	36,766,823.	39,853,587	1		29,439,7	
b	Contributions	701,986.	914,922	693,1	94.	1,552,4	
	Net investment earnings, gains, and losses	4,326,281.	-1,948,619	7,274,5	43.	4,313,0	497,527,486.
d							
	Other expenditures for facilities						
_	and programs						
f	Administrative expenses	1,484,789.	2,053,067	1,715,0	59.	1,704,3	52. 1,174,469.
g	End of year balance	40,310,301.	36,766,823,	<del></del>		33,600,9	
2	Provide the estimated percentage of the curr			·		• •	
a	Board designated or quasi-endowment	.00	%	-,,			
	Permanent endowment ► 89.43	%	<u> </u>				
	Temporarily restricted endowment ▶ 1						
·	The percentages in lines 2a, 2b, and 2c shou						
3a	Are there endowment funds not in the posses		ation that are held a	nd administered	for the c	organization	
-	by:						Yes No
	(i) unrelated organizations						3a(i) X
	(ii) related organizations		•				3a(ii) X
b	If "Yes" to 3a(ii), are the related organizations	s listed as required or	n Schedule R?				3b
4	Describe in Part XIII the intended uses of the			•			<u> </u>
	Land, Buildings, and Equipm						
	Description of property	(a) Cost or o	ľ	t or other	(c) Acci	umulated	(d) Book value
	bescription of property	basis (investr		(other)		ciation	(d) Book Value
12	Land			7,696.			1,347,696.
	Buildings	-	<del></del>		24 97	4,520.	32,426,097.
	Leasehold improvements	-	3,72	2,02,02	, - ,	_,,,,,,,,	52, 220,057.
ď	Equipment		14.13	37,968.	6.15	1,310.	7,986,658.
	Other			32,999.	<u> </u>	_,	5,182,999.
	. Add lines 1a through 1e. (Column (d) must ex	gual Form 990. Part				<b>•</b>	46,943,450.

Dort VIII Investments Other Convities s				
Part VII Investments - Other Securities. Sec	e Form 990, Part X, line 12	2.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	aluation Cost or end	d-of-year market value
(1) Financial derivatives	<del>-</del> · -			
(2) Closely-held equity interests			· · · · · · · · · · · · · · · · · · ·	•
(3) Other			<del></del>	-
(A) REAL ESTATE INVESTMENT	-		<del>-</del>	
(B) TRUSTS	703,528.	END-OF-Y	EAR MARKET	VALUE
(C) ASSETS HELD IN CHARITABLE				
(D) REMAINDER TRUSTS	1,723,936.	END-OF-Y	EAR MARKET	VALUE
(E) BENEFICIAL INTERESTS IN				
(F) TRUSTS	11,479,306.	END-OF-Y	EAR MARKET	VALUE
(G) MUTUAL FUNDS	4,186,597.		EAR MARKET	
(H) ALTERNATIVE INVESTMENTS	32,292,670.		EAR MARKET	
() FIXED INCOME	51,830.		EAR MARKET	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	50,437,867.			Arrivan Fall of San
Part VIII Investments - Program Related. Se		3 	CONTRACTOR CONTRACTOR	「京 からなけれる。 「 A Se Ari A A A A A A A A A A A A A A A A A A
(a) Description of investment type	(b) Book value		aluation Cost or end	d-of-year market value
(1)	(4) 20011 14114	(0)		
(2)		<del> </del>		
(3)				
(4)				
(5)			<u> </u>	
(6)			· <del></del>	
(7)		<del> </del>		
(8)				
(9)				
(10)		ro. 16890 - 14710 Yo 4	E 44 VE 48% 75°, 45°	SATURE CARROL SALES
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			1863 - 1864 A	
Part IX Other Assets. See Form 990, Part X, line	15.			
	Description			(b) Book value
(1)	Description			(b) Book value
	Description			(b) Book value
(1)	Description			(b) Book value
(1)	Description			(b) Book value
(1) (2) (3)	Description			(b) Book value
(1) (2) (3) (4)	Description			(b) Book value
(1) (2) (3) (4) (5)	Description			(b) Book value
(1) (2) (3) (4) (5) (6)	Description			(b) Book value
(1) (2) (3) (4) (5) (6) (7)	Description			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8)	Description			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line	: 15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9)	: 15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line	: 15.)	(b) Book value	<b>&gt;</b>	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability	: 15.)	(b) Book value	<b>&gt;</b>	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, I	: 15.)	(b) Book value 837,014.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability (1) Federal income taxes	: 15.)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, I (a) Description of liability (1) Federal income taxes (2) ANNUITIES PAYABLE	: 15.)	837,014.	<b>&gt;</b>	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, I  (a) Description of liability (1) Federal income taxes (2) ANNUITIES PAYABLE (3) POSTRETIREMENT BENEFITS (4) LIABILITIES	: 15.)		<b>&gt;</b>	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability (1) Federal income taxes (2) ANNUITIES PAYABLE (3) POSTRETIREMENT BENEFITS (4) LIABILITIES (5) REFUNDABLE ADVANCES FROM	: 15.)	837,014. 2,024,448.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, I (a) Description of liability (1) Federal income taxes (2) ANNUITIES PAYABLE (3) POSTRETIREMENT BENEFITS (4) LIABILITIES (5) REFUNDABLE ADVANCES FROM (6) DEPARTMENT OF EDUCATION	: 15.)	837,014.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, I  (a) Description of liability (1) Federal income taxes (2) ANNUITIES PAYABLE (3) POSTRETIREMENT BENEFITS (4) LIABILITIES (5) REFUNDABLE ADVANCES FROM (6) DEPARTMENT OF EDUCATION (7)	: 15.)	837,014. 2,024,448.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, I  (a) Description of liability (1) Federal income taxes (2) ANNUITIES PAYABLE (3) POSTRETIREMENT BENEFITS (4) LIABILITIES (5) REFUNDABLE ADVANCES FROM (6) DEPARTMENT OF EDUCATION (7) (8)	: 15.)	837,014. 2,024,448.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, I  (a) Description of liability  (1) Federal income taxes (2) ANNUITIES PAYABLE (3) POSTRETIREMENT BENEFITS (4) LIABILITIES (5) REFUNDABLE ADVANCES FROM (6) DEPARTMENT OF EDUCATION (7) (8) (9)	: 15.)	837,014. 2,024,448.	<b>&gt;</b>	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990. Part X. col. (B) line Part X Other Liabilities. See Form 990, Part X, I  (a) Description of liability (1) Federal income taxes (2) ANNUITIES PAYABLE (3) POSTRETIREMENT BENEFITS (4) LIABILITIES (5) REFUNDABLE ADVANCES FROM (6) DEPARTMENT OF EDUCATION (7) (8)	: 15.)	837,014. 2,024,448.	<b>&gt;</b>	(b) Book value

2. FIN 48 (ASC 740) Footnote In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2012 MARS HILL UNIVERSITY		56-0	0554207	Page 4
	t 🗓 Reconciliation of Revenue per Audited Financial Statemen	ts With Revenue per Re			
۲.	Total revenue, gains, and other support per audited financial statements		1	28,921,	074.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b	7. 3		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d -16,453,897	7		
е	Add lines 2a through 2d		2e	-16,453,	897.
3	Subtract line 2e from line 1		3	45,374,	971.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		) S. <b>德</b> 5 是 4 是		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b 1,333,645			
С	Add lines 4a and 4b		4c	1,333,	645.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	46,708,	616.
Pai	TIXII Reconciliation of Expenses per Audited Financial Stateme	nts With Expenses per	Returr	1	
1	Total expenses and losses per audited financial statements		1	27,103,	480.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		2		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses .	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d		2e		0.
3	Subtract line 2e from line 1		3	27,103,	480.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.		•		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b 17,467,683	3 4		
С	Add lines 4a and 4b		4c	17,467,	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)		5	44,571,	163.
Pai	tixIII Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,	lines 1a and 4; Part IV, lines 1	b and 2b	o, Part V, line 4	; Part
	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p		ion.		
PAF	TT V, LINE 4: TO SUPPORT THE INSTITUTION IN	PERPETUITY FOR			
SCE	OLARSHIPS, LECTURESHIPS, AND VARIOUS OTHER	OPERATIONS AND	BUII	DINGS O	N
~	<b>TD:</b> 4				
CAN	IPUS.				
				<del></del>	
ם גרם	om v IINE 3. MUE COLLEGE TO EVENDO EDOM IN	COME MAY INTOED	z p c m z	CONT	
PAF	T X, LINE 2: THE COLLEGE IS EXEMPT FROM IN	COME TAX UNDER	SECTI	LON	
<b>5</b> 01	(C)(3) OF THE INTERNAL REVENUE CODE. MANAG	באבאה שאם ביואדיי	משחא	mur	
ע ט ע	.(C)(J) OF THE INTERNAL REVENUE CODE. MANAG	MUTHAS CWU INGWG	ZIED.	105	
r pro	ECT OF THE GUIDANCE PROVIDED BY GAAP ON AC	מוואיידאנט פוס ניאיני	י יחסקי	יאד איינאדע א	r
۲۲۵	THE GUIDANCE PROVIDED BY GAAP ON AC	COOMITMG FOR ONG	TUKIF	TTATI TIA	
TNC	COME TAXES. MANAGEMENT BELIEVES THAT THE CO	OLLEGE CONTENTES	፣ ሞለ	SATTCEV	•
T 11/	COME TANES. MANAGEMENT DELIEVES THAT THE C	CTTEGE CONTINUE			
			Scried	ule D (Form 9	3U / ZU IZ

#### **SCHEDULE E**

Department of the Treasury Internal Revenue Service

Part I

(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.

2012

Open to Public Inspection

Name of the organization

MARS HILL UNIVERSITY

Employer identification number 56-0554207

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			
	other governing instrument, or in a resolution of its governing body?	1	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			2,0
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
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.		,, <u>*</u> .	
	If you need more space, use Part II	3	Х	
	RACIALLY NONDISCRIMINATORY POLICY STATEMENT IS INCLUDED IN			
	ALL COLLEGE GENERATED DOCUMENTS INCLUDING THE COLLEGE	İ		4
	CATALOG. IN ADDITION, IT IS PUBLISHED IN THE LOCAL NEWSPAPER	İ		
	AT LEAST ANNUALLY.		,	
		1.	( , , ) ( -, - )(k	5 mm
4	Does the organization maintain the following?	ـُـــُّ رُبُّتُــَ	1.2	
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Х	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	_4b_	Х	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	4c	Х	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	1 18 1
	If you answered "No" to any of the above, please explain. If you need more space, use Part II.	, , , , , , , , , , , , , , , , , , ,	JE S	
		1 44.	ing Zip Singay * ≃(i , hy	
		1. 7		
		3 .		
	<u> </u>		:: <sup>3</sup>	- 1
5	Does the organization discriminate by race in any way with respect to.			37
	Students' rights or privileges?	<u>5a</u>		X
	Admissions policies?	<u>5b</u>		X
	Employment of faculty or administrative staff?	5c		X
	Scholarships or other financial assistance?	5d		X
e	Educational policies?	5e		X
f	Use of facilities?	5f		X
-	Athletic programs?	5g	$\vdash$	X
n	Other extracurricular activities?	5h	$\vdash$	Λ
	If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.			
				,
6-	Does the organization receive any financial aid or assistance from a governmental agency?		X	
	Has the organization's right to such aid ever been revoked or suspended?	6a 6b	<del>                                     </del>	Х
D	If you answered "Yes" to either line 6a or line 6b, explain on Part II.	6b	<u> </u>	21
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of			
7	Rev. Proc. 75-50, 1975-2 C.B 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	
	nev. Proc. 15/50, 15/52 C.D 501, covering racial nonuiscrimination? II 190, explain on Part II		<u> </u>	

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

Schedule E (Form 990 or 990-EZ) (2012)

Schedule E (Form 990 or 990-EZ) (2012) MARS HILL UNIVERSITY	56-0554207	Page 2
Supplemental Information. Complete this part to provide the explanations required by Part II. as applicable. Also complete this part to provide any other additional information.	art I, lines 3, 4d, 5h, 6b, and 7,	
SCHEDULE E, LINE 6 - EXPLANATION OF GOVERNMENT FINANCIA	L AID:	
LINE 6A - THE UNIVERSITY RECEIVED STUDENT FINANCIAL AID	GRANTS FROM THE	<del></del>
U.S. DEPARTMENT OF EDUCATION.	<del></del>	
	<del> </del>	
· · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·		
		<u> </u>
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service
Name of the organization

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

Open to Public OMB No 1545-0047

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

► Attach to Form 990.

organization  MARS HILL UNIVERSITY  General Information on Grants and Assistance	λ					Employer identification number $56-0554207$
Does the organization maintain records to substantiate the amount of the	amount of the grants o	r assistance, the	grantees' eligibility	for the grants or assis	e grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for month	criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	unds in the United	States			X Yes No
vernments and	Grants and Other Assistance to Governments and Organizations in the United States. Con recipient that received more than \$5,000. Part II can be dublicated if additional space is needed.	United States. C	complete of the organ	anization answered "Y	Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any oded,	IV, line 21, for any
(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Enter total number of section 501(c)(3) and government organizat Enter total number of other organizations listed in the line 1 table	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	line 1 table				<b>A A</b>
For Paperwork Reduction Act Notice, see the Instructions for Form	ins for Form 990.					Schedule I (Form 990) (2012)

MARS HILL UNIVERSITY

Page 2

56-0554207

Schedule I (Form 990) (2012) MARS HILL UNIVERSITY

Part III 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 Grants and Other Assistance to Individuals in the United States.

					•
(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
TUITION DISCOUNTS/SCHOLARSHIPS	1243	16,453,897.	0.		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information	de the information	required in Part I, I	ine 2, Part III, columr	(b), and any other additional info	ormation.
SCHEDULE I, PART I, LINE 2: THE PRO	PROCESS FOR	MONITORING	THE USE	OF TUITION	
DISCOUNT OR GRANTS/SCHOLARSHIP FUNDS	AT	MARS HILL COLLEGE	LEGE INCLUDES	DES THE USE	
OF A MATRIX THAT LIMITS AND DETERMINES	THE	AMOUNT OF	ACADEMIC S	SCHOLARSHIP	
AWARDED WITH A MAXIMUM OF \$7000. TH	THE DEAN O	F ADMISSIO	OF ADMISSIONS AND FINANCIAL AID	ANCIAL AID	
AND THE DIRECTOR OF FINANCIAL AID MEET	MEET MONTHLY	잂	REVIEW THE CU	CURRENT AMOUNT	
OF TUITION DISCOUNT OR GRANTS/SCHOLARSHIPS		BEING AWARDED	DED TO ENSURE	URE THAT THE	
COLLEGE STAYS WITHIN BUDGET. TUITION	ON DISCOUNT	, GRANT	AND SCHOLARSHIP	RSHIP	
REPORTS ARE SUBMITTED TO THE PRESIDENT	NO	A REGULAR BASIS.	THE	BUDGET FOR	
THESE GRANTS IS APPROVED BY THE BOA	BOARD OF TR	TRUSTEES ON	AN ANNUAL	BASIS. THE	
232102 12-18-12					Schedule I (Form 990) (2012)

#### **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.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Attach to Form 990. See separate instructions.

MARS HILL UNIVERSITY **Questions Regarding Compensation** 

**Employer identification number** 56-0554207

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,		ii.	
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.	J. Eliza		£ 34.
	First-class or charter travel Housing allowance or residence for personal use	200		* '
	Travel for companions Payments for business use of personal residence		A.	
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees	李		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	, ,	," "V	30/2
		: -,		35
þ	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	<u> </u>	6	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	
		, · ·	. 74%	,
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's		1	Azu i
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.	"	-280	j 🤼
	X Compensation committee X Written employment contract	-12		Si di T
	Independent compensation consultant Compensation survey or study	System		
	Form 990 of other organizations  X Approval by the board or compensation committee	^,	,	, ,
			* ·	
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing		\$4. 2.	A 257
	organization or a related organization	<u> </u>		~,
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	****	X
	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III.	7		
			7	١,
_	Only section 501(c)(3) and 501(c)(4) organizations 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 compensation		121 -	. "
	contingent on the revenues of.		<u> </u>	X
	The organization?	5a		X
D	Any related organization?	5b	K.	<u> </u>
_	If "Yes" to line 5a or 5b, describe in Part III.	1	, 9	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	. :	1	
_	contingent on the net earnings of	6a	* .	X
	The organization? Any related organization?	6b		X
U	If "Yes" to line 6a or 6b, describe in Part III.	00	-	1
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments		<del> </del>	<u> </u>
•	not described in lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	<del></del>		<del>                                     </del>
J	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	۳_	_	<del>                                     </del>
-	Regulations section 53 4958-6(c)?	اما		

MARS HILL UNIVERSITY Schedule J (Form 990) 2012 Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) 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 individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(b)(a)	reported as deferred In prior Form 990
(1) DAN G. LUNSFORD PRESTDENT	€ 9	171,475.	0	0.0	7,716.	0	179,191.	0
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232112 12-12-12							Schedu	Schedule J (Form 990) 2012

#### SCHEDULE M (Form 990)

**Noncash Contributions** 

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

MARS HILL UNIVERSITY

Employer identification number 56-0554207

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		_	- <del></del>
1	Art - Works of art							
2	Art - Historical treasures					•		
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods		. Tana ala					
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	16	182,303.	FAIR MARKET	VAL	JE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
• •	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contributi	ion -						
	Historic structures							
14	Qualified conservation contributi	ion - Other						
15	Real estate - Residential	X	1	170,000.	FAIR MARKET	VAL	JE	
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (MISCELLA	NEOUS ) X	3	1,550.	FAIR MARKET	VAL	JE	
26	Other (	)						
27	Other (	)						
28	Other (	)			ļ			
29	Number of Forms 8283 received	d by the organization during	g the tax year for c	ontributions				
	for which the organization comp	oleted Form 8283, Part IV,	Donee Acknowledg	gement 29		,	0	
							'es	No
30a	During the year, did the organiza	ation receive by contribution	on any property rep	orted in Part I, lines 1-28 tha	t it must hold for	ءِ أُشَّةٍ	٠	. 1
	at least three years from the date	e of the initial contribution	, and which is not r	equired to be used for exem	pt purposes for			
	the entire holding period?	•				30a		X
b	If "Yes," describe the arrangeme	ent in Part II.					[_	]
31	Does the organization have a gif	ft acceptance policy that re	equires the review (	of any non-standard contribu	tions?	31	X	
32a	Does the organization hire or use	e third parties or related or	rganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization did not report	t an amount in column (c) f	or a type of proper	ty for which column (a) is ch	ecked,			
	describe in Part II.						- 1	

Schedule-M (Form 990) (2012) MARS HILL UNIVERSITY	56-0554207 Page 2
Supplemental Information. Complete this part to provide the information required by Part I, Ii the organization is reporting in Part I, column (b), the number of contributions, the number of items red Also complete this part for any additional information.	nes 30b, 32b, and 33, and whether ceived, or a combination of both.
SCHEDULE M, PART I, COLUMN (B): THE NUMBER OF CONTRIBUTION	IS REPRESENTS
THE TOTAL NUMBER OF CONTRIBUTORS.	
	· -· · · · - · · · - · · · · · · · · ·
	<del></del> -

232142 12-20-12

Schedule M (Form 990) (2012)

#### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Rublic Inspection

Name of the organization

MARS HILL UNIVERSITY

Employer identification number 56-0554207

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
BACHELOR OF ARTS, SCIENCE, MUSIC, SOCIAL WORK AND FINE ARTS.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO CHARACTER DEVELOPMENT, TO SERVICE, AND TO RESPONSIBLE CITIZENSHIP IN
THE COMMUNITY, THE REGION, AND THE WORLD.
FORM 990, PART VI, SECTION A, LINE 4: ON MAY 10, 2013 THE BOARD OF
TRUSTEES ADOPTED AN AMENDMENT TO CHANGE THE ORGANIZATION'S NAME FROM MARS
HILL COLLEGE TO MARS HILL UNIVERSITY.
FORM 990, PART VI, SECTION B, LINE 11: THE EXECUTIVE COMMITTEE OF THE
BOARD AND THE FULL BOARD OF TRUSTEES ARE PRESENTED WITH A COPY OF THE 990
FOR REVIEW PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 12C: EACH NEW OR RETURNING TRUSTEE
RECEIVES ORIENTATION WHICH INCLUDES A DISCUSSION REGARDING THE CONFLICT OF
INTEREST REQUIREMENT. BOARD MEMBERS WITH POTENTIAL CONFLICTS WILL RECUSE
THEMSELVES FROM ANY VOTE OR DISCUSSION.
FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION COMMITTEE OF THE
BOARD REVIEWS AND APPROVES THE COMPENSATION FOR THE PRESIDENT AND THE TOP
MANAGEMENT OFFICIALS. RECOMMENDED CHANGES REQUIRE ACTION AND APPROVAL BY
THE FULL BOARD OF TRUSTEES AND DISCUSSIONS ARE DOCUMENTED IN THE MEETING
MINUTES. SALARIES ARE COMPARED TO OTHER SIMILAR INSTITUTIONS AND TO SALARY
SURVEYS ISSUED BY THE NC INDEPENDENT COLLEGE/UNIVERSITIES ANNUAL

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Part

Related Organizations and Unrelated Partnerships

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7.

OMB No 1545-0047

Employer identification number 56-0554207

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.) End-of-year assets <u>e</u> Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ▶ Attach to Form 990. Total income ਉ Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) Primary activity 9 MARS HILL UNIVERSITY Name, address, and EIN (if applicable) of disregarded entity Name of the organization

(g) Section 512(b)(13) controlled ٩ entity? Yes Direct controlling entity status (if section 501(c)(3)) Public charity Exempt Code section Legal domicile (state or foreign country) Primary activity Name, address, and EIN of related organization

PartII

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

Schedule R (Form 990) 2012

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Page 2 56-0554207

Schedule R (Form 990) 2012 MARS HILL UNIVERSITY

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		(J) (K) General or Percentage managing ownership
					_						
Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	anizations Taxable poration or trust duri	as a Corpor ng the tax yo	<b>ration or Trust</b> (Cc ear.)	omplete if th	e organization ar	ıswered "Yes"	to Form 990, Pa	art IV, line 34	because it had o	ine or mor	e related
(a) Name, address, and EIN of related organization	<b>Z</b> c	Primč	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e)  Type of entity (C corp, S corp, or trust)		(f) Share of total income	(g) Share of Peend-of-year of assets	(h) Percentage ownership	Section 512(b)(13) controlled entity?
CHARITABLE REMAINDER UNITRUST (	(8)	TRUST		N N N	MARS HILL COLLEGE	TRUST					
							_				
232162 12-10-12						_	_	_	Schedul	le R (Forn	Schedule R (Form 990) 2012

Part V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

				-		,
Manda Company Line 4 to my contract of testing to line of 11 111 at 117 of this colonial					_ ^^	٦.
NOTE: COMPANDE III IN THE PRINCE OF THE PARTS II, III, OF IV OF THE SECTION OF TH	147			t	327	
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Farts irly or	. With one or more re	ated organizations listed i	In Parts II-IV?		;	;
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				Ę.	†	4
b Gift, grant, or capital contribution to related organization(s)				<b>1</b>		×
(s) (sift areast or central contribution from related organization(s)				10		×
				;	T	>
d Loans or loan guarantees to or for related organization(s)				=	†	4
e Loans or loan guarantees by related organization(s)				1e		×
					, 6	
					1	>
f Dividends from related organization(s)				=	†	4
g Sale of assets to related organization(s)				19		×
h Purchase of assets from related organization(s)				+		×
				ļ		>
<ul> <li>Exchange of assets with related organization(s)</li> </ul>				F	1	ه
J Lease of facilities, equipment, or other assets to related organization(s)				1		×
					131	15 / 15 / 15 / 15 / 15 / 15 / 15 / 15 /
k lease of facilities equipment or other assets from related organization(s)				¥		×
	(a)doutezio			F		×
ו דפונטווומוניס טו אפועונסט טו ווופוווטסואווף טו ועווטומואוון אינויסן אווענייסן אווענייסן אווענייסן אווענייסן	וולמווסו ו(פ)				t	>
m Performance of services or membership or fundraising solicitations by related organization(s)	ızatıon(s)			٤	1	ا ۵
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	s)uc			÷	1	×
Sharing of paid employees with related organization(s)				ç		×
					T	
					1	>
<ul> <li>Reimbursement paid to related organization(s) for expenses</li> </ul>				e P	1	4
q Reimbursement paid by related organization(s) for expenses				19		×
				,	417	
					1	>
r Other transfer of cash of property to related organization(s)				=	T	4 :
s Other transfer of cash or property from related organization(s)				- 1s		×
2 If the answer to any of the above is "Yes," see the instructions for information on wi	no must complete th	is line, including covered r	nation on who must complete this line, including covered relationships and transaction thresholds.			
İ	14/	3	3			
(a) Name of other organization	(b) Transaction type (a·s)	(c) Amount involved	(u) Method of determining amount involved	olved		
(1)						
(2)						
(6)				:		
					ļ	
(4)						
(6)						
232163 12-10-12			Schedule R (Form 990) 2012	(Form	990) 2	2012

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Schedule R (Form 990) 2012 MARS HILL UNIVERSITY

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

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

| Code V-UBI | Ceneral or Percentage | Industrians | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Code V-UBI | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Ceneral or Percentage | Cenera end-of-year Share of assets (f) Share of total income Predominant income partiesse. (related, unrelated, 50(io)(3) excluded from tax under section 512-514) Yes No (e) Are all partners sec. 501 (c)(3) orgs 7 ਉ (state or foreign Legal domicile country) Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2012

Part VII Section A. Officers, Directors	s, Trustees, Key En	nplo	yee	s, ar	nd H	lighe	est (	Compensated Employe	es (continued)	
.· (A)	(B)			(0				(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(ch	neck	all t	that a	app	ly)	compensation	compensation	amount of
	per				i l			from	from related	other
	week				1 1	loyee		the	organizations	compensation
	(list any	director				1 emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	hours for related	0 a	itee			satec		(***2/1099-101130)		and related
	organizations	truste	al trus		ag.	шрег				organizations
	below	Individual trustee or	Institutional trustee	<b>5</b>	Key employee	Highest compensated employee	<sub>25</sub>			3
	line)	Indiv	Instit	Officer	Key	High	Former			
(27) KAREN M. SMITH	1.00				П					
MEMBER		x	İ					0.	0.	0.
(28) B. JANE WINN	1.00				$\Box$					
MEMBER		x						0.	0.	0.
(29) GWEN DAVIS	1.00			_			$\vdash$		0.	
MEMBER	1.00	$ \mathbf{x} $						0.	0.	0.
(30) MICHAEL V. GROCE	1.00	1			$\vdash \vdash$		<del> </del>			
MEMBER	1.00	$ \mathbf{x} $						0.	0.	0.
(31) A.C. HONEYCUTT, JR.	1.00	A			$\vdash \vdash$		┢╌	0.	<u> </u>	<u> </u>
MEMBER	1.00	$ \mathbf{x} $						0.	0.	0.
(32) KEITH LEGGET	1.00	A			$\vdash$		<del>                                     </del>	0.	0.	<u></u>
	1.00	$ \mathbf{x} $					Ì	0.	0.	^
MEMBER COLUMN EDER	1 00	₽		_	$\vdash$		├	0.	0.	0.
(33) J. DIXON FREE	1.00			ν,				۱	0	^
CHAIR	1 00	X		X	$\vdash\vdash$		-	0.	0.	- 0.
(34) CHERYL B. PAPPAS	1.00	<b>  ,,</b>		,,						
VICE CHAIR	1 00	Х	<u> </u>	X	$\vdash\vdash$			0.	0.	0.
(35) W. WAYNE HIGGINS	1.00	<b> </b>								•
TREASURER		Х		Х	Ш		<u> </u>	0.	0.	0.
(36) WILL DAVIS	1.00	<b>↓</b>								
SECRETARY		Х		X			<u> </u>	0.	0.	0.
(37) DAN G. LUNSFORD	60.00	]		_					_	
PRESIDENT		Ш		X	Ш		ļ	171,475.	0.	7,716.
(38) RANDELL N. TILLEY	50.00	]	ļ						_	
VP-FINANCE		Ш		X				100,839.	0.	8,965.
(39) JOHN W. WELLS	45.00	]								
VP-ACADEMICS		Ш			Ш	Х		124,369.	0.	10,023.
(40) HAROLD G. CHRISTMAN	40.00	]				ŀ				
VP-INSTITUTIONAL ADVANCEMENT			L		Ш	X	L	109,303.	0.	9,345.
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Total to Part VII, Section A, line 1c								505,986.		36,049.
Total to Fait VII, Decidit A, IIIIe To									L	/

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Date Filed: 7/12/2013 4:00:00 PM
Effective: 8/15/2013
Elaine F. Marshall
North Carolina Secretary of State
C201318200546

# ARTICLES OF AMENDMENT TO THE CHARTER OF MARS HILL COLLEGE ("Corporation")

The undersigned Corporation hereby executes these Articles of Amendment for the purpose of amending its Charter:

The Corporation's Board of Trustees adopted the following amendment to the Charter of the Corporation on the 10<sup>th</sup> day of May, 2013 to become effective August 15, 2013, in the manner prescribed by law:

Resolved, that the Charter of Mars Hill College be amended as follows:

- Article One The name of this Corporation shall be changed to MARS HILL UNIVERSITY effective August 15, 2013.
- Article Two The street address and mailing address of the Corporation's registered office and principal office is Blackwell Administration Hall, 120 Cascade Street, Mars Hill, Madison County, North Carolina 28754. The Corporation's registered agent at its registered office is Dan G. Lunsford.

Article Three The period of existence of this Corporation is unlimited.

#### **Article Four**

- Section 4.1 The purpose of this Corporation shall continue to be as heretofore, to wit: to operate Mars Hill University.
- Section 4.2 This Corporation shall have no members.
- Section 4.3 This Corporation shall be managed and controlled in accordance with law by the Board of Directors (herein referred to as the Board of Trustees), the members of which shall be designated trustees and shall be elected as provided in the Bylaws of the Corporation.
- Section 4.4 The value of the real and personal property owned and belonging to said Corporation shall be unlimited.
- In the event of the dissolution of this Corporation, all profits and assets of the Corporation shall be paid and delivered to such charitable, educational or benevolent organizations as may be determined by the Board of Trustees, provided each such organization to which any assets are paid and delivered shall be exempt from Federal Income Tax under Section 501(c)(3) of the Internal Revenue Code of 1986 as

amended (or the corresponding provisions of any future United States Internal Revenue Law) or any organization to which contributions are deductible under Section 170(c)(2) of the Internal Revenue Code of 1986 as amended (or of the corresponding provisions of any future United States Internal Revenue Law).

#### Section 4.6

The Board of Trustees shall have power to adopt amendments to this Charter in accordance with law.

#### Section 4.7

The officers of the Board of Trustees shall be the Chair, Vice Chair, Secretary, and Treasurer, who shall be elected at such times and in such a manner as shall be provided for in the Bylaws of this Corporation. The elected Chair may appoint an Assistant Secretary and/or Assistant Treasurer to assist the Secretary and Treasurer, respectively.

#### Section 4.8

A simple majority of the voting members of the Board of Trustees shall constitute a quorum for the transaction of any business at regular or called meetings of the Board except in placing a mortgage or lien upon any part of the property or in selling any part of the property owned by the University, in which case a quorum shall consist of two-thirds (2/3) of the members of the Board. At each meeting of the Board it may consider any business or work properly before it and appoint the necessary committees to carry on any ordinary business of said Board pursuant to the bylaws of the Corporation. The Chair of the Board shall be an ex-officio member of all other committees of the Board of Trustees; provided further. that special meetings of the Board may be called by the Chair of the Board of Trustees, or by the President of the University at any time and for any purpose by giving written notice to the members by registered or certified, return receipted mailing or receipted courier, stating the specific purpose of said meeting. Notice of any special meeting must be issued no less than ten (10) calendar days in advance of such meeting and no more than sixty (60) calendar days before the meeting date.

#### Section 4.9

The President of the Corporation shall be selected by the Board of Trustees and shall hold office at its pleasure and shall have such duties and responsibilities as have been authorized by the Board of Trustees and or the Bylaws.

#### Section 4.10

The Board of Trustees shall have full right and power to enact such bylaws, rules, and regulations as to them seem

best for the government of the students, faculty and employees of said Corporation and the President of the Corporation shall be the executive officer to enforce the same.

- Section 4.11 The Board of Trustees has the power and authority to do any and all things necessary to operate Mars Hill University.
- Section 4.12 Hazing in any form of students at Mars Hill University is hereby declared to be unlawful pursuant to the provisions of Article 9 of Chapter 14 of the General Statutes of North Carolina.
- That the faculty of Mars Hill University, consisting of the President, professors, and teachers, by and with the consent and approval of the Board of Trustees, shall have the power, privilege, and the authority of conferring degrees or marks of literary distinction upon such persons as they deem entitled thereto in accordance with the normal practice and usage of colleges, universities and institutions of higher learning and distinction in other parts of the country.
- Section 4.14 All laws and clauses of laws in conflict with this act are thereby repealed.
- Section 4.15 This act shall be in full force and take effect from and after its ratification.

The number of trustees of the Corporation currently is 36. The number of trustees present at said meeting was 29. The number of trustees constituting a quorum is 19. The number of trustees who voted for such amendment was 29 and the number of trustees who voted against such amendment was zero.

There are no members of the Corporation having voting rights. This Amendment received affirmative vote of a majority of the trustees in office.

This Amendment to take effect the 15<sup>th</sup> day of August, 2013 at 12:01 a.m.

MARS HILL COLLEGE

an M- undal, Preside

By Joseph Dixon Free By Willis Mintson Davis Secretary