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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)

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

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
LYNN UNIVERSITY INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
3601 North Military Trail

City or town, state or country, and ZIP + 4
Boca Raton, FL 33431

D Employer identification number
59-1023117

E Telephone number
(561) 237-7181

G Gross receipts $ 90,663,194

F Name and address of principal officer
KEVIN ROSS
3601 North Military Trail
Boca Raton, FL 33431

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW LYNN EDU

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1962

M State of legal domicile FL

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE MISSION OF LYNN UNIVERSITY IS TO PROVIDE THE EDUCATION, SUPPORT AND ENVIRONMENT THAT ENABLE STUDENTS TO REACH THEIR FULL POTENTIAL AND TO PREPARE FOR SUCCESS IN THE WORLD

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

Activities & Governance	**3** Number of voting members of the governing body (Part VI, line 1a)	**3**	11
	4 Number of independent voting members of the governing body (Part VI, line 1b)	**4**	9
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	**5**	1,203
	6 Total number of volunteers (estimate if necessary)	**6**	41
	7a Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	3,468
	b Net unrelated business taxable income from Form 990-T, line 34	**7b**	968

		Prior Year	Current Year
Revenue	**8** Contributions and grants (Part VIII, line 1h)	6,502,984	12,155,596
	9 Program service revenue (Part VIII, line 2g)	67,449,371	70,792,823
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	504,815	400,557
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	679,194	647,850
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	75,136,364	83,996,826
Expenses	**13** Grants and similar amounts paid (Part IX, column (A), lines 1–3)	13,559,475	13,764,633
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	38,517,540	40,467,290
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶4,522,631		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	27,242,615	28,161,147
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	79,319,630	82,393,070
	19 Revenue less expenses Subtract line 18 from line 12	-4,183,266	1,603,756

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	**20** Total assets (Part X, line 16)	112,378,544	124,867,102
	21 Total liabilities (Part X, line 26)	45,914,672	53,634,665
	22 Net assets or fund balances Subtract line 21 from line 20	66,463,872	71,232,437

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** | 2013-03-13
Signature of officer | Date

LAURIE LEVINE VP BUSINESS & FINANCE
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Rachel Spurlock				P00520729
Firm's name ▶ CROWE HORWATH LLP			Firm's EIN ▶	
Firm's address ▶ 401 East Las Olas Blvd Suite 1100 Fort Lauderdale, FL 33301			Phone no (954) 202-8600	

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . . ☑

1 Briefly describe the organization's mission

FOUNDED IN 1962 AND LOCATED IN BOCA RATON, FLA , LYNN UNIVERSITY IS A PRIVATE, COEDUCATIONAL INSTITUTION ACCREDITED BY THE SOUTHERN ASSOCIATION OF COLLEGES AND SCHOOLS (SACS) (CONTINUED IN SCHEDULE O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 35,019,104 including grants of $ 11,837,584) (Revenue $ 39,317,022)

THE UNIVERSITY OFFERS BACHELOR'S, MASTER'S AND A DOCTORAL DEGREE THE ACADEMIC PROGRAM IS DESIGNED FOR TRADITIONAL AGED STUDENTS, AS WELL AS A GROWING POPULATION OF ADULT LEARNERS TODAY, LYNN UNIVERSITY HAS 2,297 STUDENTS WHO HAIL FROM 89 FOREIGN COUNTRIES AND 42 UNITED STATES AND TERRITORIES PRESENTLY, THE UNIVERSITY OFFERS FOUR MASTER'S DEGREES WITH NINE MAJOR PROGRAMS OF STUDY, WITHIN THEM 27 SPECIALIZATIONS, AS WELL AS ONE DOCTORAL DEGREE WITH ONE MAJOR PROGRAM OF STUDY, AND THREE BACHELOR'S DEGREES WITH 28 MAJOR PROGRAMS OF STUDY, AND WITHIN THEM, 16 SPECIALIZATIONS LYNN UNIVERSITY IS PROUD OF ITS TRADITION OF EDUCATING MEN AND WOMEN WHO ASSUME POSITIONS OF RESPONSIBILITY AND BECOME LEADERS IN THEIR CHOSEN PROFESSIONS (CONTINUED IN SCHEDULE O)

4b (Code) (Expenses $ 18,003,556 including grants of $ 0) (Revenue $ 19,962,702)

A PROGRAM OF ACTIVITIES COMPLEMENTS THE ACADEMIC PROGRAM STUDENTS CHOOSE THOSE ACTIVITIES THAT WILL CONTRIBUTE TO THEIR PERSONAL DEVELOPMENT AND ENJOYMENT - STUDENT GOVERNMENT, SERVICE CLUBS, SPORTS, SOCIAL FRATERNITIES, AND NUMEROUS SPECIAL INTEREST ORGANIZATIONS IN ADDITION, THE UNIVERSITY OFFERS A FORMAL LEADERSHIP CERTIFICATION PROGRAM, AVAILABLE TO ALL STUDENTS TITLED THE EMERGING LEADERS PROGRAM, IT ENTAILS SIX WORKSHOPS AND 20 HOURS OF SERVICE (CONTINUED IN SCHEDULE O)

4c (Code) (Expenses $ 12,517,573 including grants of $ 1,927,049) (Revenue $ 10,020,872)

THE UNIVERSITY MAINTAINS FIVE RESIDENCE HALLS THAT PROVIDE FULL LIVING ACCOMMODATIONS FOR MORE THAN HALF OF ITS UNDERGRADUATE STUDENT POPULATION EACH ROOM IS FURNISHED TO MEET STUDENTS' NEEDS, INCLUDING TV CABLE AND WIRELESS INTERNET SERVICE STUDENTS LIVING ON CAMPUS ARE REQUIRED TO BE ON THE UNIVERSITY MEAL PLAN IN LATE SPRING 2013, SODEXO WAS CHOSEN AS THE NEW FOOD SERVICE VENDOR, SETTING THE STAGE FOR NEW DINING VENUES AND AN ENTIRELY NEW CULINARY EXPERIENCE, INCLUDING 24/7 DINING COMMUTER STUDENTS, FACULTY, STAFF AND VISITORS CAN PURCHASE MEALS DIRECTLY THROUGH THE UNIVERSITY'S FOOD SERVICE VENDOR THE LYNN UNIVERSITY BOOKSTORE OFFERS TEXT AND OTHER TRADE BOOKS, SCHOOL-BRANDED CLOTHING AND ACCESSORIES, AS WELL AS VARIOUS OTHER SUPPLIES

(Code) (Expenses $ 1,657,946 including grants of $ 0) (Revenue $ 1,816,522)

CLASSICAL MUSIC IS PROVIDED TO THE UNIVERSITY COMMUNITY AS WELL AS THE GENERAL PUBLIC BY STUDENTS AND FACULTY IN THE LYNN UNIVERSITY CONSERVATORY OF MUSIC ADDITIONALLY, PROFESSIONAL ACTORS AND MUSICIANS PERFORM ON CAMPUS IN THE PERFORMING ARTS CENTER MANY OPPORTUNITIES ARE PROVIDED IN THE REALM OF "IDEAS," THROUGH LECTURES AND COMMUNITY DISCOURSE DURING THE SUMMER MONTHS BETWEEN ACADEMIC YEARS FOR TRADITIONAL COLLEGE STUDENTS, A PORTION OF THE UNIVERSITY'S EDUCATIONAL FACILITIES ARE USED TO PROVIDE INSTRUCTION TO A COMBINED ENROLLMENT OF APPROXIMATELY 1,500 CHILDREN ATTENDING THREE THREE-WEEK SUMMER CAMP SESSIONS AND TO GROUPS OF ADULTS ENROLLED IN SPECIAL EDUCATIONAL PROGRAMS

4d Other program services (Describe in Schedule O)

(Expenses $ 1,657,946 including grants of $ 0) (Revenue $ 1,816,522)

4e **Total program service expenses ▶** 67,198,179

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)? *If "Yes," 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? *If "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		
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*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	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
e	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	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13	Yes	
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		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		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		

Part 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**	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
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**		No
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**		No
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**		No
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**		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	2,549		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	1,203		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	3a		Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b		Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	5a			No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .	6a			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .	7f			No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	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			
b	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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .	14b			

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

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

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	**1a**	11		
	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	**1b**	9		
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**			No
6	Did the organization have members or stockholders?	**6**			No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	**7a**			No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	**7b**			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	**8a**		Yes	
b	Each committee with authority to act on behalf of the governing body?	**8b**		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	**9**			No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

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)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

▶Laurie Levine VP-Bus Fin 3601 North Military Trail Boca Raton, FL (561) 237-7181

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SEE SCHEDULE J FOR ADDITIONAL INFORMATION ON COMPENSATION		X	X	X	X	X		0	0	0
(2) ARTHUR LANDGREN SECRETARY AND TRUSTEE	40 00 0 00	X		X				54,600	0	0
(3) CHRISTINE LYNN CHAIRPERSON	2 00 0 00	X		X				0	0	0
(4) KEVIN ROSS PRESIDENT	40 00 0 00	X		X				405,442	0	144,949
(5) STEPHEN SNYDER TRUSTEE/VICE CHAIR	2 00 0 00	X		X				0	0	0
(6) BILL SHUBIN TRUSTEE	2 00 0 00	X						0	0	0
(7) BRAD OSBORNE TRUSTEE	2 00 0 00	X						0	0	0
(8) JAN CARLSSON TRUSTEE	2 00 0 00	X						0	0	0
(9) JOHN LANGAN TRUSTEE	2 00 0 00	X						0	0	0
(10) PAUL ROBINO TRUSTEE	2 00 0 00	X						0	0	0
(11) VICTORIA RIXON TRUSTEE	2 00 0 00	X						0	0	0
(12) WILLIAM REHRIG TRUSTEE	2 00 0 00	X						0	0	0
(13) CHRISTIAN G BONIFORTI CHIEF INFORMATION OFFICER	40 00 0 00			X				157,821	0	29,041
(14) GARETH FOWLES VP FOR ENROLLMENT MANAGEMENT	40 00 0 00			X				158,326	0	16,092
(15) GREG MALFITANO SVP FOR ADMINISTRATION	40 00 0 00			X				239,620	0	28,504
(16) GREGG COX VP FOR ACADEMIC AFFAIRS	40 00 0 00			X				184,454	0	27,804
(17) JASON WALTON CHIEF OF STAFF	40 00 0 00			X				172,621	0	29,907

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) JUDITH NELSON VP FOR DEVELOPMENT	40 00 0 00			X				215,574	0	13,258
(19) LAURIE LEVINE VP FOR BUSINESS AND FINANCE	40 00 0 00			X				207,757	0	76,736
(20) MARGARET RUDDY GENERAL COUNSEL	40 00 0 00			X				198,551	0	12,796
(21) MICHELE MORRIS VP FOR MARKETING & COMMUNICATION	40 00 0 00			X				158,815	0	19,016
(22) PHILIP RIORDAN VP FOR STUDENT LIFE	40 00 0 00			X				146,577	0	34,850
(23) DIANE DICERBO DIRECTOR OF ACADEMIC ADVISING	40 00 0 00					X		178,896	0	29,371
(24) MARSHA GLINES DEAN, INST FOR ACHIEVEMENT AND LEARNING	40 00 0 00					X		156,869	0	15,589
(25) MATTHEW CHALOUX DIRECTOR, AUXILIARY SERVICES	40 00 0 00					X		156,374	0	30,771
(26) RALPH NORCIO ASSOCIATE DEAN, BUSINESS SCHOOL	40 00 0 00					X		177,011	0	14,938
(27) THOMAS KRUCZEK DEAN, COLLEGE OF BUSINESS & MANAGEMENT	40 00 0 00					X		164,858	0	31,141
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								3,134,166	0	554,763

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 34

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
GERRITTS CONSTRUCTION 8177 GLADES ROAD BOCA RATON FL 33434	GENERAL CONSTRUCTION	2,525,145
G4S SECURE SOLUTIONS (USA) INC (PREVIOUSLY WACKENHUT) 1395 UNIVERSITY BOULEVARD JUPITER FL 33458	SECURITY SERVICES	586,153
GENSLER 2020 K STREET NW WASHINGTON DC 20006	ARCHITECTURAL SERVICES	541,614
RUFFALOCODY 65 KIRKWOOD NORTH ROAD SW CEDAR RAPIDS IA 52404	ENROLLMENT MANAGEMENT	204,815
MULTI IMAGE GROUP 1701 CLINT MOORE ROAD BOCA RATON FL 33487	CORPORATE EVENT PLANNING	158,420

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 ▶ 12

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII . . . . . ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	60,303			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	368,230			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	11,727,063			
	g	Noncash contributions included in lines 1a-1f $		597,565			
	h	**Total.** Add lines 1a-1f			12,155,596		
Program Service Revenue			Business Code				
	2a	STUDENT TUITION AND RELATED FEES	611710		58,682,122	58,682,122	
	b	RESIDENCE HALL, ROOM AND BOARD FEES	611710		9,159,387	9,159,387	
	c	CAMP FEES	900099		1,755,335	1,755,335	
	d	BOOKSTORE SALES	451211		861,485	861,485	
	e	STUDENT ACTIVITY INCOME	611710		334,494	334,494	
	f	All other program service revenue			0	0	0
	g	**Total.** Add lines 2a–2f			70,792,823		
	3	Investment income (including dividends, interest, and other similar amounts)			267,200		3,468
	4	Income from investment of tax-exempt bond proceeds			0		
	5	Royalties			0		
			(i) Real	(ii) Personal			
	6a	Gross rents	484,205				
	b	Less rental expenses	186,618				
	c	Rental income or (loss)	297,587	0			
	d	Net rental income or (loss)			297,587		
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory	6,534,986	54,900			
	b	Less cost or other basis and sales expenses	6,252,337	204,192			
	c	Gain or (loss)	282,649	-149,292			
	d	Net gain or (loss)			133,357		133,357
	8a	Gross income from fundraising events (not including $ 60,303 of contributions reported on line 1c) See Part IV, line 18	a	45,519			
	b	Less direct expenses	b	23,221			
	c	Net income or (loss) from fundraising events			22,298		22,298
	9a	Gross income from gaming activities See Part IV, line 19	a	3,670			
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities			3,670		3,670
	10a	Gross sales of inventory, less returns and allowances	a				
	b	Less cost of goods sold	b				
	c	Net income or (loss) from sales of inventory			0		
Other Revenue		Miscellaneous Revenue	Business Code				
	11a	COMMUNITY CULTURAL AFFAIRS	900099		263,108	263,108	
	b	OTHER	900099		61,187	61,187	
	c				0		
	d	All other revenue			0	0	0
	e	**Total.** Add lines 11a–11d			324,295		
	12	**Total revenue.** See Instructions			83,996,826	71,117,118	3,468

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 . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States See Part IV, line 22	13,764,633	13,764,633		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	2,336,595	766,788	1,190,306	379,501
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	299,111	37,546	127,665	133,900
7 Other salaries and wages	28,053,288	23,765,676	2,930,392	1,357,220
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,361,113	727,195	567,275	66,643
9 Other employee benefits	6,245,833	4,848,566	961,119	436,148
10 Payroll taxes	2,171,350	1,787,152	258,183	126,015
11 Fees for services (non-employees)				
a Management	0	0		
b Legal	64,705		64,705	
c Accounting	138,572		138,572	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	415,195		415,195	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,822,610	1,371,382	212,468	238,760
12 Advertising and promotion	1,282,824	813,092	81,560	388,172
13 Office expenses	4,014,311	3,501,687	210,339	302,285
14 Information technology	764,681	136,482	626,167	2,032
15 Royalties . .	0			
16 Occupancy	6,124,757	5,425,495	525,797	173,465
17 Travel	1,105,725	946,768	78,607	80,350
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	119,801	96,068	20,825	2,908
20 Interest	894,832	835,146	39,552	20,134
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	4,204,849	3,924,386	185,854	94,609
23 Insurance	336,351	336,351		
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 PRESIDENTIAL DEBATE	1,842,196		1,842,196	
b STUDENT PROGRAMMING	813,358	813,358		
c BOOKSTORE-COST OF GOODS SOLD	646,113	646,113		
d STUDY TOURS/INSTRUCTIONAL FEES	428,305	428,305		
e All other expenses	3,141,962	2,225,990	195,483	720,489
25 **Total functional expenses.** Add lines 1 through 24e	82,393,070	67,198,179	10,672,260	4,522,631
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)	0			

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X . . . . . ☑

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		12,443	1	13,530
	2	Savings and temporary cash investments		11,750,596	2	16,939,004
	3	Pledges and grants receivable, net		2,659,825	3	2,848,496
	4	Accounts receivable, net		450,932	4	433,778
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	0
	7	Notes and loans receivable, net		2,319,294	7	2,230,055
	8	Inventories for sale or use		538,511	8	401,841
	9	Prepaid expenses and deferred charges		1,197,145	9	1,164,965
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 145,535,256			
	b	Less accumulated depreciation	10b 72,768,006	67,090,838	10c	72,767,250
	11	Investments—publicly traded securities		7,161,943	11	6,425,601
	12	Investments—other securities See Part IV, line 11		19,046,296	12	21,494,189
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		150,721	15	148,393
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		112,378,544	16	124,867,102
Liabilities	17	Accounts payable and accrued expenses		3,573,759	17	5,253,241
	18	Grants payable			18	
	19	Deferred revenue		6,047,100	19	9,775,011
	20	Tax-exempt bond liabilities		32,000,309	20	35,943,317
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	0
	23	Secured mortgages and notes payable to unrelated third parties			23	130,630
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		4,293,504	25	2,532,466
	26	**Total liabilities.** Add lines 17 through 25		45,914,672	26	53,634,665
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		39,585,442	27	36,868,708
	28	Temporarily restricted net assets		6,601,206	28	13,375,075
	29	Permanently restricted net assets		20,277,224	29	20,988,654
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		66,463,872	33	71,232,437
	34	Total liabilities and net assets/fund balances		112,378,544	34	124,867,102

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	83,996,826
2	Total expenses (must equal Part IX, column (A), line 25)	2	82,393,070
3	Revenue less expenses Subtract line 2 from line 1	3	1,603,756
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	66,463,872
5	Net unrealized gains (losses) on investments	5	1,787,413
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,377,396
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	71,232,437

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			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 reviewed on a separate basis, consolidated basis, or both ☐ 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 separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

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SCHEDULE A (Form 990 or 990EZ)

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.**

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☑ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (see instructions) **12**

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2011 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2012.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 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 furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b 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 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)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2011** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **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 ▶☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶☐

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

Facts And Circumstances Test

Explanation

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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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ 41,750

(ii) Assets included in Form 990, Part X ▶ $ 2,134,374

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☑ Public exhibition
- b ☑ Scholarly research
- c ☑ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☑ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
c	Beginning balance	1c
d	Additions during the year	1d
e	Distributions during the year	1e
f	Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	21,273,849	21,131,637	19,185,356	16,992,187	17,767,724
b	Contributions	711,430	570,480	774,209	1,264,716	972,502
c	Net investment earnings, gains, and losses	1,229,991	-428,268	2,098,654	1,151,151	-1,748,039
d	Grants or scholarships	499,305		402,223	67,698	0
e	Other expenditures for facilities and programs	553,097		524,359	155,000	0
f	Administrative expenses				0	0
g	End of year balance	22,162,868	21,273,849	21,131,637	19,185,356	16,992,187

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ▶ 1 130 %
- b Permanent endowment ▶ 94 700 %
- c Temporarily restricted endowment ▶ 4 170 %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	110,000	1,145,045		1,255,045
b Buildings		90,800,844	40,570,055	50,230,789
c Leasehold improvements				0
d Equipment		28,325,886	24,546,614	3,779,272
e Other		25,153,481	7,651,337	17,502,144
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				72,767,250

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely-held equity interests	0	
(3) Other		
(A) ALTERNATIVE INVESTMENTS	21,494,189	F
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶	21,494,189	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	0
ANNUITIES PAYABLE	26,871
DEFERRED COMPENSATION PAYABLE	2,505,595
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	2,532,466

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
Collections of art - description of collections	Schedule D, Part III, Line 4	THE UNIVERSITY HAS A COLLECTION OF AFRICAN ART, DISPLAYED IN THE LIBRARY THE COLLECTION OF AFRICAN ART INCLUDES SCULPTURES, CARVINGS AND TEXTILE ARTS, WHICH ARE DISPLAYED IN OPEN AREAS OF THE UNIVERSITY LIBRARY FOR THE ENJOYMENT OF THE PUBLIC THE STUDY OF THESE PIECES IS INCORPORATED INTO COURSES IN ART HISTORY, ART APPRECIATION AND INTERCULTURAL STUDIES
Intended uses of endowment funds	Schedule D, Part V, Line 4	THE UNIVERSITY'S ENDOWMENT CONSISTS OF APPROXIMATELY 45 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF EDUCATIONAL PURPOSES, SCHOLARLY DEVELOPMENT, AND TO ENHANCE STUDENT LIFE ON CAMPUS ITS ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS, CLASSIFIED BY THE BOARD OF TRUSTEES, TO FUNCTION AS ENDOWMENTS AND TO FURTHER THESE GOALS
FIN 48 (ASC 740) footnote	Schedule D, Part X, Line 2	THE UNIVERSITY IS EXEMPT FROM FEDERAL INCOME TAXATION AS DEFINED BY SECTIONS 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS GENERALLY EXEMPT FROM STATE INCOME TAXES UNDER THE PROVISIONS OF THE FLORIDA NONPROFIT CORPORATION ACT THEREFORE, NO PROVISION FOR INCOME TAXES HAS BEEN REFLECTED IN THE ACCOMPANYING CONSOLIDATED FINANCIAL STATEMENTS MANAGEMENT EVALUATED THE UNIVERSITY'S TAX POSITIONS AND CONCLUDED THAT THE UNIVERSITY HAD TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THE INCOME TAXES TOPIC OF THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ACCOUNTING STANDARDS CODIFICATION ("FASB ASC") WITH FEW EXCEPTIONS, THE UNIVERSITY IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE U S FEDERAL, STATE, OR LOCAL TAX AUTHORITIES FOR YEARS BEFORE 2009

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SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Part 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?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	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	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		No
	If you answered "Yes" to either line 6a or line 6b, explain on Part II			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial 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)

Identifier	Return Reference	Explanation
Racially nondiscriminatory policy	Schedule E, Part I, Line 3	LYNN UNIVERSITY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, GENDER, RELIGION, NATIONALITY, ETHNIC ORIGIN, DISABILITY AND/OR AGE IN THE ADMINISTRATION OF ITS EDUCATIONAL AND ADMISSIONS POLICIES, SCHOLARSHIPS AND LOAN PROGRAMS, ATHLETIC AND/OR OTHER SCHOOL ADMINISTERED PROGRAMS
Financial aid or assistance from a governmental agency	Schedule E, Part I, Line 6a	U S DEPARTMENT OF EDUCATION FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT, FEDERAL WORK-STUDY, FEDERAL PERKINS LOAN, FEDERAL PELL GRANT, FEDERAL DIRECT STUDENT LOANS, ACADEMIC COMPETITIVENESS GRANT, SMART GRANT, AND TEACH GRANT FLORIDA DEPARTMENT OF EDUCATION FLORIDA MINORITY TEACHER'S FUND, FLORIDA RESIDENT ACCESS GRANT, FLORIDA WORK EXPERIENCE PROGRAM, FLORIDA PRIVATE STUDENT ASSISTANCE GRANT AND FLORIDA BRIGHT FUTURES SCHOLARSHIP PROJECT

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☐ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(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
	CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	STUDY TOURS	21,900
	EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	STUDY TOURS	169,125
	EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	STUDY TOURS	73,490
	SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDY TOURS	26,500
	SOUTH AMERICA	0	0	PROGRAM SERVICES	STUDY TOURS	57,659
3a	Sub-total					
b	Total from continuation sheets to Part I					
c	**Totals** (add lines 3a and 3b)	0	0			348,674

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1	**(a)** Name of organization	**(b)** IRS code section and EIN (if applicable)	**(c)** Region	**(d)** Purpose of grant	**(e)** Amount of cash grant	**(f)** Manner of cash disbursement	**(g)** Amount of of non-cash assistance	**(h)** Description of non-cash assistance	**(i)** Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶ _____

3 Enter total number of other organizations or entities . . . . . ▶

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. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the 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)*	☑ Yes	☐ No
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)*	☐ Yes	☑ No
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)*	☑ Yes	☐ No
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)*	☐ Yes	☑ No
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	☑ No
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).*	☐ Yes	☑ No

Part V Supplemental Information

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

Identifier	ReturnReference	Explanation
METHOD USED TO ACCOUNT FOR EXPENDITURES	SCHEDULE F, PART I, LINE 3	THE UNIVERSITY ACCOUNTS FOR REVENUE AND EXPENDITURES ON THE ACCRUAL BASIS DIRECT EXPENDITURES FOR STUDY TOURS ARE TRACKED SEPARATELY DESCRIPTION OF STUDY ABROAD PROGRAM LYNN UNIVERSITY OFFERS ITS STUDENTS A VARIETY OF STUDY ABROAD OPPORTUNITIES ALL AROUND THE WORLD THESE PROGRAMS PROVIDE INTERCULTURAL AND HISTORICAL PERSPECTIVES, ENHANCING THE EDUCATIONAL MISSION OF THE SCHOOL
Method used to account for expenditures on organization's financial statements	Schedule F, Part I, Line 3	CENTRAL AMERICA AND THE CARIBBEAN ACCRUAL EAST ASIA AND THE PACIFIC ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) ACCRUAL SOUTH AMERICA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL
Method used to account for expenditures on organization's financial statements	Schedule F, Part I, Line 3	CENTRAL AMERICA AND THE CARIBBEAN ACCRUAL EAST ASIA AND THE PACIFIC ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) ACCRUAL SOUTH AMERICA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

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

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

- **a** ☐ Mail solicitations
- **b** ☐ Internet and email solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
Total . . . . . ▶						

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

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 GOLF TOURNAMENT (event type)	(b) Event #2 AUCTION (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	72,163	33,659		105,822
	2 Less Contributions	56,805	3,498		60,303
	3 Gross income (line 1 minus line 2)	15,358	30,161	0	45,519
Direct Expenses	4 Cash prizes				0
	5 Noncash prizes	4,200			4,200
	6 Rent/facility costs	7,080	2,061		9,141
	7 Food and beverages	2,887	4,253		7,140
	8 Entertainment				0
	9 Other direct expenses	1,650	1,090		2,740
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(23,221)
	11 Net income summary Combine line 3, column (d), and line 10 ▶				22,298

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a	The organization's facility	13a	
b	An outside facility	13b	

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ .....

Address ▶ .....

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party

Name ▶ .....

Address ▶ .....

16 Gaming manager information

Name ▶ .....

Gaming manager compensation ▶ $ .....

Description of services provided ▶ .....

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

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

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

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) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) ATHLETIC SCHOLARSHIP AWARDS	139	3,263,162	0	N/A	N/A
(2) ACADEMIC SCHOLARSHIP AWARDS	419	3,185,694	0	N/A	N/A
(3) NEED BASED SCHOLARSHIP AWARDS	942	7,315,777	0	N/A	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
Procedures for monitoring use of grant funds	Schedule I, Part I, Line 2	THE UNIVERSITY AWARDS GRANTS AND LOANS BASED ON A SCHOLARSHIP PROGRAM AND THE FEDERAL GOVERNMENT REQUIREMENTS FOR ALL PROGRAMS THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) MUST BE FILLED OUT AND ELIGIBLITY IS DETERMINED BASED ON THE INFORMATION PROVIDED THE GRANT AWARDED IS CREDITED TO THEIR TUITION ACCOUNT AT LYNN UNIVERSITY

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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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☑ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☑ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ Compensation committee ☐ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**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)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

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

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
Discretionary spending account	Schedule J, Part I, Line 1a	KEVIN ROSS HAS A DISCRETIONARY SPENDING ACCOUNT WHICH IS PART OF HIS EMPLOYMENT CONTRACT AND INCLUDED IN HIS TAXABLE COMPENSATION
Housing allowance or residence for personal use	Schedule J, Part I, Line 1a	THE PRESIDENT OF LYNN UNIVERSITY IS REQUIRED TO OCCUPY UNIVERSITY-OWNED HOUSING AS A CONDITION OF EMPLOYMENT THE ANNUAL FAIR RENTAL VALUE OF THE HOUSING AND UTILITIES OF $65,606 IS INCLUDED IN THE PRESIDENT'S COMPENSATION AS A NONTAXABLE BENEFIT THE BENEFIT IS EXCLUDED FROM TAXABLE COMPENSATION PURSUANT TO IRC SECTION 119
Health or social club dues or initiation fees	Schedule J, Part I, Line 1a	THE UNIVERSITY PAYS FOR COUNTRY CLUB MEMBERSHIPS FOR THE PURPOSE OF FUNDRAISING AND DEVELOPMENT FOR KEVIN ROSS, PRESIDENT, AND GREG MALFITANO, SVP FOR ADMINISTRATION FOR KEVIN ROSS IT WAS DETERMINED THAT $1,856 WAS RELATED TO PERSONAL USE, AND THEREFORE INCLUDED IN TAXABLE INCOME FOR THE YEAR FOR GREG MALFITANO IT WAS DETERMINED THAT $2,636 WAS RELATED TO PERSONAL USE, AND THEREFORE INCLUDED IN TAXABLE INCOME FOR THE YEAR
Supplemental nonqualified retirement plan	Schedule J, Part I, Line 4b	THE UNIVERSITY MAINTAINS A NONQUALIFIED SUPPLEMENTAL DEFERRED COMPENSATION PLAN FOR THE CURRENT PRESIDENT, DR KEVIN M ROSS, TO SUPPLEMENT THE RETIREMENT BENEFIT PROGRAM MAINTAINED BY THE UNIVERSITY, AND TO ENCOURAGE THE RETENTION OF THE PRESIDENT'S SERVICES FOR A SUBSTANTIAL PERIOD OF TIME THE PLAN IS UNFUNDED, AND VESTS ON JULY 1, 2016, OR UPON DEATH OR DISABILITY OF THE PRESIDENT, CHANGE IN CONTROL OF THE UNIVERSITY OR EARLY TERMINATION OF THE PLAN NO BENEFITS WERE PAID UNDER THE EXECUTIVE PLAN FOR THE YEAR THE CHANGE IN ACTUARIAL VALUE FOR KEVIN ROSS WAS $45,042 THE UNIVERSITY MAINTAINS A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN (SERP) TO RECOGNIZE THE VITAL AND SUBSTANTIAL SERVICES RENDERED BY THE UNIVERSITY'S SENIOR EXECUTIVES, AND PROVIDE APPROPRIATE BENEFITS IN RECOGNITION OF LONG, CONTINUOUS SERVICE FOR THE BETTERMENT OF THE UNIVERSITY THE SERP CONSTITUTES AN UNFUNDED PROMISE TO PAY, IN THE FUTURE, AN ANNUAL BENEFIT EQUAL TO A PERCENTAGE OF FINAL AVERAGE SALARY PARTICIPANTS BECOME 100% VESTED UPON REACHING RETIREMENT AT THE AGE OF 65, ASSUMING CONTINUOUS SERVICE TO THE UNIVERSITY IN THE EVENT OF CHANGE IN CONTROL OF THE UNIVERSITY, OR TERMINATION OF THE PLAN, PARTICIPANTS WILL RECEIVE A LUMP-SUM DISTRIBUTION EQUAL TO THE ACTUARIALLY DETERMINED VALUE OF THE PLAN BENEFIT NO BENEFITS WERE PAID UNDER THE EXECUTIVE PLAN FOR THE YEAR THE CHANGE IN ACTUARIAL VALUE FOR EACH INDIVIDUAL IS AS FOLLOWS GREG MALFITANO $0 AND LAURIE LEVINE $37,000
Non-fixed payments	Schedule J, Part I, Line 7	THE BOARD OF DIRECTORS HAS THE AUTHORITY TO APPROVE A BONUS FOR KEVIN ROSS DURING THE YEAR, THE BOARD APPROVED AND PAID HIS BONUS IN THE AMOUNT OF $38,475

Additional Data

Return to Form

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Software Version: v2012.1.0
EIN: 59-1023117
Name: LYNN UNIVERSITY INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
KEVIN ROSS	(I)	311,581	38,475	55,386	61,073	83,876	550,391	0
	(II)	0	0	0	0	0	0	0
GREG MALFITANO	(I)	227,428	6,798	5,394	4,721	23,783	268,124	0
	(II)	0	0	0	0	0	0	0
LAURIE LEVINE	(I)	207,095	0	662	48,032	28,704	284,493	0
	(II)	0	0	0	0	0	0	0
JASON WALTON	(I)	165,823	6,798	0	8,505	21,402	202,528	0
	(II)	0	0	0	0	0	0	0
CHRISTIAN G BONIFORTI	(I)	151,023	6,798	0	6,711	22,330	186,862	0
	(II)	0	0	0	0	0	0	0
PHILIP RIORDAN	(I)	146,577	0	0	7,893	26,957	181,427	0
	(II)	0	0	0	0	0	0	0
JUDITH NELSON	(I)	215,574	0	0	10,740	2,518	228,832	0
	(II)	0	0	0	0	0	0	0
MARGARET RUDDY	(I)	198,551	0	0	10,026	2,770	211,347	0
	(II)	0	0	0	0	0	0	0
MICHELE MORRIS	(I)	158,206	0	609	8,148	10,868	177,831	0
	(II)	0	0	0	0	0	0	0
DIANE DICERBO	(I)	178,544	0	352	5,865	23,506	208,267	0
	(II)	0	0	0	0	0	0	0
RALPH NORCIO	(I)	176,646	0	365	6,077	8,861	191,949	0
	(II)	0	0	0	0	0	0	0
MARSHA GLINES	(I)	156,428	0	441	7,355	8,234	172,458	0
	(II)	0	0	0	0	0	0	0
MATTHEW CHALOUX	(I)	136,078	0	20,296	7,234	23,537	187,145	0
	(II)	0	0	0	0	0	0	0
GARETH FOWLES	(I)	157,465	0	861	7,942	8,150	174,418	0
	(II)	0	0	0	0	0	0	0
GREGG COX	(I)	183,884	0	570	9,499	18,305	212,258	0
	(II)	0	0	0	0	0	0	0
THOMAS KRUCZEK	(I)	164,348	0	510	8,500	22,641	195,999	0
	(II)	0	0	0	0	0	0	0

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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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	PALM BEACH COUNTY EDUCATIONAL FACILITIES AUTHORITY	52-1562288		05-23-2012	11,077,544	PURCHASE ENERGY CONSERVATION EQUIPMENT		X		X		X
B	PALM BEACH COUNTY EDUCATIONAL FACILITIES AUTHORITY	52-1562288		06-19-2013	25,000,000	REFINANCE PRIOR ISSUES AND FUND CONSTRUCTION PROJECTS		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	134,227	0		
2	Amount of bonds legally defeased	0	0		
3	Total proceeds of issue	11,089,961	25,000,000		
4	Gross proceeds in reserve funds	0	1,300,000		
5	Capitalized interest from proceeds	0	0		
6	Proceeds in refunding escrows	0	0		
7	Issuance costs from proceeds	64,700	300,709		
8	Credit enhancement from proceeds	0	0		
9	Working capital expenditures from proceeds	0	0		
10	Capital expenditures from proceeds	4,192,351	0		
11	Other spent proceeds	0	19,052,561		
12	Other unspent proceeds	6,832,910	4,346,730		
13	Year of substantial completion				

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X	X					
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?		X		X				
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use

		A		B		C		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?		X		X				
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X	X					

Part III Private Business Use *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		X		X				
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		X		X				
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 0000%		0%		%		%	
5	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 501(c)(3) organization, or a state or local government ▶	0 0000%		0 0000%		%		%	
6	Total of lines 4 and 5	0 0000%		0%		%		%	
7	Does the bond issue meet the private security or payment test?		X		X				
8a	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 issued?		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	0 0000%		0 0000%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		X		X				
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		X		X				

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		X				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?	X		X					
b	Exception to rebate?		X		X				
c	No rebate due?		X		X				
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X	X					
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b	Name of provider								
c	Term of hedge		0 0		0				
d	Was the hedge superintegrated?		X		X				
e	Was a hedge terminated?		X		X				

Part IV Arbitrage *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b	Name of provider								
c	Term of GIC		0 0		0				
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X		X				
6	Were any gross proceeds invested beyond an available temporary period?		X		X				
7	Has the organization established written procedures to monitor the requirements of section 148?		X		X				

Part V Procedures To Undertake Corrective Action

		A		B		C		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		X				

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

Identifier	Return Reference	Explanation
PROCEEDS OF ISSUE	SCHEDULE K, PART II, LINE 3	THE TOTAL PROCEEDS OF ISSUE REPORTED IN SCHEDULE K, PART II, LINE 3 FOR THE 2012 BOND ISSUE INCLUDES $12,417 OF INTEREST EARNINGS
WRITTEN PROCEDURES	SCHEDULE K, PART III, LINE 9	THE ORGANIZATION IS IN THE PROCESS OF ADOPTING WRITTEN PROCEDURES TO ENSURE ALL NONQUALIFIED BONDS (IF ANY) OF THE ISSUE ARE REMEDIATED IN ACCORDANCE WITH THE ASSOCIATED REGULATIONS THE ORGANIZATION STRIVES TO STAY ABREAST OF FEDERAL REGULATIONS AND CONSIDERS THE REPERCUSSIONS OF ALL SIGNIFICANT ACTIVITIES WHICH COULD FORESEEABLY HAVE AN IMPACT ON THE ORGANIZATION'S TAX EXEMPT BONDS AND THE ASSOCIATED FEDERAL TAX REGULATIONS
WRITTEN PROCEDURES	SCHEDULE K, PART IV, LINE 7	THE ORGANIZATION IS IN THE PROCESS OF ADOPTING WRITTEN PROCEDURES TO MONITOR THE ORGANIZATION'S ABILITY TO REMAIN IN COMPLIANCE WITH THE ARBITRAGE REQUIREMENTS UNDER SECTION 148 OF THE INTERNAL REVENUE CODE THE ORGANIZATION STRIVES TO STAY ABREAST OF FEDERAL REGULATIONS AND CONSIDERS THE REPERCUSSIONS OF ALL SIGNIFICANT ACTIVITIES WHICH COULD FORESEEABLY HAVE AN IMPACT ON THE ORGANIZATION'S TAX EXEMPT BONDS AND THE ASSOCIATED FEDERAL TAX REGULATIONS
WRITTEN PROCEDURES	SCHEDULE K, PART V	THE ORGANIZATION IS IN THE PROCESS OF ADOPTING WRITTEN PROCEDURES WHICH DICTATE HOW MANAGEMENT TIMELY IDENTIFIES AND CORRECTS VIOLATIONS OF FEDERAL TAX REQUIREMENTS USING THE VOLUNTARY CLOSING AGREEMENT PROGRAM PROVIDED BY THE IRS WHEN SELF-REMEDIATION IS NOT AVAILABLE TO THE ORGANIZATION THE ORGANIZATION STRIVES TO STAY ABREAST OF FEDERAL REGULATIONS AND CONSIDERS THE REPERCUSSIONS OF ALL SIGNIFICANT ACTIVITIES WHICH COULD FORESEEABLY HAVE AN IMPACT ON THE ORGANIZATION'S TAX EXEMPT BONDS AND THE ASSOCIATED FEDERAL TAX REGULATIONS IN THE EVENT A VIOLATION IS IDENTIFIED THE ORGANIZATION'S POLICY IS TO CORRECT THE VIOLATION AS SOON AS POSSIBLE, WHILE WORKING WITH THE FEDERAL AUTHORITIES AS NECESSARY TO ENSURE THAT SUFFICIENT CONTROLS ARE PRESENT WHICH WILL GUARD AGAINST FUTURE VIOLATIONS

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Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, 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.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
Total			▶ $									

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) NA	N/A	94,495	SCHOLARSHIPS	TUITION ASSISTANCE

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) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) DONALD ROSS	PRESIDENT EMERITUS - FATHER TO K ROSS	133,900	COMPENSATION		No
(2) DALE RIORDAN	SPOUSE OF OFFICER - PHILIP RIORDAN	37,546	SALARY AS LIBRARIAN		No
(3) ALFREDO BONIFORTI	FATHER OF OFFICER - CHRISTIAN BONIFORTI	127,665	SALARY AS DIRECTOR OF PURCHASING		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
GRANTS OR ASSISTANCE BENEFITTING INTERESTED PERSONS	SCHEDULE L, PART III	AS PER IRS INSTRUCTIONS FOR FORM 990 SCHEDULE L, SCHOOLS ARE NOT REQUIRED TO IDENTIFY INTERESTED PERSONS TO WHOM THEY PROVIDED SCHOLARSHIPS, FELLOWSHIPS AND SIMILAR ASSISTANCE COLUMNS (A) AND (B) SHOULD BE LEFT BLANK FOR THESE LINES

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art	X	1	41,750	OPINIONS OF EXPERTS
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded	X	8	380,432	MARKET VALUE
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				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (CLAVICHORD)	X	1	4,000	OPINIONS OF EXPERTS
26	Other ▶ (MANNIQUINS)	X	1	7,097	OPINIONS OF EXPERTS
27	Other ▶ (GRAND PIANO)	X	1	12,000	OPINIONS OF EXPERTS
28	Other ▶ (EQUIPMENT)	X	1	29,545	MARKET VALUE
	Other ▶ (KIOSKS)	X	1	5,000	MARKET VALUE
	Other ▶ (COMPUTERS)	X	1	113,975	MARKET VALUE
	Other ▶ (FURNITURE)	X	1	3,766	MARKET VALUE

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | 29 | 0

			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	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
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			

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.

Identifier	Return Reference	Explanation
Explanations of reporting method for number of contributions	Schedule M, Part I	OTHER NUMBER OF CONTRIBUTIONS OTHER NUMBER OF CONTRIBUTIONS OTHER NUMBER OF CONTRIBUTIONS OTHER NUMBER OF CONTRIBUTIONS OTHER NUMBER OF CONTRIBUTIONS OTHER NUMBER OF CONTRIBUTIONS SECURITIES - PUBLICLY TRADED NUMBER OF CONTRIBUTIONS ART - WORKS OF ART NUMBER OF CONTRIBUTIONS
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=CLAVICHORD	NUMBER OF CONTRIBUTIONS
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=MANNIQUINS	NUMBER OF CONTRIBUTIONS
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=GRAND PIANO	NUMBER OF CONTRIBUTIONS
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=EQUIPMENT	NUMBER OF CONTRIBUTIONS

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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

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990, PART III, LINE 1	(CONTINUED FROM PART III) AND WHOSE PRIMARY PURPOSES ARE EDUCATION, THE PRESERVATION, DISCOVERY, DISSEMINATION AND CREATIVE APPLICATION OF KNOWLEDGE, AND THE PREPARATION OF ITS GRADUATES WITH THE ACADEMIC FOUNDATION FOR LIFELONG LEARNING SERVICE, SCHOLARLY ACTIVITY INCLUDING RESEARCH, AND ONGOING PROFESSIONAL DEVELOPMENT ALLOW THE FACULTY, IN CONJUNCTION WITH THE ENTIRE UNIVERSITY COMMUNITY, TO FULFILL ITS PURPOSES FACILITATING LEARNING AND FOSTERING THE INTELLECTUAL LIFE OF THE UNIVERSITY LYNN STRESSES INDIVIDUALIZED LEARNING, INNOVATIVE APPROACHES AND AN INTERNATIONAL FOCUS AMONG ITS STUDENTS AND FACULTY THE UNIVERSITY OFFERS BACCALAUREATE, MASTER'S, AND DOCTORAL DEGREES AS WELL AS CERTIFICATE AND NON-CREDIT CONTINUING EDUCATION PROGRAMS BREADTH, DEPTH, AND APPLICATION OF LEARNING ARE THE BASES FOR COMPETENCIES IN ALL PROGRAMS GRADUATE CURRICULA PROMOTE ADVANCED OR EXPERT KNOWLEDGE AND SCHOLARSHIP PROGRAMS ARE DELIVERED THROUGH A VARIETY OF VENUES, INCLUDING A TRADITIONAL RESIDENTIAL CAMPUS SETTING AND DISTANCE EDUCATION

Identifier	Return Reference	Explanation
PROGRAM ACCOMPLISHMENTS	FORM 990, PART III, LINE 4A	(CONTINUED FROM PART III) THE UNIVERSITY IS COMMITTED TO STUDENT-CENTERED LEARNING, WHERE FACULTY AND STAFF PROVIDE PERSONALIZED ATTENTION TO STUDENTS WHO HAVE VARYING LEVELS OF ACADEMIC PROFICIENCY AND ARE MOTIVATED TO EXCEL A FULL RANGE OF ACADEMIC AND SUPPORT PROGRAMS ARE COORDINATED TO SERVE THE INCREASINGLY DIVERSE NEEDS OF UNDERGRADUATE AND GRADUATE STUDENTS ADDITIONAL AND SPECIALIZED ACADEMIC SUPPORT SERVICES ARE OFFERED TO PROVIDE ACADEMIC ASSISTANCE TO HELP STUDENTS REMAIN IN COLLEGE AND GRADUATE THESE SERVICES ARE OFFERED TO STUDENTS IN A VARIETY OF FORMS WITH A VARYING FEE SCHEDULE AN ACADEMIC RESOURCE NAMED THE INSTITUTE FOR ACHIEVEMENT AND LEARNING IS AVAILABLE TO ALL STUDENTS, INCLUDING THOSE WITH DIAGNOSED LEARNING DIFFERENCES MATH, COMPUTER AND OTHER SUBJECT-AREA TUTORS ASSIST STUDENTS THE UNIVERSITY, SMALL BY DESIGN, PROVIDES AN ENVIRONMENT WITHIN AND OUTSIDE THE CLASSROOM IN WHICH A COMMUNITY OF LEARNERS CAN PURSUE ACADEMIC EXCELLENCE AND DEVELOP THEIR SKILLS AS RESPONSIBLE GLOBAL CITIZENS FACULTY, STAFF AND STUDENTS CONTRIBUTE TO AN ATMOSPHERE THAT NURTURES CREATIVITY, FOSTERS ACHIEVEMENT, VALUES DIVERSITY AND ENCOURAGES VOLUNTARISM EACH JAN 12, ALL FACULTY, STAFF AND STUDENTS PERFORM COMMUNITY SERVICE DURING "KNIGHTS UNITE DAY OF CARING," A PROGRAM WHICH HONORS THE FOUR STUDENTS AND TWO PROFESSORS WHO DIED IN THE HAITI EARTHQUAKE IN 2010 WHILE PERFORMING COMMUNITY SERVICE LYNN'S ACADEMIC CURRICULA AND PROGRAMS ARE STRUCTURED TO PROVIDE A BALANCE BETWEEN THE THEORETICAL AND THE PRACTICAL, ALONG WITH OPPORTUNITIES TO BECOME INVOLVED IN COMMUNITY-BASED ORGANIZATIONS AND INDUSTRIES EDUCATION AND SERVICE ARE FULLY INTEGRATED TO MEET THE CHANGING NEEDS OF THE LOCAL AND GLOBAL COMMUNITY THIS INTEGRATIVE DESIGN PREPARES OUR GRADUATES TO MEET THE DYNAMIC NEEDS OF THE EMERGING GLOBAL SOCIETY A RIGOROUS, NEW CORE CURRICULUM-THE DIALOGUES OF LEARNING-WAS LAUNCHED IN FALL 2008 CORE COURSES ARE REQUIRED THROUGH ALL FOUR YEARS IN THE BACHELOR'S DEGREE PROGRAM IN EACH CORE CLASS, FACULTY MEMBERS MEASURE STUDENT OUTCOMES IN COMPETENCY AREAS INCLUDING WRITING, QUANTITATIVE REASONING, AND SCIENTIFIC AND TECHNOLOGICAL LITERACY PRESENTED IN SEMINAR RATHER THAN LECTURE FORMAT, THE CORE COURSES ARE ORGANIZED AROUND LIFE'S BIG QUESTIONS DIALOGUES OF SELF AND SOCIETY, DIALOGUES OF BELIEF AND REASON, DIALOGUES OF JUSTICE AND CIVIC LIFE EACH JANUARY, ALL STUDENTS ARE REQUIRED TO ATTEND A J-TERM COURSE THOSE ARE FOCUSED ON INNOVATION AND OFFER INTENSE THREE-WEEK EXPERIENCES THAT INCLUDE TRAVEL, CIVIC ACTIVISM, AND OTHER CREATIVE APPROACHES TO LEARNING ALL FRESHMEN ARE REQUIRED TO PARTICIPATE IN THE CITIZENSHIP PROJECT DURING THE J-TERM IN FALL 2013, LYNN LAUNCHED ONE OF THE MOST EXTENSIVE TABLET-BASED LEARNING EFFORTS IN THE COUNTRY THE AWARD-WINNING INITIATIVE USED APPLE TECHNOLOGY TO DELIVER THE DIALOGUES OF LEARNING CORE CURRICULUM TO ALL INCOMING FRESHMEN WHILE ALSO SAVING THEM UP TO 50 PERCENT ON THE TYPICAL COST OF THEIR CORE CURRICULUM TEXTBOOKS EARLY RESULTS AND FEEDBACK FROM THE IPAD INITIATIVE HAVE BEEN SO POSITIVE THAT THE PROGRAM WILL ENTER PHASE II AND ACCELERATE THE INITIATIVE LYNN WILL DISTRIBUTE IPADS TO ALL DAY UNDERCLASSMEN AS WELL AS EXPAND THE PROGRAM TO INCLUDE MBA STUDENTS IN FALL 2014

Identifier	Return Reference	Explanation
PROGRAM ACCOMPLISHMENTS	FORM 990, PART III, LINE 4B	(CONTINUED FROM PART III) SOCIAL ACTIVITIES INCLUDE GAME SHOWS, DANCES, COMEDIANS, LIVE MUSIC, INTERNATIONAL FESTIVALS, FILMS, POOL PARTIES, SPORTS DAYS, INTRAMURAL SPORTS, AWARD DINNERS AND NOVELTY ENTERTAINMENT INDIVIDUAL INTERESTS RANGING FROM THE FINE ARTS TO PROFESSIONAL FOOTBALL, BASEBALL, BASKETBALL AND HOCKEY TO GOURMET DINING CAN BE FOUND IN SOUTH FLORIDA LYNN UNIVERSITY HOLDS MEMBERSHIP IN THE NATIONAL COLLEGIATE ATHLETIC ASSOCIATION(NCAA), DIVISION II, AND THE SUNSHINE STATE ATHLETIC CONFERENCE INTERCOLLEGIATE ATHLETIC PROGRAMS ARE OPEN TO ALL STUDENTS IN ACCORDANCE WITH NCAA AND INSTITUTIONAL ELIGIBILITY STANDARDS INTERCOLLEGIATE TEAMS INCLUDE MEN'S AND WOMEN'S SOCCER, MEN'S AND WOMEN'S BASKETBALL, MEN'S AND WOMEN'S GOLF, MEN'S AND WOMEN'S TENNIS, BASEBALL, SOFTBALL, WOMEN'S CROSS COUNTRY, MEN'S LACROSSE, WOMEN'S SWIMMING AND VOLLEYBALL ALL STUDENT-ATHLETES ARE REQUIRED TO ATTEND SEMINARS ON SUBSTANCE ABUSE AND NCAA STANDARDS THROUGHOUT THE SCHOOL YEAR IN 2012-13, 83 PERCENT OF THE STUDENT-ATHLETES EARNED A 3 00 GPA OR HIGHER, 62 PERCENT OF STUDENT-ATHLETES EARNED A 3 50 GPA OR HIGHER AND 10 PERCENT EARNED A PERFECT 4 00 GPA THE ATHLETIC DEPARTMENT AS A WHOLE AVERAGED A SCHOOL-RECORD 3 408 GPA FOR THE ACADEMIC YEAR WHILE 12 OF THE 13 ATHLETIC PROGRAMS AVERAGED A 3 00 GPA AS A TEAM SEVEN TEAMS POSTED A 3 50 GPA OR BETTER FOR THE ACADEMIC YEAR THE WOMEN'S GOLF TEAM RECORDED A DEPARTMENT-HIGH 3 737 GPA WHILE THE MEN'S SOCCER TEAM HAD THE HIGHEST MEN'S TEAM AVERAGE AT 3 566 IN ADDITION, THE MEN'S SOCCER TEAM HAD THE HIGHEST GPA IN THE NATION AMONG ALL FOUR-YEAR NCAA INSTITUTIONS IN ADDITION TO INTERCOLLEGIATE SPORTS, STUDENTS ARE ENCOURAGED TO PARTICIPATE IN A WIDE RANGE OF INTRAMURAL PROGRAMS, INCLUDING BASKETBALL, FLAG FOOTBALL, SOFTBALL, TENNIS AND VOLLEYBALL AT LEAST ONE REGISTERED NURSE OR PHYSICIAN'S ASSISTANT IS ON DUTY DURING DAYTIME HOURS IN THE HEALTH CENTER, AND WORKS IN CONJUNCTION WITH COMMUNITY MEDICAL SERVICES TO PROVIDE AMPLE HEALTH CARE THE HEALTH CENTER PROVIDES TREATMENT FOR MINOR AILMENTS WHEN FURTHER CARE IS NEEDED, REFERRALS ARE MADE TO LOCAL PHYSICIANS AND HEALTH CARE AGENCIES ANOTHER HEALTH CENTER STAFF MEMBER ORGANIZES WELLNESS ACTIVITIES INCLUDING YOGA AND EXERCISE CLASSES AS WELL AS STUDENTS' STRENGTH TRAINING IN LYNN'S GYM COUNSELING IS PROVIDED ON A PRIVATE OR GROUP BASIS, AND RECORDS ARE MAINTAINED IN STRICT CONFIDENCE BY THE DIRECTOR OF COUNSELING STUDENTS ALSO ARE URGED TO CONSULT THEIR INDIVIDUAL INSTRUCTORS, RESIDENT ASSISTANTS, AND APPROPRIATE MEMBERS OF THE UNIVERSITY COMMUNITY, ALL OF WHOM ARE PROFESSIONALLY FOCUSED ON ASSISTING STUDENTS IN ADDITION, ALCOHOL AND SUBSTANCE ABUSE LITERATURE AND REFERRAL SERVICES ARE CONTINUALLY AVAILABLE THROUGH THE COUNSELING CENTER MULTICULTURAL AND WOMEN'S CENTERS PROVIDE PROGRAMMING AND COUNSELING SERVICES AS WELL THE CENTER FOR CAREER DEVELOPMENT PROVIDES A VARIETY OF SERVICES TO ASSIST STUDENTS IN EVALUATING, CHOOSING AND PLANNING A CAREER PROFESSIONAL STAFF AND CAREER COUNSELORS ARE AVAILABLE TO HELP STUDENTS SET THEIR CAREER GOALS, INVESTIGATE EMPLOYMENT OPPORTUNITIES AND INTERVIEW WITH COMPANIES FOR WHICH THEY WOULD LIKE TO WORK OR INTERN A LIBRARY IN THE CENTER PROVIDES INFORMATION ABOUT A BROAD CROSS-SECTION OF EMPLOYERS, CAREERS, INTERNSHIP OPPORTUNITIES, SALARY SURVEYS, CORPORATE TRAINING PROGRAMS, CAREER AND ONLINE JOB OPPORTUNITIES THE OFFICE OF SPIRITUAL AND RELIGIOUS LIFE AT LYNN UNIVERSITY IS CONCERNED WITH THE PERSONAL GROWTH OF ALL STUDENTS THE UNIVERSITY SEEKS TO HELP ITS STUDENTS UNDERSTAND HOW SPIRITUALITY IS EXPERIENCED BY PEOPLE AND ENCOURAGES THEM TO SEEK A FITTING RESPONSE TO ITS PRESENCE IN THEIR LIVES A LOVING CONCERN IS SHARED FOR STUDENTS OF ALL FAITHS, RESPECTING THEIR FREEDOM TO MAINTAIN AND EXPRESS THEIR OWN SPIRITUAL CONVICTIONS, AND FACILITATING ACCESS TO THEIR OWN SPIRITUAL LEADERS FOR WORSHIP, STUDY AND COUNSEL

Identifier	Return Reference	Explanation
Delegate broad authority to a committee	Form 990, Part VI, Section A, Line 1a	THE EXECUTIVE COMMITTEE SHALL HAVE A MINIMUM OF THREE MEMBERS, ALL OF WHOM SHALL BE MEMBERS OF THE BOARD BETWEEN MEETINGS OF THE BOARD, THE EXECUTIVE COMMITTEE SHALL HAVE GENERAL SUPERVISION OF THE ADMINISTRATION AND PROPERTY OF THE CORPORATION EXCEPT THAT, UNLESS SPECIFICALLY EMPOWERED BY THE BOARD TO DO SO, IT MAY NOT TAKE ANY ACTION INCONSISTENT WITH A PRIOR ACT OF THE BOARD OF TRUSTEES, AWARD DEGREES, ALTER THESE BY-LAWS, LOCATE PERMANENT BUILDINGS ON TAX-EXEMPT PROPERTY HELD FOR THE CORPORATION'S PURPOSES, REMOVE OR APPOINT THE PRESIDENT OF THE CORPORATION, OR TAKE ANY ACTION WHICH HAS BEEN RESERVED FOR THE BOARD

Identifier	Return Reference	Explanation
Family/business relationships amongst interested persons	Form 990, Part VI, Section A, Line 2	CHRISTINE LYNN AND JAN CARLSSON - BUSINESS RELATIONSHIP

Identifier	Return Reference	Explanation
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	A DRAFT OF FORM 990 WAS REVIEWED BY CROWE HORWATH BASED ON AUDITED FINANCIAL STATEMENTS AND OTHER INFORMATION PROVIDED BY UNIVERSITY MANAGEMENT FOLLOWING A REVIEW BY THE CFO AND DIRECTOR OF ACCOUNTING, MINOR REVISIONS WERE INCORPORATED INTO A REVISED DRAFT, WHICH WAS POSTED TO THE BOARD PORTAL PRIOR TO A GENERAL MEETING OF THE BOARD OF TRUSTEES THE FORM 990 WAS PRESENTED TO THE FULL BOARD MEETING ON MARCH 13, 2014 PROVIDING THE TRUSTEES AN OPPORTUNITY TO REVIEW AND DISCUSS PRIOR TO FILING WITH IRS

Identifier	Return Reference	Explanation
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	EACH YEAR, ALL OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES ARE REQUIRED TO SIGN A DISCLOSURE LETTER DETAILING ANY RELATIONSHIPS OR BUSINESS TRANSACTIONS WHERE A POTENTIAL CONFLICT MIGHT EXIST THESE DISCLOSURES ARE REVIEWED BY THE CFO, AND THE CHIEF OF STAFF/BOARD LIAISON IN THE EVENT OF A CONFLICT OF INTEREST, OR THE APPEARANCE OF ANY SUCH CONFLICT, IT IS INCUMBENT UPON THE RELEVANT BOARD MEMBER(S) OR DIRECTOR(S) TO NOTIFY THE BOARD OF THE CONFLICT AND RECUSE THEMSELVES FROM PARTICIPATION IN THE DISCUSSION AND VOTE REGARDING ANY RELATED ISSUES OR TRANSACTIONS

Identifier	Return Reference	Explanation
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	THE PRESIDENT'S COMPENSATION AND BENEFIT PACKAGE IS REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES THIS COMMITTEE EVALUATES PERFORMANCE AGAINST PRE-DETERMINED GOALS IN ADDITION, THE BOARD UTILIZES AN OUTSIDE COMPENSATION EXPERT TO PROVIDE INDEPENDENT INFORMATION ABOUT INDUSTRY PRACTICES AND BENCHMARKING AMONG COMPARABLE ORGANIZATIONS, IN DETERMINING AN APPROPRIATE PERCENT INCREASE THE FIRM ALSO PROVIDES INSIGHT REGARDING OTHER BENEFITS AND NON-CASH COMPENSATION THE UNIVERSITY RETAINED AN OUTSIDE EXPERT TO DO A COMPENSATION STUDY OF ALL EMPLOYEES, INCLUDING OFFICERS OF THE ORGANIZATION THIS COMPREHENSIVE STUDY WAS PERFORMED SIX YEARS AGO, AND WE RECEIVE ONGOING GUIDANCE REGARDING ANNUAL INCREASES AS NEW POSITIONS ARE CREATED, OR MARKET CONDITIONS WARRANT, THIS EXPERT IS CONSULTED ON A CASE-BY-CASE BASIS THE UNIVERSITY PROVIDES BENEFITS ACCORDING TO WRITTEN STANDARD POLICIES IF ANY BENEFIT IS PROVIDED OUTSIDE OF THESE POLICIES, BOARD APPROVAL IS REQUIRED

Identifier	Return Reference	Explanation
Process used to establish compensation of other officers/key employees	Form 990, Part VI, Section B, Line 15b	THE PRESIDENT CONDUCTS ANNUAL PERFORMANCE REVIEWS OF ALL OFFICERS, BASED ON PRE-DETERMINED GOALS HE THEN MAKES RECOMMENDATIONS REGARDING COMPENSATION TO THE CHAIR OF THE BOARD FOR APPROVAL THE UNIVERSITY RETAINED AN OUTSIDE EXPERT TO DO A COMPENSATION STUDY OF ALL EMPLOYEES, INCLUDING OFFICERS OF THE ORGANIZATION THIS COMPREHENSIVE STUDY WAS PERFORMED SIX YEARS AGO, AND WE RECEIVE ONGOING GUIDANCE REGARDING ANNUAL INCREASES AS NEW POSITIONS ARE CREATED, OR MARKET CONDITIONS WARRANT, THIS EXPERT IS CONSULTED ON A CASE-BY-CASE BASIS THE UNIVERSITY PROVIDES BENEFITS ACCORDING TO WRITTEN STANDARD POLICIES IF ANY BENEFIT IS PROVIDED OUTSIDE OF THESE POLICIES, BOARD APPROVAL IS REQUIRED

Identifier	Return Reference	Explanation
Governing documents, conflict of interest policy and financial statements available to the public	Form 990, Part VI, Section C, Line 19	FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE NOT REQUIRED DISCLOSURES PURSUANT TO INTERNAL REVENUE CODE (IRC) SECTION 6104 THEREFORE, THESE DOCUMENTS ARE NOT AVAILABLE TO THE PUBLIC AT THIS TIME. THE CONFLICT OF INTEREST POLICY IS PROVIDED UPON REQUEST

Identifier	Return Reference	Explanation
Other changes in net assets or fund balances	Form 990 , Part XI, Line 9	GAIN (LOSS) - PENSION RELATED CHANGES - 837284, GAIN (LOSS) - DERIVATIVE - 542440, GAIN (LOSS) - CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT - -2328,

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=KIOSKS	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=COMPUTERS	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=FURNITURE	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line 9	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line 1	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=CLAVICHORD	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=MANNIQUINS	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=GRAND PIANO	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=EQUIPMENT	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=KIOSKS	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=COMPUTERS	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=FURNITURE	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line 9	NUMBER OF CONTRIBUTIONS

Identifier	Return Reference	Explanation
Number of contributions or items contributed	Schedule M, part I, column (b), Line 1	NUMBER OF CONTRIBUTIONS

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
LYNN UNIVERSITY INC

Employer identification number
59-1023117

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No

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	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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.)

(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 512 (b)(13) controlled entity? Yes	(i) No
(1) SPLIT-INTEREST TRUST	TRUST	FL	LYNN UNIVERSITY	TRUST					

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 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 or more related organizations listed in Parts II-IV?		
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	**1a**	**No**
b	Gift, grant, or capital contribution to related organization(s)	**1b**	**No**
c	Gift, grant, or capital contribution from related organization(s)	**1c**	**No**
d	Loans or loan guarantees to or for related organization(s)	**1d**	**No**
e	Loans or loan guarantees by related organization(s)	**1e**	**No**
f	Dividends from related organization(s)	**1f**	**No**
g	Sale of assets to related organization(s)	**1g**	**No**
h	Purchase of assets from related organization(s)	**1h**	**No**
i	Exchange of assets with related organization(s)	**1i**	**No**
j	Lease of facilities, equipment, or other assets to related organization(s)	**1j**	**No**
k	Lease of facilities, equipment, or other assets from related organization(s)	**1k**	**No**
l	Performance of services or membership or fundraising solicitations for related organization(s)	**1l**	**No**
m	Performance of services or membership or fundraising solicitations by related organization(s)	**1m**	**No**
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1n**	**No**
o	Sharing of paid employees with related organization(s)	**1o**	**No**
p	Reimbursement paid to related organization(s) for expenses	**1p**	**No**
q	Reimbursement paid by related organization(s) for expenses	**1q**	**No**
r	Other transfer of cash or property to related organization(s)	**1r**	**No**
s	Other transfer of cash or property from related organization(s)	**1s**	**No**

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Additional Data

Return to Form

Software ID: 12000266
Software Version: v2012.1.0
EIN: 59-1023117
Name: LYNN UNIVERSITY INC

Part VII **Supplemental Information**

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

Identifier	Return Reference	Explanation	

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