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DLN: 93493134003104

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

2012

OMB No 1545-0047

Open to Public Inspection

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

B Check if a Address ch Name cha Initial retu Terminate Amended Application I Tax-exem J Website	Doing Business As Number and street (or P O box if mail is not delivered to street address) 201 MARYLAND HALL Suite City or town, state or country, and ZIP + 4 RICHMOND, VA 231730001	E Telephor (804) 4	ver identification number 05965 ne number 484-1523
Name cha Initial retu Terminate Amended Application I Tax-exem	Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 201 MARYLAND HALL Suite City or town, state or country, and ZIP + 4 RICHMOND, VA 231730001 F Name and address of principal officer EDWARD L AYERS	E Telephoi (804)4	ne number
Initial retu Terminate Amended Application	Number and street (or P O box if mail is not delivered to street address) Room/suite 201 MARYLAND HALL Suite City or town, state or country, and ZIP + 4 RICHMOND, VA 231730001 F Name and address of principal officer EDWARD L AYERS	(804)	
Terminate Amended Application	return on pending F Name and address of principal officer EDWARD L AYERS	(804)	
Amended Application I Tax-exem	Suite City or town, state or country, and ZIP + 4 RICHMOND, VA 231730001 F Name and address of principal officer EDWARD L AYERS		484-1523
Application I Tax-exem	F Name and address of principal officer EDWARD L AYERS		
I Tax-exem	F Name and address of principal officer EDWARD L AYERS	G Gross re	
	EDWARD L AYERS		eceipts \$ 807,037,924
		H(a) Is this a group	
		affiliates?	Γ Yes Γ No
	RICHMOND, VA 231730001	H(b) Are all affiliates	sincluded? Tyes TNo
		If "No," attach	a list (see instructions)
J Website	mpt status	H(c) Group exemption	on number ►
	e: ► WWW RICHMOND EDU	(5)	
K Form of or	rganization	L Year of formation 183	M State of legal domicile V
Part I	Summary		
	Briefly describe the organization's mission or most significant activities		
	TO OPERATE A UNIVERSITY FOR ACADEMIC, SCIENTIFIC, AND PROFESSION	ONAL EDUCATION A	ND LEARNING
Governance 5			
፼ `			
⊈ 2	Check this box 🔭 if the organization discontinued its operations or disposed of	more than 25% of its	net assets
<u>ලි</u>	,		
	Number of voting members of the governing body (Part VI, line 1a) $$. $$. $$.	<u> </u>	3 2:
Activities &	Number of independent voting members of the governing body (Part VI, line 1b)		4 19
5 5	Total number of individuals employed in calendar year 2012 (Part V, line 2a) $$.		5 4,77
្ទី 6	Total number of volunteers (estimate if necessary)		6 1,92
l l	Total unrelated business revenue from Part VIII, column (C), line 12		7a 13,119,158
ь	Net unrelated business taxable income from Form 990-T, line 34		7b 4,107,06
		Prior Year	Current Year
a 8	Contributions and grants (Part VIII, line 1h)	17,222,7	
ੂੰ 9	Program service revenue (Part VIII, line 2g)	181,340,7	
9 10 11	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	131,805,8	
**	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	26,506,2	53 30,636,117
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	356,875,6	41 447,569,000
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	69,661,7	69 70,955,963
14	Benefits paid to or for members (Part IX, column (A), line 4)		0 (
. 15	Salaries, other compensation, employee benefits (Part IX, column (A), lines		
8	5-10)		<u> </u>
क्व 16a		60,9	78 47,491
표 b			
17		79,868,1	
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		
	Revenue less expenses Subtract line 18 from line 12		
ම් ජි කිරි			End of Year
हैं हुँ इंट्रेड 20	Total assets (Part X, line 16)	2,268,771,8	10 2,509,346,486
문 - 및 21	Total liabilities (Part X, line 26)	271,889,8	
출발 22	Net assets or fund balances Subtract line 21 from line 20	1,996,881,9	
Part II			
13 14 15 888 16a b 17 18 19	Grants and similar amounts paid (Part IX, column (A), lines 1–3) Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) ▶10,819,350 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12	135,788,4 60,9 79,868,1 285,379,3 71,496,3 Beginning of Curren Year	69 70,95 0 53 146,27 78 4 29 93,64 29 310,91 12 136,65 tt End of Year
<u>يُّ هِ</u>		Year	End of Year
受力 21			
· · · · · · · · · · · · · · · · · · ·			
Part II		, ,	, , , , , , , , , , , , , , , , , , , ,
Jnder pena ny knowled	alties of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete Declaration of preparer (other that as any knowledge	n officer) is based on a	
o: -	Signature of officer	2014-05-13 Date	
Sign Here		Date	
Here	DAVID HALE VP FOR BUS & FIN, TREAS Type or print name and title		
	<u> </u>	, , <u>– , , , , , , , , , , , , , , , , ,</u>	DTIN
	Print/Type preparer's name Preparer's signature Dat	Check if self-employed	PTIN
		L seu-citibioxed I	
Paid	Firm's name PricewaterhouseCoopers LLP	Firm's EIN 🕨	
Paid Prepare	er <u> </u>	Firm's EIN 🕨	
	er		414-1000

Form	990	(2012)

age 2

Form	1990 (2012)				Page 2
Par	Statement of Program Check if Schedule O contain				٧
1	Briefly describe the organization's	mission			
THA PRO YEAI FACI PRO "SUS MEM	MISSION OF THE UNIVERSITY OF SUPPORTS THE PERSONAL DEVENSE, THE UNIVERSITY'S STRATES THE LARGER PURPOSE IS TOUTH OF THE STRATEGICS TO A COLLABORATIVE LEARN BERS AND THE CREATION OF NEPOSE, THOUGHTY, A	ELOPMENT OF ITS MEGIC PLAN, ESTABLIS OPERATE AS A MODE ERING THE INSTITUT PLAN AIMS TO FULF: ING AND RESEARCH WKNOWLEDGE A RIG	EMBERS AND THE C SHES HOW RICHMON EL INSTITUTION OF TION WITH THE HIG ILL THE MISSION ES COMMUNITY THAT S CHMOND EDUCATIO	REATION OF NEW KNOWLED ID WILL PURSUE ITS MISSIO HIGHER EDUCATION, SUSTA HEST STANDARDS OF INNOV TABLISHED BY THE BOARD OF SUPPORTS THE PERSONAL D N PREPARES STUDENTS TO	GE THE RICHMOND N FOR THE NEXT FIVE AINING A SUPERB VATION AND OFTRUSTEES TO DEVELOPMENT OF ITS LIVE LIVES OF
2	Did the organization undertake any the prior Form 990 or 990-EZ? .			r which were not listed on	
	If "Yes," describe these new service	es on Schedule O			
3	Did the organization cease conductions services?	ting, or make significar	nt changes in how it co	nducts, any program	
	If "Yes," describe these changes o	n Schedule O			
4	Describe the organization's progra expenses Section 501(c)(3) and the total expenses, and revenue, if	501(c)(4) organizations	s are required to repor		
4a	(Code) (Expense	es \$ 146,679,376	ıncludıng grants of \$	70,955,963) (Revenue \$	169,108,151)
	INSTRUCTION - SEE SCHEDULE O				
4b	(Code) (Expense	es \$ 37,175,300	ıncludıng grants of \$) (Revenue \$)
	ACADEMIC SUPPORT - SEE SCHEDULE O				
4c	(Code) (Expense	es \$ 39,640,186	including grants of \$) (Revenue \$	32,338,723)
40	AUXILIARY ENTERPRISES - SEE SCHEDUI		including grants of \$) (Revenue \$	32,330,723)
4d	Other program services (Describ	e ın Schedule O)			
	(Expenses \$ 31,067,1	18 including grants o	of \$) (Revenue \$)
4e	Total program service expenses	254,561,980			

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 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^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
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		No
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		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part x^{*}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

GI I	Statements Regarding Other 1RS Fillings and Tax Compliance			-
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 6,464		103	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
•	gaming (gambling) winnings to prize winners?	1c	Yes	
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	by this return	2b	Yes	
		_		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
l	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	Does the organization have applied gross resourts that are namedly groster than \$100,000 and did the	5c		N 1
•	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	<u></u>		
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	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.	-		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

Form 990 (2012) Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section 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			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	<u>even</u> u		e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b				
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a		No
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			
b 12a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		Yes	
b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	11a 12a		
b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	11a 12a 12b	Yes Yes Yes	
b 12a b c	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	11a 12a 12b	Yes Yes	
b 12a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	11a 12a 12b 12c 13	Yes Yes Yes	
b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a 12a 12b 12c 13	Yes Yes Yes	
b 12a b c 13 14 15	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
b 12a b c 13 14 15 a b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	N o

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►LAURIE F MELVILLE 201 MARYLAND HALL RICHMOND, VA (804) 484-1523

Form	990	(2012)
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

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

	1	1		(C)						
(A) Name and Title	(A) Name and Title A verage hours per week (list any hours for related					heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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

(A) Name and Title		Name and Title A verage hours per week (list any hours				oox, an	heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-		(F) Estima mount o compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganizati relate organiza	d
											_		
											+		
											-		
1b	Sub-Total			<u> </u>		<u> </u>		▶ -			+		
c	Total from continuation sheet	s to Part VII, S	ection A	۸.				Þ					
d 	Total (add lines 1b and 1c) . Total number of individuals (in	cluding but not	limited:	to the	nse l	ıste	d abov	►	7,792,338		0		3,463,815
_	\$100,000 of reportable compe	_					u ubov	C) W	no received more an	1411			
												Yes	No
3	Did the organization list any fo on line 1a? <i>If</i> " <i>Yes,"</i> complete S					key •	emplo	yee, •	or highest compen	sated employee	3	Yes	
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ										5		No
Se	ection B. Independent Co	ntractors											
1	Complete this table for your five											ax vear	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
RVA CONSTRUCTION LLC , 515 HULL ST RICHMOND VA 23224	CONSTRUCTION	4,960,766
THE CAPSTONE CONTRACTING COMPANY , 4235 INNSLAKE DR SUITE 110 GLEN ALLEN VA 23060	CONSTRUCTION	1,587,415
VIRTEXCO CORPORATION , 7840 FOREST HILL AVE SUITE A RICHMOND VA 23225	CONSTRUCTION	1,332,062
SHAW SPORTS TURF , MAIL DROP 266 PO BOX 630862 CINCINATTI OH 45263	GOODS & SERVICES	1,115,613
RICOH MANAGEMENT SERVICES , PO BOX 4245 CAROL STREAM IL 60197	MAIL SVC / EQUIP RNT	903,591
3. Total number of independent contractors (including but not limited to those listed ab	agua) who recound more than	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \(\blacktriangle 63 \)

Part V		Statement o	f Revenue					Page 9
			ıle O contains a respoi	nse to any question			<u></u>	<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
u 2	1a	Federated cam	paigns 1a					
ant	ь	Membership du	es 1b					
Gr.	С	Fundraising eve	ents 1c					
ifts, ar A	d	Related organiz	ations 1d					
, Gi	e	Government grants	s (contributions) 1e	3,034,901				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f	23,812,324	}			
outi her	•	sımılar amounts no	t included above		ļ	ļ		
ıti 101	g	Noncash contribute 1a-1f \$	ons included in lines	1,246,101				
Con1 and	h	Total. Add lines	s 1a-1f	· · · •	26,847,225			
- O				Business Code				
enu	2a	TUITION & FEES		611600	168,869,484	168,869,484		
æ	Ь	AUXILIARY ENTERF	PRISES	900099	18,200,115	17,700,174	499,941	
ИСе	С	SUMMER CAMPS &	CONFERENCES	900099	649,532		649,532	
Ser	d							
an	e	All other progra	am corvice revenue					
Program Serwce Revenue	f	_	im service revenue					
	g 3	Total. Add lines			187,719,131			
	3		ome (including dividen ar amounts)		111,271,925		-1,464,863	112,736,788
	4	Income from inves	tment of tax-exempt bond	proceeds 🕨	96,378			96,378
	5	Royalties			60,985	60,985		
	6a	Gross rents	(ı) Real 3,473,826	(II) Personal				
	b	Less rental	, ,					
	С	expenses Rental income	3,473,826	0				
	d	or (loss) Net rental incoi	me or (loss)		3,473,826			3,473,826
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	442,102,753					
	b	Less cost or other basis and	350,565,741	538,788				
	c	sales expenses Gain or (loss)	91,537,012	-538,788				
	d	Net gaın or (los	s)		90,998,224			90,998,224
nue	8a	Gross income f events (not inc \$	luding					
Other Revenue			reported on line 1c)					
the	b		penses b					
J	c 9a		loss) from fundraising	events 🛌	0			
	94	See Part IV, lin	rom gaming activities e 19 a					
	b		penses b		_]			
	с 10а	Gross sales of returns and allo		vities	Ü			
	_		a	21,862,655				
	b		oods sold b	8,364,395	13,498,260	13,428,091	70,169	
	C	Miscellaneous	loss) from sales of inv	Business Code	15,750,200	15,420,031	,0,109	
	11a	RFMC MANAGI		525990	12,761,222		12,761,222	
	b	OTHER MISCE		900099	841,824	238,667	603,157	
	С							
	d	All other reven	ue					
	е	Total. Add lines	s 11a-11d	🕨	13,603,046			
	12	Total revenue.	See Instructions .	· · · · •	447,569,000	200,297,401	13,119,158	207,305,216
					,233,000			Form 990 (2012)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 67,306,758 67,306,758 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 3,649,205 3,649,205 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 5,647,589 888,843 4,758,746 key employees . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 110,403,754 92,369,971 12,256,079 5,777,704 Pension plan accruals and contributions (include section 401(k) 8,429,558 7,240,331 735,008 and 403(b) employer contributions) 454.219 12,105,647 505,523 Other employee benefits 13,340,927 729,757 10 8,449,145 999,495 435,069 7,014,581 11 Fees for services (non-employees) 0 Management 208,118 10,037 198,081 Legal 313,196 1,000 312,196 0 47,491 Professional fundraising services See Part IV, line 17 47,491 0 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 11,048,826 8,321,985 2,052,716 674,125 Schedule O) Advertising and promotion . . 993,872 852,130 40,537 12 101,205 13 Office expenses 16,643,441 9,794,911 5,640,644 1,207,886 2,351,184 161,539 14 Information technology . . . 2,536,713 23,990 15 0 Royalties . 5,288,142 5,244,261 43,881 16 Occupancy **17** 6,615,436 5,670,327 516,163 428,946 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings . 0 20 7,339,746 5,997,190 1,342,556 Payments to affiliates 21 0 18,836,265 22 Depreciation, depletion, and amortization . 14,720,569 4,115,696 23 1,352,719 712,997 639,722 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) a PURCHASE OF RFMC INTERESTS 6,798,134 6,798,134 RFMC MANAGEMENT FEE EXPENSE 1,391,364 1,391,364 LIBRARY BOOKS & MATERIALS 5,054,732 5,047,574 2,425 4,733 d EQUIP RENTAL & MAINTENANCE 2,963,313 1,476,574 1,423,195 63,544 6,259,645 3,785,905 1,603,059 870,681 e All other expenses Total functional expenses. Add lines 1 through 24e 25 310,918,089 254,561,980 45,536,759 10,819,350 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)

Part X Balance Sheet

Pal	C A	Check if Schedule O contains a response to any question in	this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		119,020,756	2	202,844,709
	3	Pledges and grants receivable, net		12,424,573	3	12,879,818
	4	Accounts receivable, net		2,514,185	4	2,492,572
	5	Loans and other receivables from current and former officer key employees, and highest compensated employees Com Schedule L	plete Part II of	59,663	5	0
Assets	6	Loans and other receivables from other disqualified persons section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c)(beneficiary organizations (see instructions) Complete Part	3)(B), and contributing 9) voluntary employees'	0	6	0
82	7	Notes and loans receivable, net		4,385,622	7	4,477,879
ď	8	Inventories for sale or use		2,010,049	8	1.940.390
	9	Prepaid expenses and deferred charges		9,161,534	9	7,905,252
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 607,524,835	, ,	9	7,900,232
	ь	Less accumulated depreciation	10b 314,358,539	289,193,386	100	293,166,296
	11	Investments—publicly traded securities	, ,	53,708,134	11	51,297,517
	12	Investments—other securities See Part IV, line 11		1,769,716,520	12	1,925,950,178
	13	Investments—program-related See Part IV, line 11		0	13	1,020,000,170
	14	Intangible assets		0	14	
	15	Other assets See Part IV, line 11		6,577,388	15	6,391,875
	16	Total assets. Add lines 1 through 15 (must equal line 34)		2,268,771,810	16	2,509,346,486
	17			26,458,864	17	35,816,106
		Accounts payable and accrued expenses	20,438,864	18	33,810,100	
	18	Grants payable	12,066,752	19	12,459,506	
	19		· · ·			
	20	Tax-exempt bond liabilities		173,951,311	20	232,538,618
S	21	Escrow or custodial account liability Complete Part IV of S		0	21	0
Liabiliti	22	Loans and other payables to current and former officers, dir key employees, highest compensated employees, and disqu	ualified			_
<u></u>		persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third pa		0	23	0
	24	Unsecured notes and loans payable to unrelated third partie		0	24	0
	25	Other liabilities (including federal income tax, payables to r and other liabilities not included on lines 17-24) Complete	Part X of Schedule	59,412,887	25	46,443,453
	26	D		271,889,814	26	327,257,683
	20	Organizations that follow SFAS 117 (ASC 958), check here		271,000,014	20	327,237,000
φ		lines 27 through 29, and lines 33 and 34.	r p and complete			
ř	27	Unrestricted net assets		980,826,558	27	1,083,889,795
<u> </u>	28	Temporarily restricted net assets		683,535,364	28	752,171,139
=	29	Permanently restricted net assets		332,520,074	29	346,027,869
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), chec		,==,,		, -=-,
or F		complete lines 30 through 34.				
S	30	Capital stock or trust principal, or current funds		30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fun	d		31	
As	32	Retained earnings, endowment, accumulated income, or oth			32	
Šet	33	Total net assets or fund balances		1,996,881,996	33	2,182,088,803
Z	34	Total liabilities and net assets/fund balances		2,268,771,810	34	2,509,346,486
	1		<u> </u>		1	

Par	TEXT Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		447,!	569,000
2	Total expenses (must equal Part IX, column (A), line 25)	2		310,9	918,089
3	Revenue less expenses Subtract line 2 from line 1	3		136,6	550,911
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			 381,996
5	Net unrealized gains (losses) on investments	5			
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		18.6	508,136
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			088,803
Par	t XII Financial Statements and Reporting				•
	Check if Schedule O contains a response to any question in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revial separate basis, consolidated basis, or both	ewed or	ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepassis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	d 3b	Yes	

Software ID: Software Version:

EIN: 54-0505965

Name: UNIVERSITY OF RICHMOND

Form 990, Part VII - Compensation of Compensated Employees, and Indepen			Trı,	ıste	ees,	, Key	En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related
	hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
R LEWIS BOGGS TRUSTEE	2 0	Х						0	0	0
ALAN W BREED TRUSTEE	2 0	х						0	0	0
TIMOTHY W FINCHEM TRUSTEE	2 0	х						0	0	0
ROGER L GREGORY TRUSTEE	2 0	x						0	0	0
MELANIE L HEALEY TRUSTEE	2 0	×						0	0	0
SUSAN M HUMPHREVILLE TRUSTEE	2 0	×						0	0	0
RICHARD S JOHNSON TRUSTEE	2 0	×						0	0	0
CHARLES A LEDSINGER JR RECTOR	7 0 0 0	×		х				0	0	0
PAUL B QUEALLY TRUSTEE	2 0	x						0	0	0
PATRICIA L ROWLAND VICE-RECTOR	7 0 0 0	x		х				0	0	0
ROBERT S UKROP TRUSTEE (THROUGH 12/2012)	2 0	x						0	0	0
ALLISON P WEINSTEIN TRUSTEE	2 0	X						0	0	0
LYNNE E WASHINGTON TRUSTEE	2 0 0 0	Х						0	0	0
JEFFREY M LACKER TRUSTEE	2 0	Х						0	0	0
ANN CAROL MARCHANT TRUSTEE	2 0 0 0	Х						0	0	0
LELAND D MELVIN TRUSTEE	2 0 0 0	Х						0	0	0
LEONARD W SANDRIDGE JR TRUSTEE	2 0 0 0	х						0	0	0
SUZANNE F THOMAS TRUSTEE	2 0 0 0	х						0	0	0
EDWARD L AYERS PRESIDENT	40 0 0 0	х		х				870,088	0	230,682
STEPHEN J ARONSON TRUSTEE (AS OF 7/2012)	2 0 0 0	х						0	0	0
HERBERT H MCDADE III TRUSTEE (AS OF 7/2012)	2 0 0 0	х						0	0	0
WILLIAM H MCLEAN TRUSTEE (AS OF 7/2012)	2 0 0 0	х						0	0	0
MICHAEL S SEGAL TRUSTEE (AS OF 1/2013)	2 0 0 0	х						0	0	0
HOSSEIN SADID VP BUSINESS & FINANCE/TREAS	40 0 0 0			х				363,615	0	51,679
STEPHEN ALLRED PROVOST & VP ACAD AFFAIRS	40 0 0 0			×				328,218	0	52,074

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

Compensated Employees, and Indepe	ndent Contra	actors	,		,	,				
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted	Positio more unless and direct or direct	(Con (do than pers office	o not n one son i er an trust	e box is bot nd a stee)	c, oth	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
THE LOUIS PREFERENCE	line) 40 0		Î	_	+	sated				
ANN LLOYD BREEDEN SECRETARY	0 0	<u> </u>	<u> </u>	х		<u> </u>		209,606	0	31,476
SRINIVAS PULAVARTI PRES , SMC (THROUGH 6/2012)	40 0 0 0				x			888,127	0	962,014
KATHRYN MONDAY VP, INFO SERVICES	40 0 0 0				х			215,152	0	29,976
STEPHEN BISESE VP, STUDENT DEVELOPMENT	40 0 0 0				х			199,713	0	39,393
LORRAINE SCHUYLER CHIEF OF STAFF	40 0 0 0				х			152,067	0	38,092
ANNE TESSIER VP ENROLLMENT MGMT	40 0 0 0				x			199,311	0	31,880
KATHLEEN SKERRETT DEAN, ARTS & SCIENCES	40 0 0 0				х			222,577	0	29,265
WENDY PERDUE DEAN, LAW	40 0 0 0				х			343,624	0	50,510
ROBIN BLANDFORD PRESIDENT, SMC	40 0 0 0				х			692,278	0	1,279,330
STEPHEN KNEELEY CEO, SPIDER MANAGEMENT COMPANY	40 0 0 0				х			576,279	0	34,013
CHRISTOPHER MOONEY BASKETBALL COACH	40 0 0 0					х		744,617	0	400,524
DANIEL ROCCO FOOTBALL COACH	40 0 0 0					х		360,775	0	76,897
GILL HICKMAN PROFESSOR	40 0 0 0					х		338,970	0	14,320
DARYL DANCE PROFESSOR	40 0 0 0					х		306,643	0	8,147
MATTHEW WERNER ASSOC DIRECTOR, SMC	40 0 0 0					х		293,727	0	32,682
ANDREW NEWCOMB FORMER DEAN, ARTS & SCIENCES	40 0 0 0						х	236,689	0	35,743
JOHN DOUGLASS FORMER DEAN, LAW	40 0						x	250,262	0	35,118

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134003104

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

UNIVERSITY OF RICHMOND

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Open to Public Inspection

									54-0505		
Pai				blic Charity Sta						instruction	s.
	rganı		•	te foundation becaus	•			•	•		
1	<u> </u>		•	ion of churches, or a				section 170((b)(1)(A)(i).		
2	고			d in section 170(b)(1			· ·				
3				perative hospital se							
4				h organization opera	ted ın conjur	nction with a	hospital des	cribed in se	ection 170(b)	(1)(A)(iii).	Enter the
5	_			ity, and state erated for the benefi	t of a college	or univers	ity owned or	nerated by	a dovernmen	ntal unit des	cribed in
,	ı	_	•	(A)(iv). (Complete P	_	e or univers	ity owned or t	pperated by	a governmen	itai uiiit ues	scribed iii
•	_				•	tal wait dag	aribad in cast	ian 170(h)(1)(A)()		
6	<u>'</u>			local government o						£	
7 8	' 	describ	oed in sectio	at normally receives on 170(b)(1)(A)(vi). : described in sectio r	(Complete F	Part II)		_	ental unit or	from the ge	neral public
9	<u>'</u>		-				-	-	hutions man	nharchin fac	as and dross
9	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of										
	its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses										
	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)										
10	10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).										
11	_							t the nurnoses 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	<u>t</u> hat descr	ibes <u>th</u> e type of supp	or <u>tı</u> ng organ	ıızatıon and	complete line	es 11e th <u>ro</u>	ugh 11h		
	_		Type I				=				· -
е	Γ	othert	han foundat	ox, I certify that the ion managers and ot							
f			1509(a)(2)	received a written de	otormination	from the I	OC that it is a	Typo I Tyr	ao II or Tyn	n III cunno	ting organization
•			this box	received a written d	eceriiiiiacioii	i iioiii tile II	(5 that it is a	Type I, Typ	be II, or Type	e III Suppoi	
g		Since	August 17,	2006, has the organ	ızatıon acce _l	pted any gıf	t or contribut	ion from any	of the		,
			ng persons?							`	
				rectly or indirectly o	*		_	i persons de	escribed in (ii	_	Yes No
				governing body of th		_	n /				lg(i)
		• •	•	er of a person descr			a bayya 2				g(ii)
				lled entity of a persong information about						111	g(iii)
h 		PTOVIG	e the followi	ng illiormation about	the support	eu organiza	tion(s)				
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is		(v) Did yo		(vi) Is		(vii) A mount of
	uppoi			organization	organizat		the organ		organiza		monetary
or	ganiz	ation		(described on lines 1- 9 above	col (i) lis your gove		ın col (i) suppo		col (i) or in the l		support
				or IRC section	docume		Зарро		III the t	<i>.</i> 5 .	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	7
Total											

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,	 	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493134003104

OMB No 1545-0047

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.

Open to Public

	me of the organization VERSITY OF RICHMOND		Emp	loyer identification number
				0505965
Pa	rt I Organizations Maintaining Donor Ac organization answered "Yes" to Form 99		unds	or Accounts. Complete if the
		(a) Donor advised funds		(b) Funds and other accounts
L	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
ŀ	Aggregate value at end of year			
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		or adv	rsed Yes No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the bend conferring impermissible private benefit?			
Pa	rt III Conservation Easements. Complete	if the organization answered "Yes" to	o Forn	n 990, Part IV, line 7.
L 2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held easement on the last day of the tax year	Preservation of an Preservation of a c	ertifie	ncally important land area d historic structure n of a conservation
	easement on the last day of the tax year	Γ		Held at the End of the Year
а	Total number of conservation easements	ľ	2a	ricia de the End of the Fedi
b	Total acreage restricted by conservation easements		 2b	
c	Number of conservation easements on a certified his	toric structure included in (a)	2c	
d	Number of conservation easements included in (c) achistoric structure listed in the National Register	` '	2d	
3	Number of conservation easements modified, transfe	rred released extinguished or terminate	d by th	ne organization during
	the tax year ►	Trea, releasea, extingaishea, er terminate	u D, ti	ie organización daring
	,			
	Number of states where property subject to conserva			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		lling of	violations, and Yes No
5	Staff and volunteer hours devoted to monitoring, insp	ecting, and enforcing conservation easem	nents (during the year
	A mount of expenses inclured in monitoring increase.			a the year
7	Amount of expenses incurred in monitoring, inspecting \$	ig, and emorcing conservation easements	uuiiii	g tile year
3	Does each conservation easement reported on line 2 and section 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion 1	70(h)(4)(B)(ı)
)	In Part XIII, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easem	he footnote to the organization's financial		
ar	Organizations Maintaining Collectio Complete if the organization answered "	ns of Art, Historical Treasures, o	or Ot	her Similar Assets.
La	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide, in Part XIII, the text of the footnote	116 (ASC 958), not to report in its reven sets held for public exhibition, education, o	or rese	arch in furtherance of public
b	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar ass service, provide the following amounts relating to the	sets held for public exhibition, education, o		
	(i) Revenues included in Form 990, Part VIII, line 1			► \$
	(ii) Assets included in Form 990, Part X			► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS		r finan	cial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1			▶ \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	ollections of Art,	<u>, His</u>	tori	cal Tre	asures, or ()the	<u>r Similar</u>	Asse	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	sion, and other record	ds, ch	necka	any of the	e following that	are a	significant	use of	its	
а	Public exhibition		d	굣	Loan or	exchange prog	rams	;			
b	Scholarly research		e	Γ	Other						
c											
4	Provide a description of the organization's c Part XIII	ollections and explai	ın hov	w the	y further t	the organizatio	n's ex	xempt purpo:	se in		
5	During the year, did the organization solicit							nılar	_		_
D	assets to be sold to raise funds rather than							/a		Yes	✓ No
Pal	Part IV, line 9, or reported an air						eu r	es to Fori	11 990),	
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?						sets	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follov	ving t	able						
									Amou	ınt	
C	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 F	orm 990, Part X, line	21?						Γ	Yes	Г No
ь	If "Yes," explain the arrangement in Part XI	II Check here ıf the	expla	natio	n has be	en provided in	Part	XIII			<u> </u>
Pa	rt V Endowment Funds. Complete										
1_	Degraping of week helenge	(a)Current year 1,874,291,569		Prior ye	ear b ((c)Two years back 1,631,928,74.	+	Three years ba 1,393,253,9	-		ears back 17,377,490
la L	Beginning of year balance	12,917,272			219,571	17,549,61	_	105,146,7	_		1,382,356
b	Contributions	12,917,272		10,2	119,371	17,549,01	1	103,140,7	17		1,302,330
С	Net investment earnings, gams, and losses	230,944,400		50,8	81,421	317,202,71	6	138,996,4	08	-25	1,435,539
d	Grants or scholarships						1				
е	Other expenditures for facilities and programs	78,604,938		81,8	390,794	77,517,80	9	5,468,3	52	6	4,070,335
f	Administrative expenses	963,249		9	37,918	1,143,97	9				
g	End of year balance	2,038,585,054	1	.,874,2	91,569	1,888,019,28	9	1,631,928,7	42	1,39	3,253,972
2	Provide the estimated percentage of the cui	rrent year end balanc	e (lın	ie 1g,	. column ((a)) held as					_
а	Board designated or quasi-endowment 🕨	50 000 %									
b	Permanent endowment ► 16 000 %										
С	Temporarily restricted endowment ► 34	000 %									
	The percentages in lines 2a, 2b, and 2c sho	ould equal 100%									
За	Are there endowment funds not in the posse	ession of the organiza	ation	that a	are held a	ınd admınıstere	d for	the			
	organization by							г	- (:\	Yes	No
	(i) unrelated organizations						•	<u> </u>	3a(i) 3a(ii)	Yes	
b	(ii) related organizations						•	· · · [3b	Yes	<u> </u>
4	Describe in Part XIII the intended uses of t	·					•			1	<u> </u>
Par	t VI Land, Buildings, and Equipm					•					
	Description of property				Cost or oth (investme			(c) Accumula depreciatio		(d) Boo	ok value
1a	Land					21,174	1,657		$\neg \uparrow$	2	1,174,657
b	Buildings					368,708	3,278	165,882	,321	20	2,825,957
c	Leasehold improvements						0		0		0
d	Equipment					89,868	3,450	78,830	,180	1	1,038,270
						127,773	3,450	69,646	,038	5	8,127,412
	I. Add lines 1a through 1e (Column (d) must	equal Form 990, Part X	(, colu	ımn (l	B), line 10)(c).)				29	3,166,296
								Schedu	le D (I	orm 9	90) 2012

Part VII Investments—Other Securities. See		
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests (3)Other		
(A) INVESTMENTS- HEDGE FUNDS	1,309,553,308	F
(D) INVESTMENTS DRIVATE FOURTY	402.006.561	-
(B) INVESTMENTS- PRIVATE EQUITY	403,806,561	F
(C) INVESTMENTS- OTHER FUNDS	205,300,347	F
(D) INVESTMENTS OTHER INVESTMENTS	5 055 151	-
(D) INVESTMENTS- OTHER INVESTMENTS	6,066,151	F
(E) INVESTMENTS- COMMINGLED FUNDS	1,223,811	F
	+	
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	1,925,950,178	
Part VIII Investments—Program Related. Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Tabel (Calumn (h) much aqual Farm 000, Darb V, cal (D) line 12.)	-	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, II	ne 15	
(a) Descri		(b) Book value
		, i
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
FUNDS HELD BY OTHERS	254,083	
ANNUITIES PAYABLE	6,042,408	
POST RETIREMENT BENEFITS	13,750,796	
INTEREST RATE SWAP LIABILITY	21,835,240	
US GOVERNMENT GRANTS REFUNDABLE	4,560,926	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	46,443,453	
		on's financial statements that reports the

Part 1		er support per audited financial statem				1	eturn
2		ut not on Form 990, Part VIII, line 12	1	ا ا			
a b	_	tments	F	2a 2b		1	
С		:s		2c		1	
d	Other (Describe in Part XIII))	[2d			
e	Add lines 2a through 2d .		• •			2e	
3 4	Subtract line 2e from line 1 . Amounts included on Form 99	00, Part VIII, line 12, but not on line 1				3	
а		luded on Form 990, Part VIII, line 7b		4a			
b	Other (Describe in Part XIII))	. [4b			
C -	Add lines 4a and 4b		 T. luna 1			4c	
5 Part		d 4c. (This must equal Form 990, Part Expenses per Audited Financia				5 per	Return
1		r audited financial statements				1	
2		ut not on Form 990, Part IX, line 25			ı		
a b		acılıtıes		2a 2b		+	
c	Other losses			2c		1	
d	Other (Describe in Part XIII))		2d]	
e	_					2e	
3 4	Subtract line 2e from line 1 .	0, Part IX, line 25, but not on line 1 :				3	
		luded on Form 990, Part VIII, line 7b		4a			
b	Other (Describe in Part XIII))		4b]	
С	Add lines 4a and 4b					4c	
5 Part	Total expenses Add lines 3 a **********************************	nd 4c. (This must equal Form 990, Par formation	t I, line	18)		5	
Comp	lete this part to provide the de	scriptions required for Part II, lines 3,					
Part V Inform		, lines 2d and 4b, and Part XII, lines 2	d and 4	b Als	o complete this part to	provid	le any additional
	Identifier	Return Reference			Explanat	ion	
PART I	II, LINE 1A		1		RSITY'S COLLECTION NT ARTIFACTS, SCIEN		
			ART O	BJECT	'S ARE HELD FOR EDI	JCATI	ION, RESEARĆH,
					INQUIRY, AND PUBL OT REFLECTED IN TH		
			1		ATED FINANCIAL STA C TOPIC 958, ACCOL		•
			CONT	RIBUT	IONS RECEIVED AND	CON	TRIBUTIONS MADE
PARTI	II, LINE 4				Y OWNS SEVERAL TH USED FOR TEACHING		
			1		RESERVED SO FUTUR E THEM THE LIBRAR		
			PORTE	RAITS	OF FIGURES ASSOCI	ATED	WITH THE
			FIGUR	ES AS	SOCIATED WITH THE	E UNI\	VERSITY'S HISTORY
			1		4ILE SHEETS OF MED ON DISPLAY THE CO		•
			1		Y MUSEUMS INCLUDE .ATIVE ARTS, RANGII		
			CULTU	JRES I	N GREECE AND CHIN	ІА ТО	CONTEMPORARY
			NATIC	NAL,	ART, AND SPANNING . AND INTERNATIONA	LORI	GIN THE
			1		Y MUSEUMS PROVIDE CIATION, KNOWLEDG		
					HIP OF ART, CULTURA N-CAMPUS AND TRA		STORY, AND SCIENCE
			scho	LARLY	PUBLICATIONS, AND	DACA	DEMIC AND PUBLIC
			1		NAL PROGRAMS THES OURSES, LECTURES, G		
					ES, WORKSHOPS, COI NTS THE UNIVERSIT		
			ANDR	ESEA	RCH ACTIVITIES CO TIONAL MISSION OF	MPLEN	MENT AND SUPPORT
			RICHM	10 N D	BY BEING INTEGRAT	ED WI	THTHE
					Y'S ACADEMIC PROG ACULTY, AND STAFF		
					PS, RESEARCH FELLO Y POSITIONS FOR ST		
DART	/ LINE /		 		OFFERINGS	CON	
PARIV	/, LINE 4		1		RSITY'S ENDOWMENT TELY 1,300 INDIVID		UNDS ESTABLISHED
			1		ETY OF PURPOSES SUBUTIONS TO EDUCA		
			1		THE SPENDING POLIC TEET CURRENT OPER		
			UNIVE	RSIT	Y BY PROVIDING YEA	R-TO-	-YEAR BUDGET
			PO WE	ROFT	AND PROTECTING TH THE ENDOWMENT ASS		
PART X	(, LINE 2	UNCERTAIN TAX POSITION	<u> </u>		INFLATION RSITY RECEIVED A LE	TTFR	FROM THE
	•	FOOTNOTE	INTER	NALR	EVENUE SERVICE DA THE UNIVERSITY FR	ATED	SEPTEMBER 1941,
			RELAT	EDIN	COME UNDER SECTI	O N 50)1(C)(3) OF THE
			ANDS	MC AI	RE LIMITED LIABILIT	Y COR	D QUADRANGLE, LLC RPORATIONS, WHICH
			1		ATELY PASS ALL OF T VERSITY RFMC IS A		
			1		ON AND THE RICHM IP REMC AND THE R		
			RECO	RD PR	OVISIONS FOR INCO	META	XES BECAUSE THE
			SHARE	OFT	ND PARTNERS, RESPE HE ENTITIES' INCOM	1E O R	LOSS ON THEIR
					X RETURNS TAX POS GNIZED BASED ON A		NS ARE RECOGNIZED RE LIKELY THAN
			NOT"	THRES		INCO	ME TAX POSITIONS
			GREAT	TER TH	HAN 50% LIKELY OF E	BEING	REALIZED
			REFLE	CTED	N RECOGNITION OR I IN THE PERIOD IN W	HICH	A CHANGE IN
			OREX	PECTI	OCCURS THIS APPLI ED TO BE TAKEN ON A	А ТАХ	RETURN THE
					Y RECOGNIZES INTER GNIZED TAX BENEFI		
			RELAT	EDTO	UNRECOGNIZED TA PAYABLE AND ACCR	XBEN	NEFITS IN
			ASSES	SSED	NO INTEREST EXPEN	SEOR	R PENALTIES HAVE
			JUNE 3	30,20	GNIZED AS OF AND F 13 AND 2012 FOR A	LL O P	EN TAX YEARS, THE
			1		Y HAS ANALYZED FIL AL, STATE AND FOREI		OSITIONS IN ALL OF JRISDICTIONS
			WHERE	E IT IS	REQUIRED TO FILE	INCO	
			ORGA	NIZAT	ION THE UNIVERSI	ΓΥ BEL	LIEVES ITS INCOME
			1		POSITIONS WILL BE NOT ANTICIPATE AN		
			1		T IN A MATERIAL CH. AS OF JUNE 30, 2013		
			REMAI	IN SUI	BJECT TO EXAMINAT	ÍON B	
					EAR 2006 FORWARD		OF ETHILIMITONS 15

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As Filed Data -

DLN: 93493134003104

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

UNIVERSITY OF RICHMOND

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.

Employer identification number

	54-0505965			
Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4	Does the organization maintain the following?	1	Yes	
	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4a 4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
ь	Admissions policies?	5b		No
c	: Employment of faculty or administrative staff?	5c		No
	Scholarships or other financial assistance?	5d		No
	• Educational policies? Use of facilities?	5e		No
	Athletic programs?	5f 5g		No No
	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
62	Does the organization receive any financial aid or assistance from a governmental agency?		Yes	
	has the organization's right to such aid ever been revoked or suspended?	6b	, 23	No
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

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

ldentifier	Return Reference	Explanation
PART I, LINE 3		A POLICY OF NON-DISCRIMINATION IS CONTAINED IN ALL UNIVERSITY CATALOGS AND GENERAL SEARCH PUBLICATIONS WHICH ARE SENT TO HIGH SCHOOLS IN STATES WHERE STUDENTS ARE RECRUITED, AND IN ENROLLMENT APPLICATIONS ON-LINE CATALOGS ALSO CONTAIN THE POLICY
PART I, LINE 6A		FEDERAL AND STATE FUNDS ARE USED TO FINANCE STUDENT AID PROGRAMS A COMPLETE LIST OF AGENCIES AND AMOUNTS IS ON FILE

Schedule E (Form 990 or 990-EZ) 2012

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As Filed Data -

DLN: 93493134003104

2012

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

3a Sub-total

to Part I

b Total from continuation sheets

c Totals (add lines 3a and 3b)

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

Interna	al Revenue Service						Inspection
	ne of the organization VERSITY OF RICH					Employer iden 54-0505965	tification number
Pa			n on Activition		he United States. Co		zation answered
1	assistance, the	grantees' elig	gibility for the	grants or assis	s to substantiate the a stance, and the selecti	on criteria used to aw	ard
2	For grantmake the United State		n Part V the or	ganızatıon's p	rocedures for monitori	ng the use of grant fu	ınds outsıde
3	Activites per Reg	jion (The follow	ving Part I, line 3	3 table can be d	uplicated if additional spa	ace is needed)	
	(a) Regior	1	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
	See Add'l Data				Tagett,		

31

31

1,204,278,501

1,204,278,501

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nu	mher of other or	nanizations or en	tities					

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

-						
	Daul III		اممامماني	.£ = d d .1. = = = 1		
	Parrill	can be	amblicated	if additional	SDACE IS	needed
		cuii bc	aapiicatca	n auaitionai	Space 13	niccaca.

Part III Call De	e duplicated if additio	nai space is n	eeueu.	1	•		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD SCHOLARSHIPS	Central America and the Caribbean	5	83,349	STUDENT ACCT		N/A	Other
STUDY ABROAD SCHOLARSHIPS	East Asia and the Pacific	57	621,824	STUDENT ACCT		N/A	Other
STUDY ABROAD SCHOLARSHIPS	Europe (Including Iceland and Greenland)	264	2,459,404	STUDENT ACCT		N/A	Other
STUDY ABROAD SCHOLARSHIPS	Middle East and North Africa	6	118,922	STUDENT ACCT		N/A	Other
STUDY ABROAD SCHOLARSHIPS	South America	19	212,186	STUDENT ACCT		N/A	Other
STUDY ABROAD SCHOLARSHIPS	South Asia	5	•	STUDENT ACCT		N/A	Other
STUDY ABROAD SCHOLARSHIPS	Sub-Saharan Africa	9	108,240	STUDENT ACCT		N/A	Other
							-ll- E (E 000) 2012

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<u> </u>	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	▽	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	굣	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	굣	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	▽	Yes	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	₽	No

Schedule F (Form 990) 2012

Part V Supplemental Information

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

Identifier	ReturnReference	Explanation
PART I, LINE 2		GRANTS AWARDED TO INDIVIDUALS OUTSIDE THE UNITED STATES BY THE UNIVERSITY OF RICHMOND CONSIST OF FINANCIAL AID IN THE FORM OF SCHOLARSHIPS AND GRANTS TO STUDENTS STUDYING ABROAD STUDENTS RECEIVING THESE GRANTS ARE DETERMINED TO BE WORTHY ON THE BASIS OF THE UNIVERSITY'S ASSESSMENT OF ACADEMIC ACHIEVEMENT, FINANCIAL NEED AND OTHER SIMILAR CRITERIA THE OFFICE OF FINANCIAL AID MONITORS STUDENTS' ELIGIBILITY FOR THESE FUNDS IN ACCORDANCE WITH INSTITUTIONAL POLICIES AND

Additional Data

Software ID: Software Version:

EIN: 54-0505965

Name: UNIVERSITY OF RICHMOND

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America & the Caribbean			Investments		1,089,470,813
Europe (Including Iceland and Greenland)			Investments		41,987,000
North America			Investments		35,877,016

Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region						
Sub-Saharan Africa			Investments		31,998,846						
East Asia and the Pacific		6	Program Services	STUDY ABROAD	462,563						
Europe (Including Iceland and Greenland)		22	Program Services	STUDY ABROAD	774,967						

Form 990 Schedule F	<u>Part I - Activit</u>	ies Outside T	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa		1	Program Services	STUDY ABROAD	47,800
South America		2	Program Services	STUDY ABROAD	10,291
Central America & the Caribbean			Grantmakıng		83,349

Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region						
East Asia and the Pacific			Grantmakıng		621,824						
Europe (Including Iceland and Greenland)			Grantmakıng		2,459,404						
Middle East and North Africa			Grantmakıng		118,922						

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
South America			Grantmakıng		212,186			
South Asia			Grantmakıng		45,280			
Sub-Saharan Africa			Grantmaking		108,240			

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DLN: 93493134003104

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

Name of the organization		
UNIVERSITY OF RICHMOND		

Employer identification number

54-0505965

Part I	Fundraising Activities.	Complete if the org	ganızatıon answered	"Yes" to	Form 990,	Part IV,	line 17.
--------	-------------------------	---------------------	---------------------	----------	-----------	----------	----------

Indicate whether the organization raised funds through any of the following activities. Check all that apply

а	Mail solicitations			е	Solicitation of non	i-government grants		
b	b F Internet and email solicitations f				Solicitation of government grants			
c	Phone solicitations			g	✓ Special fundraisin	g events		
d	✓ In-person solicitation	s		_	·			
2a	Did the organization have or key employees listed in						√ _{Yes} Γ N	
b	If "Yes," list the ten highe to be compensated at leas			undraisei	rs) pursuant to agreeme	ents under which the fun	draiser is	
	(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrai cust cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
			Yes	No				
	WASHBURN MCGOLDRICK 950 NEW LOUDON RD	FUNDRAISING CONSULTING		No		47,491	-47,491	
	LATHAM, NY 12110							
		-						
Tota	ıl			>		47,491	-47,491	
3	List all states in which the licensing	organization is regis	tered or lı	censed to	solicit funds or has be	een notified it is exempt	from registration or	
AL,	AZ, CA, CT, DE, FL, GA, HI	, ID, IL, IN, IA, KS, I	KY, LA, ME	, MD, MI	,MN,MS,MO,MT,NE	, NV, NJ, NM, NY, NC, N	D, OH, OK, PA, RI, SC	

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribu	cion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lin	ne 18, or reported es 1 and 6b. List
		<u> </u>	(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
_			(event type)	(event type)	(total number)	(3)
Revenue	1	Gross receipts				
9. 9.	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
en.	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ğ	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .				
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		()
	11	Net income summary Combine Ii	ne 3, column (d), and Iır	e 10		
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
<u>—</u>		\$13,000 ON TOTAL 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c))
<u>R</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
			☐ Yes	┌ Yes	┌ Yes	
	6	Volunteer labor	□ No	│ No	┌ No	
	7	Direct expense summary Add lines	s 2 through 5 ın column	(d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in co	lumn (d)	🛌	
9	Ent	er the state(s) in which the organiza	ation operates gaming a	ctivities		
а		the organization licensed to operate				. 「Yes 「No
b	If"	No," explain				
10a b		re any of the organization's gaming Yes," explain	icenses revoked, suspe	ended or terminated during	the tax year?	

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address 🟲			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
		activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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DLN: 93493134003104 OMB No 1545-0047

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

Open to Public

Department of the Treasury

Schedule I

(Form 990)

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

nternal Revenue								Inspection
lame of the org: JNIVERSITY	anization OFRICHMOND						Employer identification	on number
Dowl T	O						54-0505965	
1 Does th	General Information ne organization maintain rection criteria used to awa ne in Part IV the organizat	ecords to substantia ard the grants or ass	ate the amount of the					Γ Yes Γ I
	Grants and Other As Form 990, Part IV, line							es" to
orga	and address of anization overnment	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grai or assistance
	otal number of section 50 otal number of other orgar							
or Paperwork	Reduction Act Notice, see	the Instructions for F	orm 990.		Cat No 50055P		Schedu	le I (Form 990) 2012

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 can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STUDENT GRANTS & SCHOLARSHIPS	2412	67,306,758		O ther	N/A

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

Identifier	Return Reference	Explanation
PART I, LINE 2		GRANTS AWARDED TO INDIVIDUALS BY THE UNIVERSITY OF RICHMOND CONSIST OF STUDENT FINANCIAL AID IN THE FORM OF SCHOLARSHIPS AND GRANTS STUDENTS RECEIVING THESE GRANTS ARE DETERMINED TO BE WORTHY ON THE BASIS OF THE UNIVERSITY'S ASSESSMENT OF ACADEMIC ACHIEVEMENT, FINANCIAL NEED AND OTHER SIMILAR CRITERIA THE OFFICE OF FINANCIAL AID MONITORS STUDENTS' ELIGIBILITY FOR THESE FUNDS IN ACCORDANCE WITH INSTITUTIONAL POLICIES AND STANDARDS

DLN: 93493134003104

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization UNIVERSITY OF RICHMOND

Employer identification number

54-0505965

Pa	rt I Questions Regarding Compensation	on				
					Yes	No
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part I					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses of			1b		No
2	Did the organization require substantiation prior to directors, trustees, and the CEO/Executive Direct				V	
	directors, trastees, and the eloyexcedive birect	or, regure	ing the items effected in the 14	2	Yes	
3	Indicate which, if any, of the following the filing org organization's CEO/Executive Director Check all used by a related organization to establish comper	that apply	·			
	▼ Compensation committee	굣	Written employment contract			
	✓ Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	I✓	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	l paymen	t?	4a	Yes	
b	Participate in, or receive payment from, a supplem	ental non	qualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c	Yes	
	If "Yes" to any of lines 4a-c, list the persons and p	provide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only n	nust comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section a compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section a compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b	Yes	
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section a payments not described in lines 5 and 6? If "Yes,"			7		Νo
8	Were any amounts reported in Form 990, Part VII,	paid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described		tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow to section 53 $4958-6(c)$?	he rebutta	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) 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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2012

Part IIII Supplemental Information

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

Also complete this part for any additional information

Identifier	Return Reference	Explanation
PART I, LINE 1A		FIRST-CLASS OR CHARTER TRAVEL - THE FOOTBALL AND MEN'S BASKETBALL COACHES OCCASIONALLY TRAVEL WITH THEIR TEAMS BY MEANS OF CHARTER TRAVEL FOR SCHEDULED COMPETITIONS THE VALUE IS NOT TREATED AS TAXABLE COMPENSATION HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE - THE PRESIDENT IS REQUIRED TO LIVE ON CAMPUS IN A UNIVERSITY-PROVIDED HOME AS A CONDITION OF EMPLOYMENT THE VALUE OF THIS LODGING IS NOT REPORTED AS TAXABLE COMPENSATION HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES - CLUB MEMBERSHIP DUES ARE PAID ON BEHALF OF ONE EMPLOYEE WHERE THE MEMBERSHIP IS AN IMPORTANT FACTOR IN THE PERFORMANCE OF THE EMPLOYEE'S JOB RESONSIBILITIES THE VALUE OF THE MEMBERSHIP DUES IS NOT INCLUDED IN TAXABLE COMPENSATION, HOWEVER, ANY PERSONAL USE OF CLUB FACILITIES IS REPORTED AS TAXABLE COMPENSATION
PART I, LINE 1B		THE PROVISION OF NON-STANDARD BENEFITS IS DETERMINED BY THE PRESIDENT, FOR SENIOR LEADERS AND KEY EMPLOYEES, AND THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES, FOR THE PRESIDENT FACTORS CONSIDERED ARE WHETHER THE BENEFIT UNDER CONSIDERATION IS COMMONLY PROVIDED TO INDIVIDUALS IN SIMILAR POSITIONS AT SIMILAR ORGANIZATIONS, WHETHER THE BENEFIT IS NECESSARY FOR THE INDIVIDUAL TO SUCCESSFULLY FULFILL HIR OR HER JOB RESPONSIBILITIES, AND WHETHER, IN THE CONTEXT OF THE INDIVIDUAL'S OVERALL COMPENSATION, THE PROVISION OF THE NON-STANDARD BENEFIT IS REASONABLE
PART I, LINE 4A		SRINIVAS PULAVARTI RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$228,033
PART I, LINE 4B		EDWARD AYERS DEFERRED \$50,000 IN A SECTION 457(F) PLAN AND RECEIVED A DISTRIBUTION OF \$250,000 AS OF THE FIRST VESTING DATE DURING CALENDAR 2012 CHRISTOPHER MOONEY DEFERRED \$359,625 IN A SECTION 457(F) PLAN DANIEL ROCCO DEFERRED \$50,000 IN A SECTION 457(F) PLAN
PART I, LINE 4C		SRINIVAS PULAVARTI AND ROBIN BLANDFORD ARE MEMBERS OF A LIMITED LIABILITY COMPANY THROUGH WHICH THEY ACCRUE AN INTEREST IN THE NET CAPITAL PROFITS BASED ON A CONTRACTUALLY DEFINED VESTING SCHEDULE MR PULAVARTI'S EQUITY INTEREST ACCRUED DURING CALENDAR 2012 TOTALED \$928,078 MR BLANDFORD'S EQUITY INTEREST ACCRUED DURING CALENDAR 2012 TOTALED \$1,239,102 THESE ACCRUALS ARE REPORTED AS DEFERRED COMPENSATION IN PART II, COLUMN (C) THE UNIVERSITY PURCHASED THEIR MEMBERSHIP INTERESTS ON JUNE 30, 2012 SEE SCHEDULE L, PART IV, FOR DETAILS OF THE BUYOUT OF MR PULAVARTI'S AND MR BLANDFORD'S EQUITY INTERESTS
PART I, LINE 6B		SRINIVAS PULAVARTI AND ROBIN BLANDFORD ARE MEMBERS OF A LIMITED LIABILITY COMPANY THROUGH WHICH THEY RECEIVE DISTRIBUTIONS OF NET INCOME BASED ON THEIR MEMBERSHIP PERCENTAGE THE UNIVERSITY PURCHASED THEIR MEMBERSHIP INTERESTS ON JUNE 30, 2012 FOR CALENDAR YEAR 2012, MR PULAVARTI RECEIVED \$273,557 IN EQUITY DISTRIBUTIONS, AND MR BLANDFORD RECEIVED \$212,767

Software ID: Software Version:

EIN: 54-0505965

Name: UNIVERSITY OF RICHMOND

(A) Name	,	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
EDWARD L AYERS	(I) (II)		0 0	388,324	92,000	138,682 0	1,100,770 0	250,000
HOSSEIN SADID	(ı) (ıı)) 352,364) 0	0	11,251	35,867 0	15,812 0	415,294 0	(
STEPHEN ALLRED	(ı) (ıı)		0	8,337	32,952 0	19,122	380,292 0	(
ANN LLOYD BREEDEN	(ı) (ıı)		0	41,138	19,317 0	12,159	241,082	(
SRINIVAS PULAVARTI	(I) (II)		396,000	229,712	953,078 0	8,936 0	1,850,141	(
ANDREW NEWCOMB	(I) (II)		0	44,665	24,006 0	11,737 0	272,432	(
JOHN DOUGLASS	(I) (II)) 205,601) 0	0 0	44,661	24,941 0	10,177	285,380	(
KATHRYN MONDAY	(I) (II)		0] ""	21,627	8,349 0	245,128	(
STEPHEN BISESE	(I) (II)		0	138	20,872	18,521	239,106	(
LORRAINE SCHUYLER	(I) (II)		0		16,434 0	21,658	190,159	(
ANNE TESSIER	(ı) (ıı)		0	138	20,591	11,289	231,191	(
KATHLEEN SKERRETT	(I) (II)		0	2,330	22,183 0	7,082 0	251,842 0	(
WENDY PERDUE	(I) (II)		0	9,541	34,283 0	16,227 0	394,134 0	(
CHRISTOPHER MOONEY	(I) (II)		10,000	287,171	384,625 0	15,899 0	1,145,141	(
DANIEL ROCCO	(I) (II)		0	116,636	62,462 0	14,435 0	437,672 0	(
ROBIN BLANDFORD	(I) (II)) 300,761) 0	373,889 0	17,628	1,264,102	15,228 0	1,971,608	(
GILL HICKMAN	(ı) (ıı)) 85,872) 0	0	253,098	8,769 0	5,551 0	353,290 0	(
DARYL DANCE	(ı) (ıı)) 59,050) 0	0	247,593	7,873 0	274 0	314,790 0	
MATTHEW WERNER	(ı) (ıı)		120,606	5,876	17,390 0	15,292	326,409	
STEPHEN KNEELEY	(I) (II)) 423,920	135,284	17,075	_	17,013	610,292	

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493134003104

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization

UNIVERSITY OF RICHMOND

Part I Bond Issues

Employer identification number

54-0505965

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	(f) Description of purpose		(g) De	feased	beha	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	VIRGINIA COLLEGE BUILDING AUTHORITY	54-1249154	927781YF5	02-28-2011	45,587,682 REFU		REFUND PRIOR ISSUE			x		×		Х	
В	VIRGINIA COLLEGE BUILDING AUTHORITY	54-1249154	9277803U8	08-05-2004	15,06	9,000	REFU	UND PRIOR	ISSUE		Х		х		Х
c –	VIRGINIA COLLEGE BUILDING AUTHORITY	54-1249154	9277802U8	08-05-2004	30,93			NSTRUCT SO LDING & FO			Х		х		Х
D	VIRGINIA COLLEGE BUILDING AUTHORITY	54-1249154	927781CR3	11-08-2006	38,07	0,000	REFU	UND PRIOR	ISSUE		Х		х		Х
Pa	rie III Proceeds			•						•			'		
						1	В		С				D		
1_							0 0				0			0	
	Amount of bonds legally defea	sed			0		0			0			0		
3	Total proceeds of issue				45,587,682		:	15,069,000	31,070,37		0,375		38,	070,000	
4	Gross proceeds in reserve fun				0		0			0			0		
5	Capitalized interest from proc				0		0	0 0				0			0
6	Proceeds in refunding escrows				0		0	0 0				0	0 0		
7	Issuance costs from proceeds				502,682		682	2 69,000		141,136		1,136	140,000		
8	Credit enhancement from proc						0		0			0			30,000
9	Working capital expenditures	<u>·</u>					0	0 0				0			0
10	Capital expenditures from pro-	ceeds					0		0		30,929	9,239			0
11	O ther spent proceeds				4	5,085,	000	-	15,000,000			0		37,	900,000
12	O ther unspent proceeds						0		0			0			0
13	Year of substantial completion			20	11		19	96	20	006			1997		
					Yes	No		Yes	No	Yes	+	lo	Yes		No
14	Were the bonds issued as part	t of a current refundı	ng issue?		Х			Х			<u> </u>	<u> </u>	Х		
15	Were the bonds issued as part	t of an advance refur	nding issue?			Х			Х		\	<			Χ
16	Has the final allocation of proceeds been made?							Х		X			X		

Private Business Use

allocation of proceeds?

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х				×		
2	Are there any lease arrangements that may result in private business use of bond-financed property?		Х				Х		

Χ

Does the organization maintain adequate books and records to support the final

Χ

Х

Χ

Part Private Business Use (Continued) C D Α В Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Х Х of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-Х Х financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside d Х counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 0% 0 00000% 0 00000% 0% other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 0% 0 00000% 0 00000% 501(c)(3) organization, or a state or local government Total of lines 4 and 5 0% 0 00000% 0 00000% Does the bond issue meet the private security or payment test? 7 Χ Χ Has there been a sale or disposition of any of the bond financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of % % % % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Χ Χ 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Х Х Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage В С D Α Yes Yes No No Yes No Yes No Has the issuer filed Form 8038-T? 1 Χ Χ Χ Х If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Χ Χ Exception to rebate? b Х Χ Χ Χ No rebate due? Х Х c Χ Χ If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was a hedge terminated?

Pa	rt IV Arbitrage (Continued)								
		Δ	1	Е	3	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х		Х		х
b	Name of provider	0		0		0		0	
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		Х		Х		Х		Х
7	Has the organization established written procedures to monitor the requirements of section 148?	х		х		Х		X	
Pa	rt V Procedures To Undertake Corrective Action								
		Δ.		E	3	С		D	

ı	Fait	FIOCEGGICS	10 Ollder take	COLLECTIVE ACTION
1				

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

Α		В		С		D			
Yes	No	Yes	No	Yes	No	Yes	No		
x		×		×		х			

Part VI Supplemental Inf	Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).											
Identifier	Return Reference	Explanation										
PART II, LINE 3		THE AMOUNT REPORTED ON PART II, LINE 3 FOR CUSIP# 927781E75 INCLUDES \$96,372 OF INVESTMENT INCOME RECEIVED ON THE UNEXPENDED PROCEEDS PART IV, LINE 2C CUSIP# 9277803U8 - REBATE COMPUTATION PERFORMED 8/17/09, CUSIP# 9277802U8 - REBATE COMPUTATION PERFORMED 3/24/10										

Schedule K (Form 990) 2012

DLN: 93493134003104

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection**

Name of the organization

Employer identification number

UNI	NIVERSITY OF RICHMOND												54-0505965				
Pa	art I Bond Issues																
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(1	(f) Description	n of purpose	(g)	(g) Defeased		(h) On behalf of issuer		Pool ncing		
			1				<u> </u>			Ye	es No	Yes	No	Yes	No		
A	VIRGINIA COLLEGE BOARD AUTHORITY	54-1249154	927781CR3	11-08-2006	17,83	30,000	CONSTRUCT DORM & BOILER PLANT				X		×		Х		
В	VIRGINIA COLLEGE BOARD AUTHORITY	54-1249154	927781YD0	02-01-2011	29,84	16,165	REF	REFUND PRIOR ISSUE			х		х		Х		
c _	VIRGINIA COLLEGE BOARD AUTHORITY	61,68	34,083		NSTRUCT ST NOV ARENA	DNT HOUS	&	Х		х		х					
Pa	rt III Proceeds																
			Α	1		В	,		С		D						
1	A mount of bonds retired				0		0		0								
2	A mount of bonds legally defeas			0		0			0								
3	Total proceeds of issue			18,447,	,484	2	29,846,165		61,78	80,455							
4	Gross proceeds in reserve fund				0		0			0							
5	Capitalized interest from proce	eeds					0		0			0					
6	Proceeds in refunding escrows	ŝ					0		0			0					
7	Issuance costs from proceeds	5				66,	66,980 231,165				549,940						
8	Credit enhancement from proc	eeds				14,282 0		0									
9	Working capital expenditures f	from proceeds					0		0		,	0					
10	Capital expenditures from proc	ceeds				18,366,	,222		0		11,7	20,707					
11	O ther spent proceeds						0	2	29,615,000			0		,			
12	O ther unspent proceeds						0		0		49,50	09,808					
13	Year of substantial completion	1			200	09		200	06								
					Yes	No		Yes	No	Yes	;	No	Yes		No		
14	Were the bonds issued as part	t of a current refundi	ing issue?			Х		X				Х					
15	Were the bonds issued as part	t of an advance refu	nding issue?			Х			Х			Х					
16	Has the final allocation of proc	ceeds been made?			×			х				Х					
17	Does the organization maintain allocation of proceeds?	ort the final	Х			Х		Х									
Pai	rt 💵 Private Business U	Jse															
					<u> </u>	·		В			c			D			
					Yes	No.	,	Yes	No	Yes	د	No	Yes		No		

property financed by tax-exempt bonds?

financed property?

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

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

Χ

Χ

Χ

Part Private Business Use (Continued) C D Α В Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Х Х of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? Are there any research agreements that may result in private business use of bond-Х Х financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside Х Х counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 0% 0 00000% 0% other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 0% 0 00000% 501(c)(3) organization, or a state or local government Total of lines 4 and 5 0% 0 00000% % % Does the bond issue meet the private security or payment test? 7 Χ Χ Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Х issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of 0 00000% % 0 00000% % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections Χ Χ 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Х Х Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage В С D Α Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T? 1 Χ Χ Χ If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Χ Exception to rebate? b Х Χ Χ No rebate due? c Х Χ Χ If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was a hedge terminated?

Pai	t IV Arbitrage (Continued)								
		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×		Х		Х		
b	Name of provider	0		0		0			
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		Х		X		
7	Has the organization established written procedures to monitor the requirements of section 148?	Х		X		X			
Pa	rt V Procedures To Undertake Corrective Action								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		×		Х			

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

Identifier Return Reference Explanation

Schedule K (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134003104

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Transactions with Interested Persons

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

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

2012

Open to Public Inspection

Name of the orga UNIVERSITY OF RICH										En	ploye	r identii	fication	numbe	r
											-050				
	s Benefit Tra te if the organiza													Ωb	
	of disqualified pe					etween dis		23	(c) Descrip					d) Corr	ected?
• ()			1 ' '			organızatı							<u> </u>	res	No
2 Enter the am 4958		red by	y organiza	ition ma	anag	gers or disc	qualified per	sor	ns during the	yearı	ınder	section •			
3 Enter the am		v on	line 2 ahr	 nve rei	ımbu	rsed by th	e organizatio	on.			•	- \$			
	•		•			•	a organizaci	• • • • • • • • • • • • • • • • • • • •			•	٠ ٠			
	ns to and/or							1		00	O D	t T1/ 1	- 26 -	6 &	
	olete if the organ iization reported							, III	ie 38a, or Fo	rm 99	о, Раг	t IV, IIn	e 26, 0	rirthe	
(a) Name of	(b) Relationsh	p (c)) Purpose	(d) L	oan	to	(e)Origin		(f) Balance		In	(h		(i)Wr	
ınterested person	with organization	on	of loan	or fro			principal amount		due	defa	ıult?	A ppro		agreer	nent?
person				organi	Zuci	011						committee?			
				То		From				Yes	No	Yes	No	Yes	No
		_												_	
														_	
		+						+						_	
														_	
														_	
otal				>					0						
	ts or Assista plete if the org							art	IV, line 27.						
(a) Name of inte	, , ,		nship bet		(c)	Amount o	fassistance	9	(d) Type of	fassis	tance	(e)	Purpos	e of ass	ıstance
person	Inter		person ar anızatıon	id the											
		5													
								_							
								_							

Part IV Business Transactions Involving Interested Persons.

	Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.										
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	f zatıon's						
				Yes	No						
(1) NATHANIEL B AYERS	FMLY MMBR OF OFFCR/TRSTEE	49,752	COMPENSATION PAID AS EMPLOYEE		No						
(2) WILTON COMPANIES	UR TRUSTEE IS OFFICER	175,689	LEASE OFFICE SPACE BY UNIVRSTY		No						
(3) PROPERTY INVESTMENT ADVISORS	UR OFCR/TRSTE IS 50% OWNR	1,533,586	INVESTMNT MGMT SVCS TO REL ORG		No						
(4) ROBIN BLANDFORD	UR KEY EMPLOYEE	1,861,151	UR PURCHASE OF RFMC INTEREST		No						
(5) SRINIVAS PULAVARTI	UR KEY EMPLOYEE	4,936,983	UR PURCHASE OF RFMC INTEREST		No						

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
PART IV, LINE 3		DURING THE UNIVERSITY'S 2012 TAX YEAR, IT CAME TO OUR ATTENTION THAT INFORMATION PREVIOUSLY PROVIDED TO US REGARDING FEES PAID TO PROPERTY INVESTMENT ADVISORS FOR INVESTMENT MANAGEMENT SERVICES DURING THE 2011 TAX YEAR WAS INACCURATE THE CORRECT AMOUNT WHICH SHOULD HAVE BEEN REPORTED IN SCHEDULE L OF THE UNIVERSITY'S 2011 FORM 990 IS \$5,171,830

Schedule L (Form 990 or 990-EZ) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493134003104

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

Noncash Contributions

Inspection

Name of the organization **Employer identification number** UNIVERSITY OF RICHMOND 54-0505965 Part I Types of Property (a) (b) (c) (d) Check Number of contributions Noncash contribution Method of determining or items contributed amounts reported on noncash contribution amounts ıf applicable Form 990, Part VIII, line 1 g 20 0 SEE PART II 1 Art-Works of art Χ 2 Art—Historical treasures **3** Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles 7 Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . 147 1,218,333 MARKET QUOTATION 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests 12 Securities-Miscellaneous . . 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . . 15 Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . . 18 Collectibles **19** Food inventory . . . 4,953 DONOR ASSESSED VALUE 20 Drugs and medical supplies . **21** Taxidermy Historical artifacts . . . 23 Scientific specimens . . **24** Archeological artifacts . . USE OF PERSONAL 22,815 DONOR ASSESSED VALUE Other►(AIRCRAFT) Other ▶(__ 27 Other►(_ 28 Other ► (Number of Forms 8283 received by the organization during the tax year for contributions 29 1 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a No **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Νo **b** If "Yes," describe in Part II 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

describe in Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

number of items received, or a combination of both. Also complete this part for any additional information.										
I dentifier	Return Reference	Explanation								
PART I, COLUMN (B)		THE AMOUNTS SHOWN IN PART I, COLUMN (B) FOR "NUMBER OF CONTRIBUTIONS" REPRESENTS THE TOTAL NUMBER OF ITEMS CONTRIBUTED AND NOT NECESSARILY THE TOTAL NUMBER OF CONTRIBUTIONS CONTRIBUTED								
PART I, LINE 33		DONATED ARTWORK IS HELD FOR PURPOSES OF EDUCATION, RESEARCH, SCIENTIFIC INQUIRY AND PUBLIC EXHIBITION AS PERMITTED UNDER FASB ASC TOPIC 958 AND DISCLOSED IN ITS FINANCIAL STATEMENTS, THE UNIVERSITY HAS ELECTED NOT TO REPORT THE VALUE OF THESE ITEMS AS REVENUE IN ITS STATEMENT OF ACTIVITIES								

Schedule M (Form 990) (2012)

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As Filed Data -

DLN: 93493134003104

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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public
Inspection

Name of the organization UNIVERSITY OF RICHMOND

Employer identification number

54-0505965

ldentifier	Return Reference	Explanation
FORM 990, PART III, PROGRAM SERVICE ACCOMPLISHMENTS		PART III, LINE 4A - INSTRUCTION - THE UNIVERSITY OF RICHMOND ENDEAVORS TO OFFER ITS STUDENTS THE HIGHEST QUALITY EDUCATION POSSIBLE, MAKING AVAILABLE TOP-OF-THE-LINE RESOURCES AND FACILITIES BY MAINTAINING AN 8 1 FACULTY TO STUDENT RATIO, EACH STUDENT HAS THE OPPORTUNITY TO BYJOY A PERSONAL AND UNIQUE LEARNING EXPERIENCE. THE KEY CHARACTERISTICS OF THE UNIVERSITY'S INSTRUCTIONAL FOUNDATION ARE A CHALLENGING LEARNING ENVIRONMENT, SMALL CLASSES, A HIGH QUALITY OF STUDENT LIFE, A COORDINATE COLLEGE SYSTEM, A COMMITMENT TO SERVICE, OPPORTUNITIES FOR MORAL AND SPIRITUAL DEVELOPMENT, A MIXTURE OF ENRICHING ACADEMIC AND CO-CURRICULAR EXPERIENCES, A SENSE OF COMMUNITY, AND A SPIRIT OF INNOVATION THERE ARE APPROXIMATELY 4,361 STUDENTS PART III, LINE 4B - ACADEMIC SUPPORT - THE RESPECTIVE DEAN'S OFFICES OF EACH OF THE FIVE SCHOOLS OVERSEE THE MAINTENANCE AND DEVELOPMENT OF THE SCHOOL TO BYSURE THAT THEY MAINTAIN THE HIGH LEVEL OF ACADEMIC INTEGRITY THAT HAS BECOME THE STANDARD OF THE UNIVERSITY OF RICHMOND THE UNIVERSITY OFFIERS OPPORTUNITIES FOR CONTINUING EDUCATION IN EACH PROFESSOR'S SPECIALTY, PLUS IN NEW TEACHING METHODS AND TECHNOLOGY, WHILE FACULTY COMMITTEES WORK TOWARD CONTINUOUS IMPROVEMENT IN ALL AREAS OF STUDENT INSTRUCTION ACADEMIC COMPUTING PROVIDES INFORMATION TECHNOLOGY TO BIHANCE THE ACADEMIC RESOURCES AVAILABLE TO PROFESSORS AND STUDENTS, AND TO THE COMMUNITY THROUGH THE UNIVERSITY LIBRARY LECTURE FUNDS ARE SET ASIDE TO PAY FOR VISITING SPEAKERS ON TOPICS RELEVANT TO A CADEMIC STUDIES OFFERED PART III, LINE 4C - AUXILIARY ENTERPRISES - THE HOUSING OFFICE STRUCES TO MAINTAIN A COMFORTABLE LIVING ENVIRONMENT FOR THE 92% OF THE SUDENTS HAVE ACCESS TO EXEMPLARY SERVICE, OUTSTANDING QUALITY FOOD, WITH A PASSION AND COMMITMENT TO EXCELLENCE THE BOOKSTORE ENSURES THAT MEMBERS OF THE UNIVERSITY COMMUNITY HAVE AN AFFORDABLE, CONVENIENT OPTION FOR UNIVERSITY OF RICHMOND TEXTBOOKS, GEAR, AND SUPPLIES PRINTING SERVICES OFFERS TOP QUALITY GRAPHIC COMMUNICATIONS FOR STUDENTS, FACULTY AND STAFF THE ATHLETIC DEPARTMENT

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES		STUDENT SERVICES - STUDENT DEVELOPMENT PROVIDES ON-CAMPUS PHYSICAL AND MENTAL HEALTH SERVICES, ACADEMIC AND CARRER COUNSELING, VAROUS FRATERNITY, SORORITY AND EXTRACURRICULAR ACTIVITIES, AND ORGANIZATIONS THAT WORK TO UPHOLD THE UNIVERSITY'S COPY ENDIVERSE AND NICLUSION RECREATION AND WELLINESS PROVIDES THE CAMPUS COMMUNITY WITH OUTSTANDING RECREATIONAL FACILITIES, FITNESS AND WELLINESS PROVIDES THE CAMPUS COMMUNITY WITH OUTSTANDING SECREATIONAL FACILITIES, FITNESS AND WELLINESS PROGRAMS, INTRAMURALS, AND SPORT CLUSE IT ALSO SUPPORTS MULTIFLE STUDENT GOVERNMENT ASSOCIATIONS, WHICH VOICE THE STUDENTS ONDERNA AND OPINIONS, AS WELL AS SERVES AS A LIAISON BETWEEN STUDENTS AND ADMINISTRATION, FACULTY, AND STAFF UNDERGRADULATE AND LAW SCHOOL ADMISSION OFFICES COUNSEL THOUSANDS OF PROSPECTIVE APPLICANTS AND MAKE THEM FEEL WELCOME AT THE UNIVERSITY, WHILE PROVIDING SUPPORT FOR ACCEPTED STUDENTS THE UNIVERSITY BIBRARIES SERVE THE CAMPUS COMMUNITY AND THE PUBLIC AND ARE A DESIGNATED FEDERAL DOCUMENT REPOSITORY EXPENSES \$22,160,557, INCLUDING GRAINTS OF \$0 REVISIUE \$0 RESEARCH - THE UNIVERSITY BELEVES THAT ACADEMIC RESEARCH AT THE FACILITY, STAFF AND STUDENT LEVELS SIGNIFICANTLY IMPROVES THE QUALITY OF EDUCATION OF ALL STUDENTS THUS, THE UNIVERSITY BNCOURAGES FACILITY, STUDENT AND STAFF RESEARCH BY OFFRATING AND FRICE OF FOUNDATION CORPORATE AND GOVERNMENT RELATIONS TO ASSIST WITH APPLICATIONS FOR FUNDING, ALLOCATING FUNDS FOR STUDENT AND FACILITY SUMMER AND VACACTION RESEARCH PROJECTS, AND TRAVEL TO PARTICIPATE AND PRESENT FINDINGS AT ACADEMIC CONFERENCES, PROVIDING LABS, STUDIOS AND SPECIALIZED CLASSROOMS FOR CONDUCTING RESEARCH PROVIDING INFRASTRUCTURE NECESSARY TO CONDUCT RESEARCH EMPLOYING NON-FACILITY ENESSON. FOR SERVICE AND AND RESEARCH PROVIDING SERVICE OR PRINCES TO BRING TOCSTHER FOR CIVIC ENSAGEMENT (CCE) AT THE UNIVERSITY OF RICHMOND STRIVES TO BRING TOCSTHER FOR CIVIC ENSAGEMENT (CCE) AT THE UNIVERSITY OF RICHMOND STRIVES TO BRING TOCSTHER FOR COVER DISAGEMENT OF CONDUCT SERVICE OR PRINCES. AND CONDUCT EXP

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 2		R LEWIS BOGGS AND PAUL B QUEALLY HAVE IDENTIFIED A BUSINESS RELATIONSHIP WITH EACH OTHER R LEWIS BOGGS AND ROBIN BLANDFORD HAVE IDENTIFIED A BUSINESS RELATIONSHIP WITH EACH OTHER PAUL B QUEALLY AND ALAN W BREED HAVE IDENTIFIED A BUSINESS RELATIONSHIP WITH EACH OTHER PAUL B QUEALLY AND HERBERT H MCDADE III HAVE IDENTIFIED A BUSINESS RELATIONSHIP WITH EACH OTHER

ldentifier	Return Reference	Explanation
FORM 990, PART VI LINE 11B		THE FORM 990 WAS REVIEWED BY THE UNIVERSITY OF RICHMOND'S VICE PRESIDENT FOR BUSINESS AND FINANCE AND BY ITS GENERAL COUNSEL. FOLLOWING THAT REVIEW, A DRAFT OF THE FORM 990 WAS PROVIDED TO THE UNIVERSITY'S PRESIDENT, RECTOR, AND MEMBERS OF THE UNIVERSITY'S EXECUTIVE COMMITTEE. A MEETING WAS CONDUCTED TO REVIEW THE FORM 990 AND RESPOND TO ANY QUESTIONS THAT THE GROUP HAD REGARDING THE RETURN FOLLOWING THAT MEETING, AN ELECTRONIC VERSION OF THE FORM 990 WAS DISTRIBUTED TO THE ENTIRE BOARD OF TRUSTEES. THE STAFF OF THE VICE PRESIDENT FOR BUSINESS AND FINANCE AND THE GENERAL COUNSEL CONDUCTED TWO INFORMATION SESSIONS TO REVIEW THE FORM 990 WITH THE MEMBERS OF THE BOARD OF TRUSTEES AND TO RESPOND TO ANY QUESTIONS ALL OF THIS OCCURRED PRIOR TO FILING THE FORM 990 WITH THE INTERNAL REVENUE SERVICE. THE RETURN THAT WAS REVIEWED WITH THE BOARD OF TRUSTEES WAS IDENTICAL TO THE ONE FILED WITH THE IRS WITH ONE EXCEPTION INFORMATION REGARDING A SPECIFIC DONOR WAS REDACTED FROM SCHEDULE B. AS A CONDITION OF THE GIFT, THE DONOR REQUESTED ABSOLUTE ANONYMITY. IN ORDER TO COMPLY WITH THE DONOR'S STIPULATION, IDENTIFY ING INFORMATION WAS REMOVED FROM THE VERSION OF THE RETURN SHARED WITH THE BOARD.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 12C		THE UNIVERSITY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY IN SEVERAL WAYS FIRST, THE UNIVERSITY REQUIRES ALL INDIVIDUALS COVERED BY ITS POLICY TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE FORM ON AN ANNUAL BASIS THE OFFICE OF THE SECRETARY TO THE BOARD OF TRUSTEES ENSURES THAT ALL COVERED INDIVIDUALS COMPLETE THE DISCLOSURE FORM PRIOR TO ALL MEETINGS OF THE BOARD OF TRUSTEES OR ANY COMMITTEE THEREOF, THE SECRETARY TO THE BOARD AND THE GENERAL COUNSEL OF THE UNIVERSITY REVIEW THE MEETING AGENDA IN LIGHT OF THE CONFLICT OF INTEREST DISCLOSURES TO IDENTIFY ANY POTENTIAL OR ACTUAL CONFLICTS OF INTEREST THAT MIGHT ARISE ADDITIONALLY, THE UNIVERSITY'S CONFLICT OF INTEREST POLICY REQUIRES COVERED INDIVIDUALS TO UPDATE THEIR DISCLOSURE FORMS DURING THE YEAR AND TO NOTIFY APPROPRIATE UNIVERSITY OFFICIALS OF ANY ACTUAL OR POTENTIAL CONFLICT THAT MIGHT ARISE PRIOR TO OR IN THE COURSE OF A MEETING IF THERE IS A CONFLICT OF INTEREST, THE INVOLVED INDIVIDUAL IS REQUIRED TO RECUSE HIM OR HERSELF FROM THE DISCUSSION OF THE MATTER AT ISSUE, TO REFRAIN FROM VOTING ON THE MATTER AND TO REFRAIN FROM SEEKING TO INFLUENCE THE VOTE ON THE MATTER

Identifier Return Reference	Explanation
FORM 990, PART VI, LINE 15A	THE BOARD OF TRUSTEES HAS DELEGATED AUTHORITY FOR APPROVAL OF THE COMPENSATION OF THE PRESIDENT TO THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES THE MEMBERS OF THE COMPENSATION COMMITTEE ARE THE RECTOR AND VICE RECTOR OF THE UNIVERSITY AND AT LEAST ONE OTHER MEMBER OF THE BOARD OF TRUSTEES THE UNIVERSITY ENSURES THAT THE MEMBERS OF THE COMPENSATION COMMITTEE DO NOT HAVE A CONFLICT OF INTEREST WITH REGARD TO ANY MATTER COMING BEFORE THEM IN SETTING THE INITIAL COMPENSATION AND BENEFITS OF THE PRESIDENT AND IN CONSIDERING ANY MATERIAL AMENDMENT TO HIS EMPLOYMENT AGREEMENT, THE COMPENSATION COMMITTEE HAS ENGAGED AN OUTSIDE COMPENSATION CONSULTANT THE COMPENSATION CONSULTANT RELIES ON COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS AND HAS OPINED ON THE REASONABLENESS OF THE PRESIDENT'S COMPENSATION IN CONDUCTING THE ANNUAL REVIEW, THE COMPENSATION COMMITTEE RELIES ON COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS THE DELIBERATIONS AND DECISIONS OF THE COMPENSATION COMMITTEE RELIES ON COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS THE DELIBERATIONS AND DECISIONS OF THE COMPENSATION COMMITTEE ARE DOCUMENTED CONTEMPORANEOUSLY

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 15B		THE BOARD OF TRUSTEES HAS DELEGATED AUTHORITY FOR REVIEWING AND APPROVING THE PRESIDENT'S RECOMMENDATIONS REGARDING THE COMPENSATION OF HIS DIRECT REPORTS AND DEANS TO THE COMPENSATION COMMITTEE ARE THE RECTOR AND VICE RECTOR OF THE UNIVERSITY AND AT LEAST ONE OTHER MEMBER OF THE BOARD OF TRUSTEES THE UNIVERSITY ENSURES THAT THE MEMBERS OF THE COMPENSATION COMMITTEE DO NOT HAVE A CONFLICT OF INTEREST WITH REGARD TO ANY MATTER COMING BEFORE THEM THE COMPENSATION COMMITTEE UTILIZES COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS THE COMPENSATION COMMITTEE APPROVES THE ANNUAL COMPENSATION FOR THE PRESIDENT'S DIRECT REPORTS AND THE UNIVERSITY'S DEANS IN THE CASE OF OTHER STAFF WHOSE PROPOSED COMPENSATION AT THE TIME OF HIRING EXCEEDS THE BOARD-APPROVED COMPENSATION STRUCTURE FOR UNIVERSITY STAFF, THE COMPENSATION COMMITTEE UTILIZES COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS IN REVIEWING AND APPROVING THE PROPOSED COMPENSATION THE DELIBERATIONS AND DECISIONS OF THE COMPENSATION COMMITTEE ARE DOCUMENTED CONTEMPORANEOUSLY

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 19		THE UNIVERSITY OF RICHMOND MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE ON ITS PUBLIC WEBSITE. THE UNIVERSITY MAKES ITS CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	TAX INCOME DIFFERENTIAL FROM RFMC K-1 6,108,846, CHANGE IN FAIR VALUE OF SWAP AGREEMENTS 11,657,648, CHANGE IN PRESENT VALUE - SPLIT INTEREST AGREEMENTS (1,032,263), CHANGE IN POST-RETIREMENT BENEFIT OBLIGATION 1,873,903, TOTAL PART XI, LINE 9 18,608,136

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DLN: 93493134003104

Related Organizations and Unrelated Partnerships

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

2012

Open to Public Inspection

Employer identification number

54-0505965

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

Name of the organization

UNIVERSITY OF RICHMOND

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

(a) Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		Direct controlling entity		
(1) RICHMOND QUADRANGLE LLC 201 MARYLAND HALL RICHMOND, VA 23173 54-0505965	PROPERTY MGMT	VA	3,473,826	27,602,186	UR			
(2) SPIDER MANAGEMENT COMPANY LLC 201 MARYLAND HALL RICHMOND, VA 23173 26-1501416	INVSTMNT MGMT	VA	12,825,202	4,268,999	UR			
(3) RICHMOND FUND MANAGEMENT COMPANY LLC 201 MARYLAND HALL RICHMOND, VA 23173 26-1501524	INVSTMNT MGMT	VA	12,825,202	3,798,625	SMC			
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the		the organization a	answered "Yes"	to Form 990, Par	t IV, lı	ne 34 because it	had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	n Public charity sta (if section 501(c)		(f) Direct controlling entity	(g) Section 512 (13) control entity?	
							Yes	No
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y			Schedule R (Form	990) 2	012

Part III	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.)		

(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	Share of total	(g) Share of end-of- year assets	Share of end-of- I year	Share of end-of- I year	Share of end-of- year allo assets	(h) Disproprtionate allocations?		Disproprtionate allocations?		Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part		(k) Percentage ownership
				31.,			Yes	No]	Yes	No									
(1) PROP HLDNGS LLC 901 EAST BYRD ST SUITE 150 RICHMOND, VA 23219 54-1738291	REAL ESTATE LOANS	VA	UR	INVEST	1,169,114	16,061,242	Yes				No	99 000 %								
(2) PROP HLDNGS III LLC 901 EAST BYRD ST SUITE 150 RICHMOND, VA 23219 65-1229396	REAL ESTATE LOANS	VA	UR	INVEST	98,204	19,650,647	Yes				No	65 220 %								
(3) ROR PARTNERSHIP 201 MARYLAND HALL RICHMOND, VA 23173 26-1761403	INVESTMENT MGMT	VA	UR	INVEST	121,845,434	2,105,838,280		No	221,689	Yes		61 154 %								
(4) RICHMOND FUND LP 6802 PARAGON PL RICHMOND, VA 23230 26-1501561	INVESTMENT MGMT	VA	RFMC	INVEST	10,983,658	15,226,641	Yes		-2,156	Yes		0 154 %								

Part IV 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.)

line 34 because it had one or m	ore related organization	ons treateu as a corpora	ition or trust at	iring the tax	year.)				
(a) Name, address, and EIN of related organization	(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 end- of-year assets	(h) Percentage ownership	(i) Section (b)(1 contro entit	L3) olled
								Yes	No
(1) CHARITABLE REMAINDER TRUSTS (13)	CRT		NA	TRUST	0	0			No
(2) CHARITABLE LEAD TRUSTS (1)	CLT		NA	TRUST	0	0			No

(4) ROR PARTNERSHIP

(5) ROR PARTNERSHIP

Part V	Transactions With Related Organizations (Complete if the organizations	atıon answe	red "Yes" to Forn	n 990, Part IV, line	e 34, 35b, or 36.)			
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule						Yes	No
1 During	the tax year, did the orgranization engage in any of the following transactions with one	e or more rela	ted organizations li	sted in Parts II-IV?				
a Rece	ipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity					1a		No
b Gıft,	b Gift, grant, or capital contribution to related organization(s)							
c Gıft,	grant, or capital contribution from related organization(s)					1c		No
d Loan	s or loan guarantees to or for related organization(s)					1d		No
e Loan	s or loan guarantees by related organization(s)					1e		No
f Divid	lends from related organization(s)					1f	Yes	
g Sale	of assets to related organization(s)					1g		No
h Purc	hase of assets from related organization(s)					1h		No
i Exch	ange of assets with related organization(s)					1 i		No
j Lease of facilities, equipment, or other assets to related organization(s)								No
k Lease of facilities, equipment, or other assets from related organization(s)								No
I Performance of services or membership or fundraising solicitations for related organization(s)								No
m Performance of services or membership or fundraising solicitations by related organization(s)								No
n Sharı	ng of facilities, equipment, mailing lists, or other assets with related organization(s)					1n		No
o Shar	ing of paid employees with related organization(s)					10		No
p Reim	bursement paid to related organization(s) for expenses					1 p		No
q Reim	bursement paid by related organization(s) for expenses					1q		No
r Othe	r transfer of cash or property to related organization(s)					1r	Yes	
s Othe	r transfer of cash or property from related organization(s)					1s	Yes	
2 If the	answer to any of the above is "Yes," see the instructions for information on who mus	st complete th	nis line, including co	overed relationships	and transaction threshold	5		
(a) Name of other organization			(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	mount	involved	l
1) THE RICI	IMOND FUND LP	S		6,334,872	GAAP			
2) THE RICI	IMOND FUND LP	R		14,815,677	GAAP			
3) PROPERT	Y HOLDINGS III LLC	В		353,805	CASH			

В

S

27,960,505 CASH 87,452,102 CASH

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)

egardıng exclu	ision for c	ertaın ınvestr	nent	partnerships								
(b) Primary activity	(c) Legal domicile (state or foreign country)	income (related, unrelated, excluded from tax under section 512-	org	section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets			amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentag ownership
		314)	Yes	No			Yes	No		Yes	No	
									 		1	I
	egarding exclu	(b) Primary activity Primary activity Legal domicile (state or foreign	(b) (c) (d) Primary activity Legal domicile (state or foreign country) (country) (country) (b) (c) (d) (d) (Predominant income (related, unrelated, country) (country)	(b) (c) (d) Primary activity Legal domicile (state or foreign country) (related, excluded from tax under section 512-	regarding exclusion for certain investment partnerships (b) (c) (d) (e) Primary activity Legal domicile (state or foreign country) excluded from tax under section 512-	(b) (c) Legal domicile (state or foreign country) (related, excluded from tax under section 512-	(b) (c) Legal domicile (state or foreign country) (related, excluded from tax under section 512-	(b) (c) Legal domicile (state or foreign country) (related, excluded from tax under section 512-	(b) (c) Legal domicile (state or foreign country) (related, country) ((b) CC Legal domicile (state or foreign country) (related, excluded from tax under section 512-	(b) CC Legal domicile (state or foreign country) (related, country) (related, country) (related, country) (related) (excluded from tax under section 512-	(b) Code V—UBI amount in come (related, country) (rountry) (rountry) (rountry) (c) Legal domicile (state or foreign country) (rountry) (c) Legal domicile (state or foreign country) (rountry) (roun

Additional Data Return to Form

Software ID:

Software Version:

EIN: 54-0505965

Name: UNIVERSITY OF RICHMOND

Schedule R (Form 990) 2012

Page **5**

Part VII Supplemental Information

Identifier Return Reference Explanation	Complete this part to pr	Complete this part to provide additional information for responses to questions on Schedule R (see instructions)					
			Explanation				