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DLN: 93493343001035

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 private foundations)

 \blacktriangleright Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

Open to Public Inspection

A F	or the 2	2014 ca	lendar year, or tax year be	ginning 06-01-201	4 , and ending 05-31-20	015			
B Ch	eck if ap	pplicable	C Name of organization The University of Tampa Inc.	orporated			D Emplo	yer iden	tification number
☐ Ad	dress ch	ange	, ,	•			59-0	624459	
∏ Na	ıme chai	nge	Doing business as						
In	tıal retui	rn					E Teleph	one numt	per
	nal turn/tern	nınated	Number and street (or P O 1 401 W Kennedy Blvd	box if mail is not deliv	ered to street address) Room,	/suite	(813) 253-6	210
	nended i		City or town, state or provin	ce country and ZIP o	r foreign postal code		(013	, 233 0	210
_		pending	Tampa, FL 336061490	ce, country, and zir c	i Toreigh postar code		G Gross	receipts \$	278,642,705
,	p iloution	. penamy	F Name and address	of principal office	r	1 11/ > -		_	_
			Ronald L Vaughn	of principal office			Is this a group subordinates?		for
			401 W Kennedy Blvd Tampa, FL 33606149	9.0					
			rampa, re 33000113			I	Are all subord ncluded?	ınates	Γ Y es Γ No
I Ta	ax-exem	pt status	501(c)(3) 501(c) () ◀ (insert no)	4947(a)(1) or 527			nalıst ((see instructions)
J W	<i>l</i> ebsite	e: ► ww	w ut edu			H(c)	Group exemp	tion num	nber ►
<u></u>	m of ore	720172101	n 🔽 Corporation 🗆 Trust 🗀 As	cocation C Other b		1	of formation 1	<u> </u>	State of legal domicile FL
	ırt I		in p corporation) must as	sociation Other		L feat	OI IOIIIIauoii 1	931 14	state of legal dofficile. FL
			describe the organization's	mission or most s	ignificant activities				
			versity of Tampa is commi			become a p	productive an	d respor	isible citizen
2	-								
Ě	-								
e	2 -	Chackt	:his box 🛏 if the organizat	tion discontinued	its operations or dispose	d of more th	nan 25% of its	net ac	e e t c
Activities & Governance	- `	CHECK	in the organizat	cion discontinuca	ics operations of dispose	a or more cr	1411 25 70 01 10.	, nec as.	3003
ب 20	1 8	Number	of voting members of the g	joverning body (Pa	art VI, line 1a)			з	45
8	4 1	Number	of independent voting men	nbers of the gover	ning body (Part VI, line 1	.b)		4	4.4
Ĕ	5 1	Total nu	ımber of ındıvıduals employ	ed in calendar ye	ar 2014 (Part V , line 2a)			5	2,886
<u>ş</u>	6 7	Total nu	umber of volunteers (estima	ate if necessary)				6	800
٠.	7a 1	Total ur	nrelated business revenue 1	from Part VIII, co	lumn (C), line 12			7a	C
	ь	Net unr	elated business taxable inc	ome from Form 99	90-T, line 34			7b	C
-							Prior Year		Current Year
	8	Contr	ributions and grants (Part V	'III, line 1h) .			16,677,	869	18,229,505
Rayenue	9	9 Program service revenue (Part VIII, line 2g)						848	232,396,236
	10	Inves	stment income (Part VIII, c	column (A), lines 3	3,4, and 7d)		3,892,	777	4,848,478
ď	11	Other	r revenue (Part VIII, colum	ın (A), lınes 5, 6d,	8c, 9c, 10c, and 11e)		1,465,	042	2,264,580
	12		revenue—add lines 8 throu			ıne	235,624,	F 3.6	257,738,799
	12								
	13 14		is and similar amounts paid fits paid to or for members (·			48,448,	0	52,906,434
	15		ies, other compensation, er						
83	15	5-10		iipioyee bellelits (r art 1%, column (A), me	"	61,289	955	63,290,299
<u>\$</u>	16a	Profe	ssional fundraising fees (Pa	art IX, column (A)	, line 11e)			0	0
Expenses	Ь	Total f	undraısıng expenses (Part IX, colı	umn (D), line 25) 🕒	254,240	.			
ш	17	Other	r expenses (Part IX, columi	n (A.) lines 11a-1	1d 11f-24e)	_	80,166	889	95,756,247
	18		expenses Add lines 13-1				189,905,		211,952,980
	19		nue less expenses Subtrac				45,719		45,785,819
<u>አ ማ</u>			·				nning of Curre		End of Year
Not Assets or Fund Balances							Year		
3,00	20		assets (Part X, line 16) .				500,385,		574,229,285
38	21		liabilities (Part X, line 26)				182,546,		212,503,650
	22		ssets or fund balances Sul	btract line 21 fron	n line 20		317,838,	446	361,725,635
	rt II	_	nature Block						
			iperjury, I declare that I ha belief, it is true, correct, ai						
			nowledge	na complete Deel	aracion of preparer (other	than onice	i / is bused of	an iiioi	mation of winen
		T.					1		
		****	*** nature of officer				2015-12-09 Date		
Sig:		l'.					Date		
.161	_		ald Vaughn President e or print name and title						
		<u> </u>	Print/Type preparer's name	Preparer's s	signature	Date	Check If	PTIN	
Pai	Ч		Nicole Bencik	Nicole Bend			self-employed	D007F6	195
	u pare		Firm's name F CROWE HORW	ATH LLP			Firm's EIN 🕨 3	5-092168	00
	pare Onl		Firm's address ► 401 E Jackson S	St			Phone no (81	3) 223-13	16
US	, OIII	ו עי	Suite 2900				1		

Tampa, FL 336025231

∀Yes **No**

Part IV	Checklist of	Required	Schedules

	,			
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes,"		Yes Yes	No
	complete Schedule A	1		
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	Yes	No
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		NO
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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? <i>If "Yes,"</i> complete Schedule D, Part III 2	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? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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? <i>If "Yes," complete Schedule D, Part IX</i>	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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government 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 or other assistance to or for domestic individuals 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? <i>If "Yes," complete Schedule J</i>	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 25a	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), 501(c)(4), and 501(c)(29) 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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)			
а	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,"	204		NO
	complete Schedule L, Part IV	28b	Yes	
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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 or note to any line in this Part V	<u> </u>		
	Estable sombar control of Paul 2 of Estable		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 10,225 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
ь	If "Yes," enter the name of the foreign country CJ			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	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
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
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?	5c 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).			
а	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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	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			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
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			
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			
С	Enter the amount of reserves on hand			
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 or note to any line in this Part V	Ι														.マ
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Se	ction A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7a		No
	more members of the governing body?	H		No No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			ī.
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	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		
Se	ction 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.			

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, address, and telephone number of the person who possesses the organization's books and records ►SONIA ROMERO

401 W KENNEDY BLVD TAMPA,FL 336061490 (813) 253-6235

Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line 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) A verage hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n ıs l	ne l both	box, an	heck unless officer stee)	;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

c Total from continu	uation sheets to Part VII, Section A	►			
d Total (add lines 1	o and 1c)	►	2,810,958	0	524,850

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►84

	_		Yes	NO
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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	_		
	maividual	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 I for such person	5	Yes	

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)	(B)	(C)				
Name and business address	Description of services	Compensation				
SODEXO CAMPUS FOOD SERVICE	FOOD SERVICES	12,834,130				
401 W KENNEDY BLVD BOX 62F						
TAMPA, FL 336061450						
CROSSROADS CONSTRUCTION COMPANY	CONSTRUCTION SERVICES	10,394,083				
PO BOX 1109						
LAKELAND, FL 338021109						
BECK	CONSTRUCTION SERVICES	9,214,154				
220 W 7TH AVE SUITE 200						
TAMPA, FL 336022012						
SODEXO CAMPUS SERVICES	FACILITIES MAINTENANCE	6,439,104				
200 N EDISON AVE						
TAMPA, FL 336061435						
CORESLAB STRUCTURES OF TAMPA INC	GARAGE CONSTRUCTION SERVICES	5,553,993				
6301 N 56TH ST						
TAMPA, FL 336104020						
2 Total number of independent contractors (including but not limited to those listed above	e) who received more than					

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►72

άı	
Revenu	
Other	

Total revenue	Form 99		•	_					Page 9
Total revenue Related or sevenue Related or s	Part V	/			se or note to any lu	ne in this Part VIII			.
Page 25 Pag						(A)	(B) Related or exempt function	Unrelated business	(D) Revenue excluded from tax under sections 512-514
2a Tutton and Fees	<u> 9</u> 2	1a	Federated cam	paigns 1a					
2a tutton and Fees	am	b	Membership du	ies 1b	0				
2a tutton and Fees	Ğ ğ	c	Fundraising eve	ents 1c	0				
2a tutton and Fees	iffs ar /	d	Related organiz	zations 1d	318,959				
2a tutton and Fees	£, E	e	Government grants	s (contributions) 1e	1,627,228				
2a tutton and Fees	rtions er Si	f	All other contribution	ons, gifts, grants, and 1f ot included above	16,283,318				
2a tutton and Fees	ntribu 4 Oth	g		ons included in lines	3,419,090				
100 100,750,232 100,750,232 0	ë G	h	Total. Add lines	s 1 a - 1 f	· · · •	18,229,505			
3 Investment income (including dividends, interest, and other similar amounts) 1,715,142 0 0 0					Business Code				
3 Investment income (including dividends, interest, and other similar amounts) 1,715,142 0 0 0	n e	2a	Tuition and Fees		900099	190,750,232	190,750,232	0	0
3 Investment income (including dividends, interest, and other similar amounts) 1,715,142 0 0 0	Ę	b	Education Related	Auxiliary Sales	900099	40,996,034	40,996,034	0	0
3 Investment income (including dividends, interest, and other similar amounts) 1,715,142 0 0 0	Ace	c	Educational Service	es	611710	286,376	286,376	0	0
3 Investment income (including dividends, interest, and other similar amounts) 1,715,142 0 0 0	Ser.	d	Student Services		611710	140,857	140,857	0	0
3 Investment income (including dividends, interest, and other similar amounts) 1,715,142 0 0 0	E E	_			900099	·	115,375	0	0
3 Investment income (including dividends, interest, and other similar amounts) 1,715,142 0 0 0	Ď	f	All other progra	am service revenue		107,362	107,362	0	0
1,715,142 0 0 0 0 0 0 0 0 0	<u>~</u>	<u> </u>				232,396,236			
Toome from investment of tax-exempt bond proceeds		3				1,715,142	0	0	1,715,142
(i) Real		4			F	0	0	0	0
Comparison		5	Royalties			42,628	0	0	42,628
Description Test			C		(II) Personal				
Rental income or (loss)				·	0				
The state of th			expenses		0				
Ta Gross amount (1) Securities (11) Other			or (loss)			477 420			477 120
7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses 20,176,936 0 0 0 0 8a Gross income from fundraising events (not including \$ _ 0 0 0 0 0 9a Gross income from gaming activities See Part IV, line 18					-4/7,139	0	U	-477,139	
## Description of the pass and sales expenses controlled in the pass an		7a	from sales of		(II) O thei				
Sales expenses Sale		b	than inventory Less cost or	20.475.225					
Net gain or (loss)			sales expenses		0				
8a Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c) See Part IV, line 18					0	2 122 226			2 422 226
\$ 0 0 0 0 0 0 0 0 0			Gross income f	rom fundraising		3,133,336	U U	0	3,133,336
Gross income from gaming activities See Part IV, line 19 a 0 b Less direct expenses b 0 c Net income or (loss) from gaming activities 0 10a Gross sales of inventory, less returns and allowances . a 0 b Less cost of goods sold b 0 c Net income or (loss) from sales of inventory 0 Miscellaneous Revenue Business Code 11a Health Center Fees 621400 1,062,854 0 0 Parking/Library Fines 900099 244,047 244,047 0	Revenue		\$ of contributions	0 s reported on line 1c)					
Gross income from gaming activities See Part IV, line 19 a 0 b Less direct expenses b 0 c Net income or (loss) from gaming activities 0 10a Gross sales of inventory, less returns and allowances . a 0 b Less cost of goods sold b 0 c Net income or (loss) from sales of inventory 0 Miscellaneous Revenue Business Code 11a Health Center Fees 621400 1,062,854 0 0 Parking/Library Fines 900099 244,047 244,047 0	<u>u</u>	.	1	<u> </u>	0				
Gross income from gaming activities See Part IV, line 19	돌				ovents	0		0	o
b Less direct expenses b 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			Gross income f	rom gaming activities					
c Net income or (loss) from gaming activities		ь	Less direct ex	H	0				
returns and allowances . a 0 b Less cost of goods sold b 0 c Net income or (loss) from sales of inventory 0 0 Miscellaneous Revenue Business Code 11a Health Center Fees 621400 1,062,854 0 0 Parking/Library Fines 900099 244,047 244,047 0		c			⁄ities . ►	0	0	0	0
b Less cost of goods sold b 0 0 c Net income or (loss) from sales of inventory ▶ 0 0 0 Miscellaneous Revenue Business Code 0 0 11a Health Center Fees 621400 1,062,854 0 0 b Parking/Library Fines 900099 244,047 244,047 0		10a							
c Net income or (loss) from sales of inventory ▶ 0 0 0 Miscellaneous Revenue Business Code 0 0 11a Health Center Fees 621400 1,062,854 0 0 b Parking/Library Fines 900099 244,047 244,047 0		l .		-	0				
Miscellaneous Revenue Business Code 11a Health Center Fees 621400 1,062,854 0 0 b Parking/Library Fines 900099 244,047 244,047 0				L		0	0	0	
11a Health Center Fees 621400 1,062,854 0 0 b Parking/Library Fines 900099 244,047 244,047 0		-				Ŭ	o o	-	
b Parking/Library Fines 900099 244,047 244,047 0		11a				1,062,854	О	o	1,062,854
					900099	244,047	244,047	0	0
c Vending/Laundry 900099 151,222 0 0					900099	151,222	0	0	151,222
d All other revenue		_		<u> </u>		1,240,968	1,240,968	0	0
e Total. Add lines 11a−11d		e	Total. Add lines	s 11a-11d	🕨	2,699,091			
12 Total revenue. See Instructions		12	Total revenue.	See Instructions		, ,	233,881 251	0	5,628,043

Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All other organizations must complete colu

	Check if Schedule O contains a response or note to any line in this	Part IX			. .
	ot include amounts reported on lines 6b, b, 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 domestic organizations and domestic governments See Part IV, line 21	0	0		
2	Grants and other assistance to domestic individuals See Part IV, line 22	52,868,134	52,868,134		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	38,300	38,300		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	2,098,460	724,998	1,373,462	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	72,829	0	72,829	0
7	Other salaries and wages	48,176,281	42,396,774	4,317,136	1,462,371
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,620,563	2,113,968	409,786	96,809
9	Other employee benefits	6,909,119	5,302,003	1,381,632	225,484
10	Payroll taxes	3,413,047	2,964,931	350,848	97,268
11	Fees for services (non-employees)		, , ,	<u> </u>	, -
а	Management	0	0	0	0
b	Legal	122,019	0	122,019	0
c	Accounting	164,563	0	164,563	0
d	Lobbying	24,000	0	24,000	0
e	Professional fundraising services See Part IV, line 17	0		2.,,555	0
f	Investment management fees	147,089	0	147,089	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	19,785,728	19,480,242	230,982	74,504
12	Advertising and promotion	2,947,628		117,511	36,775
13	Office expenses	12,836,837	9,829,028	2,788,857	218,952
14	Information technology	6,749,930	4,143,616	2,603,419	2,895
15	Royalties	12,096	12,096	0	0
16	Occupancy	12,097,758	11,997,443	100,315	0
17	Travel	2,349,061	2,270,559	49,689	28,813
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2,343,001	0	43,003	0
19	Conferences, conventions, and meetings	556,670	495,167	52,444	9,059
20	Interest	5,939,156	5,939,156	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	16,773,194	11,282,651	5,490,543	0
 23	Insurance	7,256,633	6,379,708	876,925	0
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)	,, -30	, ,	-,	
а	Loss on Extinguishment of Debt	3,001,855	3,001,855	0	0
b	Bad Debt Expense	415,000	415,000	0	0
c	Student Programs	371,519	371,490	29	0
d	Faculty and Staff Recruiting	352,276	232,856	118,110	1,310
е	All other expenses	3,853,235	3,853,235	0	0
25	Total functional expenses. Add lines 1 through 24e	211,952,980	188,906,552	20,792,188	2,254,240
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				
		•			

Part X Balance Sheet

	τχ	Check if Schedule O contains a response or note to any line in	this	Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			16,956	1	16,656
	2	Savings and temporary cash investments			59,815,621	2	95,682,960
	3	Pledges and grants receivable, net			16,299,000	3	9,262,000
	4	Accounts receivable, net			3,115,140	4	3,405,775
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete F Schedule L	art II	of	0	5	
Assets	6	Loans and other receivables from other disqualified persons (4958(f)(1)), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedule	conti emplo	ibuting employers	0		
82	7	Notes and loans receivable, net			2,126,863		2,211,256
ď	8	Inventories for sale or use			164,212		169,363
	9	Prepaid expenses and deferred charges			5,099,086		4,563,246
	10a	Land, buildings, and equipment cost or other basis		 I	3,099,080	9	4,303,240
		Complete Part VI of Schedule D	10a	528,507,603			
	b	Less accumulated depreciation	10b	<u> </u>			410,710,875
	11	Investments—publicly traded securities			36,531,497	11	39,950,442
	12	Investments—other securities See Part IV, line 11			11,677,418		8,256,712
	13	Investments—program-related See Part IV, line 11			0		
	14	Intangible assets	•	•		14	0
	15	Other assets See Part IV, line 11			0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			500,385,181	16	574,229,285
	17	Accounts payable and accrued expenses			13,873,767	17	17,753,095
	18	Grants payable			0	18	0
	19	Deferred revenue	•		10,288,792	19	7,776,605
	20	Tax-exempt bond liabilities			138,611,910	20	180,711,606
Ø	21	Escrow or custodial account liability Complete Part IV of Sch	nedule	D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, direckey employees, highest compensated employees, and disqua		rustees,			
дe		persons Complete Part II of Schedule L			0	22	
	23	Secured mortgages and notes payable to unrelated third parti	es .		13,768,223	23	0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to reland other liabilities not included on lines 17-24) Complete P					
		D			6,004,043		6,262,344
	26	Total liabilities. Add lines 17 through 25			182,546,735	26	212,503,650
\$ 0.00		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	▼ aı	id complete			
an	27	Unrestricted net assets			268,857,923	27	310,301,199
8 8	28	Temporarily restricted net assets			27,336,226	28	28,666,432
<u> </u>	29	Permanently restricted net assets	21,644,297	29	22,758,004		
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check	here 🕨	⊢			
ŏ		complete lines 30 through 34.					
Assets	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building or equipment fund				31	
4	32	Retained earnings, endowment, accumulated income, or other				32	
Ř	33	Total net assets or fund balances			317,838,446	33	361,725,635
	34	Total liabilities and net assets/fund balances			500,385,181	34	574,229,285

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		257,7	738,799
2	Total expenses (must equal Part IX, column (A), line 25)	2		211.9	952,980
3	Revenue less expenses Subtract line 2 from line 1	3			, 785,819
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments	5			338,446 951,630
6	Donated services and use of facilities	6		•	0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			53,000
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		361,7	725,635
Par	t XII Financial Statements and Reporting				,
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
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 review a separate basis, consolidated basis, or both	ewed o	n		
	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 sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of tl	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
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?	ne	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	

Additional Data

Software ID: 14000329

Software Version: 2014v1.0

EIN: 59-0624459

Name: The University of Tampa Incorporated

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ 31,150,631 including grants of \$ 0) (Revenue \$ 41,000,639)

AUXILIARY SERVICES AT THE UNIVERSITY OF TAMPA OFFER THE STUDENTS DINING, A BOOKSTORE, STUDENT LIFE SERVICES AND VARIOUS ACTIVITIES THE PURPOSE OF THE AUXILIARY SERVICES OFFICE IS TO PROVIDE THE STUDENTS WITH SERVICES AND ACTIVITIES THAT TAKE PLACE OUTSIDE THE CLASSROOM, ENHANCING LIFE AT THE UNIVERSITY DINING SERVICES OFFER A VARIETY OF DINING VENUES FOR THE STUDENTS AND VISITORS CAMPUS HOUSING IS LIMITED AND IS OFFERED ONLY TO FULL TIME STUDENTS THE UNIVERSITY OF TAMPA HAS ELEVEN RESIDENTIAL HALLS FROM WHICH TO CHOOSE VARIOUS ATHLETIC PROGRAMS ARE ALSO OFFERED FOR THE STUDENTS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Position (do not check Reportable Average Reportable Estimated amount hours per more than one box, unless compensation compensation of other person is both an officer from the week (list from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Individual or dilector Former 9 Highest compensated organizations related Institutional below organizations emplo) ee dotted line) trustee d Trustee (1) Phillip E Casey 1 00 Х Х 0 0 Secretary (1) James L Ferman Jr 1 00 Χ Χ 0 0 Vice Chair (2) John B West 1 00 Х Х (3) Ronald L Vaughn 40 00 Х Х 773,671 0 180,410 President 1 00 (4) Don DeFosset Χ Χ 0 0 Past Chair 1 00 (5) Suzanne Kırkconnell 0 0 0 Х 1 00 Trustee (6) Charlotte Baker 1 00 Χ 0 0 0 Trustee (7) Allen R Brinkman II 1 00 Χ 0 0 (8) Christine M Burdick 1 00 0 0 Χ Λ Trustee 1 00 (9) James K Murray Jr Χ 0 (10) Roy J McCraw Jr 1 00 0 0 0 Х (11) Douglas C Rothschild 1 00 0 0 Χ (12) Nancy J Rabenold 1 00 Х Trustee - Partial Year 1 00 (13) Gary W Harrod 0 0 0 Х Trustee (14) Leo B Berman 1 00 Χ 0 0 Trustee (15) Robert J Rohrlack Jr 1 00 Χ 0 0 0 Trustee (16) Edward M Kobel 1 00 Х 0 0 0 (17) Howard M Jenkins 1 00 Χ 0 0 Trustee - Partial Year (18) Bob Buckhorn 1 00 0 0 0 Х Trustee (19) Blake J Casper 1 00 Χ 0 0 (20) Thomas A Castriota 1 00 Χ 0 0 (21) John J Holton 1 00 Χ 0 0 0 Trustee (22) Kamal Majeed 1 00 Χ 0 0 (23) Craig C Sturken 1 00 0 Х 0 0 (24) Michael S Southard 1 00 0 0 Trustee

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

hours per week (list person is both an officer any hours for related organizations organizations organizations organizations organizations organizations (W-2/1099-MISC) organizations (W-2/1099-MISC)	timated amount of other compensation from the related organizations
organizations below dotted line) Institutional Trustee Officer Officer Officer Officer Officer Officer Institutional Trustee	related organizations 0
(26) O Rex Damron	
Trustee (1) Patty Martini Clark 1 00	0
Trustee (2) Mariano Legaz 1 00	
Trustee - Partial Year X 0 0	0
(3) Katie Krimitsos	0
(4) A William Goede 1 00 X 0 0	0
Trustee 1 00 (5) John P Lowth III 1 00	
Trustee	0
(6) Robert M Thomas 1 00 X 0 0 0 Trustee X 0	0
(7) R Vijayanagar 1 00 X 0 0	0
Trustee 1 00 X 0 0	0
Trustee A (9) AD MacKinnon 1 00	
Trustee X 0 0 0	0
(10) Thilo D Best	0
(11) Susan W Leisner 1 00 X 0 0	0
Trustee 1 00 (12) Robert C Calafell 1 00	
Trustee	0
Trustee	0
(14) Richard C Elias 1 00 X 0 0 Trustee - Partial Year X 0 0 0	0
(15) James A Tumer III 1 00	0
Trustee 1 00	
Trustee	0
(17) James E MacDougald 1 00 X 0 0 Trustee X 0 0 0	0
(18) Robert D Gries Jr	0
Trustee 1 00 X 0 0	
Trustee - Partial Year (20) Rufus J Williams III 1 00	
Trustee	0
(21) Donna B Popovich 40 00 Human Resources Director / Secretary X 152,621 0	39,135
(22) Richard W Ogorek 40 00 X 194,280 0	24,160
VP Administration and Finance / Treasurer 40 00 40 00	
VP Enrollment X 328,815 0 (24) David S Stern 40 00 0 0	67,586
Provost, VP Academic Affairs X 282,733 0	42,089

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

VP Operations & Planning

(A) Name and Title	(B) Average hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(51) Daniel T Gura VP Development & University Relations	40 00					х		235,036	0	37,068
(1) James A Gore	40 00									
Dean						Х		176,134	0	28,858
(2) Haig Mardirosian Dean	40 00					х		187,237	0	23,408
(3) Farhad F Ghannadian Dean	40 00					х		232,890	0	38,630
(4) Linda Devine	40 00					х		247,541	0	43,506

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As Filed Data -

DLN: 93493343001035

OMB No 1545-0047

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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2011

Open to Public Inspection

		ne organization			Employer identification number						
rne o	niversit	y of Tampa Incorporated					59-0624459				
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	itions must co	mnlete this r		nns			
		zation is not a private f						71101			
1	Ē	·		· ·	= :	•	•				
2	৴	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)									
3	<u></u>	A hospital or a cooper	=		· ·	tion 170(b)(1)	(Λ)(iii)				
4	<u>'</u>	A medical research or		=				i) Entartha			
7	,	hospital's name, city,		erated in Conjunction v	vitii a nospitai u	lescribed iii se		i). Linter the			
5	Г	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	r operated by	a governmental unit d	escribed in			
		section 170(b)(1)(A)			·		_				
6	Г	A federal, state, or loc			described in se	ection 170(b)(1)(A)(v).				
7	Ē	An organization that n						general public			
	•	described in section 1				J		,			
8	Γ	A community trust de	scribed in sec	tion 170(b)(1)(A)(vi)	(Complete Par	tII)					
9	Γ	An organization that n	ormally receiv	ves (1) more than 33:	1/3% of its supp	ort from contri	butions, membership	fees, and gross			
		receipts from activitie	s related to it	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of			
		ıts support from gross	ınvestment ır	ncome and unrelated b	usıness taxable	e income (less	section 511 tax) from	n businesses			
		acquired by the organ	ızatıon after Jı	une 30, 1975 See sec	tion 509(a)(2).	(Complete Pa	rt III)				
10	Γ	An organization organ	ized and opera	ated exclusively to tes	t for public safe	ty See sectio	n 509(a)(4).				
11	Γ	An organization organ	ized and opera	ated exclusively for th	e benefit of, to p	erform the fun	ctions of, or to carry o	out the purposes of			
		one or more publicly s									
_	_	the box in lines 11a th	_			_		· -			
а	ı	Type I. A supporting of supported organization									
		organization You mus				cy or the uncer	or or crubicos or circ	Supporting			
b	Γ	Type II. A supporting				with its suppo	rted organization(s), l	by having control or			
		management of the su			same persons t	hat control or r	manage the supported	organızatıon(s) You			
_	_	must complete Part I'									
C	ı	Type III functionally supported organizatio						grated with, its			
d	Г	Type III non-function						janization(s) that is			
	•	not functionally integr									
	_	(see instructions) Yo									
е	ı	Check this box if the contegrated, or Type II					s a Type I, Type II, T	ype III functionally			
f		Enter the number of s									
g		Provide the following i									
9				- a - a - a - a - a - a - a - a - a - a							
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of			
		organization	` ´	organization	listed in your	governing	monetary support	other support (see			
				(described on lines	docume	nt?	(see instructions)	ınstructıons)			
				1-9 above or IRC							
				section (see instructions))]				
				,,,	Yes	No					
			i	1							

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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						
3	behalf 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						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts 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 VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organizations	on ala not check	cabox on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 31 and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493343001035

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

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

- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- ◆ Section 527 organizations Complete Part I-A only

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

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

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

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

Employer identification number Name of the organization The University of Tampa Incorporated Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ┌ Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2014

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	h Subtract line 1g from line 1a If zero or less, enter -0-					
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

	rt II-B Complete if the organization is exempt under section 501(c)(3) and has	NOT			Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOI			
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	a)	(b)
activ		Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo		
С	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		No		
e	Publications, or published or broadcast statements?		No		
f	Grants to other organizations for lobbying purposes?		Νo		24.000
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes	NI -		24,000
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?	Yes	No		1 500
j	Total Add lines 1c through 1i	165			1,580 25,580
J 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		25,580
2u b	If "Yes," enter the amount of any tax incurred under section 4912		110		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section $501(c)(4)$, section	501(c)(5). c	r secti	on
	501(c)(6).		,(-,, -		
			_	Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		<u> </u>	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
Par	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Iine 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
P	art IV Supplemental Information				
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro (see instructions), and Part II-B, line 1 Also, complete this part for any additional information	up list),	Part II	-A , lines	1 and
	Return Reference Explanation				
DET	The University of Tampa contracted Chris L. Floyd & Associates to lobe behalf regarding issues that affect all private not-for-profit higher education of Independent Colleges and Universities (NAICU). A port lobbying	ation ins e and t	stitution he Natio	s Inado nal	dition,

Part IV Supplemental Information (continued)					
Return Reference	Explanation				

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493343001035

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

ame of the organization ne University of Tampa Incorporated		Employer identificat	ion number
art I Organizations Maintaining Dono organization answered "Yes" to For	or Advised Funds or Other Similar m 990, Part IV, line 6.	59-0624459 Funds or Accounts.	Complete if the
organization anowered 100 to 101	(a) Donor advised funds	(b) Funds and of	ther accounts
Total number at end of year			
Aggregate value of contributions to (during yea	r)		
Aggregate value of grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and dono funds are the organization's property, subject t		onor advised	┌ Yes ┌ No
Did the organization inform all grantees, donors used only for charitable purposes and not for the conferring impermissible private benefit?	•		┌ Yes ┌ No
art II Conservation Easements. Comp	plete if the organization answered "Yes"	to Form 990, Part IV,	line 7.
Purpose(s) of conservation easements held by	the organization (check all that apply)		
lacksquare Preservation of land for public use (e g , rec	reation or education) $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	an historically important	land area
Protection of natural habitat	Preservation of a	a certified historic structi	ure
Preservation of open space			
Complete lines 2a through 2d if the organizatio easement on the last day of the tax year	n held a qualified conservation contribution in	n the form of a conservatı	on
		Held at the I	nd of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easer	ments	2b	
Number of conservation easements on a certifi	ed historic structure included in (a)	2c	
Number of conservation easements included in historic structure listed in the National Registe	2d		
Number of conservation easements modified, to the tax year -	ransferred, released, extinguished, or termina	ted by the organization d	uring
Number of states where property subject to cor	nservation easement is located 🗠		
Does the organization have a written policy reg enforcement of the conservation easements it		ndling of violations, and	┌ Yes ┌ No
Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservation eas	ements during the year	
A mount of expenses incurred in monitoring, ins	pecting, and enforcing conservation easemer	nts during the year	
Does each conservation easement reported on and section 170(h)(4)(B)(II)?	line 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(ı)	┌ Yes ┌ No
In Part XIII, describe how the organization rep balance sheet, and include, if applicable, the te the organization's accounting for conservation	xt of the footnote to the organization's financi		
rt III Organizations Maintaining Colle		, or Other Similar A	ssets.
If the organization elected, as permitted under works of art, historical treasures, or other simil service, provide, in Part XIII, the text of the fo	SFAS 116 (ASC 958), not to report in its rev ar assets held for public exhibition, education	n, or research in furtherar	
If the organization elected, as permitted under works of art, historical treasures, or other simil service, provide the following amounts relating	ar assets held for public exhibition, education		
(i) Revenue included in Form 990, Part VIII, li	ne 1	► \$	12,000
(ii) Assets included in Form 990, Part X		· <u></u> \$	413,451
If the organization received or held works of art following amounts required to be reported unde		for financial gain, provide	
Revenue included in Form 990, Part VIII, line		- \$	0
Accets included in Form 990, Part V		·	

Part	•••• Organizations Maintaining Co	llections of Art, F	<u>listor</u>	ical Trea	asures, or Ot	her Similar A	Assets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	, check	any of the	following that a	re a significant u	se of its
а	Public exhibition	•	d √	Loan or	exchange progra	ams	
b	Scholarly research e Other						
С	Preservation for future generations						
4	Provide a description of the organization's co Part XIII	ollections and explain	how the	y further t	he organızatıon'	s exempt purpos	e ın
5	During the year, did the organization solicit						F., F.,
Dav	assets to be sold to raise funds rather than to the training to the training to the training assets to be sold to raise funds rather than to the training to the training assets to be sold to raise funds rather than to the training assets to be sold to raise funds rather than to the training assets to be sold to raise funds rather than to the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training as the training a						Yes No
Pal	Part IV, line 9, or reported an ar					i tes lo roilli	990,
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?					ets not	┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XI	I and complete the fol	llowing	table	_		
					<u> </u>		Amount
c	Beginning balance				<u> </u>	1c	
d	Additions during the year				H	1d	
e	Distributions during the year				<u> </u>	1e	
f	Ending balance					1f	
2a	Did the organization include an amount on Fe	orm 990, Part X, line 2	1, for e	scrow or c	ustodial accoun	t liability?	┌ Yes ┌ No
_ь	If "Yes," explain the arrangement in Part XI						<u> ' </u>
Pa	rt V Endowment Funds. Complete		nswei (b)Prior			Part IV, line 10 (d)Three years back	
1a	Beginning of year balance	33,821,231		,448,316	24,030,048	22,846,01	
ь	Contributions	982,470		630,176	1,450,089	1,100,84	1 2,203,729
С	Net investment earnings, gains, and losses	2 600 046		047.444	5 050 445	050.07	004 335
d	Grants or scholarships	2,699,046 1,447,453		,947,111	5,960,445 992,266	959,97 876,78	<u> </u>
e	Other expenditures for facilities	2,,.00		,201,012	332,200		1 320,611
•	and programs	0		0	0		0 0
f	Administrative expenses	0		0	0		0 0
g	End of year balance	36,055,294	33	,821,231	30,448,316	24,030,04	8 22,846,011
2	Provide the estimated percentage of the cur	· · · · · · · · · · · · · · · · · · ·	(line 1	ı, column (a)) held as		
а	Board designated or quasi-endowment 🕨	17 5 %					
b	Permanent endowment ► 63 12 %						
С	remporarily restricted endowment	38 %					
	The percentages in lines 2a, 2b, and 2c sho						
3a	Are there endowment funds not in the posse organization by	ssion of the organization	on that	are held a	nd administered	for the	Yes No
	(i) unrelated organizations					3	a(i) No
	(ii) related organizations					<u> </u>	a(ii) No
b	If "Yes" to 3a(II), are the related organization	·					3b
4	Describe in Part XIII the intended uses of the						
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		orga	nization a	inswered 'Yes'	to Form 990,	Part IV, line
	Description of property			Cost or others (investme			
			+	27,9	30,587,	642	30,615,587
	Buildings			830,0	-		-
	Leasehold improvements			,-	25,122,		-
d	Equipment				55,405,	399 27,556,4	27,848,950
	Other				39,426,	263	39,426,263
	l. Add lines 1a through 1e <i>(Column (d) must e</i>		olumn	(B), line 10	(c).)		410,710,875
						Schedule	D (Form 990) 2014

Part VII Investments—Other Securities. Co	omplete if the organization	answered 'Yes' to Form 990, Part IV, line	e 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation	
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value	
(2)Closely-held equity interests		+	
Other			
		+	
		+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	*		
Part VIII Investments—Program Related.	Complete if the organization	n answered 'Yes' to Form 990, Part IV, li	ne 11c
See Form 990, Part X, line 13.			
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
		Social and or year market value	
		+	
		+	
		_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*		
		0, Part IV, line 11d See Form 990, Part X, line	e 15
(a) Desi	Tiption	(b) Book value	
			
Total. (Column (b) must equal Form 990, Part X, col.(B) line			
Part X Other Liabilities. Complete if the organization Form 990, Part X, line 25.	ganization answered 'Yes' t	to Form 990, Part IV, line 11e or 11f. See	е
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
Agency Funds Payable	1,369,794		
Private Loan Funds Payable	1,461,419		
Obligations Under Capital Leases	1,942,121		
Governmental Loan Funds Payable	1,489,010		
	+		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	6,262,344		
2 Liability for uncertain tay positions. In Part VIII. prov			

expenses in audited financial statements not in form 990

financial statements

Schedule D, Part XII, Line 4(b) Other

expenses in form 990 not in audited

Scholarships - 52906434

Part		Revenue per Audited Financial State Wered 'Yes' to Form 990, Part IV, line 1		nts With Revenue p	er R	eturn Complete if
1		er support per audited financial statements			1	203,557,491
2		ut not on Form 990, Part VIII, line 12				, ,
а	Net unrealized gains (losses)		2a	-1,951,630		
b	Donated services and use of f	acılıtıes	2b	43,875		
c		s	2c	0		
d			2d	779,970		
e	Add lines 2a through 2d .		<u> </u>		2e	-1,127,785
3	Subtract line 2e from line 1 .				3	204,685,276
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a	147,089		
b	Other (Describe in Part XIII)		4b	52,906,434		
c	Add lines 4a and 4b				4 c	53,053,523
5	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line	12)		5	257,738,799
Part		xpenses per Audited Financial Sta			per	Return. Complete
		nswered 'Yes' to Form 990, Part IV, line			<u> </u>	150 670 000
1	·	raudited financial statements	•		1	159,670,302
2		it not on Form 990, Part IX, line 25	۱ ـ	1 42.075		
a		acilities	2a	43,875	-	
b	, <u>-</u>		2b	0	-	
C			2c 2d	736 070	-	
d			_ <u>Za</u>	726,970	1	770.045
e 2	-		•		2e 3	770,845
3		0, Part IX, line 25, but not on line 1 :	• •		-	158,899,457
4		uded on Form 990, Part VIII, line 7b	4a	147,089		
a b	•		4b	52,906,434	1	
c	Add lines 4a and 4b		40	32,900,434	4c	53,053,523
5		nd 4c. (This must equal Form 990, Part I, lin			5	211,952,980
	XIII Supplemental In		e 10)			211,932,980
Provi Part	de the descriptions required foi V , line 4 , Part X, line 2 , Part XI nation	r Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
	ule D, Part III, Line 4 tions of art - description of tions	The collections held by the University of T and a collection or rare type matrices, whi community's knowledge of art				
	ule D, Part V, Line 4 Intended f endowment funds	The endowments are maintained in accordance with donor restrictions. Most of the University's endowments are used for scholarships				
	ule D, Part X, Line 2 FIN 48 740) footnote	Financial Accounting Standards Board Accounting Standards Codification Subtopic 740-10, Income Taxes - Overall, prescribes a recognition threshold and measurement attribute for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return, and provides guidance on derecognition, classification, interest and penalties, and disclosure The University believes that it has appropriate support for its tax positions taken and as such, does not have any uncertain tax positions that could result in a material impact to the consolidated financial statements				
revenu	ule D, Part XI, Line 2 (d) O ther les in audited financial	Rental Expenses - 726970 Provision For	Uncoll	ectible Pledges - 53000		
	nents not in form 990	Cabalamahma F2006424				
revenu	ule D, Part XI, Line 4(b) O ther les in form 990 not in audited al statements	Scholarships - 52906434				
Sched	ule D, Part XII, Line 2(d) Other	Rental Expenses - 726970				

Companies (Form 550) 2010		i age 5
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
-		

Schedule D (Form 990) 2014

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DLN: 93493343001035

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	e of the organization niversity of Tampa Incorporated	Employer identificati	ion nur	nber	
THE O	,	59-0624459			
Pa	rt I			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in rother governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student adriprograms, and scholarships?		2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadd the period of solicitation for students, or during the registration period if it has no solicitation prothat makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain If you need more space use Part II	gram, ın a way	3	Yes	
4 a	Does the organization maintain the following? 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 basis?	nondiscriminatory	4b	Yes	
c	: Copies of all catalogues, brochures, announcements, and other written communications to the pu with student admissions, programs, and scholarships?	ıblıc dealıng	4c	Yes	
d	f d Copies of all material used by the organization or on its behalf to solicit contributions?			Yes	
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?		5a		No
b	Admissions policies?		5b		No
c	Employment of faculty or administrative staff?		5c		No
	Scholarships or other financial assistance?		5d		No
	Educational policies? Use of facilities?		5e		No
	Athletic programs?		5f 5g		No 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				
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?		6a 6b	Yes	No
	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Pa		7	Yes	

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

Return Reference	Explanation
Schedule E, Part I, Line 3 RACIALLY NONDISCRIMINATORY POLICY	The University of Tampa's nondiscriminatory policy is published in the University Handbook, the University Catalog and various other administrative publications
Schedule E, Part I, Line 4(d) RECORDS AND COPIES MAINTAINED BY THE ORGANIZATION	
Schedule E, Part I, Line 5(h) DISCRIMINATION BY RACE	
Schedule E, Part I, Line 6(a) FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT	The University of Tampa receives financial aid and assistance from federal governmental agencies as follows Pell Grants, FSEOG, FWSP, Perkins Loans, Teacher Education Assistance for College and Higher Education Grant, Federal Direct Student Loans, Improving Teacher Quality State Grant, Charles Stark Draper Laboratory Subaward, Research Opportunities in Space and Earth Sciences 2010 The University of Tampa receives financial aid and assistance from state governmental agencies as follows FRAG, FSAG, Florida Bright Futures, Florida Minority Teacher Scholarship Program, Scholarships for Children and Spouses of Deceased or Disabled Veterans and Service Members Program, Florida Honorably Discharged Graduate Assistance Program, Florida Work Experience Program, Florida Department of Highway Safety and Motor Vehicles-University of Tampa License Plate Project
Schedule E, Part I, Line 6(b) REVOCATION OR SUSPENSION OF GOVERNMENTAL AID OR ASSISTANCE	
Schedule E, Part I, Line 7 RACIAL NONDISCRIMINATION REQUIREMENTS	

Schedule E (Form 990 or 990-EZ) (2014)

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DLN: 93493343001035

OMB No 1545-0047

2014

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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.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	e of the organization University of Tampa Incorporated				Employer ident	ification number
THE	, , , ,				59-0624459	
Pa	rt I General Information "Yes" to Form 990, Par		s Outside th	e United States. Co	omplete if the organiz	ation answered
1	For grantmakers. Does the o	_			-	
	and other assistance, the gra	_		·		
	used to award the grants or a	issistance?				✓ Yes No
2	For grantmakers. Describe in assistance outside the United		janızatıon's pr	ocedures for monitorin	ng the use of its grant	s and other
3	Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ce 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
(1) See Add'l Data		<u> </u>	,		
(2)					
(3)					
(4)					
(5)					
3a	s Sub-total	0	0			5,928,290
I	Total from continuation sheets to Part I	0	0			0
•	c Totals (add lines 3a and 3b)	0	0			5,928,290

Schedule F (Form 990) 2014

Pa				izations or Entitie ved more than \$5,0		•	9		to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2				ed above that are ro or counsel has pro					
3	Enter total num	nber of other or	ganizations or ent	ities					

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) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
(1) SCHOLARSHIPS	Europe (Including Iceland and Greenland)	9	36,800				N/A		
(2) SCHOLARSHIPS	Central America and the Caribbean	1	1,500	CREDIT	0	N/A	N/A		
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									
(17)									
(18)									
-	1	<u> </u>			<u> </u>	Calcad	ula E (Earm 000) 2014		

Part IV Foreign Forms

1	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)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may 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; do not file with Form 990)	Г	Yes	<u>r</u>	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)	I	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	V	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)	Г	Yes	▽	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	<u>~</u>	Νo

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page 5

Part V Supplemental Information

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2 Procedures for monitoring use of grant funds	Scholarships and tuition assistance are applied directly to students' tuition accounts. No cash is given to students. Assistance may be granted on the basis of need or on the basis of academic or talent qualifications.

990 Schedule F, Supplemental Information

Return Reference	Explanation
GRANT FUNDS	Scholarships and tuition assistance are applied directly to students' tuition accounts. No cash is given to students. Assistance may be granted on the basis of need or on the basis of academic or talent qualifications.

Additional Data

Software ID: 14000329

Software Version: 2014v1.0

EIN: 59-0624459

Name: The University of Tampa Incorporated

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean	0	0	Program Services	TRAVEL ABROAD COURSES	217,961
Central America and the Caribbean	0	0	Program Services	SEMINARS/CONFERENCES	58,472
East Asia and the Pacific	0	0	Program Services	SEMINARS/CONFERENCES	53,650

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
Europe (Including Iceland and Greenland)	0	0	· · · 3 · · · · · · · · · · · · · · · · · · ·	TRAVEL ABROAD COURSES	355,713				
Europe (Including Iceland and Greenland)	0	0	Program Services	SEMINARS/CONFERENCES	48,607				
Middle East and North Africa	0	0	Program Services	SEMINARS/CONFERENCES	16,525				

Form 990 Schedule F	Part I - Activ	<u>ities Outside</u>	The United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
North America (Canada & Mexico only)	0	0	Program Services	SEMINARS/CONFERENCES	3,427
South America	0	0	Program Services	TRAVEL ABROAD COURSES	6,808
South America	0	0	Program Services	SEMINARS/CONFERENCES	173,505

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
South Asia	0	0	Program Services	SEMINARS/CONFERENCES	74,722				
Sub-Saharan Africa	0	0	Program Services	SEMINARS/CONFERENCES	19,048				
Central America and the Caribbean	0	0	Investments		4,813,346				

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region				
Europe (Including Iceland and Greenland)	0	0	Grantmakıng		36,800				
North America (Canada & Mexico only)	0	0	· · · · 3 · · · · · · · · · · · · · · · · · · ·	MFA PROGRAM - COURSE EXPENSES	26,135				
Middle East and North Africa	0	0	Program Services	TRAVEL ABROAD COURSES	22,071				

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
Central America and the Caribbean	0	0	Grantmakıng		1,500			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493343001035 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 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. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number The University of Tampa Incorporated 59-0624459 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes 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 Domestic Organizations and Domestic Governments. 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. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other)

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

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

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Addıtıonal Data Table					

Part IV Supplemental Ir	nformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
Schedule I, Part I, Line 2 Description Of Procedure For Monitoring Use Of Grant Funds	Scholarships and tuition assistance are applied directly to students' tuition accounts. No cash is given to students
Schedule I, Part I, Line 2 Procedures for monitoring use of grant funds	Scholarships and tuition assistance are applied directly to students' tuition accounts. No cash is given to students

Additional Data

Software ID: 14000329

Software Version: 2014v1.0

EIN: 59-0624459

Name: The University of Tampa Incorporated

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(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 NEED BASED FINANCIAL AID 2678 9,979,042 0 N/A N/A ATHLETIC AWARDS 299 2,316,004 0 N/A N/A TALENT AWARDS 161 345,000 0 N/A N/A UNIVERSITY OF TAMPA GRANTS 265 1,141,499 0 N/A N/A MERIT AWARDS 5780 36,916,874 0 N/A N/A GRAD ASSISTANTSHIPS 83 781,200 0 N/A N/A STIPENDS 164 459,155 0 N/A N/A FEDERAL GIFT AID 2071 929,360 0 N/A N/A	i orini 990, Scheddie 1, Part III, Grant	is and Other As	sistance to Donnes	tic Illulyludais.		
ATHLETIC AWARDS 299 2,316,004 0 N/A N/A TALENT AWARDS 161 345,000 0 N/A N/A UNIVERSITY OF TAMPA GRANTS 265 1,141,499 0 N/A N/A MERIT AWARDS 5780 36,916,874 0 N/A N/A GRAD ASSISTANTSHIPS 83 781,200 0 N/A N/A STIPENDS 164 459,155 0 N/A N/A	(a)Type of grant or assistance	` '		' '		(f)Description of non-cash assistance
TALENT AWARDS 161 345,000 0 N/A N/A UNIVERSITY OF TAMPA GRANTS 265 1,141,499 0 N/A N/A MERIT AWARDS 5780 36,916,874 0 N/A N/A GRAD ASSISTANTSHIPS 83 781,200 0 N/A N/A STIPENDS 164 459,155 0 N/A N/A	NEED BASED FINANCIAL AID	2678	9,979,042	0	N/A	N/A
UNIVERSITY OF TAMPA GRANTS 265 1,141,499 0 N/A N/A MERIT AWARDS 5780 36,916,874 0 N/A N/A GRAD ASSISTANTSHIPS 83 781,200 0 N/A N/A STIPENDS 164 459,155 0 N/A N/A	ATHLETIC AWARDS	299	2,316,004	0	N/A	N/A
MERIT AWARDS 5780 36,916,874 0 N/A N/A GRAD ASSISTANTSHIPS 83 781,200 0 N/A N/A STIPENDS 164 459,155 0 N/A N/A	TALENT AWARDS	161	345,000	0	N/A	N/A
GRAD ASSISTANTSHIPS 83 781,200 0 N/A N/A STIPENDS 164 459,155 0 N/A N/A	UNIVERSITY OF TAMPA GRANTS	265	1,141,499	0	N/A	N/A
STIPENDS 164 459,155 0 N/A N/A	MERIT AWARDS	5780	36,916,874	0	N/A	N/A
	GRAD ASSISTANTSHIPS	83	781,200	0	N/A	N/A
FEDERAL GIFT AID 2071 929,360 0 N/A N/A	STIPENDS	164	459,155	0	N/A	N/A
	FEDERAL GIFT AID	2071	929,360	0	N/A	N/A

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DLN: 93493343001035

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

► Attach to Form 990. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization The University of Tampa Incorporated

Employer identification number

59-0624459

Pa	rt I Questions Regarding Compensation	,				
			Yes	No		
1a	Check the approprate 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					
	▼ Travel for companions					
	Tax idemnification and gross-up payments					
	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 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		V			
	directors, crustees, sincers, metading the elegipticative brieffel, regulating the items effected in fine 14	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					
	✓ 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					
а	Receive a severance payment or change-of-control payment?	4a		Νo		
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		Νo		
	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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of					
а	The organization?	5a		No		
	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					
а	The organization?	6a		No		
b	Any related organization?	6b		Νo		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 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					
	ın Part III					
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)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

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

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Return Reference	Explanation
Schedule J, Part I, Line 1a Travel for companions	Limited and pre-approved travel is provided to the spouse of the University's President, Ronald L. Vaughn, to attend events and meetings during which the spouse's participation benefits the University. This benefit was not treated as taxable compensation to the individual
, ,	Housing allowances are provided to Ronald L Vaughn, President, Dennis L Nostrand, Vice President of Enrollment, and, David S Stern, Provost, Vice President of Academic Affairs These housing allowances are treated as taxable compensation to the individuals
social club dues or initiation fees	Social club dues are paid by the University for the President, Ronald L. Vaughn, the Vice President of Development and University Relations, Daniel T. Gura, the Vice President of Operations and Planning, Linda Devine, and Dean, Farhad F. Ghannadian. These dues are not treated as taxable compensation to the individuals because they are used only for business purposes. The club dues are invoiced directly to the University and approved by the Treasurer. The business purpose for each use of the social club is documented and kept on file with the invoices to document the business use of the social club.
Supplemental nonqualified retirement	The President, Ronald L Vaughn, deferred \$137,890 through the IRC Section 457(f) retirement plan The Human Resources Director / Secretary, Donna B Popovich, deferred \$8,000 through the IRC Section 457(f) retirement plan The Vice President of Enrollment, Dennis L Nostrand deferred \$25,000 through the IRC Section 457(f) retirement plan
Schedule J, Part I, Line 7 Non-fixed payments	Linda Devine, Vice President of Operations and Planning, received a non-fixed payment of \$12,000

Schedule J (Form 990) 2014

Additional Data

Software ID: 14000329

Software Version: 2014v1.0

EIN: 59-0624459

Name: The University of Tampa Incorporated

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (A) Name and Title (B) Propletown of W 2 and/or 1000 MISC compensation (C) Potersment and (D) Neptowable

(A) Name and Title	(B) Breakdown ((i) Base Compensation	of W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	SC compensation (iii) O ther reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
1 Ronald L Vaughn President	(I) 427,034 (II)	75,000	271,637 0	162,590 0	17,820 0	954,081	0 0
Donna B Popovich Human Resources Director / Secretary	(I) 146,590 (II)	0 0	6,031 0	22,408 0	16,727 0	191,756 0	0
2 Richard W Ogorek VP Administration and Finance / Treasurer	(I) 186,423 (II)	0 0	7,857 0	15,867 0	8,293 0	218,440	0
3 Dennis L Nostrand VP Enrollment	(I) 274,064 (II) (II)	20,000	34,751 0	44,500 0	23,086 0	396,401 0	0
4 David S Stern Provost, VP Academic Affairs	(I) 244,486 (II)	15,000 0	23,247 0	18,963 0	23,126 0	324,822 0	0
5 Daniel T Gura VP Development & University Relations	(I) 210,563 (II)	0 0	24,475 0	20,394 0	16,674 0	272,104 0	0
6 James A Gore Dean	(I) 167,660 (II)	0	8,474 0	12,849 0	16,009 0	204,992	0
7 Haig Mardirosian Dean	(I) 178,056 (II) 0	0 0	9,181 0	13,453 0	9,955 0	210,645	0
8 Farhad F Ghannadian Dean	(I) 223,574 (II) (II)	0 0	9,316 0	16,574 0	22,056 0	271,520 0	0
9 Linda Devine VP Operations & Planning	(I) 217,403 (II)	12,000	18,138 0	21,362 0	22,144 0	291,047 0	000

DLN: 93493343001035

Open to Public

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

A Higher Educational Facilities 30-0058227 04-30-2012 20,000,000 Construction of a new dormitory X X X X X X X X X	Name	e of the organization								Em	ployer id	lentifica		mber	
Calibration	The '	University of Tampa Incorporate	ad							59	-06244	59			,
A Higher Educational Facilities 90-0058227 04-30-2012 20,000,000 Construction of a new domitory X X X X X X X X X	Pa	rt I Bond Issues					_								
Note 1		(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price		(f) Description	n of purpose	(g) De	efeased	beh	alfof	(i) Pool financing	
Financing Authority					'					Yes	No			Yes	No
Financing Authority		_	90-0058227	·	04-30-2012	20,000,00	0 C	onstruction of a	new dormitory	,	Х		Х		Х
C Higher Educational Facilities 90-0058227 04-30-2012 7,300,000 Refund prior bond issue (2011) X X X X X X X X X			90-0058227	·	04-30-2012	77,561,33	pr	orior bond issues			Х		Х		Х
Part Proceeds Pr			90-0058227	·	04-30-2012	7,300,00			issue (2011)		Х		Х		Х
A mount of bonds retired 777,083 5,300,000 3,415,000	D	City of Tampa Florida	59-1101138	875231LG5	04-23-2015	85,618,99	m	multı-use facılıty, advance			Х		Х		Х
1 Amount of bonds retired 777,083 5,300,000 3,415,000 2 Amount of bonds legally defeased 0 0 0 3 Total proceeds of issue 20,000,000 77,567,156 7,300,000 85,6 4 Gross proceeds in reserve funds 0 5,502,738 0 5 Capitalized interest from proceeds 0 0 0 6 Proceeds in refunding escrows 0 0 0 37,7 7 Issuance costs from proceeds 104,850 1,005,202 0 7 8 Credit enhancement from proceeds 0 351,743 0 9 Working capital expenditures from proceeds 0 0 0 0 10 Capital expenditures from proceeds 19,895,150 14,642,901 0 26,2 11 Other spent proceeds 0 58,566,572 7,300,000 12 Other unspent proceeds 0 0 0 0 20,3 13 Year of substantial completion 2013 2013 2012 2012 Yes No Yes No Yes No Yes 14 Were the bonds issued as part of an advance refunding issue? <td>Pa</td> <td>rt II Proceeds</td> <td></td> <td><u> </u></td> <td></td> <td></td>	Pa	rt II Proceeds											<u> </u>		
2 Amount of bonds legally defeased 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0														D	
Total proceeds of issue						77	7,08	83	5,300,000		3,41	5,000			0
Gross proceeds in reserve funds			ised			<u> </u>		0	0			0			0
5 Capitalized interest from proceeds 0 0 0 6 Proceeds in refunding escrows 0 0 0 37,22 7 Issuance costs from proceeds 104,850 1,005,202 0 7 8 Credit enhancement from proceeds 0 351,743 0 0 9 Working capital expenditures from proceeds 0 0 0 0 10 Capital expenditures from proceeds 19,895,150 14,642,901 0 26,22 11 Other spent proceeds 0 58,566,572 7,300,000 20 20 21,33 12 Other unspent proceeds 0 0 0 0 2013 2013 2012 Yes No Yes No Yes No Yes No Yes 14 Were the bonds issued as part of an advance refunding issue? X X X X X 15 Were the bonds issued as part of an advance refunding issue? X X X <t< td=""><td></td><td><u>'</u></td><td></td><td></td><td>·'</td><td>20,00</td><td>00,00</td><td></td><td></td><td></td><td>7,30</td><td></td><td></td><td>85,</td><td>,619,178</td></t<>		<u>'</u>			·'	20,00	00,00				7,30			85,	,619,178
6 Proceeds in refunding escrows 7 Issuance costs from proceeds 8 Credit enhancement from proceeds 9 Working capital expenditures from proceeds 10 Capital expenditures from proceeds 11 Other spent proceeds 12 Other unspent proceeds 13 Year of substantial completion 14 Were the bonds issued as part of a current refunding issue? 15 Were the bonds issued as part of an advance refunding issue? 16 Has the final allocation of proceeds been made? 10 O 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								0	5,502,738			- 1			0
104,850		<u> </u>						0	0			- 1			0
Solid Credit enhancement from proceeds 0 351,743 0 0 0 0 0 0 0 0 0						<u> </u>		0	0			- 1			,268,222
9 Working capital expenditures from proceeds 0 0 0 10 Capital expenditures from proceeds 19,895,150 14,642,901 0 26,2 11 Other spent proceeds 0 58,566,572 7,300,000 12 Other unspent proceeds 0 0 0 0 21,3 13 Year of substantial completion 2013 2013 2012 Yes No						10	4,85	50							711,071
10 Capital expenditures from proceeds 19,895,150 14,642,901 0 58,566,572 7,300,000 12 Other unspent proceeds 0 0 0 0 0 21,3 13 Year of substantial completion 2013 2013 2012 Yes No Yes No Yes No Yes No Yes 14 Were the bonds issued as part of a current refunding issue? 15 Were the bonds issued as part of an advance refunding issue? 16 Has the final allocation of proceeds been made? 17 Does the expanyation maintain adequate backs and records to support the final		<u>'</u>				 		0	351,/43			- 1			0
11 Other spent proceeds			·			1986		0 1	4 642 901			- 1			0 256,006,
Other unspent proceeds Other						19,09	5,15				7 30				,256,006
13 Year of substantial completion 2013 Yes No Yes No Yes No Yes No Yes 14 Were the bonds issued as part of a current refunding issue? 15 Were the bonds issued as part of an advance refunding issue? 16 Has the final allocation of proceeds been made? 17 Dees the organization maintain adequate books and records to support the final						 					7,30	0,000		 21	
Yes No Ye		Year of substantial completio	n			2013		20:		2	012	\dashv			303,073
15 Were the bonds issued as part of an advance refunding issue? X X X 16 Has the final allocation of proceeds been made? X X X X X X X							No					lo	Yes	;	No
16 Has the final allocation of proceeds been made? X X X	14	Were the bonds issued as par	rt of a current refundi	ng issue?	•		X	X		X					X
Doos the organization maintain adequate books and records to support the final	15	Were the bonds issued as par	rt of an advance refur	nding issue?	•		X		Х		 	×	Х		
Deed the excenimation maintain adequate heals and records to connect the final	16	.6 Has the final allocation of proceeds been made?			x		×		X				\top	Х	
allocation of proceeds? A private Business Use	17	allocation of proceeds?		nd records to supp	ort the final	х		x		Х			X		

Part IIII Private Business Use

	,	A		В		<u> </u>)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×		×		×		Х
2	Are there any lease arrangements that may result in private business use of bond- financed property?		Х		X		Х	Х	
= -	B								

Part Private Business Use (Continued) C D В Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Х Х Х Χ of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed Х Χ Х Х property? Are there any research agreements that may result in private business use of bondc Χ Χ Χ Χ financed property? 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? Enter the percentage of financed property used in a private business use by entities 4 other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 0 % 0 % 0 % 0 % Does the bond issue meet the private security or payment test? 7 Χ Χ Χ Χ Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В C Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Х Χ Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Χ Χ Exception to rebate? b Χ Χ Χ Χ No rebate due? Х Х c Х If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was the hedge terminated?

Part IV	Arbitrage	(Continued)
---------	-----------	-------------

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

Part V Procedures To Undertake Corrective Action

	Α		В		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
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		×		×	

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
Schedule K, Part II, Line 3 Total proceeds of issue	The University of Tampa issued bonds in April 2012 that had an issue price of \$77,561,332 The form 990 instructions indicate that Schedule K, Part II, Line 3 should show the total proceeds of the issue plus investment earnings. The bond proceeds amount of \$77,567,156 shown in Part II includes cumulative investment earnings of \$5,824 from the Project Fund and the Reserve Fund accounts. Thus the amount of proceeds shown in Part II is more than the proceeds from issue due to these investment earnings.

Return Reference	Explanation
Schedule K, Part III, Line 3a Management or Service contracts	The University of Tampa has incidental service contracts for maintenance of the grounds which meet an exception to private business use

Return Reference	Explanation
Schedule K, Part II, Line 3 Total Proceeds of Issue	The University of Tampa issued bonds in April 2015 that had an issue price of \$85,618,991 The form 990 instructions indicate that Schedule K, Part II, Line 3 should show the total proceeds of the issue plus investment earnings. The bond proceeds amount of \$85,619,178 shown in Part II includes cumulative investment earnings of \$187 from the Project Fund account. Thus the amount of proceeds shown in Part II is more than the proceeds from issue due to these investment earnings.

Return Reference	Explanation
Schedule K, Part I, Column (f) Description Of Purpose	Issuer name Higher Educational Facilities Financing Authority Construction of a new dormitory

Return Reference	Explanation
Schedule K, Part I, Column (f) Description Of Purpose	Issuer name Higher Educational Facilities Financing Authority Construct new dorm and refund prior bond issues (1999, 2000, 2002)

Return Reference	Explanation
Schedule K, Part I, Column (f) Description Of Purpose	Issuer name City of Tampa, Florida Construct new dorm and new multi-use facility, advance refund prior bond issue (2006)

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

►Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

The University of	Tampa Incorpor	atea								24450			
art I Exc	ess Benefi	it Trai	nsactions	(section	501(c)(3), section 50	(c)(4), and 501			24459 nizations	s only)		
					on Form 990, Part IV, I							40b	
1 (a) Nam	ne of disqualif		son (b) i		nıp between dısqualıfıed		(c) Desc	rıptıon	of tra	nsaction	n [(d) Cor	rected?
				person	and organization							Yes	No
4958 .					anagers or disqualified mbursed by the organiz				unde · ·	rsectioi ▶ \$ ▶ \$	n 		
Loans to a ll Complete if the	e organizatio	n answ	ered "Yes"	on Form 9	90-EZ, Part V, line 38	a, or	Form 990, I	Part IV	, line 2	26, or ıf	the org	janizatio	n
Loans to a Complete if th reported an ar	e organizatio mount on Forr	n answ m 990,	ered "Yes" Part X, line	on Form 9 5, 6, or 2	90-EZ, Part V, line 38 2					1		ı	
Loans to a	e organizatio	n answ m 990, nship	ered "Yes"	on Form 9 5, 6, or 2 (d) Loar	190-EZ, Part V, line 38 2 In to (e)Origing the principal control of the control o	ial (Form 990, I (f) Balance due	Part IV (g) defa	In	(h) A ppro by boa) ved rd or	(i)Wr agreer	ıtten
Loans to an Complete of the complete of an arman of interested	e organizatio mount on Forr (b) Relation	n answ m 990, nship	ered "Yes" Part X, line (c) Purpose of	on Form 9 5, 6, or 2 (d) Loar or from	190-EZ, Part V, line 38 2 In to (e)Origing the principal control of the control o	ial ((f) Balance	(g)	In	(h) Appro by boa) ved rd or	(i)Wr	ıtten
Loans to and Complete of the reported an arm (a) Name of onterested	e organizatio mount on Forr (b) Relation	n answ m 990, nship	ered "Yes" Part X, line (c) Purpose of	on Form 9 5, 6, or 2 (d) Loar or from torganizat	po-EZ, Part V, line 38 the (e)Origing principal amounts	ial ((f) Balance	(g) defa	In ult?	(h) A ppro by boa commit	ved rd or ttee?	(i)Wr agreer	itten nent?
Loans to and Complete of the reported and are reported	(b) Relation with organization	on answ m 990, nship zation	ered "Yes" Part X, line (c) Purpose of loan	on Form 9 5, 6, or 2 (d) Loar or from 9 organizat To	p90-EZ, Part V, line 38 2 n to the principal amount From	aal ((f) Balance due	(g) defa	In ult?	(h) A ppro by boa commit	ved rd or ttee?	(i)Wr agreer	itten nent?
Loans to an Complete of the reported an arm (a) Name of Interested person	(b) Relation with organization	nship zation	ered "Yes" Part X, line (c) Purpose of loan	on Form 9 5, 6, or 2 (d) Loar or from 6 organizat To fiting In nswered petween and the	190-EZ, Part V, line 38 2 In to (e)Origi principa amoun	Par	(f) Balance due	(g) defa	In ult?	(h) A ppro by boa commit Yes	ved rd or ttee?	(i)Wr agreer	nttennent?

Part IV Business Transactions In Complete if the organization			ne 28a. 28b. or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	zation's
				Yes	No

Part V	Supplemental Inform	pplemental Information					
Provide additional information for responses to questions on Schedule L (see instructions)							
Return Reference Explanation							

Schedule L (Form 990 or 990-EZ) 2014

Software ID: 14000329 **Software Version:** 2014v1.0

EIN: 59-0624459

Name: The University of Tampa Incorporated

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested	(c) A mount of transaction	(d) Description of transaction	(e) Sharing o	
	person and the organization				nues?
(1) FICURMA	RICHARD W OGOREK (VP ADMINISTRATION AND FINANCE AND TREASURER) IS A BOARD MEMBER OF FICURMA	2,501,989	PROPERTY & CASUALTY INSURANCE PREMIUMS		No
(2) SHERI OGOREK	RICHARD W OGOREK (VP ADMINISTRATION AND FINANCE AND TREASURER) - HIS SPOUSE IS AN EMPLOYEE	69,342	COMPENSATION		Νο
(3) TAMPA ELECTRIC COMPANY	JAMES L FERMAN JR , VICE CHAIR OF THE BOARD, IS A DIRECTOR OF TAMPA ELECTRIC COMPANY	3,544,457	ELECTRICITY AND NATURAL GAS UTILITIES SERVICES		Νo
(4) THE BANK OF TAMPA	JAMES L FERMAN JR , GARY W HARROD, AND A D MACKINNON (ALL TRUSTEES) ARE DIRECTORS OF THE BANK	317,057	INTEREST ON A BANK LOAN		Νo
(5) BECK	CONTRIBUTOR	16,757,054	CONSTRUCTION SERVICES		No
(6) CROSSROADS CONSTRUCTION COMPANY	CONTRIBUTOR	12,626,308	CONSTRUCTION SERVICES		No
(7) EWI CONSTRUCTION LLC	CONTRIBUTOR	159,667	CONSTRUCTION SERVICES		No
(8) FORTUNE STREET PARTNERS LTD	CONTRIBUTOR	845,404	TEMPORARY OFF-CAMPUS HOUSING FOR STUDENTS		No
(9) GENESIS DIVERSIFIED SERVICES	CONTRIBUTOR	546,428	BUILDING REPAIR AND PAINTING SERVICES		No
(10) MILLS AND ASSOCIATES INC	CONTRIBUTOR	194,530	ARCHITECTURAL AND ENGINEERING SERVICES		No
(11) PRODIGY FLOORING INC	CONTRIBUTOR	2,428,237	FLOORING AND FLOORING REPAIRS		No
(12) SHILLING CONTRACTING INC	CONTRIBUTOR	2,419,169	CONSTRUCTION SERVICES, BUILDING REPAIRS AND MAINTENANCE		No
(13) SPECIALIZED PROPERTY SERVICE INC	CONTRIBUTOR	792,447	BUILDING REPAIR AND PAINTING SERVICES		No
(14) KREHER ARCHITECTS INC	ERIC KREHER IS A CONTRIBUTOR TO UT AND PRESIDENT OF KREHER ARCHITECTS INC	395,931	ARCHITECTURAL AND INTERIOR DESIGN SERVICES		No

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DLN: 93493343001035

OMB No 1545-0047

Inspection

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SCHEDULE M (Form 990)

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Noncash Contributions

Name of the organization **Employer identification number** The University of Tampa Incorporated 59-0624459

Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermı		ts
1	Art—Works of art	Х	1	12,000	Market value			
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 .	Х	34	3,407,090	Market value			
LO	Securities—Closely held stock .							
L 1	Securities—Partnership, LLC, or trust interests							
L 2	Securities—Miscellaneous							
L3	Qualified conservation contribution—Historic							
14	structures							
	contribution—Other							
L 5	Real estate—Residential .							
L6	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens Archeological artifacts							
	Other ()							
	Other ► ()							
	Other ►()							
	Other►()							
	Number of Forms 8283 received	by the orga	inization during the tax yea	r for contributions				
	for which the organization comple				29			1
							Yes	No
30a	During the year, did the organiza				= -			
	it must hold for at least three ye			·	red to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
b	If "Yes," describe the arrangeme	ent in Part 1	II					
31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use contributions?	·	es or related organizations	to solicit, process, or sell i	noncash • • •	32a		Νo
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	an amount	in column (c) for a type of	property for which column (a) is checked,			

Supplemental Information. 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.

Return Reference	Explanation
reporting method for number on	Securities - Publicly traded The University is reporting the number of securities contributions received Art - Works of art The University is reporting the number of rare type matrices collection contributions received
Schedule M, Part I, Line 9 Number of contributions or items contributed	The University is reporting the number of securities contributions received
Schedule M, Part I, Line 1 Number of contributions or items contributed	The University is reporting the number of rare type matrices collection contributions received

Schedule M (Form 990) (2014)

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OMB No 1545-0047

2014

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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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization The University of Tampa Incorporated	Employer identification number
- The officersky of Fullipu meorpolated	59-0624459

Return Reference	Explanation
MISSION STATEMENT	(CONTINUED FROM PART III) FOUR COLLEGES OFFER MORE THAN 200 AREAS OF STUDY THROUGH A CORE CURRICULUM ROOTED IN A LIBERAL ARTS TRADITION THE UNIVERSITY IS COMMITTED TO THE DEVELOPMENT OF EACH STUDENT TO BECOME A PRODUCTIVE AND RESPONSIBLE CITIZEN

Return Reference	Explanation
CoreFormPartIII_PartIIILine4d Description of other program services	(Expenses \$ 31,150,631 including grants of \$ 0)(Revenue \$ 41,000,639) AUXILIARY SERVICES AT THE UNIVERSITY OF TAMPA OFFER THE STUDENTS DINING, A BOOKSTORE, STUDENT LIFE SERVICES AND VARIOUS ACTIVITIES THE PURPOSE OF THE AUXILIARY SERVICES OFFICE IS TO PROVIDE THE STUDENTS WITH SERVICES AND ACTIVITIES THAT TAKE PLACE OUTSIDE THE CLASSROOM, ENHANCING LIFE AT THE UNIVERSITY DINING SERVICES OFFER A VARIETY OF DINING VENUES FOR THE STUDENTS AND VISITORS CAMPUS HOUSING IS LIMITED AND IS OFFERED ONLY TO FULL TIME STUDENTS THE UNIVERSITY OF TAMPA HAS ELEVEN RESIDENTIAL HALLS FROM WHICH TO CHOOSE VARIOUS ATHLETIC PROGRAMS ARE ALSO OFFERED FOR THE STUDENTS

Return Reference	Explanation
Form 990, Part VI, Line 1a Delegate broad authority to a committee	The executive committee of the board may act on behalf of the governing body in the instance where emergency action is required. In addition, the executive committee will have general responsibility on behalf of the full board of trustees to review the annual form 990 and related governance issues. They will report their review to the full board and board members shall be provided access to the form 990 prior to its filing.

Return Reference	Explanation
Form 990, Part VI, Line 2 Family/business relationships amongst interested persons	JAMES S MACLEOD AND JAMES K MURRAY, JR - Business relationship, JAMES L FERMAN, JR AND GARY W HARROD AND A D MACKINNON - Business relationship

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	The University's treasurer, comptroller, and paid preparer reviewed the return in detail with the University's executive committee and chairpersons of the University's standing committees on November 19, 2015. Then the executive committee reported its acceptance of the return to the Board of Trustees prior to the return being filed. A copy of the return was provided to each voting trustee before it was filed.

Return Reference	Explanation										
Form 990, Part VI, Line 12c Conflict of interest policy	Conflict of interest surveys are completed each year by every member of the Board of Trustees, all officers, key employees, and highest compensated employees, and contributors who have given \$5,000 or more during the year. The survey results are reviewed by the VP of Operations & Planning and compiled to produce an official record for the institution that is housed in the Office of Administration and Finance. This record is reviewed by the President, the Treasurer, and the Comptroller to ascertain perceived conflicts of interest and determine action steps, if any lift there are any conflicts of interest, the board member with the conflict will abstain from voting on issues related to the conflict of interest.										

Return Reference Explanation						
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The compensation of the President is reviewed annually by a Compensation Committee which is comprised of independent members of the Board of Trustees. The Committee uses comparability data, including compensation studies and the work of an independent consultant, to determine the compensation of the President. The decisions of the Committee are documented in the minutes of the Committee and of the Board and in a letter sent to the President. This review process was last undertaken in September, 2014.					

Return Reference Explanation						
Form 990, Part VI, Line 15b Process to establish compensation of other employees	The compensation of other officers and key employees is determined by an independent Compensation Committee. The Committee uses comparability data, including compensation studies and the work of an independent consultant. In addition, the President makes recommendations to the committee for compensation adjustments. The decisions of the Committee are documented in its minutes and are presented to the Board of Trustees as a Committee report. This review process was last undertaken in September, 2014.					

Return Reference	Explanation
Form 990, Part VI, Line 19 Required documents available to the public	Financial statements, governing documents, and conflict of interest policies are not required disclosures pursuant to Internal Revenue Code (IRC) Section 6104. These documents are not available to the public at this time.

Return Reference	Explanation
Form 990, Part VIII, Line 2f Other Program Service Revenue	Student Affairs - Total Revenue 107362, Related or Exempt Function Revenue 107362, Unrelated Business Revenue 0, Revenue Excluded from Tax Under Sections 512, 513, or 514 0,

Return Reference	Explanation
Form 990, Part VIII, Line 11d Other Miscellaneous Revenue	All Other Revenue - Total Revenue 1240968, Related or Exempt Function Revenue 1240968, Unrelated Business Revenue 0, Revenue Excluded from Tax Under Sections 512, 513, or 514 0,

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Provision For Uncollectible Pledges - 53000,

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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" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization The University of Tampa Incorporated **Employer identification number**

59-0624459

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on 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						

1,315,000 THE UNIVERSITY OF TAMPA (1) BOULEVARD AND KENNEDY HOLDINGS LLC TO HOLD SEVERAL FL 0 401 W KENNEDY BLVD PARCELS OF REAL TAMPA, FL 336061490 **PROPERTY** 59-0624459

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on 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((13) controll entity?	
						Yes	No
(1) THE CHISELERS INC PO BOX 13895	SUPPORT OF UT	FL	501(c)(3	Type III-FI	NA		No
TAMPA, FL 33681 59-6200154							

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	atıon ansv	ered "Ye	s" on Form	990, Part 1	[V, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.						
											$^{-}$

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	Ü)	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Dispropr	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	lend-of-year	allocati	ions?	amount in box	mana	iging	ownership
-		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from		1			Schedule K-1			
		country)		tax under		1			(Form 1065)			
				sections 512-		1						
		1 1		514)		1	L			L		
				,		1	Yes	No		Yes	No	
									ı			

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No

Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Form	n 990, Part IV, line	e 34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more rel	ated organizations li	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1 a		No
b Gift, grant, or capital contribution to related organization(s)			1b		No
c Gift, grant, or capital contribution from related organization(s)			1c	Yes	
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)			1 g		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)			<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)			1k		No
I Performance of services or membership or fundraising solicitations for related organization(s)			11		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
• Sharing of paid employees with related organization(s)			10		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 co	overed relationships	and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	ınvolved	1
	1	1			

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	, , , , , , , , , , , , , , , , , , ,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
1			<u> </u>			'				

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

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