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DLN: 93493137037836

# 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	2014 cal		ning 07-01-2014 , and ending 06-30-20	15			
B Ch	eck if a	applicable	C Name of organization UNIVERSITY OF RICHMOND			D Emplo	yer iden	tification number
☐ Ad	dress c	hange	0/ LAUDIE E MELVIUE			54-0	505965	
П Na	me cha	ange	% LAURIE F MELVILLE  Doing business as			-		
┌ Ini	tıal retu	um				E Talaah		
Fir				if mail is not delivered to street address) Room/	suite	- E reiepn	one numb	er
		rmınated	201 MARYLAND HALL			(804)	289-8	150
An	nended	return	City or town, state or province, RICHMOND, VA 231730001	country, and ZIP or foreign postal code		1		000 570 554
Г Ар	plicatio	n pending	RICHMOND, VA 231730001			<b>G</b> Gross	receipts \$	832,573,554
			<b>F</b> Name and address of	principal officer	<b>H(a)</b> Is t	nis a group	return 1	for
			EDWARD LAYERS			ordinates?		┌ Yes 🗸 No
			201 MARYLAND HALL RICHMOND, VA 23173	0001	<b>И/Б</b> ) А	-11		┌ Yes ┌ No
			·		H(b) Are incli	ali subora uded?	inates	j Yesj No
I Ta	ax-exer	mpt status	▼ 501(c)(3)	◀ (insert no )	If "N	No," attach	nalıst (	see instructions)
	/ebsit	e:▶ WW	/W RICHMOND EDU		T Gro	up exemp	tion num	har 🌬
					1 (-)			
			Corporation Trust Associ	ation Other 🗠	<b>L</b> Year of f	ormation 18	330 <b>M</b> 9	State of legal domicile VA
Pa	rt I	Sum	mary					
				ssion or most significant activities	CTONAL EDII	CATION	ANDIE	N D N I N C
		TO OPE	RATE A UNIVERSITY FOR A	CADEMIC SCIENTIFIC, AND PROFES	SIONALEDU	CATION	AND LEA	ARNING
ဋ								
룓								
<u>ş</u>	2	Check th	nis box দ if the organization	discontinued its operations or disposed	d of more than	25% of its	net ass	ets
Governance								
	1			erning body (Part VI, line 1a)			3	2.2
Ĕ	1			rs of the governing body (Part VI, line 1			4	20
Activities &				ın calendar year 2014 (Part V, line 2a)			5	4,745
Q Q	1			ıf necessary)			6	1,889
				n Part VIII, column (C), line 12			7a	12,497,503
	b	Net unre	lated business taxable incom	ne from Form 990-T, line 34			7b	4,494,451
	_				Pri	or Year		Current Year
<u>a</u>	"	8 Contributions and grants (Part VIII, line 1h)					649	25,937,654
Revenue	9			[, line 2g)		190,055,	_	200,198,859
<u>}</u>	10			ımn (A), lines 3, 4, and 7d)	•	172,166,		76,515,572
	11		, ,	A ), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 (must equal Part VIII, column (A ), l		35,772,	104	33,263,277
	12					435,844,	352	335,915,362
	13			art IX, column (A ), lines 1-3 )		69,630,	079	74,034,215
	14	Benefi	ts paid to or for members (Pa	rt IX, column (A), line 4)			0	0
	15	Saları	es, other compensation, empl	oyee benefits (Part IX, column (A), lines	5	155,031,	229	161,918,264
\$		5-10)						
Expenses	16a			IX, column (A), line 11e)	•	155,503 156,		
ਨੀ	b	Total fu	ndraising expenses (Part IX, column	(D), line 25) • 10,347,226	.			
_	17	Other	expenses (Part IX, column (A	A), lines 11a-11d, 11f-24e)		93,171,	014	94,105,297
	18	Total	expenses Add lines 13-17 (	must equal Part IX, column (A), line 25)	,	317,987,	825	330,214,172
	19	Reven	ue less expenses Subtract lı	ne 18 from line 12		117,856,	527	5,701,190
<u>ኞ</u>					_	ng of Curre	nt	End of Year
9.00 0.00 0.00					<u> </u>	Year		
Net Assets or Fund Balances	20				.   2	,819,071,		2,854,649,911
and and	21				•	349,808,		319,497,803
	22			act line 21 from line 20	. [ 2	,469,263,	590	2,535,152,108
	rt II		ature Block					
my k	nowle	dge and		examined this return, including accomp complete Declaration of preparer (other				
		Tk .			.	2016-05-12		
Sigi	n	Signa	ature of officer			Date		
Her		DAVI	D B HALE VP FOR BUS & FIN, TREAS	5				
			or print name and title					
			Print/Type preparer's name	Preparer's signature		eck I if	PTIN	: 12
Pai	d	<u> </u>	RAVIS L PATTON	TRAVIS L PATTON		lf-employed	P003696	023
	pare		firm's name FRICEWATERHOUS	DECOUPERS ILP	Fir	m's EIN 🟲		
	On		irm's address 🟲 600 13TH STREET I	NW SUITE 1000	Ph	one no (202	2) 414-10	00
	- 011	,	WASHINGTON, DC	200053005				

Form	990 (2014)					Page 2					
Par		nt of Program Ser									
		chedule O contains a re	<u> </u>	to any line in this Part I							
1	·	he organization's missic									
THAT PROP PURF ADM PLAN AND	I SUPPORTS THE MISE, THE UNIVE POSE IS TO OPER INISTERING THE NAME TO FULFIL RESEARCH COMM	PERSONAL DEVELOP RSITY'S STRATEGIC P ATE AS A MODEL INS INSTITUTION WITH T L THE MISSION ESTA MUNITY THAT SUPPOR	MENT OF ITS M LAN, ESTABLI TITUTION OF I HE HIGHEST S BLISHED BY TH RTS THE PERSO	IEMBERS AND THE CF SHES HOW RICHMON HIGHER EDUCATION TANDARDS OF INNO HE BOARD OF TRUSTI DNAL DEVELOPMENT	RATIVE LEARNING AND RES REATION OF NEW KNOWLED D WILL PURSUE ITS MISSIO , SUSTAINING A SUPERB FAR VATION AND PROFESSIONA EES TO "SUSTAIN A COLLA OF ITS MEMBERS AND THE	GE THE RICHMOND N THE LARGER CULTY AND STAFF, AND ALISM THE STRATEGIC BORATIVE LEARNING CREATION OF NEW					
		10ND EDUCATION PR RSHIP IN A GLOBAL A			OF PURPOSE, THOUGHTFUL	INQUIRY, AND					
KLSI	ONSIBEE EEADEI	KSIIII IN A GEODALA	ND I EUNALIST	10 30 012 11							
2		on undertake any signifi 0 or 990-EZ?			which were not listed on	┌ Yes ┌ No					
	If "Yes," describe these new services on Schedule O										
3		on cease conducting, or			nducts, any program	┌ Yes ┌ No					
	If "Yes," describe these changes on Schedule O										
4	expenses Section		(4) organization:	s are required to report	ree largest program services, a the amount of grants and alloo						
4a	(Code	) (Expenses \$	149,197,151	ıncludıng grants of \$	74,111,364 ) (Revenue \$	181,021,755 )					
	INSTRUCTION - SEE	SCHEDULE O									
	(Code	) (Expenses \$	44,939,991	ıncludıng grants of \$	0 ) (Revenue \$	0)					
	ACADEMIC SUPPORT	Γ - SEE SCHEDULE O									
4c	(Code	) (Expenses \$	49,418,483	ıncludıng grants of \$	0 ) (Revenue \$	35,158,336 )					
	AUXILIARY ENTERPR	ISES - SEE SCHEDULE O									
	Other program s	ervices (Describe in Sc	hadula O )								

0 ) (Revenue \$

32,128,154 including grants of \$

275,683,779

(Expenses \$

Total program service expenses ►

0)

# Form 990 (2014) Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			No
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		110
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		Νo
LO	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	
l <b>1</b>	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
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	
L5	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	Yes	
L6	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	
L7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
L8	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
L9	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		Νo
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	Yes	
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
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
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? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	20		No
37	organization? If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
٠,	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			厂_
	Estantia number un statu Pau 2 of Estantia O of Estantia de La		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 6,023  Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> 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	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4</b> a		No
b	If "Yes," enter the name of the foreign country ►			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
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).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
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
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
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.			
а	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	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 VI							

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie 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		Νo
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	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		Ī	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►AK, IL, MD, MA, MI, NV, NH, NY, OK, OR, SC, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website V 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 ►LAURIE F MELVILLE

201 MARYLAND HALL

RICHMOND, VA 231730001 (804) 289-8150

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	han d n is l	ne l both	box, an d	officer stee)		(D) Reportable compensation from the organization (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

1b	Sub-Total	۰			
C	Total from continuation sheets to Part VII, Section A	►			
d	Total (add lines 1b and 1c)	Þ	9,003,771	0	1,377,255

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►271

			Yes	No	
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee				
	on line 1a? If "Yes," complete Schedule I for such individual	3	Yes		
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				
	ındıvıdual	4	Yes	ı	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	·	No	

#### Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation				
HOURIGAN CONSTRUCTION CORP, 1600 FOREST AVE RICHMOND, VA 23229	CONSTRUCTION	9,986,139				
DONLEY'S LLC, 300 ARBORETUM PLACE STE 245 RICHMOND, VA 23236	CONSTRUCTION	5,748,179				
TBL NETWORKS INC, 1801 BAYBERRY CT 202 RICHMOND, VA 23226	TECHNOLOGY	3,423,718				
BARTON MALOW COMPANY, 1019 HULL STREET RICHMOND, VA 23224	ARCHITECT	2,135,088				
SHOOSMITH CONSTRUCTION, 11800 LEWIS ROAD CHESTER, VA 23831	CONSTRUCTION	1,710,099				
2 Total number of independent contractors (including but not limited to those listed above) 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 ►147

Form 99		•	_					Page <b>9</b>
Part V	7111	Statement o	o <b>f Revenue</b> ule O contains a respor	nse or note to any lu	ne in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	ies <b>1b</b>					
	С	Fundraising eve	ents <b>1c</b>					
Giffs, iilar A	d	Related organiz	zations 1d					
<u>n</u> <u>G</u>	e	Government grant	s (contributions) <b>1e</b>	3,011,282				
ons Sir	f	All other contribution	ons, gifts, grants, and <b>1f</b>	22,926,372				
int her	•	sımılar amounts no	ot included above					
Contributions, and Other Sim	g	Noncash contributi 1a-1f \$	ons included in lines	3,953,309				
a G	h	Total. Add lines	s 1a-1f	🕨	25,937,654			
<u> </u>				Business Code				
Program Serwoe Revenue	2a	Tuition & fees		611600	175,280,423	175,280,423		
æ	Ь	Auxiliary enterprise		900099	20,998,353	19,719,682	1,278,671	
MCA	C	Summer camps &		900099	666,705		666,705	
S.	d	NON-CREDIT PRO	GRAMMING	611600	3,253,378	3,253,378		
Ē	e f	All other progra	m corvice revenue					
Togi	•	All other progra	am service revenue					
	g	Total. Add lines			200,198,859			
	3		ome (including dividendar ar amounts)	ds, interest,	114,429,994		-3,244,316	117,674,310
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨	15,017			15,017
	5	Royalties		►	64,862	64,862		
	6a	Gross rents	(ı) Real 3,485,602	(II) Personal				
	ь	Less rental	, ,					
	С	expenses Rental income	3,485,602	0				
	d	or (loss) Net rental inco	me or (loss)	🛌	3,485,602			3,485,602
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	449,982,834					
	ь	Less cost or other basis and	487,788,981	123,292				
	c	sales expenses Gaın or (loss)	-37,806,147	-123,292				
	d	, ,	ss)	·	-37,929,439			-37,929,439
<u>e</u>	8a	Gross income f						
Other Revenue		of contributions See Part IV, lin	s reported on line 1c) ne 18					
je.	ь	Less direct ex	penses b					
₹	С	Net income or (	(loss) from fundraising	events 🛌	0			
	9a	Gross income f See Part IV, lin	rom gaming activities ne 19 a					
	b		penses b					
	C		loss) from gamıng actı). ت	vities	0			
	10a	Gross sales of returns and allo		22,209,205				
	b		oods sold <b>b</b>	8,745,919			_	
	С	Net income or (	(loss) from sales of inve	entory 🛌 Business Code	13,463,286	13,428,416	34,870	
	11a	INVESTMENT		525990	13,098,748		13,098,748	
	b	OTHER MISCE		900099	3,150,779	2,487,954	662,825	
		INCOME						
	C	Λ II -+						
	d e	All other reven	ue   s 11a-11d	<u></u> ▶				
				.  -	16,249,527			
	12	i ota i revenue.	See Instructions .	· · · · •	335,915,362	214,234,715	12,497,503	83,245,490

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns $All$	other organizat	ions must comp	lete column (A )			
Check if Schedule O contains a response or note to any line in this Part IX							
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses		
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	498,858	498,858				
2	Grants and other assistance to domestic individuals See Part IV, line 22	69,324,903	69,324,903				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	4,210,454	4,210,454				
4	Benefits paid to or for members	0					
5	Compensation of current officers, directors, trustees, and key employees	5,151,035	929,936	4,221,099			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	308,017	308,017				
7	Other salaries and wages	121,612,469	98,303,454	17,801,550	5,507,465		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	9,228,392	7,438,244		417,933		
9	Other employee benefits	16,723,470	13,322,851	2,678,774	721,845		
10	Payroll taxes	8,894,881	6,984,628	1,523,266	386,987		
11	Fees for services (non-employees)	, ,	, ,		<u>,                                     </u>		
а	Management	0					
ь	Legal	244,441	6,391	238,050			
c	Accounting	326,043	1,000	325,043			
d	Lobbying	0	2,000	320,010			
e	Professional fundraising services See Part IV, line 17	156,396			156,396		
f	Investment management fees	0					
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	13,447,407	9,335,668	3,229,222	882,517		
12	Advertising and promotion	1,142,034	1,024,940	57,823	59,271		
13	Office expenses	18,213,952	11,202,456	5,919,690	1,091,806		
14	Information technology	5,128,478	4,869,694	<del> </del>	37,158		
15	Royalties	0	, ,	,	<u> </u>		
16	Occupancy	3,081,759	2,928,256	153,503			
17	Travel	9,010,450	7,760,033	876,290	374,127		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	,,,,,,,,,,	3,3,21			
19	Conferences, conventions, and meetings	0					
20	Interest	6,536,912	6,037,654	499,258			
21	Payments to affiliates	0					
22	Depreciation, depletion, and amortization	22,699,205	21,069,348	1,629,857			
23	Insurance	1,608,135	1,169,259	438,876			
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)						
а	LIBRARY BOOKS & MATERIALS	5,551,807	5,485,591	1,147	65,069		
Ь	EQUIP RENTAL & MAINTENANCE	4,015,925	1,628,427	2,368,808	18,690		
c	TAXES	168,101	168,467	-366	0		
d	MISCELLANEOUS EXPENSES	2,930,648	1,675,250	627,436	627,962		
e	All other expenses						
25	Total functional expenses. Add lines 1 through 24e	330,214,172	275,683,779	44,183,167	10,347,226		
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)				rm <b>990</b> (2014)		

#### Part X Balance Sheet

Cash-non-interest-bearing   Beginning of year   End of year	F GII	L A	Check if Schedule O contains a response or note to any line in this Part X			
2   Savings and temporary cash investments   27,507,012   2   31,864,556				(A)		(B)
3   Pledges and grants receivable, net   22.227.655   3   21.832.467		1	Cash-non-interest-bearing	0	1	0
4   Accounts receivable, net   6,775,782   4   6,700,782		2	Savings and temporary cash investments	97,520,102	2	31,864,509
Section   Sec		3	Pledges and grants receivable, net	22,257,895	3	21,832,467
Separation   Se		4	Accounts receivable, net	6,775,782	4	6,790,762
1	ts	5	key employees, and highest compensated employees Complete Part II of	0	E	0
9 Prepaid expenses and deferred charges		6	section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees			
9 Prepaid expenses and deferred charges		7	Notes and loans receivable net	8.188.940		9.138.820
9	⋖			, ,	-	<u>`</u> _
10a		_				
11   Investments—publicity traded secunties   10b   352,825,283   323,986,904   10c   333,404,334     11   Investments—publicity traded secunties   86,414,059   11   86,201,699     12   Investments—publicity traded secunties   12   2,355,202,380,880   12   2,355,202,380     13   Investments—program-related See Part IV, line 11   2,258,380,680   12   2,355,202,380     14   Intangible assets   0   14   0     15   Other assets See Part IV, line 11   6,575,514   15   6,472,871     16   Total assets See Part IV, line 11   6,575,514   15   6,472,871     16   Total assets See Part IV, line 11   7,856,991   7,856,991     17   Accounts payable and accrued expenses   60,014,939   17   31,976,556     18   Grants payable   0   18   0     19   Deferred revenue   10,140,389   19   7,856,992     20   Tax-exempt bond liabilities   20   22,400,365   20   226,237,490     21   Escrow or custodial account liability Complete Part IV of Schedule   D   0   21   0     22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule   D   0   22   0     22   Loans and other payables to unrelated third parties   0   23   0   0     23   Secured mortgages and notes payable to unrelated third parties   0   24   0   0     24   Unsecured notes and loans payable to unrelated third parties   0   24   0   0     25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule   D   0   24   0   0     25   Total liabilities   Not included on lines 17-24) Complete Part X of Schedule   D   0   24   0   0     26   Total liabilities   Not included on lines 33 and 34.   1   1   1   1   1   1   1   1   1		-	Land, buildings, and equipment cost or other basis			-,,
11   Investments—publicly traded securities   86,414,055   11   86,201,699     12   Investments—other securities   See Part IV, line 11   2,258,380,680   12   2,350,202,389     13   Investments—program—related   See Part IV, line 11   0   13   0     14   Intangible assets   0   14   0     15   Other assets   See Part IV, line 11   6,575,514   15   6,472,871     16   Total assets. Add lines 1 through 15 (must equal line 34)   2,819,071,870   16   2,854,649,911     17   Accounts payable and accrued expenses   60,014,939   17   31,976,551     18   Grants payable   0   18   0     19   Deferred revenue   10,140,389   19   7,883,992     20   Tax—exempt bond liabilities   10,140,389   19   7,883,992     21   Escrow or custodial account liability   Complete Part IV of Schedule   D   21   0     22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons   Complete Part II of Schedule   D   22   0     23   Secured mortpages and notes payable to unrelated third parties   23   24   0     24   Unsecured notes and loans payable to unrelated third parties, and other liabilities not included on lines 17-24)   Complete Part X of Schedule   D   22   0     26   Total liabilities   Add lines 17 through 25   349,803,280   26   319,497,803     27   Target   Through 29, and lines 33 and 34.   1,221,713,232   27   1,273,554,399     28   Temporarily restricted net assets   385,978,882   29   376,506,536     29   Permanently restricted net assets   385,978,882   29   376,506,536     30   Capital stock or trust principal, or current funds   30   1     20   Permanently restricted net assets   385,978,882   29   376,506,536     31   Paid-in or capital surplus, or land, building or equipment fund   31   1     32   Retained earnings, endowment, accumulated income, or other funds   32   2,489,283,590   33   2,535,152,108   30   2,489,283,590   33   2,535,152,108   30   2,489,283,590   33   2,535,152,108   30   2,489,283,590   33   2,535,152,108		Ь		323,996,904	10c	333,404,334
12   Investments—other securities See Part IV, line 11   2,258,380,680   12   2,350,202,389   13   Investments—program-related See Part IV, line 11   0   13   0   0   14   0   0   0   0   0   0   0   0   0		11	<u> </u>	86,414,059	11	86,201,699
13		12		2,258,380,690	12	2,350,202,389
14		13	·	0	13	0
15			· ·	0		0
16   Total assets. Add lines 1 through 15 (must equal line 34)   2,819,071.870   16   2.854,649,911		15		6,575,514	15	6,472,871
17					16	2.854,649,911
18   Grants payable		1				31,976,551
19   Deferred revenue   10,140,389   19   7,858,9992   20   Tax-exempt bond liabilities   229,400,365   20   226,237,490   22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L   0   22   0   0   0   0   0   0   0				0		0
20   Tax-exempt bond liabilities   229,400,365   20   226,237,490     21   Escrow or custodial account liability Complete Part IV of Schedule D   0   21   0     22   Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L   0   22   0     23   Secured mortgages and notes payable to unrelated third parties   0   23   0     24   Unsecured notes and loans payable to unrelated third parties   0   24   0     25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24   Complete Part X of Schedule D   0   0   0   0     26   Total liabilities Add lines 17 through 25   349,808,280   26   319,497,803     26   Total liabilities Add lines 17 through 25   349,808,280   26   319,497,803     27   Unrestricted net assets   1,221,713,232   27   1,273,554,399     28   Temporarily restricted net assets   881,571,476   28   885,091,173     29   Permanently restricted net assets   365,978,882   29   376,506,596     29   Organizations that do not follow SFAS 117 (ASC 958), check here   and complete lines 30 through 34.     30   Capital stock or trust principal, or current funds   30     31   Paid-in or capital surplus, or land, building or equipment fund   31     32   Retained earnings, endowment, accumulated income, or other funds   32     33   Total net assets or fund balances   2,469,263,590   33   2,535,152,108     31   Paid-in or capital surplus, or land, building or equipment fund   2,469,263,590   33   2,535,152,108     32   Paid-in or capital surplus, or land, building or equipment fund   31     34   Paid-in or capital surplus, or land, building or equipment fund   31     35   Paid-in or capital surplus, or land, building or equipment fund   32     36   Paid-in or capital surplus, or land, building or equipment fund   32     35   Paid-in or capital surplus, or land, building or equipment fund   32     36   Paid-in or capi				10,140,389		7,858,992
21   Escrow or custodial account liability Complete Part IV of Schedule D   0   21   0   0   22   0   0   23   0   0   24   0   0   24   0   0   0   25   0   0   25   0   0   26   0   0   27   0   0   0   0   0   0   0   0   0				, ,		
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			·			· · ·
24 Unsecured notes and loans payable to unrelated third parties	-		Loans and other payables to current and former officers, directors, trustees,		21	
24 Unsecured notes and loans payable to unrelated third parties	졅			0	22	0
24 Unsecured notes and loans payable to unrelated third parties  O ther liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule  D	ä	23		0		0
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D				0		0
D			Other liabilities (including federal income tax, payables to related third parties,			
Organizations that follow SFAS 117 (ASC 958), check here			D	50,252,587	25	53,424,770
Innex 27 through 29, and lines 33 and 34.   27    Unrestricted net assets		26	Total liabilities. Add lines 17 through 25	349,808,280	26	319,497,803
Complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	s e s		·			
Complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	an I	27	Unrestricted net assets	1,221,713,232	27	1,273,554,399
Complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	ල ස	28	Temporarily restricted net assets	881,571,476	28	885,091,173
Complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	둳	29	Permanently restricted net assets	365,978,882	29	376,506,536
30 Capital stock or trust principal, or current funds	r Fur		- · · · · · · · · · · · · · · · · · · ·			
33 Total net assets or fund balances	۰ د	30			30	
33 Total net assets or fund balances	ŠĘ	31	Paid-in or capital surplus, or land, building or equipment fund		31	
33 Total net assets or fund balances	AS	32	Retained earnings, endowment, accumulated income, or other funds		32	
<b>34</b> Total liabilities and net assets/fund balances	ಹ	33	Total net assets or fund balances	2,469,263,590	33	2,535,152,108
	Z	34	Total liabilities and net assets/fund balances	2,819,071,870	34	2,854,649,911

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		335,9	915,362
2	Total expenses (must equal Part IX, column (A), line 25)	2		330,2	214,172
3	Revenue less expenses Subtract line 2 from line 1	3			, ,01,190
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			263,590
5	Net unrealized gains (losses) on investments	5			280,137
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-4,0	92,809
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		2,535,1	52,108
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revial separate basis, consolidated basis, or both	ewed 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 ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	tht of th	ne <b>2c</b>	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 t Single Audit Act and OMB Circular A-133?	he	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	!	3b	Yes	

Software ID: **Software Version:** 

**EIN:** 54-0505965

Name: UNIVERSITY OF RICHMOND

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
(1) PATRICIA ROWLAND	7 0	х		х				0	0	0
RECTOR (AS OF 7/2014) (1) LEONARD W SANDRIDGE JR	7 0									
VICE-RECTOR	0 0	х		Х				0	0	0
(2) EDWARD L AYERS	40 0									
PRESIDENT	0 0	X		Х				906,427	0	231,440
(3) STEPHEN J ARONSON	2 0	х						0	0	0
TRUSTEE	0 0	^						Ů	Ŭ	
(4) ALAN W BREED	2 0	X						0	0	0
TRUSTEE (5) TIMOTHY W FINCHEM	0 0									
TRUSTEE	0 0	Х						0	0	0
(6) ROGER L GREGORY	2 0									
TRUSTEE	0 0	X						0	0	0
(7) JEFFREY M LACKER	2 0	x						0	0	0
TRUSTEE	0 0	^						0	Ů	Ů
(8) ANN CAROL MARCHANT	2 0	X						0	0	0
TRUSTEE  (9) HERBERT H MCDADE III	0 0									
		х						0	0	0
TRUSTEE (10) WILLIAM H MCLEAN	0 0									
TRUSTEE	0 0	Х						0	0	0
(11) LELAND D MELVIN	2 0	×						0	0	0
TRUSTEE	0 0	_ ^						0	0	0
(12) LOUIS W MOELCHERT JR	2 0	X						0	0	0
TRUSTEE (13) SD ROBERTS MOORE	0 0									
		х						0	0	0
TRUSTEE (14) KAREN G O'MALEY	0 0									
TRUSTEE (AS OF 7/2014)	0 0	Х						0	0	0
(15) PAUL B QUEALLY	2 0	x						0	0	0
TRUSTEE	0 0	_ ^						0	Ů	0
(16) SUSAN G QUISENBERRY	2 0	X						0	0	0
TRUSTEE (17) GREGORY S ROGOWSKI	0 0									
		Х						0	0	0
TRUSTEE (18) MICHAEL S SEGAL	2 0									
TRUSTEE	0 0	Х						0	0	0
(19) SUZANNE F THOMAS	2 0	x						0	0	0
TRUSTEE	0 0	_ ^						0	Ů	Ů
(20) LYNNE E WASHINGTON	2 0	X						0	0	0
TRUSTEE (21) ALLISON P WEINSTEIN	0 0									
TRUSTEE	0 0	х						0	0	0
(22) ANN LLOYD BREEDEN	40 0									
SECRETARY	0 0			Х				186,879	0	33,146
(23) DAVID B HALE	40 0			Х				373,333	0	52,477
VP BUSINESS & FINANCE/TREAS	0 0			L^				373,333		32,777
(24) JACQUELYN FETROW	40 0			х				149,316	0	24,602
PROVOST & VP ACAD AFFAIRS	0 0									

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

Compensated Employees, and Independent Contractors										
<b>(A)</b> Name and Title	(B) A verage	(C) Position (do not check				eck		<b>(D)</b> Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated amount
	hours per		more than one box, unless					compensation compensation		of other
	week (list	perso						from the organization (W-	from related	compensation from the
	any hours for related	1	2/1		2/1099-MISC)	organızatıons (W- 2/1099-MISC)	organization and			
	organizations	불립	5	Office	<u>중</u>	遺真	Former	,	,	related
	below dotted line)		<u>ĝ</u>	⊻	en	Š Š	∄			organizations
	docted lille)	dividual t	Institutional		흥	8 g	<u> </u>			
		` <del>g</del>	≗		emplo) ee	3				
		Individual trustee or director	Trustee			틢				
			œ.			Highest compensated employee				
(26) STEPHEN BISESE	40 0					_				
VP, STUDENT DEVELOPMENT	0 0				Х			210,815	0	40,714
(1) ROBIN BLANDFORD	40 0									
					Х			1,879,423	0	40,260
PRESIDENT, SMC (2) KATHRYN MONDAY	0 0 40 0									
					Х			233,711	0	35,054
VP, INFORMATION SERVICES  (3) WENDY PERDUE	40 0									
DEAN, LAW	0 0				х			358,862	0	53,549
(4) LORRAINE SCHUYLER	40 0									
CHIEF OF STAFF	0 0				Х			186,725	0	36,929
(5) KATHLEEN SKERRETT	40 0									
DEAN, ARTS & SCIENCES	0 0				Х			230,835	0	29,254
(6) ANNE TESSIER	40 0				,			210,402		24.442
VP ENROLLMENT MANAGEMENT	0 0				X			219,482	0	31,143
(7) PAUL COSTELLO	40 0					х		E70 922	0	25 524
COO, SMC	0 0					_ ^		579,833	U	35,524
(8) STEVEN HENDERSON	40 0					х		652,961	0	41,399
DIRECTOR, SMC	0 0					^		032,901		41,399
(9) CHRISTOPHER MOONEY	40 0					x		740,440	0	456,845
BASKETBALL COACH	0 0					,		710,110		130,013
(10) KEVIN STOUDT	40 0					x		432,198	0	41,858
DIRECTOR, SMC	0 0									
(11) MATTHEW WERNER	40 0					×		474,234	0	60,178
DIRECTOR, SMC	0 0							,		
(12) STEPHEN ALLRED	40 0						x	304,031	0	49,390
FMR PROVOST & VP ACAD AFFAIRS	0 0							,	_	
(13) JOHN DOUGLASS	40 0						x	257,640	0	37,331
FORMER DEAN, LAW	0 0							,		,
(14) STEPHEN KNEELEY	40 0						х	416,491	0	11,549
FORMER CEO, SMC	0 0							·		· 
(15) ANDREW NEWCOMB	40 0						х	210,135	0	34,613
FORMER DEAN, ARTS & SCIENCES	0 0									

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As Filed Data -

DLN: 93493137037836

**Employer identification number** 

#### 9349313/03/836

### SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Name of the organization

#### **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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2014

Open to Public Inspection

UNIVERSITY OF RICHMOND 54-0505965 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  $\overline{\mathbf{v}}$ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement. (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i)Name of supported (ii) EIN (iv) Is the organization (vi) A mount of (iii) Type of (v) A mount of listed in your governing other support (see organization organization monetary support (described on lines document? (see instructions) instructions) 1-9 above or IRC section (see instructions)) Yes No

Sch	edule A (Form 990 or 990-EZ) 2014						Page <b>2</b>
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>(b)</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	<b>Total.</b> 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	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	<b>(b)</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	<b>Total support</b> 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				<del></del>	<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		<del> </del>	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	<b>33 1/3% support test—2014.</b> 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 <b>stop here.</b> The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	<b>-2014.</b> 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	<b>▶</b> ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		<b>▶</b> ┌
18	<b>Private foundation.</b> If the organizations	on ala not check	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• <b>▶</b> □

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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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	<b>Type I or Type II only.</b> 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 <b>Part VI</b> .	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 <b>Part VI</b> .	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 <b>Part VI</b> .	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 <b>Part VI</b> .	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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> 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>b</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 <b>Part VI</b> 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	<b>Discount</b> 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			
<b>a</b> From 2009			
<b>b</b> From 2010			
<b>c</b> From 2011			
d From 2012			
<b>e</b> 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>b</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)			
<b>7 Excess distributions carryover to 2015.</b> Add lines 3j and 4c			
8 Breakdown of line 7			
<b>a</b> From 2010			
<b>b</b> From 2011			
<b>c</b> 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

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DLN: 93493137037836

OMB No 1545-0047

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

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

Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public Inspection

e of the organization ERSITY OF RICHMOND			Employer identification number
ERSITI OF RICHMOND			54-0505965
Organizations Maintaining organization answered "Yes" to	o Form 990, Part IV, line 6.		nds or Accounts. Complete if the
	(a) Donor adv	rised funds	(b) Funds and other accounts
Total number at end of year			
Aggregate value of contributions to (during	g year)		
Aggregate value of grants from (during yea	ar)		
Aggregate value at end of year			
Did the organization inform all donors and funds are the organization's property, sub			advised Yes No
Did the organization inform all grantees, dused only for charitable purposes and not conferring impermissible private benefit?	•	-	
Conservation Easements.	Complete if the organization a	nswered "Yes" to	Form 990, Part IV, line 7.
Purpose(s) of conservation easements he Preservation of land for public use (e g Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organ	, recreation or education)	Preservation of an h Preservation of a ce	rtified historic structure
easement on the last day of the tax year			11-11-11-5-1-611-7
Total number of conservation easements		-	Held at the End of the Year
		-	2a
Total acreage restricted by conservation			2b
Number of conservation easements on a c		· ` ' —	2c
Number of conservation easements include historic structure listed in the National Re	egister		2d
Number of conservation easements modified the tax year 🛌			
Number of states where property subject t			
Does the organization have a written polic enforcement of the conservation easemen	y regarding the periodic monitoring its it holds?	g, ınspection, handlı	ng of violations, and Yes No
			nts during the year
Staff and volunteer hours devoted to moni	toring, inspecting, and enforcing c	onservation easeme	,
Staff and volunteer hours devoted to moni			
<b>-</b>			
► A mount of expenses incurred in monitorin	g, inspecting, and enforcing conse	rvation easements c	during the year
►A mount of expenses incurred in monitorin ►\$  Does each conservation easement reporte	g, inspecting, and enforcing conse ed on line 2(d) above satisfy the re n reports conservation easements the text of the footnote to the organ	rvation easements of section in its revenue and e	during the year on 170(h)(4)(B)(i)  Yes No expense statement, and
► A mount of expenses incurred in monitorin  ► \$  Does each conservation easement reporte and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organizatio balance sheet, and include, if applicable, t	g, inspecting, and enforcing conse ed on line 2(d) above satisfy the re n reports conservation easements the text of the footnote to the organ ation easements <b>Collections of Art, Historic</b>	rvation easements of section in its revenue and enization's financial s	during the year  on 170(h)(4)(B)(i)  Yes No  expense statement, and tatements that describes
Amount of expenses incurred in monitorin  \$  Does each conservation easement reporte and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organizatio balance sheet, and include, if applicable, t the organization's accounting for conserva	g, inspecting, and enforcing consected on line 2(d) above satisfy the results of the footnote to the organization easements  Collections of Art, Historical Insured "Yes" to Form 990, Particles of STAS 116 (ASC 958), not to similar assets held for public exhibitions	rvation easements of section in its revenue and enization's financial state of the section art IV, line 8.  report in its revenue bition, education, or	during the year  on 170(h)(4)(B)(i)  Yes No expense statement, and tatements that describes  r Other Similar Assets.  e statement and balance sheet research in furtherance of public
A mount of expenses incurred in monitorin  \$  Does each conservation easement reporte and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organizatio balance sheet, and include, if applicable, t the organization's accounting for conserva  III Organizations Maintaining Complete if the organization a  If the organization elected, as permitted u works of art, historical treasures, or other	g, inspecting, and enforcing conservation line 2(d) above satisfy the results of the footnote to the organism easements.  Collections of Art, Historical inswered "Yes" to Form 990, Particle 1990, Parti	equirements of section in its revenue and enization's financial start IV, line 8.  report in its revenue bition, education, or ents that describes to ort in its revenue st	during the year  on 170(h)(4)(B)(i)  Yes No expense statement, and tatements that describes  r Other Similar Assets.  e statement and balance sheet research in furtherance of public these items atement and balance sheet
Amount of expenses incurred in monitorin	g, inspecting, and enforcing conservation assements the text of the footnote to the organization easements.  Collections of Art, Historic nswered "Yes" to Form 990, Pander SFAS 116 (ASC 958), not to similar assets held for public exhibits footnote to its financial statements.	equirements of section in its revenue and enization's financial start IV, line 8.  report in its revenue bition, education, or ents that describes to ort in its revenue st	during the year  on 170(h)(4)(B)(i)  Yes No expense statement, and tatements that describes  r Other Similar Assets.  e statement and balance sheet research in furtherance of public these items atement and balance sheet
Amount of expenses incurred in monitorin	g, inspecting, and enforcing conservation assements the text of the footnote to the organization easements.  Collections of Art, Historic nswered "Yes" to Form 990, Pander SFAS 116 (ASC 958), not to similar assets held for public exhibits footnote to its financial statements.	equirements of section in its revenue and enization's financial start IV, line 8.  report in its revenue bition, education, or ents that describes to ort in its revenue st	on 170(h)(4)(B)(i)  Yes No expense statement, and tatements that describes  r Other Similar Assets.  e statement and balance sheet research in furtherance of public these items atement and balance sheet research in furtherance of public
Amount of expenses incurred in monitorin  \$  Does each conservation easement reported and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conservation of the organization's accounting for conservation of the organization and the organization along the organization elected, as permitted under the organization elected and the organization elected and the organization elected and the organization elected and t	g, inspecting, and enforcing conservation asservation easements the text of the footnote to the organistion easements.  Collections of Art, Historicanswered "Yes" to Form 990, Pander SFAS 116 (ASC 958), not to a similar assets held for public exhibits footnote to its financial statement of the footnote of the footnote to its financial statement of the footnote of the footn	rvation easements of section in its revenue and enization's financial start IV, line 8.  report in its revenue bition, education, or ents that describes the fortin its revenue start in its revenue s	expense statement, and tatements that describes  r Other Similar Assets.  e statement and balance sheet research in furtherance of public these items atement and balance sheet research in furtherance of public.
Amount of expenses incurred in monitorin  \$  Does each conservation easement reported and section 170(h)(4)(B)(ii)?  In Part XIII, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conservation or conservation or complete if the organization at the organization elected, as permitted under works of art, historical treasures, or other service, provide, in Part XIII, the text of the organization elected, as permitted under works of art, historical treasures, or other service, provide the following amounts religiously for the provide the following amounts religion. Revenue included in Form 990, Part X (ii) Assets included in Form 990, Part X If the organization received or held works.	g, inspecting, and enforcing conserved on line 2(d) above satisfy the results of the footnote to the organistic easements.  Collections of Art, Historic easements  Collections of Art, Historic enswered "Yes" to Form 990, Particle of the footnote to the organistic expectation in the footnote to its financial statement of the footnote to its financial statement ender SFAS 116 (ASC 958), to represent the similar assets held for public exhibition and the similar expectation of these items  III, line 1  of art, historical treasures, or other under SFAS 116 (ASC 958) relations.	rvation easements of section in its revenue and enization's financial start IV, line 8.  report in its revenue bition, education, or ents that describes the fortin its revenue start in its revenue s	expense statement, and tatements that describes  r Other Similar Assets.  e statement and balance sheet research in furtherance of public these items atement and balance sheet research in furtherance of public these items  atement and balance sheet research in furtherance of public

Par	Organizations Maintaining Co	llections of Art,	Histo	rical Tr	easures, or	Othe	r Similar As	sets (co	ntinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	s, chec	k any of t	he following tha	t are a	a significant use	ofits	
a	Public exhibition		d F	Loan	or exchange pro	grams	3		
b	Scholarly research		e 「	Other	-				
С	Preservation for future generations								
4	Provide a description of the organization's c Part XIII	ollections and explair	n how t	ney furthe	r the organizati	on's e	xempt purpose	ın	
5	During the year, did the organization solicit						nılar	_	_
Do	assets to be sold to raise funds rather than						(as!! to Farms (	Yes	✓ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					eu 1	res to Form s	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ssets		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the f	ollowin	g table					
							An	nount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					<b>1</b> f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow o	r custodial acco	ount li	ability?	│ Yes	☐ No
ь	If "Yes," explain the arrangement in Part XI	II Check here if the	explana	ation has	been provided ii	n Part	XIII		Γ
Pa	rt V Endowment Funds. Complete								
4_	Danimum af was a balanca	(a)Current year 2,349,468,126	( <b>b)</b> Prio	r year 8,585,054	<b>b (c)</b> Two years bad 1,874,291,5		Three years back 1,888,019,289	(e)Four y	ears back 31,928,742
1a L	Beginning of year balance	10,853,584		8,661,355	12,917,2	_	18,219,571	-	17,549,619
b	Contributions	10,833,384		0,001,333	12,917,2	/2	10,219,3/1		17,349,019
С	Net investment earnings, gains, and losses	138,688,911	33	9,508,185	230,944,4	00	50,881,421	31	7,202,716
d	Grants or scholarships					4			
e	Other expenditures for facilities and programs	116,116,208	4	7,148,938	78,604,9	_	81,890,794	-	77,517,809
f	Administrative expenses	-20,280		137,530	963,2		937,918		1,143,979
g	End of year balance	2,382,914,693		9,468,126	2,038,585,0	54	1,874,291,569	1,88	88,019,289
2	Provide the estimated percentage of the cur	·	e (line :	Lg, colum	n (a)) held as				
а	Board designated or quasi-endowment 🕨	51 000 %							
b	Permanent endowment ► 15 000 %								
C	Temporarily restricted endowment ► 34 The percentages in lines 2a, 2b, and 2c sho	000 % uld equal 100%							
3a	Are there endowment funds not in the posse	ssion of the organizat	tion tha	t are held	d and administer	ed for	the		
	organization by  (i) unrelated organizations						3a(	(i) Yes	No
	(ii) related organizations						3a(		
ь	If "Yes" to 3a(II), are the related organization			edule R?			31	_	<u> </u>
4	Describe in Part XIII the intended uses of the	he organızatıon's end	owmen	t funds					<u> </u>
Par	t VI Land, Buildings, and Equipme		ne org	anızatıor	n answered 'Ye	es' to	Form 990, Pa	art IV, lı	ne
	11a. See Form 990, Part X, line Description of property	10.		a) Cost or o			(c) Accumulated depreciation	(d) Bo	ok value
				-	<u> </u>		<u> </u>	1	
	_and		<u> </u>			10,442		+	0,740,442
	Buildings		·		464,68	39,646	211,496,022	2 25	3,193,624
	_easehold improvements		•  -						
	Equipment		.  -			36,129	83,078,97		2,207,157
	Other			7 (D) 1:==	· · · · · · · · · · · · · · · · · · ·	13,400	58,250,289	+	7,263,111
iota	📭 Auu IIIIes ta Uliougii te (C <i>olumii (a) Must 6</i>	-uuai ruilli 330, Päft X,	. coiumi	i ini iine	101C/./			ı 33	3,404,334

See Form 990, Part X, line 12.	lete if the organization a	inswered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	( <b>b)</b> Book value	(c) Method of va Cost or end-of-year	
(1)Financial derivatives		Cost of end-of-year	illarket value
(2)Closely-held equity interests			
(3)Other			
(A) INVESTMENTS-HEDGE FUNDS	1,610,904,761	F	
(B) INVESTMENTS-PRIVATE EQUITY	486,222,668	F	
(C) INVESTMENTS-OTHER FUNDS	250,922,791	F	
(D) INVESTMENTS-COMMINGLED FUNDS	1,787,994	F	
(E) INVESTMENTS-OTHER INVESTMENTS	364,175	F	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII Investments—Program Related. Com	2,350,202,389 plete if the organization	answered 'Yes' to Fo	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. Complete if the organization a		Part IV, line 11d See	
(a) Descripti	ion		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		<u> </u>	
Part X Other Liabilities. Complete if the organization		Form 990, Part IV, I	Ine 11e or 11f. See
Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Book value		
Federal income taxes	1,817,133		
FUNDS HELD BY OTHERS	254,477		
ANNUITIES PAYABLE	5,001,621		
POST RETIREMENT BENEFITS	15,990,897		
INTEREST RATE SWAP LIABILITY	25,632,160		
US GOVERNMENT GRANTS REFUNDABLE	4,728,482		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	53,424,770		
, , , , , , , , , , , , , , , , , , , ,	33,727,770		

Part		evenue per Audited Financial Statements With Revenue pered 'Yes' to Form 990, Part IV, line 12a.	per R	eturn Complete If
1	_	r support per audited financial statements	1	
2		t not on Form 990, Part VIII, line 12	<del>-</del>	
– a	Net unrealized gains (losses) of	1 1		
b		cilities 2b	1	
c			┪	
d			┪	
e	Add lines <b>2a</b> through <b>2d</b> .			
3	<u>-</u>		3	
4		), Part VIII, line 12, but not on line <b>1</b>	<u> </u>	
-		ided on Form 990, Part VIII, line 7b .   4a		
a b	•	· · · · · · · · · · · · · · · · · · ·	-	
_			ا 🖈	
C E		<b>4c.</b> (This must equal Form 990, Part I, line 12 )	4c 5	
5 Part		cpenses per Audited Financial Statements With Expense		Peturn Complete
Part		swered 'Yes' to Form 990, Part IV, line 12a.	s per	<b>Return.</b> Complete
1		audited financial statements	1	
2		not on Form 990, Part IX, line 25		
а		cilities		
b	Prior year adjustments			
С			1	
d				
e				
3	ū		3	
4		), Part IX, line 25, but not on line <b>1:</b>	۲	
a		ided on Form 990, Part VIII, line 7b   4a		
b		4b	-	
			-  4c	
с 5		d <b>4c.</b> (This must equal Form 990, Part I, line 18 )	5	
	Supplemental Info		<sup>3</sup>	
Part V Inform	ation	lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to	provid	de any additional
	Return Reference	Explanation		
	II, LINE 1A	THE UNIVERSITYS COLLECTIONS OF HISTORICALLY SIGNIFICAN' SPECIMENS, AND ART OBJECTS ARE HELD FOR EDUCATION, RESE INQUIRY, AND PUBLIC EXHIBITION THEIR VALUE IS NOT REFLEC CONSOLIDATED FINANCIAL STATEMENTS, AS PERMITTED BY U S ACCOUNTING PRINCIPLES (GAAP)	ARCH, TED IN GENE	SCIENTIFIC NTHE UNIVERSITYS RALLY ACCEPTED
PAKII	II, LINE 4	THE LIBRARY OWNS SEVERAL THOUSAND RARE BOOKS, FACSIMIL MUSIC, AND PORTRAITS OF FIGURES ASSOCIATED WITH THE UNITHESE ARE USED FOR TEACHING, STUDY, AND RESEARCH THE COUNIVERSITY MUSEUMS INCLUDE FINE ART, ARTIFACTS, AND DECTROM THE ANCIENT CULTURES IN GREECE AND CHINA TO CONTEST THE MUSEUMS PROVIDE THE OPPORTUNITY FOR THE APPRECIAT RESEARCH, AND SCHOLARSHIP OF ART, CULTURAL HISTORY, AND CAMPUS AND TRAVELING EXHIBITIONS, SCHOLARLY PUBLICATION PUBLIC EDUCATIONAL PROGRAMS THESE PROGRAMS INCLUDES LECTURES, GALLERY TALKS, ARTISTS' RESIDENCIES, WORKSHOPS EVENTS THE MUSEUMS' EDUCATION AND RESEARCH ACTIVITIES SUPPORT THE EDUCATIONAL MISSION OF THE UNIVERSITY OF RISINTEGRATED WITH THE UNIVERSITY'S ACADEMIC PROGRAMS AN FACULTY, AND STAFF INVOLVEMENT, INTERNSHIPS, RESEARCH FIWORK/STUDY POSITIONS FOR STUDENTS TO ENHANCE THE MUSE	VERSI LLECTORATI MPOR ION, K ION, K PECIA COM	TY'S HISTORY FIONS OF THE VE ARTS, DATING ARY WORKS OF ART NOWLEDGE, NCE THROUGH ON- ND ACADEMIC AND L COURSES, POSIA, AND OTHER PLEMENT AND IND BY BEING LIZING STUDENT, SHIPS, AND
PARTV	, LINE 4	THE UNIVERSITY'S ENDOWMENT CONSISTS OF APPROXIMATELY ESTABLISHED FOR A VARIETY OF PURPOSES, SUCH AS SCHOLARS CONTRIBUTIONS TO EDUCATIONAL AND GENERAL EXPENSES TH ALLOWS ENDOWMENT FUNDS TO MEET CURRENT OPERATING NEE PROVIDING YEAR-TO-YEAR BUDGET STABILITY, AND PROTECTS TO WER OF THE ENDOWMENT ASSETS AGAINST THE IMPACT OF IN	HIPS E SPE DS OF HE FU	AND NDING POLICY THE UNIVERSITY BY TURE PURCHASING
PART	(, LINE 2	UNCERTAIN TAX POSITION FOOTNOTE THE UNIVERSITY IS A TAX AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE AMENDED (THE CODE) AS SUCH, THE UNIVERSITY IS EXEMPT FROM TAXES TO THE EXTENT PROVIDED UNDER SECTION 501 OF THE COPROVISION FOR INCOME TAXES IS MADE IN THE CONSOLIDATED WHEN APPLICABLE, THE UNIVERSITY RECOGNIZES INTEREST ACCUNRECOGNIZED TAX BENEFITS AND PENALTIES RELATED TO UNR BENEFITS IN ACCOUNTS PAYABLE AND OTHER LIABILITIES NO INTERNAL TIES HAVE BEEN RECOGNIZED AS OF AND FOR THE YEAR ENTAX YEARS THAT REMAIN SUBJECT TO EXAMINATION BY THE MASUNDER THE STATUTE ARE FROM THE YEAR 2011 FORWARD THE READ RICHMOND QUANDRANGLE, LLC DO NOT RECORD PROVISION BECAUSE THE PARTNERS AND MEMBERS REPORT THEIR SHARE OF OR LOSS ON THEIR RESPECTIVE INCOME TAX RETURNS	E CODI DM FEI ODE A FINAL CRUED ECOG NTERE NDED JOR TA ICHMO NS FOI	E OF 1986, AS DERAL INCOME ACCORDINGLY, NO NCIAL STATEMENTS RELATED TO NIZED TAX ST EXPENSE OR JUNE 30, 2015 THE AX JURISDICTIONS OND FUND, RFMC R INCOME TAXES
		1		

Jenedale 2 (1 31111 33 3) 23 13		i age <b>S</b>
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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DLN: 93493137037836

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

Name of the organization UNIVERSITY OF RICHMOND		Employer identification number				
		54-0505965				
Pa	rt I	r		YES	NO	
1	Does the organization have a racially nondiscriminatory policy toward students by statement in in other 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 address, and scholarships?		2	Yes		
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broads the period of solicitation for students, or during the registration period if it has no solicitation pro that 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		
			3	165		
4 a	Does the organization maintain the following?  Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes		
Ь	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 puwith student admissions, programs, and scholarships?	blic dealing	4c	Yes		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes		
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?		5a		No	
	Admissions policies?		5b		No	
c	Employment of faculty or administrative staff?	-	5c		No	
d	Scholarships or other financial assistance?	_	5d		Νo	
	Educational policies?	_	5e		Νo	
	Use of facilities?	_	5f		No	
	Athletic programs?	-	5g 		No	
П	Other extracurricular activities?  If you answered "Yes" to any of the above, please explain If you need more space, use Part II		5h		No	
	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
PART I, LINE 3	A POLICY OF NON-DISCRIMINATION IS CONTAINED IN ALL UNIVERSITY CATALOGS AND GENERAL SEARCH PUBLICATIONS SENT TO HIGH SCHOOLS AND POTENTIAL APPLICANTS, IN ENROLLMENT APPLICATIONS, AND ON-LINE CATALOGS
PART I, LINE 6A	THE UNIVERSITY RECEIVES FINANCIAL SUPPORT FROM AGENCIES OF THE FEDERAL GOVERNMENT TO PROVIDE FINANCIAL AID TO STUDENTS AND FOR RESEARCH PURPOSES ADDITIONAL FINANCIAL AID SUPPORT IS RECEIVED FROM AGENCIES OF THE COMMONWEALTH OF VIRGINIA A COMPLETE LIST OF AGENCIES AND AMOUNTS IS ON FILE

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

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DLN: 93493137037836

OMB No 1545-0047

2014

04

SCHEDULE F (Form 990) **Statement of Activities Outside the United States** 

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Employer identification number

S4-0505965								
and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
assistance outside the United States.  3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed )  (a) Region (b) Number of offices in the region (c) Number of employees, agents, and independent contractors in region (by type) (e g, fundraising, program service, investments, grants to recipients located in the region)  (1) See Add'l Data (2)	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria							
(a) Region  (b) Number of offices in the region  (c) Number of employees, agents, and independent contractors in region  (1) See Add'l Data  (c) Number of employees, agents, and independent contractors in region  (d) Activities conducted in region (by type) (e g , fundraising, program service, describe specific type of service(s) in region  (f) Total expenditure for and investments to recipients located in the region  (1) See Add'l Data								
offices in the region agents, and independent contractors in region  (1) See Add'l Data  offices in the region  offices in the fundraising, program service, describe specific type of service(s) in region  offices in the fundraising, program service, describe specific type of service(s) in region  offices in the region  offices in the region (by type) (e g , fundraising, program service, describe specific type of service(s) in region  offices in the region  offices in the region (by type) (e g , fundraising, program service, describe specific type of service(s) in region  offices in the region  offices in the region (by type) (e g , fundraising, program service, describe specific type of service(s) in region  offices in the region (by type) (e g , fundraising, program service, describe specific type of service(s) in region  offices in the region (by type) (e g , fundraising, program service, describe specific type of service(s) in region  offices in the region (by type) (e g , fundraising, program service, describe specific type of service(s) in region  offices in the region (by type) (e g , fundraising, program service, describe specific type of service(s) in region  offices in the region (by type) (e g , fundraising, program service, describe in region (by type) (e g , fundraising, program service, describe in region (by type) (e g , fundraising, program service, describe in region (by type) (e g , fundraising, program service, describe in region (by type) (e g , fundraising, program service, describe in region (by type) (e g , fundraising, program service, describe in region (by type) (e g , fundraising, program service, describe in region (by type) (e g , fundraising, program service, describe in region (by type) (e g , fundraising, program service, describe in region (by type) (e g	3 Activites per Reg							
(2)	<b>(a)</b> Regior							
	(1) See Add'l Data							
(3)	( 2)							
	(3)							
(4)	(4)							
(5)	(5)							
3a Sub-total 37 1,520,045, b Total from continuation sheets to Part I 1,520,045, c Totals (add lines 3a and 3b) 37 1,520,045,	<b>b</b> Total from contin							

organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	( <b>g)</b> A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)	Sou	uth America	GRANT SUBAWARD FROM SPONSORED RESEARCH FUNDS	189,285	WIRE		N/A	O ther
( 2)	Sou	uth America	GRANT SUBAWARD FROM SPONSORED RESEARCH FUNDS	17,505	WIRE		N/A	Other
(3)	Sou	uth America	GRANT SUBAWARD FROM SPONSORED RESEARCH FUNDS	5,361	WIRE		N/A	Other
(4)	Sou	uth America	GRANT SUBAWARD FROM SPONSORED RESEARCH FUNDS	6,319	WIRE		N/A	Other
2 Enter total num	ber of recipient of	organizations li	RESEARCH FUNDS GRANT SUBAWARD FROM SPONSORED	ecognized as chariti	es by the foreign co		as	O th

Schedule F (Form 990) 2014

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	<u>e duplicated if additio</u>	nal space is ne	eded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	( <b>f)</b> A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) STUDY ABROAD SCHOLARSHIPS	Central America and the Caribbean	4	80,834	STUDENT ACCT		N/A	Other
(2) STUDY ABROAD SCHOLARSHIPS	East Asia and the Pacific	57	447,924	STUDENT ACCT		N/A	O ther
(3) STUDY ABROAD SCHOLARSHIPS	Europe (Including Iceland and Greenland)	304	3,125,714	STUDENT ACCT		N/A	O ther
(4) STUDY ABROAD SCHOLARSHIPS	Middle East and North Africa	5	30,042	STUDENT ACCT		N/A	Other
(5) STUDY ABROAD SCHOLARSHIPS	North America	1	9,845	STUDENT ACCT		N/A	Other
(6) STUDY ABROAD SCHOLARSHIPS	Russia and the Newly Independent States	1	9,715	STUDENT ACCT		N/A	Other
(7) STUDY ABROAD SCHOLARSHIPS	South America	11	107,240	STUDENT ACCT		N/A	Other
(8) STUDY ABROAD SCHOLARSHIPS	South Asia	10	36,367	STUDENT ACCT		N/A	Other
(9) STUDY ABROAD SCHOLARSHIPS	Sub-Saharan Africa	15	143,803	STUDENT ACCT		N/A	Other
(10)							
(11)							
( 12)							
( 13)							
( 14)							
( 15)							
( 16)							
(17)							
( 18)							

#### Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>₽</b>	Yes	Г	No
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)	Γ	Yes	্ব	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	দ	Yes	Γ	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)	্ব	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	্ব	Yes	Г	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713: do not file with Form 990)	Г	Yes	٦	No

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
PART I, LINE 2	GRANTS AWARDED TO INDIVIDUALS OUTSIDE THE UNITED STATES BY THE UNIVERSITY OF RICHMOND CONS IST OF FINANCIAL AID IN THE FORM OF SCHOLARSHIPS AND GRANTS TO STUDENTS STUDYING ABROAD S TUDENTS RECEIVING THESE GRANTS ARE DETERMINED TO BE WORTHY ON THE BASIS OF THE UNIVERSITY'S ASSESSMENT OF ACADEMIC ACHIEVEMENT, FINANCIAL NEED, AND OTHER SIMILAR CRITERIA THE OFFICE OF FINANCIAL AID MONITORS STUDENTS' ELIGIBILITY FOR THESE FUNDS IN ACCORDANCE WITH INST ITUTIONAL POLICIES AND STANDARDS GRANTS MADE TO ORGANIZATIONS LOCATED OUTSIDE THE UNITED STATES WERE MADE PURSUANT TO THE UNIVERSITY'S POLICIES AND PROCEDURES FOR GRANT SUBAWARDS SUBAWARD ACTIVITY IS MONITORED PRIMARILY BY THE GRANTS ACCOUNTING OFFICE. SUBAWARD DOCUME NTATION, INCLUDING INVOICES, RECEIPTS, PAYMENT REQUESTS, AND SIMILAR RECORDS, IS REVIEWED BY GRANTS ACCOUNTING TO ENSURE COMPLIANCE WITH INSTITUTIONAL POLICIES, OMB CIRCULAR A-21, AND THE REQUIREMENTS OF THE GRANT AGREEMENT, AND APPROVED BY THE PRINCIPAL INVESTIGATOR

#### **Additional Data**

Software ID: Software Version:

**EIN:** 54-0505965

Name: UNIVERSITY OF RICHMOND

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Investments		1,410,943,617
Europe (Including Iceland and Greenland)			Investments		51,199,885
North America			Investments		47,785,337

Form 990 Schedule F F	Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region		
Sub-Saharan Africa			Investments		4,645,187		
East Asia and the Pacific		6	Program Services	STUDY ABROAD	176,290		
Europe (Including Iceland and Greenland)		29	Program Services	STUDY ABROAD	1,078,453		

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America		2	Program Services	STUDY ABROAD	6,180
Central America and the Caribbean			Grantmakıng		80,834
East Asia and the Pacific			Grantmakıng		447,924

Form 990 Schedule F I	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Grantmakıng		3,125,714
Middle East and North Africa			Grantmakıng		30,042
North America			Grantmaking		9,845

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		
Russia and the Newly Independent States			Grantmakıng		9,715		
South America			Grantmakıng		326,210		
South Asia			Grantmakıng		36,367		

Form 990 Schedule F I	<u> Part I - Activit</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Grantmakıng		143,803

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

DLN: 93493137037836

54-0505965

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

# **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-FZ. line 6a. Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Name of the organization UNIVERSITY OF RICHMOND

Mail solicitations

Phone solicitations

In-person solicitations

Internet and email solicitations

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

Open to Public Inspection **Employer identification number** 

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

> e 🔽 Solicitation of non-government grants Solicitation of government grants

▼ Special fundraising events

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No			
1	RUFFALO CODY PO BOX 718 DES MOINES, IA 50303	SOLICITOR CONSULTING		No		145,000	-145,000
2	PERRONE GROUP 111 NORTH ORANGE AVENUE STE 1300  ORLANDO, FL 32801	SOLICITOR CONSULTING		No		7,146	-7,146
3	OREANDO, LE SECOL						
4							
5							
6							
7							
8							
9							
10							
Tota	ıl					152,146	-152,146

AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC,

ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY

registration or licensing

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundraevents with gross receipts g	aising event contribu	cion answered "Yes" to tions and gross income	Form 990, Part IV, li e on Form 990-EZ, lir	ne 18, or reported les 1 and 6b. List
			(a) Event #1	<b>(b)</b> Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts				
<b>₽</b> ΛΦ	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
£O.	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .				
Direct	8	Entertainment				
ā	9	Other direct expenses .				
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		( )
	11	Net income summary Subtract li	ne 10 from line 3, colum	n (d)		
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
<u>Ф</u>		\$13,000 ON TOTAL 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c))
<u>~</u>	1	Gross revenue				
Expenses	2	Cash prizes				
xper	3	Non-cash prizes				
Dreat E	4	Rent/facility costs				
چ	5	Other direct expenses				
	6	Volunteer labor			│ Yes	
	7	Direct expense summary Add line	s 2 through 5 ın column	(d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)		
9	Ent	er the state(s) in which the organiza	ation conducts gaming a	ctivities		
а		the organization licensed to conduct				Г <sub>Yes</sub> Г <sub>No</sub>
b		No," explain				
10a b		re any of the organization's gaming   Yes," explain	licenses revoked, suspe	nded or terminated during	the tax year?	
U	TI	163, EXPIAIII				

Sche	edule G (Form 990 or 990-EZ) 2014				Page <b>3</b>					
11	Does the organization conduct gaming	activities with nonn	members?	T <sub>Yes</sub> [						
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity							
	formed to administer charitable gaming	,,		Г <sub>Yes</sub> Г	— No					
13	Indicate the percentage of gaming acti		1 1	, , , ,						
а	The organization's facility		13a		%					
b	An outside facility				%					
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records							
	Name <b>▶</b>									
	Address ►									
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming							
154				┌ Yes 「	– <sub>No</sub>					
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization <b>&gt;</b> \$ and the							
c	If "Yes," enter name and address of the third party									
	Name ▶									
	Address 🏲									
16	Gaming manager information									
	Name 🟲									
	Gaming manager compensation 🕨 \$		······							
	Description of services provided									
	Director/officer	<del>_</del> Employee	☐ Independent contractor							
17	Mandatory distributions									
а	Is the organization required under state	e law to make charıt	table distributions from the gaming proceeds to							
	retain the state gaming license?			Γ <sub>Yes</sub> [	Γ <sub>No</sub>					
b	Enter the amount of distributions requi	red under state law	distributed to other exempt organizations or spent							
	ın the organization's own exempt activi		·							
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr							
	Return Reference		Explanation							

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States OMB No 1545-0047

2014

DLN: 93493137037836

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UNIVERSITY OF RICHMOND

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

Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at <a href="www.irs.gov/form990">www.irs.gov/form990</a>.

Employer identification number

54-0505965

						134-0303903	
Part I General Inform	nation on Grants a	nd Assistance				•	
<ul><li>Does the organization main the selection criteria used</li><li>Describe in Part IV the organization</li></ul>	to award the grants or	assistance?					√Yes No
					Complete if the org licated if additional s		"Yes" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	(h) Purpose of grant or assistance
(1) VA DEPT OF REHAB SERVICES 8004 FRANKLIN FARMS DR RICHMOND, VA 23229	54-0756941	VA	54,525				GRANT SUBAWARD
(2) VIRGINIA COMMONWEALTH UNIVERSITY 800 E LEIGH ST RICHMOND,VA 23284	54-6001758	VA	70,176				GRANT SUBAWARD
(3) INDIANA UNIVERSITY 509 E 3RD ST BLOOMINGTON,IN 47401	35-6001673	IN	212,491				GRANT SUBAWARD
(4) YALE UNIVERSITY PO BOX 1873 NEW HAVEN,CT 06508	06-0646973	501(C)(3)	29,802				
(5) GEORGE WASHINGTON UNIVERSITY 45155 RESEARCH PLACE ASHBURN,VA 20147	53-0196584	501(C)(3)	96,140				
(6) STANFORD UNIVERSITY PO BOX 44253 SAN FRANCISCO, CA 941444253	94-1156365	501(C)(3)	33,812				

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	·	$\epsilon$
2	Enter total number of other examplestions listed in the line 1 table	<b>I</b>	

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>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STUDENT GRANTS AND SCHOLARSHIPS	2493	69,324,903		Other	N/A

Part IV Supplem	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.					
Return Reference	Explanation					
PART I, LINE 2	GRANTS AWARDED TO INDIVIDUALS BY THE UNIVERSITY OF RICHMOND CONSIST OF STUDENT FINANCIAL AID IN THE FORM OF SCHOLARSHIPS AND GRANTS STUDENTS RECEIVING THESE GRANTS ARE DETERMINED TO BE WORTHY ON THE BASIS OF THE UNIVERSITY'S ASSESSMENT OF ACADEMIC ACHIEVEMENT, FINANCIAL NEED, AND OTHER SIMILAR CRITERIA THE OFFICE OF FINANCIAL AID MONITORS STUDENTS' ELIGIBILITY FOR THESE FUNDS IN ACCORDANCE WITH INSTITUTIONAL POLICIES AND STANDARDS GRANTS MADE TO ORGANIZATIONS LOCATED IN THE UNITED STATES WERE MADE PURSUANT TO THE UNIVERSITY'S POLICIES AND PROCEDURES FOR GRANT SUBAWARDS SUBAWARD ACTIVITY IS MONITORED PRIMARILY BY THE GRANTS ACCOUNTING OFFICE SUBAWARD DOCUMENTATION, INCLUDING INVOICES, RECEIPTS, PAYMENT REQUESTS, AND SIMILAR RECORDS, IS REVIEWED BY GRANTS ACCOUNTING TO ENSURE COMPLIANCE WITH INSTITUTIONAL POLICIES, OMB CIRCULAR A-21, AND THE REQUIREMENTS OF THE GRANT					
	AGREEMENT, AND APPROVED BY THE PRINCIPAL INVESTIGATOR					

DLN: 93493137037836

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 UNIVERSITY OF RICHMOND

**Employer identification number** 

			54-0505965			
Pa	rt I Questions Regarding Compensati	on				
					Yes	No
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First-class or charter travel	굣	Housing allowance or residence for personal use			1
	Travel for companions	Γ	Payments for business use of personal residence			1
	Tax idemnification and gross-up payments	⊽	Health or social club dues or initiation fees			1
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b		No
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Ex			2	Yes	
3	Indicate which, if any, of the following the filing orgoganization's CEO/Executive Director Check all used by a related organization to establish compe	that apply				
	Compensation committee	V	Written employment contract			1
	✓ Independent compensation consultant	Γ	Compensation survey or study			1
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	), Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	t?	4a		No
b	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-	-based co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and	provide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiz	zations mu	ust complete lines 5-9.			1
5	For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of					
а	The organization?			5a		No
	Any related organization?			5b	Yes	
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
ь	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			7	Yes	
8	Were any amounts reported in Form 990, Part VII			Ė		
-	subject to the initial contract exception described		tions section 53 4958-4(a)(3)? If "Yes," describe			1
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	the rebutta	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	<b>(B)</b> Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of	<b>(F)</b> 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
PART I, LINE 1A	FIRST-CLASS OR CHARTER TRAVEL - THE MEN'S BASKETBALL COACH OCCASIONALLY TRAVELS WITH HIS TEAM BY MEANS OF CHARTER TRAVEL FOR SCHEDULED COMPETITIONS THE VALUE IS NOT TREATED AS TAXABLE COMPENSATION HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE - THE PRESIDENT IS REQUIRED TO LIVE ON CAMPUS IN A UNIVERSITY-PROVIDED HOME AS A CONDITION OF EMPLOYMENT THE VALUE OF THIS LODGING IS NOT REPORTED AS TAXABLE COMPENSATION HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES - CLUB MEMBERSHIP DUES ARE PAID ON BEHALF OF ONE EMPLOYEE WHERE THE MEMBERSHIP IS AN IMPORTANT FACTOR IN THE PERFORMANCE OF THE EMPLOYEE'S JOB RESPONSIBILITIES THE VALUE OF THE MEMBERSHIP DUES IS NOT INCLUDED IN TAXABLE COMPENSATION, HOWEVER, ANY PERSONAL USE OF CLUB FACILITIES IS REPORTED AS TAXABLE COMPENSATION
PART I, LINE 1B	THE PROVISION OF NON-STANDARD BENEFITS IS DETERMINED BY THE PRESIDENT, FOR SENIOR LEADERS AND KEY EMPLOYEES, AND THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES, FOR THE PRESIDENT FACTORS CONSIDERED ARE WHETHER THE BENEFIT UNDER CONSIDERATION IS COMMONLY PROVIDED TO INDIVIDUALS IN SIMILAR POSITIONS AT SIMILAR ORGANIZATIONS, WHETHER THE BENEFIT IS NECESSARY FOR THE INDIVIDUAL TO SUCCESSFULLY FULFILL HIS OR HER JOB RESPONSIBILITIES, AND WHETHER, IN THE CONTEXT OF THE INDIVIDUAL'S OVERALL COMPENSATION, THE PROVISION OF THE NON-STANDARD BENEFIT IS REASONABLE
PART I, LINE 4B	EDWARD AYERS DEFERRED \$50,000 IN A SECTION 457(F) PLAN CHRISTOPHER MOONEY DEFERRED \$410,629 IN A SECTION 457(F) PLAN
PART I, LINE 5B	ROBIN BLANDFORD, STEPHEN KNEELEY, STEVEN HENDERSON, MATTHEW WERNER, AND KEVIN STOUDT RECEIVED BONUSES BASED ON THE GROSS REVENUES OF THE RICHMOND FUND MANAGEMENT COMPANY THE BONUS AMOUNT FOR EACH INDIVIDUAL WAS CALCULATED AT CONTRACTUALLY DEFINED PERCENTAGES
PART I, LINE 7	DAVID HALE, JACQUELINE FETROW, STEVEN HENDERSON, PAUL COSTELLO, MATTHEW WERNER AND KEVIN STOUDT RECEIVED NON-FIXED PAYMENTS RELATED TO RECOGNITION AND/OR PERFORMANCE BONUSES

Schedule J (Form 990) 2014

Software ID: Software Version:

**EIN:** 54-0505965

Name: UNIVERSITY OF RICHMOND

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

(A) Name and Title		-	f W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation in
(A) Name and True	С	(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) O ther reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred in prior Form 990
EDWARD L AYERS, PRESIDENT	(I) (II)	516,255 0	250,000	140,172	93,500	137,940 0	1,137,867	0
ANN LLOYD BREEDEN, SECRETARY	(I) (II)	186,819 0	0	60 0	18,477 0	14,669 0	220,025	0
DAVID B HALE, VP BUSINESS & FINANCE/TREAS	(I) (II)	347,479 0	16,250 0	9,604 0	35,467 0	17,010 0	425,810	0
JACQUELYN FETROW, PROVOST & VP ACAD AFFAIRS	(I) (II)	123,727 0	25,000 0	589 0	13,125 0	11,477 0	173,918 0	0
STEPHEN BISESE, VP, STUDENT DEVELOPMENT	(I) (II)	210,677 0	0	138 0	21,888 0	18,826 0	251,529 0	0
ROBIN BLANDFORD, PRESIDENT, SMC	(I) (II)	503,355 0	1,375,702 0	366 0	26,000 0	14,260 0	1,919,683	0
KATHRYN MONDAY, VP, INFORMATION SERVICES	(I) (II)	233,315 0	0	396 0	23,725 0	11,329 0	268,765 0	0
WENDY PERDUE, DEAN, LAW	(I) (II)	348,656 0	0	10,206	35,810 0	17,739 0	412,411 0	0
LORRAINE SCHUYLER, CHIEF OF STAFF	(I) (II)	186,665 0	0	60 0	18,612 0	18,317 0	223,654 0	0
KATHLEEN SKERRETT, DEAN, ARTS & SCIENCES	(I) (II)	230,697 0	0	138 0	23,152 0	6,102 0	260,089 0	0
ANNE TESSIER, VP ENROLLMENT MANAGEMENT	(I) (II)	219,343 0	0	139 0	22,273 0	8,870 0	250,625 0	0
PAUL COSTELLO, COO, SMC	(I) (II)	243,240 0	332,579 0	4,014 0	9,567 0	25,957 0	615,357 0	0
STEVEN HENDERSON, DIRECTOR, SMC	(I) (II)	262,243 0	390,522 0	196 0	22,770 0	18,629 0	694,360 0	0
CHRISTOPHER MOONEY, BASKETBALL COACH	(1) (11)	461,610 0	0	278,830 0	436,629 0	20,216 0	1,197,285 0	0
KEVIN STOUDT, DIRECTOR, SMC	(I) (II)	208,583 0	223,535 0	80	21,886 0	19,972 0	474,056 0	0
MATTHEW WERNER, DIRECTOR, SMC	(I) (II)	210,654 0	2 17 /3 3 3 1			40,276 0		0
STEPHEN ALLRED, FMR PROVOST & VP ACAD AFFAIRS	(I) (II)	303,635 0	0	396 0	·	18,982 0	353,421 0	0
JOHN DOUGLASS, FORMER DEAN, LAW	(I) (II)	212,265 0	0	45,375 0	25,797 0	11,534 0	294,971 0	0
STEPHEN KNEELEY, FORMER CEO, SMC	(I) (II)	76,257 0	340,199 0	35 0	7,826 0	3,723 0	428,040 0	0
ANDREW NEWCOMB, FORMER DEAN, ARTS & SCIENCES	(I) (II)	174,172 0	0	l ' l		13,130 0	244,748 0	0

DLN: 93493137037836

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization

**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.

Open to Public **Inspection** Employer identification number

	IVERSITY OF RICHMOND									'	•		icion nui	iibei	
D	art I Bond Issues									54-	05059	6.5			
P	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(1	<b>f)</b> Description	on of purpose	<b>(g)</b> De	feased	beh	On alf of uer		Pool ncing
						Yes			Yes	No	Yes	No	Yes	No	
A	VA COLLEGE BUILDING AUTHORITY	54-1249154	927781YF5	02-28-2011	45,58	37,682	REF	UND PRIOR	ISSUE		Х		X		X
В	VA COLLEGE BUILDING 54-1249154 9277803U8 08-05-2004 AUTHORITY				15,0	59,000	REF	REFUND PRIOR ISSUE			Х		Х		Х
c ¯	VA COLLEGE BUILDING 54-1249154 9277802U8 08-05-2004 AUTHORITY							NSTRUCT SO LDING & FO			Х		Х		Х
D	VA COLLEGE BUILDING AUTHORITY	54-1249154	927781CR3	11-08-2006	38,0	70,000	REF	UND PRIOR	ISSUE		Х		Х		Х
Pa	art III Proceeds			l						<b>.</b>			<u> </u>		l
			ļ	4	В			С				D			
1	A mount of bonds retired						0		0			0			0
	A mount of bonds legally defea	ased 					0		0			0			0
	Total proceeds of issue					45,587,	,682	;	15,069,000		31,070	0,375		38	,070,000
4	Gross proceeds in reserve fu						0		0			0			0
5	Capitalized interest from proc						0	0 0				0			0
6	Proceeds in refunding escrow  Issuance costs from proceed						0 0		141 126		0			0	
7	Credit enhancement from pro-					502,			141,136						
8	Working capital expenditures						0	0 0					0 30,0		
9 10		<u> </u>					0		0		20.02	0 220			0
11						45,085,	000		15,000,000		30,929	9,239		27	900,000
12						43,003,	000		13,000,000					37	0 00,000
13		n			20	11	$\dashv$	19	96	21	006	$\dashv$		1997	
	13				Yes	No		Yes	No	Yes		lo	Yes		No
14	Were the bonds issued as part of a current refunding issue?				Х			Х			×	<	Х		
15	Were the bonds issued as part of an advance refunding issue?					Х			Х		×	<			Х
16	Has the final allocation of proceeds been made?							Х		Х			Х		
17	allocation of proceeds?		nd records to supp	ort the final	х			Х		Х			Х		
Pa	rt IIII Private Business l	Jse													
			'	A			3		С		D				

		A						<u> </u>	
		Yes	No	Yes	No	Yes	No	Yes	No
	es the organization a partner in a partnership, or a member of an LLC, which owned operty financed by tax-exempt bonds?		×				Х		
_	e there any lease arrangements that may result in private business use of bond- anced property?		Х				Х		

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 Χ 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 property? Are there any research agreements that may result in private business use of bond-С Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other Χ 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 0 % 0 % 0 % 0 % other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 0 090 % 0 % 0 % 0 % 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 0 090 % 0 % 0 % 0 % Does the bond issue meet the private security or payment test? 7 Χ Χ Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c Х Х 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 Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В С Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Χ 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? Χ b Χ Χ Χ No rebate due? Х Χ c Χ Χ 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 (Conti	nued)
--------------------------	-------

		А		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	0			0		0		
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X		x		X
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

## Part V Procedures To Undertake Corrective Action

	Α		В		С	С		
	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		X		X		X	

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

Return Reference	Explanation
PART II, LINE 3	THE AMOUNT REPORTED ON PART II, LINE 3 FOR CUSIP# 927781E75 INCLUDES \$14,653 OF INVESTMENT INCOME RECEIVED ON THE UNEXPENDED PROCEEDS PART IV, LINE 2C CUSIP# 9277803U8 - REBATE COMPUTATION PERFORMED 8/17/09, CUSIP# 9277802U8 - REBATE COMPUTATION PERFORMED 8/17/09, CUSIP# 927781CR3 - REBATE COMPUTATION PERFORMED 3/24/10

DLN: 93493137037836

Open to Public

OMB No 1545-0047

Schedule K **Supplemental Information on Tax Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

Department of the Treasury Internal Revenue Service

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** 

	e of the organization								Em	oloyer ic	lentifica	ation numbe	er		
	VERSITY OF RICHMOND									54	-05059	65			
Pa	art I Bond Issues			•											
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(1	<b>(f)</b> Description	n of purpose	( <b>g)</b> De	feased		On Of		Pool
			I										behalf of Issuer		ncing
			l							Yes	No	Yes		es	No
A	VA COLLEGE BUILDING AUTHORITY	11-08-2006	17,83		CON	NSTRUCT DO	RM & BOILE	₹	Х		X		Х		
В	VA COLLEGE BUILDING AUTHORITY	54-1249154	927781YD0	02-01-2011	29,84	6,165	REF	FUND PRIOR	ISSUE		Х		X		Х
c	VA COLLEGE BUILDING AUTHORITY	54-1249154	927781E75	11-06-2012	61,68			NSTRUCT ST NOV ARENA	DNT HOUS &		Х		Х		Х
Pa	rt III Proceeds										<u> </u>				
						١		В			С		D		
1	A mount of bonds retired						0		0			0			
2	A mount of bonds legally defea	ısed					0 0			0					
3	Total proceeds of issue					18,447,	,484	. 2	9,846,165	61,707,590					
4	Gross proceeds in reserve fun	ıds					0		0			0			
5	Capitalized interest from proc	eeds					0		0			0			
6	Proceeds in refunding escrows	5					0		0			0			
7	Issuance costs from proceeds	5				66,980 231,165				54	9,940				
8	Credit enhancement from proc	eeds				14,282 0			С			0			
9	Working capital expenditures	from proceeds			0 0			0			0				
10	Capital expenditures from pro-	ceeds				18,366,	,222 0			52,103,36			360		
11	Other spent proceeds						0	2	9,615,000			0			
12	O ther unspent proceeds						0		0			0			
13	Year of substantial completion	n			20	09		200	)6	2	015				
					Yes	No	,	Yes	No	Yes	ľ	No	Yes		No
14	Were the bonds issued as part	t of a current refundı	ng issue?			Х		X				x			
15	Were the bonds issued as part			Х			Х			Х					
16	Has the final allocation of proc		Х			Х				Х			,		
17	Does the organization maintai allocation of proceeds?	ort the final	Х			х		Х							
Part III Private Business Use								_							
Ì								В			С			D	
i			Yes	No	)	Yes	No	Yes	_ N	No	Yes		No		

property financed by tax-exempt bonds?

financed property?

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

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

Х

Χ

Χ

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 Χ 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 property? Are there any research agreements that may result in private business use of bond-С Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other Χ 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 0 % 0 % 0 % other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 0 720 % 0 060 % 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 0 720 % 0 060 % Does the bond issue meet the private security or payment test? 7 Χ Х Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c Х Х 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 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 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 Exception to rebate? b Χ Χ Χ No rebate due? c Х Х Χ 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 Has the organization or the governmental issuer entered 4a Χ Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was the hedge terminated?

Par	til Arbitrage (Continued)								
		Α		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		
b	Name of provider	0		0		0			
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		x		Х		
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		С		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		x		X			

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

Schedule K (Form 990) 2014

DLN: 93493137037836

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Transactions with Interested Persons**

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

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

Open to Public Inspection

Name of the o							I	Employ	er identi	ificatio	n numbe	r
ONIVERSITY OF I	CICHITOND							54-05	05965			
Part I Exc	ess Benefit Tr	ansactions	s (section	501(c)(3),	section 501(c	:)(4), and 501	(c)(29	) orga	nızatıons	only)		
Com	plete if the organiz	ation answer	ed "Yes" (	on Form 990	), Part IV, line	25a or 25b, o	or Form	1990-	EZ, Part	V , line	40b	
<b>1 (a)</b> Nan	ne of disqualified p	erson (b)		•	disqualified	<b>(c)</b> Desc	ription	of tra	nsaction	L	(d) Cor	rected?
			person	and organiz	ation						Yes	No
4958 . 3 Enter the  Part II  Loans to a  Complete if the reported an a	amount of tax incu  amount of tax, if a nd/or From Ir ne organization ans mount on Form 99	terested F wered "Yes" ), Part X, line	Persons on Form 9 5, 6, or 2	imbursed by  990-EZ, Par	the organizati	on	 	· ·	► \$ ► \$ 26, or if t			
(a) Name of interested person	(b) Relationship with organization	1 ,	(d) Loa or from organizat	the	(e)Original principal amount	<b>(f)</b> Balance due	(g) defa		(h) Approv by board	red d or	(i)Wrı agreen	
			То	From			Yes	No	Yes	No	Yes	No
		1									1	
		ganization a Relationship ested person	nswered between and the	"Yes" on		<u> </u>		sistand	ee (e)	Purpo	se of ass	istance
perso	on Inter	ested person organizatio										

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 o organi reven	f zation's
				Yes	No
(1) NATHANIEL B AYERS	FMLY MMBR OF OFFCR/TRSTEE	53,284	COMPENSATION PAID AS EMPLOYEE		No
(2) PROSINC LLC	OWNED BY FML MBR OF TRSTE	63,939	FACILITY RENTAL FEES		No
(3) FIRM OWNED BY SUBSTANTIAL CNTRBTR	SUBSTANTIAL CONTRIBUTOR	320,520	INVESTMENT MGMT SERVICES		No
(4) SUBSTANTIAL CONTRIBUTOR	SUBSTANTIAL CONTRIBUTOR	3,485,602	LEASE PAYMENTS TO UNIVERSITY		No
(5) SUBSTANTIAL CONTRIBUTOR	SUBSTANTIAL CONTRIBUTOR	144,917	SERVICES		No
(6) SUBSTANTIAL CONTRIBUTOR	SUBSTANTIAL CONTRIBUTOR	258,437	PROFESSIONAL SERVICES		No

#### Part V Supplemental Information

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

Return Reference	Explanation

Schedule L (Form 990 or 990-EZ) 2014

DLN: 93493137037836

OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE M** (Form 990)

Department of the Treasury

Internal Revenue Service

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

► Attach to Form 990.

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

**Noncash Contributions** 

Name of the organization UNIVERSITY OF RICHMOND

**Employer identification number** 

54-0505965

Pa	rt I Types of Property				34 0303303			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	( <b>d</b> Method of d noncash contrib	etermı	_	ts
1	Art—Works of art	X	4		FMV			
	Art—Historical treasures .		'					
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	131	3,953,309	MARKET QUOTAT	ION		
	Securities—Closely held stock .							
11	Securities—Partnership, LLC,							
12	or trust interests							
	Qualified conservation							
	contribution—Historic structures							
14	Q ualified conservation							
	contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other► ()							
	Other ►()							
	O ther ►()							
28	O ther ► ()							
29	Number of Forms 8283 received							
	for which the organization comple	eted Form 8	283, Part IV, Donee Acknowledge	owledgement [	29			
	5						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					30a		No_
b	If "Yes," describe the arrangeme	ent in Part 1	!I					
31	Does the organization have a gif	ft acceptand	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell	noncash • • •	32a		No
b	If "Yes," describe in Part II							
33 33	If the organization did not report	t an amount	ın column (c) for a type of	property for which column (	a) is checked,			
	describe in Part II		, , , , , , , , , , , , , , , , , , , ,		•			

	nd whether the organization is reporting in Part I, column (b), the number of contributions, the is received, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
PART I, COLUMN (B)	THE AMOUNT SHOWN IN PART I, COLUMN (B) FOR "NUMBER OF CONTRIBUTIONS" REPRESENTS THE TOTAL NUMBER OF ITEMS CONTRIBUTED AND NOT NECESSARILY THE TOTAL NUMBER OF CONTRIBUTIONS CONTRIBUTED
PART I, COLUMN (C)	A ZERO AMOUNT WAS REPORTED ON FORM 990, PART VIII, LINE 1G, BECAUSE THE UNIVERSITY DOES NOT CAPITALIZE ITS COLLECTIONS. AS PERMITTED UNDER ASC 958-

360-25

Schedule M (Form 990) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493137037836

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.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization UNIVERSITY OF RICHMOND	Employer identification number
	54-0505965

Return Reference	Explanation
FORM 990, PART III, PROGRAM SERVICE ACCOMPLISHMENTS	PART III, LINE 4A - INSTRUCTION - THE UNIVERSITY OF RICHMOND BNDEAVORS TO OFFER ITS STUDENTS THE HIGHEST QUALITY EDUCATION POSSIBLE, MAKING AVAILABLE TOP-OF-THE-LINE RESOURCES AND FACILITIES BY MAINTAINING AN 8 1 FACULTY TO STUDENT RATIO, EACH STUDENT HAS THE OPPORTUNITY TO ENJOY A PERSONAL AND UNIQUE LEARNING EXPERIENCE. THE KEY CHARACTERISTICS OF THE UNIVERSITY'S INSTRUCTIONAL FOUNDATION ARE A CHALLENGING LEARNING BNVIRONMENT, SMALL CLASSES, A HIGH QUALITY OF STUDENT LIFE, A COORDINATE COLLEGE SYSTEM, A COMMITMENT TO SERVICE, OPPORTUNITIES FOR MORAL AND SPIRITUAL DEVELOPMENT, A MIXTURE OF ENRICHING ACADEMIC AND CO-CURRICULAR EXPERIENCES, A SENSE OF COMMUNITY, AND A SPIRIT OF INNOVATION THERE ARE APPROXIMATELY 4,000 STUDENTS PART III, LINE 4B - ACADEMIC SUPPORT - THE RESPECTIVE DEAN'S OFFICES OF EACH OF THE FIVE SCHOOLS OVERSEE THE MAINTENANCE AND DEVELOPMENT OF THE SCHOOL TO BISURE THAT THEY WAINTAIN THE HIGH LEVEL OF ACADEMIC INTEGRITY THAT HAS BECOME THE STANDARD OF THE UNIVERSITY OF RICHMOND THE UNIVERSITY OFFIERS OPPORTUNITIES FOR CONTINUING EDUCATION IN EACH PROFESSOR'S SPECIALTY AS WELL AS IN NEW TEACHING METHODS AND TECHNOLOGY, WHILE FACULTY COMMITTEES WORK TOWARD CONTINUOUS IMPROVEMENT IN ALL AREAS OF STUDENT INSTRUCTION ACADEMIC COMPUTING PROVIDES INFORMATION TECHNOLOGY TO ENHANCE THE ACADEMIC RESOURCES AVAILABLE TO PROFESSORS AND STUDENTS, AND TO THE COMMUNITY THROUGH THE UNIVERSITY LIBRARY LECTURE FUNDS ARE SET ASIDE TO PAY FOR VISITING SPEAKERS ON TOPICS RELEVANT TO ACADEMIC STUDIES OFFERED PART III, LINE 4C - AUXILIARY ENTERPRISES - THE HOUSING OFFICE STRIVES TO MAINTAIN A COMFORTABLE LIVING BNVIRONMENT FOR THE 92% OF THE STUDENT BODY THAT RESIDES ON CAMPUS EACH YEAR DINING SERVICES AUGMENTS THESE EFFORTS BY ENSURING STUDENTS HAVE ACCESS TO EXEMPLARY SERVICE, OUTSTANDING QUALITY FOOD, WITH A PASSION AND COMMITMENT TO EXCELLENCE THE BOOKSTORE BNSURES THAT MEMBERS OF THE UNIVERSITY COMMUNITY HAVE AN AFFORDABLE, CONVENIENT OPTION FOR UNIVERSITY OF RICHMOND TEXTBOOKS, GEAR, AND SUPPLIES PRINTING SERV

Return Reference	Explanation
FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES	STUDBNT SERVICES - STUDBNT DEVELOPMENT PROVIDES ON-CAMPUS PHY SICAL AND MENTAL HEALTH SERVICES, ACADEMIC AND CAREER COUNSELING, VARIOUS FRATERINTY, SORORITY AND EXTRACURRICULAR ACTIVITIES, AND ORGANIZATIONS THAT WORK TO UPHOLD THE UNIVERSITY'S CORE PRINCIPLES OF DIVERSITY AND INCLUSION RECREATION AND WELLNESS PROVIDES THE CAMPUS COMMUNITY WITH OUTSTANDING RECREATIONAL FACILITIES, FITNESS AND WELLNESS PROVIDES THE CAMPUS COMMUNITY WITH OUTSTANDING RECREATIONAL FACILITIES, FITNESS AND WELLNESS PROVIDES THE CAMPUS COMMUNITY WITH OUTSTANDING, RECREATIONAL FACILITIES, FITNESS AND ADMINISTRATION, FACULTY, AND STAFF UNDERGRADUATE AND LAW SCHOOL ADMISSION OFFICES COUNSEL THOUSANDS OF PROSPECTIVE APPLICANTS AND DEPROPERTY OF PROSPECTIVE APPLICANTS AND MAKE HEMPEL WELCOME AT THE UNIVERSITY, WHILE PROVIDING SUPPORT FOR ACCEPTED STUDENTS THE UNIVERSITY LIBRARIES SERVE THE CAMPUS COMMUNITY AND THE PUBLIC AND ARE A DESIGNATED FEDERAL DOCUMENT REPOSITORY DEPENSES \$21,982,640, INCLUDING GRANTS OF \$0 REVENUE \$0 RESEARCH - THE UNIVERSITY BELIEVES THAT ACADEMIC RESEARCH AT THE FACULTY, STAFF AND STUDENT EXPENSES TO STUDENTS THE UNIVERSITY BELIEVES THAT ACADEMIC RESEARCH AT THE FACULTY, STAFF AND STUDENT EXPENSES TO STUDENTS THE UNIVERSITY DESCURAGES FACULTY, STUDENT AND STAFF RESEARCH BY OPERATING AN OFFICE OF CORPORATE, FOUNDERS ON SOMEWHAND THE PROVIDING LABS, STUDIOS AND SPECIAL PROJECTS, AND TRAVULT TO PARTICIPATE AND PRESENT ENDINGS AT ACADEMIC CONFERENCES, PROVIDING LABS, STUDIOS AND SPECIALZED CLASS, STUDIOS AND SPECIALZED CLASS. SOMEWHAND AND ACCURATE PROJECTS, AND TRAVULT TO PARTICIPATE AND PRESENT ENDINGS AT ACADEMIC CONFERENCES.  PROVIDING LABS, STUDIOS AND SPECIALZED CLASSROOMS FOR CONDUCTING RESEARCH PROVIDING INFRASTRUCTURE NECESSARY TO CONDUCT RESEARCH BY VALUE TO PARTICIPATE AND PRESENT ENDINGS AT ACADEMIC CONFERENCES.  PROVIDING LABS, STUDIOS AND SPECIALZED CLASSROOMS FOR CONDUCTING RESEARCH PROVIDING INFRASTRUCTURE NECESSARY TO CONDUCT RESEARCH, BY VALUE AND ADVANCE FOR THE PROVIDING INFRASTRUCTURE.  PROVIDED LA

Return Reference	Explanation
FORM 990, PART VI, LINE 2	PAUL B QUEALLY AND ALAN W BREED HAVE IDENTIFIED A BUSINESS RELATIONSHIP WITH EACH OTHER PAUL B QUEALLY AND HERBERT H MCDADE III HAVE IDENTIFIED A BUSINESS RELATIONSHIP WITH EACH OTHER PAUL B QUEALLY AND LOUIS W MOELCHERT JR HAVE IDENTIFIED A BUSINESS RELATIONSHIP WITH EACH OTHER

Return Reference	Explanation
FORM 990, PART VI LINE 11B	THE FORM 990 WAS REVIEWED BY THE UNIVERSITY OF RICHMOND'S VICE PRESIDENT FOR BUSINESS AND FINANCE AND BY ITS GENERAL COUNSEL. FOLLOWING THAT REVIEW, A DRAFT OF THE FORM 990 WAS PROVIDED TO THE UNIVERSITY'S PRESIDENT, RECTOR, AND MEMBERS OF THE UNIVERSITY'S EXECUTIVE AND AUDIT AND COMPLIANCE COMMITTEES A MEETING WAS CONDUCTED TO REVIEW THE FORM 990 AND RESPOND TO ANY QUESTIONS THAT THE GROUP HAD REGARDING THE RETURN FOLLOWING THAT MEETING, AN ELECTRONIC VERSION OF THE FORM 990 WAS DISTRIBUTED TO THE ENTIRE BOARD OF TRUSTEES THE STAFF OF THE VICE PRESIDENT FOR BUSINESS AND FINANCE AND THE GENERAL COUNSEL CONDUCTED INFORMATION SESSIONS TO REVIEW THE FORM 990 WITH THE MEMBERS OF THE BOARD OF TRUSTEES AND TO RESPOND TO ANY QUESTIONS ALL OF THIS OCCURRED PRIOR TO FILING THE FORM 990 WITH THE INTERNAL REVENUE SERVICE. THE RETURN THAT WAS REVIEWED WITH THE BOARD OF TRUSTEES WAS IDENTICAL TO THE ONE FILED WITH THE IRS WITH ONE EXCEPTION-INFORMATION RELATED TO SPECIFIC DONORS WHO REQUESTED ANONY MITY AS A CONDITION OF THEIR GIFT WAS REDACTED FROM THE VERSION OF THE RETURN SHARED WITH THE BOARD

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

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

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

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

Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS OR FUND BALANCES CHANGE IN FAIR VALUE OF SWAP AGREEMENTS (2,853,993), CHANGE IN PRESENT VALUE - SPLIT INTEREST AGREEMENTS (412,464), CHANGE IN POST-RETIREMENT BENEFIT OBLIGATION (113,041), RFMC SCHEDULE K-1 REVENUE DIFFERENTIAL (713,311), TOTAL PART XI, LINE 9 (4,092,809)

DLN: 93493137037836

OMB No 1545-0047

2014

Open to Public Inspection

# **SCHEDULE R** (Form 990)

Name of the organization

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.

UNIVERSITY OF RICHMOND

**Employer identification number** 54-0505965

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)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
(1) RICHMOND QUADRANGLE LLC 201 MARYLAND HALL RICHMOND, VA 23173 20-0094353	PROPERTY MGMT	VA	3,485,602	26,447,719	UR
(2) SPIDER MANAGEMENT COMPANY LLC 201 MARYLAND HALL RICHMOND, VA 23173 26-1501416	INVSTMNT MGMT	VA	13,098,748	2,329,206	UR
(3) RICHMOND FUND MANAGEMENT COMPANY LLC 201 MARYLAND HALL RICHMOND, VA 23171 26-1501524	INVSTMNT MGMT	VA	13,098,748	1,165,868	SMC

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

	•					
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(g) Section 5 (13) cont entity	rolled
					Yes	No

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

because it had one of more related organizations treated as a partnership during the tax year.											,	
(a) Name, address, and EIN of related organization	,	(c) Legal domicile (state or foreign country)	r entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)		(g) Share of end-of- year assets	(h Disprop allocat	prtionate	e Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	(j) eral or naging rtner?	(k) Percentage ownership
	<u> </u>	<u> </u>	1		<u>1</u> '	<u> </u>	Yes	No		Yes	No	1
(1) PROP HOLDINGS LLC  901 EAST BYRD ST SUITE 150 RICHMOND, VA 23219 54-1738291	REAL ESTATE INVES	VA	UR	EXCLUDED	1,333,593	18,423,244	Yes		0		No	99 000 %
(2) PROP HLDNGS III LLC 901 EAST BYRD ST SUITE 150 RICHMOND, VA 23219 65-1229396	REAL ESTATE INVES	VA	UR	EXCLUDED	5,803,482	13,877,739	Yes		0		No	65 220 %
(3) PROP HLDNGS VII LLC  901 EAST BYRD ST SUITE 150 RICHMOND, VA 23219 46-1449900	REAL ESTATE INVES	VA	UR	EXCLUDED	-311,431	34,205,755	Yes		0		No	99 990 %
(4) ROR PARTNERSHIP  201 MARYLAND HALL RICHMOND, VA 23173 26-1761403	INVEST MGMT	VA	UR	EXCLUDED	124,469,226	2,452,463,590		No	-1,524,353	Yes		59 257 %
(5) RICHMOND FUND LP  6802 PARAGON PLACE RICHMOND, VA 23230 26-1501561	INVEST MGMT	VA	RFMC	EXCLUDED	12,637,267	22,926,312	Yes		0	Yes		0 %

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) Name, address, and EIN of related organization	( <b>b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)		(g) Share of end-of- year assets	<b>(h)</b> Percentage ownership	(i) Section (b)(1 contro entit	512 13) Illed
								Yes	No
(1) CHARITABLE REMAINDER TRUSTS (12)	CRT		NA	TRUST	0	0			No
(2) CHARITABLE LEAD TRUSTS (1)	CLT		NA	TRUST	0	0			No

Chedule IX (Folim 220) 2017				Р	age 3
Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Fori	m 990, Part IV, line	34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more rel	ated organizations l	listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)			1b	Yes	
<b>c</b> Gıft, grant, or capıtal contribution from related organization(s)			1c		No
<b>d</b> Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Dividends from related organization(s)			1f		No
g Sale of assets to related organization(s)			1g		No
h Purchase of assets from related organization(s)			1h		No
i Exchange of assets with related organization(s)			1i		No
j Lease of facilities, equipment, or other assets to related organization(s)			1j		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)			1k		No
Performance of services or membership or fundraising solicitations for related organization(s)			11		No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)			1n	1	No
<b>n</b> 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
<b>p</b> Reimbursement paid to related organization(s) for expenses			1p		No
<b>q</b> Reimbursement paid by related organization(s) for expenses			<b>1</b> q		No
r Other transfer of cash or property to related organization(s)			1r	Yes	
s Other transfer of cash or property from related organization(s)			1s	Yes	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including o	overed relationships a	nd transaction thresholds		
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amount	ınvolve	ed
See Additional Data Table			<u> </u>		

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

Name, address, and EIN of entity  Name, address, and ent	[					·								
514)			Legal domicile (state or foreign	Predominant income (related, unrelated, excluded from tax under	50 orga	all partners section 01(c)(3)	Share of total	Share of end-of-year	Disproprtiona		Code V-UBI amount in box 20 of Schedule K-1	General or managing		Percentage
				514)	Yes	No	1		Yes	No	ı İ	Yes	No	
					اتــــــــــــــــــــــــــــــــــــ				163					ļ

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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## **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 54-0505965

Name: UNIVERSITY OF RICHMOND

## Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	<b>(b)</b> Transaction type(a-s)	<b>(c)</b> A mount I nvolved	<b>(d)</b> Method of determining amount involved
THE RICHMOND FUND LP	S	5,193,334	GAAP
THE RICHMOND FUND LP	R	37,525,849	GAAP
ROR PARTNERSHIP	В	48,946,214	CASH
ROR PARTNERSHIP	S	98,516,972	CASH
PROPERTY HOLDINGS LLC	В	450,000	CASH
PROPERTY HOLDINGS LLC	S	160,050	CASH
PROPERTY HOLDINGS III LLC	S	8,131,795	CASH
PROPERTY HOLDINGS VII LLC	S	128,400	CASH