

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

**2010**

Open to Public Inspection

**A** For the 2010 calendar year, or tax year beginning **JUL 1, 2010** and ending **JUN 30, 2011**

**B** Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization

**FISK UNIVERSITY**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

**1000 17TH AVENUE**

City or town, state or country, and ZIP + 4

**NASHVILLE, TN 37208**

**F** Name and address of principal officer: **CLANCY ROBERTS**

**1000 17TH AVENUE, NASHVILLE, TN 37208**

**D** Employer identification number

**62-0202000**

**E** Telephone number

**(615) 329-8500**

**G** Gross receipts \$ **26,443,519.**

**H(a)** Is this a group return

for affiliates? ☐ Yes ☒ No

**H(b)** Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

**H(c)** Group exemption number ▶

**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)( ) (insert no.) ☐ 4947(a)(1) or ☐ 527

**J** Website: ▶ **WWW.FISK.EDU**

**K** Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶ **INSTI** **L** Year of formation: **1867** **M** State of legal domicile: **TN**

## Part I Summary

Activities & Governance	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>FISK UNIVERSITY PRODUCES GRADUATES FROM DIVERSE BACKGROUNDS WITH THE INTEGRITY AND INTELLECT</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>26</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>26</b>
	<b>5</b> Total number of individuals employed in calendar year 2010 (Part V, line 2a)	<b>5</b>	<b>631</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>2</b>
Revenue	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>
	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>10,775,358.</b>	<b>11,914,376.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>10,412,034.</b>	<b>10,592,138.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>105,964.</b>	<b>77,798.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>4,166,984.</b>	<b>3,859,207.</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>25,460,340.</b>	<b>26,443,519.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>3,889,647.</b>	<b>4,594,818.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
Expenses	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>11,565,744.</b>	<b>10,909,951.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>684,109.</b>	<b>0.</b>	<b>0.</b>
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>12,774,392.</b>	<b>14,400,363.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>28,229,783.</b>	<b>29,905,132.</b>
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>-2,769,443.</b>	<b>-3,461,613.</b>
	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>107,539,550.</b>	<b>105,843,214.</b>
Net Assets or Fund Balances	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>19,025,140.</b>	<b>20,168,854.</b>
		<b>88,514,410.</b>	<b>85,674,360.</b>

## Part II Signature Block

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

**Sign Here** ▶ Signature of officer **CLANCY ROBERTS** Date

**Paid** Print/Type preparer's name **RICHARD M. WINSTEAD** Preparer's signature *Richard M. Winstead* Date **2-7-12** Check if self-employed ☐ PTIN

**Preparer Use Only** Firm's name ▶ **CROSSLIN & ASSOCIATES, P.C.** Firm's EIN ▶

Firm's address ▶ **2525 WEST END AVE, SUITE 1100** Phone no. **(615) 320-5500**

**NASHVILLE, TN 37203**

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

SCANNED MAR 06 2012

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**Part III** Statement of Program Service Accomplishments

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

☒ X**1** Briefly describe the organization's mission:

FISK UNIVERSITY PRODUCES GRADUATES FROM DIVERSE BACKGROUNDS WITH THE INTEGRITY AND INTELLECT REQUIRED FOR SUBSTANTIVE CONTRIBUTIONS TO SOCIETY. OUR CURRICULUM IS GROUNDED IN THE LIBERAL ARTS. OUR FACULTY AND ADMINISTRATORS EMPHASIZE THE DISCOVERY AND ADVANCEMENT OF

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 24442172. including grants of \$ 4,594,818. ) (Revenue \$ 10592138. )

THE ORGANIZATION IS AN INSTITUTE OF HIGHER EDUCATION AND PROVIDES INSTRUCTION SCHOLARSHIPS AND VARIOUS SUPPORT SERVICES IN ACHIEVING ITS PRIMARY PURPOSE OF EDUCATING STUDENTS.

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ► 24,442,172.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors?	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
<b>4</b> <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>		X
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III</i>		
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
<b>10</b> Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
<b>11</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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII</i>		X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII</i>	X	
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X</i>		X
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?		X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I</i>		X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
<b>20a</b> Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)		

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
<b>23</b> 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>	X	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
<b>25b</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? <i>If "Yes," complete Schedule L, Part I</i>		X
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
<b>28</b> 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)		
<b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>28b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>28c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i>		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
<b>32</b> 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>		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)?		X
<b>a</b> Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

**Note.** All Form 990 filers are required to complete Schedule O

**Part V** Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response to any question in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	91	
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>	X
<b>2a</b>	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	631	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	<b>2b</b>	X
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>3b</b>	
<b>4a</b>	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>4a</b>	X
<b>b</b>	If "Yes," enter the name of the foreign country: <u>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	X
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b>	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?	<b>6a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?	<b>7a</b>	X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>8</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?	<b>9a</b>	
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter.		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>	

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

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

☒**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	26	
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent	26	
<b>2</b> 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?		X
<b>3</b> 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?		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b> Does the organization have members or stockholders?		X
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body?	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	X	
<b>9</b> 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		X

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

	Yes	No
<b>10a</b> Does the organization have local chapters, branches, or affiliates?		X
<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
<b>11a</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
<b>13</b> Does the organization have a written whistleblower policy?	X	
<b>14</b> Does the organization have a written document retention and destruction policy?	X	
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	X	
<b>b</b> Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</b> If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **TN**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **CLANCY ROBERTS - 615-329-8604**  
**1000 17TH AVENUE, NASHVILLE, TN 37208**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CAMILLE BENBOW TRUSTEE	1.00	X						0.	0.	0.
JOHN BLUFORD TRUSTEE	1.00	X						0.	0.	0.
BARBARA BOWLES TRUSTEE	1.00	X						0.	0.	0.
ALMA ARRINGTON BROWN TRUSTEE	1.00	X						0.	0.	0.
LINDA COLEMAN TRUSTEE	1.00	X						0.	0.	0.
WARREN COLLINS TRUSTEE	40.00	X						131,646.	0.	0.
CHERYL DANIEL TRUSTEE	1.00	X						0.	0.	0.
ADENIKE DAVIDSON TRUSTEE	1.00	X						0.	0.	0.
HOWARD GENTRY JR TRUSTEE	1.00	X						0.	0.	0.
EDWARD GEORGE TRUSTEE	1.00	X						0.	0.	0.
EDDIE D HAMILTON TRUSTEE	1.00	X						0.	0.	0.
ROBERT I HANFLING TRUSTEE	1.00	X						0.	0.	0.
KASE L LAVAL TRUSTEE	1.00	X						0.	0.	0.
ROBERT L MALLET TRUSTEE	1.00	X						0.	0.	0.
PATRICIA CASTLES MEADOWS TRUSTEE	1.00	X						0.	0.	0.
LESLIE MEEK TRUSTEE	1.00	X						0.	0.	0.
JOAN THOMPSON MOBLEY TRUSTEE	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GREGG F MORTON TRUSTEE	1.00	X						0.	0.	0.
ROBERT NORTON TRUSTEE	1.00	X						0.	0.	0.
HAZEL O'LEARY PRESIDENT AND TRUSTEE	40.00	X		X	X	X		231,975.	0.	0.
P ANDREW PATTERSON TRUSTEE	1.00	X						0.	0.	0.
MICHAEL REEVES TRUSTEE	1.00	X						0.	0.	0.
SHAYLA SHANE TRUSTEE	1.00	X						0.	0.	0.
WILLIS B SHEFTALL JR TRUSTEE	1.00	X						0.	0.	0.
TAMARA STALLWORTH TRUSTEE	1.00	X						0.	0.	0.
PERIAN STRANG TRUSTEE	1.00	X						0.	0.	0.
<b>1b Sub-total</b>								363,621.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								523,253.	0.	28,284.
<b>d Total (add lines 1b and 1c)</b>								886,874.	0.	28,284.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **3**

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 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

	Yes	No
3		X
4	X	
5		X

**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.

(A) Name and business address	(B) Description of services	(C) Compensation
THOMPSON HOSPITALITY 1000 17TH AVENUE NORTH, NASHVILLE, TN 37208	FOOD SERVICES	1,020,382.
ROCK CITY CONSTRUCTION PO BOX 607, FRANKLIN, TN 37065	CONSTRUCTION SERVICES	846,705.
NASHVILLE ELECTRIC SERVICE 1214 CHURCH STREET, NASHVILLE, TN 37246	UTILITY SERVICES	782,794.
HONEYWELL, INC, 12490 COLLECTIONS CENTER DRIVE, CHICAGO, IL 60693	MAINTENANCE SERVICES	520,010.
GCA SERVICES GROUP 4726 WESTERN AVENUE, KNOXVILLE, TN 37921	JANITORIAL SERVICES	285,264.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **5**

SEE PART VII, SECTION A CONTINUATION SHEETS

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(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ARNOLD BURGER VICE PROVOST FOR ACADEMIC INITIATIVE	40.00			X				145,854.	0.	5,097.
CLANCY ROBERTS VP FOR FINANCE AND CFO	40.00			X				96,543.	0.	4,900.
PRINCILLA EVANS-MORRIS INTERIM EXECUTIVE VICE PRESIDENT & P	40.00			X				84,164.	0.	13,787.
EDWINA HAMBY INTERIM VP OF INSTITUTIONAL ADVANCEM	40.00			X				28,767.	0.	0.
MICHAEL SELF VP FOR INSTITUTIONAL RESEARCH AND AS	40.00			X				89,708.	0.	0.
JASON MERIWETHER VP OF STUDENT ENGAGEMENT AND ENROLLM	40.00			X				78,217.	0.	4,500.
Total to Part VII, Section A, line 1c								523,253.		28,284.

**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	8124801.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3789575.			
	g	Noncash contributions included in lines 1a-1f \$					
	h	<b>Total.</b> Add lines 1a-1f		11,914,376.			
Program Service Revenue	2 a	TUITION AND FEES	Business Code 611310	10,592,138.	10,592,138.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	<b>Total.</b> Add lines 2a-2f		10,592,138.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		77,798.			77,798.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns and allowances	a				
	b	Less: cost of goods sold	b				
	c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue			Business Code				
11 a	AUXILLIARY INCOME	900099	2821199.	2821199.			
b	OTHER INCOME	900099	1038008.	1038008.			
c							
d	All other revenue						
e	<b>Total.</b> Add lines 11a-11d		3859207.				
12	<b>Total revenue.</b> See instructions.		26,443,519.	14,451,345.	0.	77,798.	

**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) but are not required to complete columns (B), (C), and (D)

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
<b>2</b> Grants and other assistance to individuals in the U.S. See Part IV, line 22	4,594,818.	4,594,818.		
<b>3</b> Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	889,374.	277,500.	611,874.	
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	8,302,313.	6,780,210.	1,119,463.	402,640.
<b>8</b> Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
<b>9</b> Other employee benefits	1,713,449.	1,360,077.	309,513.	43,859.
<b>10</b> Payroll taxes	4,815.	4,141.	674.	
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal	649,469.	396.	599,073.	50,000.
<b>c</b> Accounting	175,131.	149,566.	25,565.	
<b>d</b> Lobbying				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	-7,455.	-15,867.	728.	7,684.
<b>g</b> Other				
<b>12</b> Advertising and promotion	28,287.	26,635.	1,652.	
<b>13</b> Office expenses	532,736.	458,007.	57,327.	17,402.
<b>14</b> Information technology	2,102.	5,686.	-3,584.	
<b>15</b> Royalties				
<b>16</b> Occupancy	1,192,467.	899,084.	293,383.	
<b>17</b> Travel	534,813.	501,647.	28,138.	5,028.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	77,144.	67,985.	6,101.	3,058.
<b>20</b> Interest	566,254.	478,802.	87,452.	
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	2,683,895.	2,308,150.	375,745.	
<b>23</b> Insurance	365,779.	242,256.	123,523.	
<b>24</b> Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
<b>a</b> <b>CONTRACT SERVICES</b>	1,956,708.	1,442,643.	459,312.	54,753.
<b>b</b> <b>REPAIRS AND MAINTENANCE</b>	1,283,798.	994,781.	288,973.	44.
<b>c</b> <b>STIPENDS</b>	1,113,198.	1,074,450.	38,748.	
<b>d</b> <b>FOOD SERVICES</b>	1,097,583.	1,096,552.	1,031.	
<b>e</b> <b>BAD DEBT EXPENSE</b>	574,900.	417,014.	67,886.	90,000.
<b>f</b> All other expenses	1,573,554.	1,277,639.	286,274.	9,641.
<b>25</b> Total functional expenses. Add lines 1 through 24f	29,905,132.	24,442,172.	4,778,851.	684,109.
<b>26</b> Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing	2,184,255.	1	2,210,018.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	5,812,321.	4	4,178,944.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net	355,507.	7	346,123.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	707,077.	9	717,156.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 78,357,497.		
	b Less: accumulated depreciation	10b 53,557,347.	25,341,670.	10c 24,800,150.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	4,937,225.	12	5,689,328.
	13 Investments - program-related. See Part IV, line 11	68,201,495.	13	67,901,495.
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	107,539,550.	16	105,843,214.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	4,058,688.	17	5,381,063.
	18 Grants payable		18	
	19 Deferred revenue	1,519,347.	19	1,888,809.
	20 Tax-exempt bond liabilities	8,464,519.	20	8,070,000.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	4,982,586.	25	4,828,982.
	26 <b>Total liabilities.</b> Add lines 17 through 25	19,025,140.	26	20,168,854.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	27 Unrestricted net assets	71,792,164.	27	68,447,606.
	28 Temporarily restricted net assets	4,530,623.	28	4,701,420.
	29 Permanently restricted net assets	12,191,623.	29	12,525,334.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	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 <b>Total net assets or fund balances</b>	88,514,410.	33	85,674,360.
	34 <b>Total liabilities and net assets/fund balances</b>	107,539,550.	34	105,843,214.

Form 990 (2010)

**Part XI Reconciliation of Net Assets**

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

☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,443,519.
2	Total expenses (must equal Part IX, column (A), line 25)	2	29,905,132.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,461,613.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	88,514,410.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	411,509.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	85,464,306.

**Part XII Financial Statements and Reporting**

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

☐

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?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

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.

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2010)

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

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

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

OMB No 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

**FISK UNIVERSITY**

Employer identification number

**62-0202000**

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

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

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

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

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

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

Schedule A (Form 990 or 990-EZ) 2010

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3						
<b>5</b> 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)						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions)					<b>12</b>	
<b>13 First five years.</b> 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 <b>stop here</b> <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
<b>15</b> Public support percentage from 2009 Schedule A, Part II, line 14	<b>15</b>	%
<b>16a 33 1/3% support test - 2010.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 33 1/3% support test - 2009.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a 10% -facts-and-circumstances test - 2010.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 10% -facts-and-circumstances test - 2009.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2010

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						

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

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	<b>15</b>		%
<b>16</b> Public support percentage from 2009 Schedule A, Part III, line 15	<b>16</b>		%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2010</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>		%
<b>18</b> Investment income percentage from <b>2009</b> Schedule A, Part III, line 17	<b>18</b>		%

**19a 33 1/3% support tests - 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

**b 33 1/3% support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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



**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, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2010**Open to Public  
Inspection

Name of the organization

FISK UNIVERSITY

Employer identification number

62-0202000

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the

organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

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

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

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

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

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

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ <u>67,901,495.</u>

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

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

- a** ☒ Public exhibition  
**b** ☒ Scholarly research  
**c** ☒ Preservation for future generations

**d** ☒ Loan or exchange programs

**e** ☒ Other **EDUCATIONAL OUTREACH PROGRAMS**

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

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☒ No

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

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

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

	Amount
<b>1c</b> Beginning balance	
<b>1d</b> Additions during the year	
<b>1e</b> Distributions during the year	
<b>1f</b> Ending balance	

**2a** Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	12,611,220.	12,141,741.	12,431,114.		
<b>b</b> Contributions	333,711.	266,121.	393,527.		
<b>c</b> Net investment earnings, gains, and losses	590,239.	340,558.	-364,075.		
<b>d</b> Grants or scholarships	96,279.	137,200.	118,825.		
<b>e</b> Other expenditures for facilities and programs			200,000.		
<b>f</b> Administrative expenses					
<b>g</b> End of year balance	13,438,891.	12,611,220.	12,141,741.		

**2** Provide the estimated percentage of the year end balance held as:

**a** Board designated or quasi-endowment ☐ %

**b** Permanent endowment ☒ 93.20 %

**c** Term endowment ☒ 6.80 %

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

(i) unrelated organizations

(ii) related organizations

**b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
<b>3a(i)</b>		<input checked="" type="checkbox"/>
<b>3a(ii)</b>		<input checked="" type="checkbox"/>
<b>3b</b>		

**4** Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land	123,350.	1,084,188.		1,207,538.
<b>b</b> Buildings		50,146,830.	30,139,389.	20,007,441.
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		23,841,763.	21,644,562.	2,197,201.
<b>e</b> Other		3,161,430.	1,773,396.	1,388,034.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				24,800,214.

Schedule D (Form 990) 2010

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) MONEY MARKET FUNDS	1,258,025.	END-OF-YEAR MARKET VALUE
(B) CORPORATE STOCKS	866,224.	END-OF-YEAR MARKET VALUE
(C) STOCK FUNDS	3,565,079.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.)	<b>5,689,328.</b>	

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) STIEGLITZ ART COLLECTION	67,901,495.	END-OF-YEAR MARKET VALUE
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.)	<b>67,901,495.</b>	

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.)	

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

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) DEPOSITS HELD IN CUSTODY	47,375.
(3) ADV. FROM FED GOVT. FOR PERKIN	419,595.
(4) BANK LINE OF CREDIT	4,279,212.
(5) CAPITAL LEASE OBLIGATION	82,800.
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.)	<b>4,828,982.</b>

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	26,443,519.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	29,905,132.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-3,461,613.
4	Net unrealized gains (losses) on investments	4	-77,798.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-333,711.
9	Total adjustments (net). Add lines 4 through 8	9	-411,509.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	-3,873,122.

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	21,437,132.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	-4,594,818.
e	Add lines 2a through 2d	2e	-4,594,818.
3	Subtract line 2e from line 1	3	26,031,950.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	411,569.
c	Add lines 4a and 4b	4c	411,569.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	26,443,519.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	25,310,314.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	25,310,314.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	4,594,818.
c	Add lines 4a and 4b	4c	4,594,818.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	29,905,132.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART III, LINE 4: FISK UNIVERSITY GALLERIES PROVIDES A WELCOMING**

**ENVIRONMENT AND FOSTERS AN APPRECIATION AND UNDERSTANDING OF ART THROUGH**

**EXHIBITIONS, CLASSROOM INSTRUCTION, EDUCATIONAL PROGRAMS, AND RESEARCH.**

**THE FISK ART COLLECTION CONSISTS OF MORE THAN 4000 WORKS OF ART -**

**PAINTINGS, PRINTS, DRAWINGS, SCULPTURES, PHOTOGRAPHS, HISTORICAL ARTIFACTS**

**AND OTHER OBJECTS - FROM CULTURES ACROSS THE GLOBE. MAJOR COLLECTIONS**

**INCLUDE THE ALFRED STIEGLITZ COLLECTION OF MODERN ART, THE HARMON**

**FOUNDATION COLLECTION OF AFRICAN AMERICAN ART, THE LIFF FAMILY COLLECTION**

**Part XIV** Supplemental Information (continued)

OF AFRICAN ART, AND THE WINOLD REISS PORTRAIT COLLECTION AMONG MANY OTHERS. WORKS FROM THE COLLECTION ARE EXHIBITED REGULARLY IN PERMANENT AND TEMPORARY EXHIBITIONS AT THE UNIVERSITY'S AARON DOUGLAS AND CARL VAN VECHTEN GALLERIES. THEY ARE ALSO OCCASIONALLY LOANED FOR TEMPORARY EXHIBITION AT ACCREDITED MUSEUMS ACROSS THE UNITED STATES. THE GALLERIES ALSO SEEK TO RAISE AWARENESS AND SUPPORT AN APPRECIATION OF ART THROUGH THE CONTINUED ACQUISITION AND PRESERVATION OF WORKS OF ART RECEIVED AS DONATIONS TO FISK UNIVERSITY GALLERIES. THE COLLECTIONS AND ANY BENEFITS FROM THE ART WILL BE USED FOR THE MISSION OF THE UNIVERSITY.

## PART XI, LINE 8 - OTHER ADJUSTMENTS:

NON-OPERATING ACTIVITIES CONTRIBUTIONS -333,711.

## PART XII, LINE 2D - OTHER ADJUSTMENTS:

SCHOLARSHIP EXPENSE NETTED AGAINST REVENUE -4,594,818.

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

NON-OPERATING CONTRIBUTIONS 333,771.

INTEREST AND DIVIDENDS 77,798.

TOTAL TO SCHEDULE D, PART XII, LINE 4B 411,569.

## PART XIII, LINE 4B - OTHER ADJUSTMENTS:

SCHOLARSHIP EXPENSE NETTED AGAINST REVENUE 4,594,818.

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

Department of the Treasury  
Internal Revenue Service

**Schools**

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

► **Attach to Form 990 or Form 990-EZ.**

OMB No 1545-0047

**2010**

**Open to Public  
Inspection**

Name of the organization

**FISK UNIVERSITY**

Employer identification number

**62-0202000**

**Part I**

- 1** Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2** Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3** Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.

If you need more space, use Part II

**THE COLLEGE'S NONDISCRIMINATORY POLICY IS PRINTED IN THE  
"EMPLOYEE POLICIES AND PROCEDURES" MANUAL AS WELL AS THE  
STUDENT HANDBOOK.**

- 4** Does the organization maintain the following?
- a** Records indicating the racial composition of the student body, faculty, and administrative staff?
- b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c** Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d** Copies of all material used by the organization or on its behalf to solicit contributions?

If you answered "No" to any of the above, please explain. If you need more space, use Part II.

- 5** Does the organization discriminate by race in any way with respect to:

- a** Students' rights or privileges?
- b** Admissions policies?
- c** Employment of faculty or administrative staff?
- d** Scholarships or other financial assistance?
- e** Educational policies?
- f** Use of facilities?
- g** Athletic programs?
- h** Other extracurricular activities?

If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.

- 6a** Does the organization receive any financial aid or assistance from a governmental agency?
- b** Has the organization's right to such aid ever been revoked or suspended?
- If you answered "Yes" to either line 6a or line 6b, explain on Part II.
- 7** Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II

	YES	NO
<b>1</b>	<b>X</b>	
<b>2</b>	<b>X</b>	
<b>3</b>	<b>X</b>	
<b>4a</b>	<b>X</b>	
<b>4b</b>	<b>X</b>	
<b>4c</b>	<b>X</b>	
<b>4d</b>	<b>X</b>	
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>5c</b>		<b>X</b>
<b>5d</b>		<b>X</b>
<b>5e</b>		<b>X</b>
<b>5f</b>		<b>X</b>
<b>5g</b>		<b>X</b>
<b>5h</b>		<b>X</b>
<b>6a</b>	<b>X</b>	
<b>6b</b>		<b>X</b>
<b>7</b>	<b>X</b>	

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

Schedule E (Form 990 or 990-EZ) 2010

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





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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
SCHOLARSHIPS & FELLOWSHIPS FOR STUDENTS ATTENDING	329	4,594,818.	0.	N/A	N/A

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

**SCHEDULE I, PART I, LINE 2: SCHEDULE I PART I LINE 2**

THE OFFICE OF SPONSORED PROGRAMS IS RESPONSIBLE FOR ENSURING THAT AUDITABLE

RECORDS ARE MAINTAINED IN SUPPORT OF ALL DIRECT AND INDIRECT CHARGES TO

GRANTS, CONTRACTS, OR AGREEMENTS. THE PRINCIPAL INVESTIGATOR INITIALLY

APPROVES ALL EXPENDITURES OF A SPONSORED PROJECT AND IS RESPONSIBLE FOR

DETERMINING WHETHER THE SPONSOR WILL ALLOW AN ITEM OF DIRECT COST, BEFORE

THE EXPENDITURE IS PROCESSED. IN ADDITION, THESE EXPENDITURES ARE ALSO

CLOSELY REVIEWED AND MONITORED BY THE OFFICE OF SPONSORED PROGRAMS BEFORE

THE EXPENDITURE REQUISITION IS APPROVED FOR PAYMENT TO ENSURE THAT THE

**Part IV** Supplemental Information

GRANT FUNDS ARE PROPERLY UTILIZED FOR THE PURPOSES SPECIFIED IN THE GRANT  
CONTRACT/AGREEMENT.

**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. ▶ See separate instructions.

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**2010**

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**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence            |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees              |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)            |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |  |   |
|--|---|
| <input type="checkbox"/> Compensation committee              | <input checked="" type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2010

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

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

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 HAZEL O'LEARY	(i)	231,975.	0.	0.	0.	231,975.	0.
	(ii)	0.	0.	0.	0.	0.	0.
2 ARNOLD BURGER	(i)	145,854.	0.	0.	0.	145,854.	0.
	(ii)	0.	0.	0.	0.	0.	0.
3	(i)						
	(ii)						
4	(i)						
	(ii)						
5	(i)						
	(ii)						
6	(i)						
	(ii)						
7	(i)						
	(ii)						
8	(i)						
	(ii)						
9	(i)						
	(ii)						
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

**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.

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**FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:**

**INSTITUTION**

**FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**

**REQUIRED FOR SUBSTANTIVE CONTRIBUTIONS TO SOCIETY.**

**FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:**

**KNOWLEDGE THROUGH RESEARCH IN THE NATURAL AND SOCIAL SCIENCES, BUSINESS  
AND THE HUMANITIES. WE ARE COMMITTED TO THE SUCCESS OF SCHOLARS AND  
LEADERS WITH GLOBAL PERSPECTIVE. THE D.E.T.A.I.L.S. REPRESENTS FISK'S  
CORE VALUES. OUR VALUES REFLECT OUR OVERALL ETHICAL AND MORAL  
ENGAGEMENT. WE, THE FISK FAMILY, SEEK TO INTERNALIZE THESE PRINCIPLES  
AND APPLY THEM IN OUR DAY-TO-DAY WORK AND IN OUR LIVES. DIVERSITY WE  
BELIEVE THAT OUR INDIVIDUAL DIFFERENCES ARE A COLLECTIVE STRENGTH. WE  
WILL SUPPORT AND ENCOURAGE DIVERSITY OF OPINION, OF CULTURE AND AIDS US  
IN BUILDING A COLLECTIVE WISDOM THAT RESULTS IN MORE POWERFUL AND  
RELEVANT SOLUTIONS TO OUR CHALLENGES. EXCELLENCE WE BELIEVE THAT  
EXCELLENCE IS THE RESULT OF A LIFELONG PURSUIT OF THE HIGHEST  
STANDARDS. AT FISK, OUR COLLECTIVE QUEST IS TO EARN MERIT THROUGH  
COMMITMENT TO RIGOROUS SCHOLARSHIP, CULTURAL LITERACY, AND HIGH ETHICAL  
STANDARD. TEAMWORK WE BELIEVE THAT INDIVIDUALS ACHIEVE HIGH STANDARDS  
WHEN SUPPORTED BY THE COLLECTIVE WORK OF OTHERS. WE REINFORCE THIS  
VALUE BY CONSTANTLY CREATING OPPORTUNITIES TO COLLABORATE BOTH INSIDE  
AND OUTSIDE OF TRADITIONAL ALLIANCES ON OUR UNIVERSITY, OUR PROXIMATE  
COMMUNITY, AND THE WORLD. ACCOUNTABILITY WE BELIEVE THAT WE MUST HOLD  
OURSELVES TO THE HIGHEST STANDARD WHEN WE MAKE COMMITMENTS. CONSISTENT**

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AND MEASURABLE FOLLOW-THROUGH IS ESSENTIAL FOR INDIVIDUAL AND TEAM PROGRESS. WE ARE FORTHRIGHT ABOUT OUR SUCCESSES AND SHORTCOMINGS AND WE WILL POSITION FISK FOR CONTINUED ACHIEVEMENT. INTEGRITY WE BELIEVE THAT IT IS OUR RESPONSIBILITY TO PREPARE YOUNG PEOPLE TO BE STEWARDS OF AN EVER CHANGING WORLD. THAT MEANS THAT WE MUST MODEL BEHAVIOR GROUNDED IN TRUTHFULNESS AND COMPASSION. LEADERSHIP WE BELIEVE THAT LEADERS ARE OBLIGATED TO EMPOWER THOSE AROUND THEM. WE ARE CONSISTENT, TRANSPARENT, AND ACCOUNTABLE. THROUGH OUR WORDS AND BEHAVIORS WE ENCOURAGE OTHERS TO EXHIBIT THESE SAME ATTRIBUTES. SERVICE WE BELIEVE THAT SERVICE IS OUR ABILITY TO GIVE THE GIFT OF KNOWLEDGE TO HUMANITY. AS WE SERVICE, WE BECOME TRANSFORMED AND SO ARE OUR COMMUNITIES.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE FORM 990 IS DISTRIBUTED TO THE AUDIT COMMITTEE FOR CHANGES AND APPROVAL ON FEBRUARY 2, 2012.

FORM 990, PART VI, SECTION B, LINE 12C: THE FISK UNIVERSITY ("FISK" OR THE "UNIVERSITY") BOARD OF TRUSTEES (THE "BOARD") HAS ADOPTED A CONFLICT OF INTEREST POLICY (THE "POLICY") THAT IS CURRENTLY IN EFFECT.

THE POLICY ESTABLISHES A PROCEDURE FOR TRUSTEES TO DISCLOSE CONFLICTS OR POTENTIAL CONFLICTS OF INTEREST AS THEY ARISE. THE POLICY ALSO CREATES A PROCEDURE WHEREBY THE INDIVIDUAL FACTS OF EACH SITUATION CAN BE ASSESSED IN RELATION TO THE BEST INTERESTS OF THE UNIVERSITY AND AN INFORMED, UNBIASED DECISION CAN BE MADE WITH REGARD TO WHETHER A PARTICULAR CONFLICT IS PERMISSIBLE OR IMPERMISSIBLE UNDER THE POLICY.

THE POLICY REQUIRES EACH TRUSTEE TO SUBMIT AN ANNUAL CONFLICT OF INTEREST

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DISCLOSURE STATEMENT AT LEAST ANNUALLY TO THE BOARD SECRETARY. NEW TRUSTEES ARE REQUIRED TO SUBMIT THE ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENTS UPON ACCEPTING SERVICE ON THE BOARD AND IN NO EVENT LATER THAN HIS OR HER FIRST BOARD/BOARD COMMITTEE MEETING.

THE UNIVERSITY ENDEAVORS TO ENSURE STRICT COMPLIANCE WITH THIS POLICY. TO ACHIEVE THIS GOAL, THE UNIVERSITY CONTINUALLY REMINDS AND EDUCATES THE BOARD MEMBERS ABOUT CONFLICT ISSUES. AT NEW TRUSTEE ORIENTATION, THE UNIVERSITY'S GENERAL COUNSEL PROVIDES A TUTORIAL ON CONFLICT ISSUES, REVIEWS THE UNIVERSITY'S BYLAWS REGARDING CONFLICTS, AND REVIEWS THE TERMS OF THE POLICY, INCLUDING REPORTING REQUIREMENTS. ALSO, AT THE BEGINNING OF EACH ANNUAL MEETING OF THE BOARD, THE BOARD MEMBERS ARE REMINDED BY THE BOARD'S CHAIRMAN, THE UNIVERSITY'S PRESIDENT AND THE UNIVERSITY'S GENERAL COUNSEL ABOUT CONFLICT REPORTING REQUIREMENTS; AND, THE BOARD MEMBERS ARE REQUIRED TO SUBMIT AN ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENT PRIOR TO THE ADJOURNMENT OF THE MEETING. FOLLOWING THE MEETING, THE UNIVERSITY'S GENERAL COUNSEL CHECKS EACH ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENT RECEIVED TO ENSURE THAT ALL TRUSTEES HAVE COMPLETED THE REQUIRED FORM. THE GENERAL COUNSEL OBTAINS THE ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENT FROM ANY TRUSTEE WHO DID NOT ATTEND THE ANNUAL MEETING OF THE BOARD OR WHO DID NOT RETURN THE FORM AT THE ADJOURNMENT OF THAT MEETING.

ADDITIONALLY, THE UNIVERSITY'S BYLAWS SPECIFY THE PRESIDENT OR HIS OR HER DISGNEE(S) AS THE ONLY UNIVERSITY OFFICIAL(S) AUTHORIZED TO ENTER INTO A BINDING AGREEMENT ON BEHALF OF THE UNIVERSITY. BY LIMITING SIGNATORY AUTHORITY TO THE PRESIDENT, THE UNIVERSITY HAS CENTRALIZED AND STANDARDIZED ITS CONTRACT REVIEW PROCESS. ALL CONTRACTS ARE REQUIRED TO UNDERGO REVIEW

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BY THE UNIVERSITY'S GENERAL COUNSEL, WHO SUBMITS A WRITTEN RECOMMENDATION WITH REGARD TO THE CONTRACT TO THE UNIVERSITY'S PRESIDENT. BY CENTRALIZING AND STANDARDIZING ITS CONTRACT REVIEW PROCESS THROUGH, AT LEAST THESE TWO OFFICES, THE UNIVERSITY IS ABLE TO, AMONG OTHER THINGS, REVIEW ALL CONTRACTUAL ARRANGEMENTS TO ENSURE THAT THERE ARE NO UNDISCLOSED CONFLICTS OF INTEREST ISSUES PRESENTED IN ANY SUCH ARRANGEMENT.

FORM 990, PART VI, SECTION B, LINE 15: GOVERNANCE AND ADMINISTRATION: CEO EVALUATION/SELECTION

THE GOVERNING BOARD OF THE INSTITUTION IS RESPONSIBLE FOR THE SELECTION AND THE PERIODIC EVALUATION OF THE CHIEF EXECUTIVE OFFICER.

THE FISK BOARD OF TRUSTEES EMPLOYS SEARCH FIRMS THAT SPECIALIZE IN THE PLACEMENT OF SENIOR ADMINISTRATIVE PERSONNEL AT INSTITUTIONS OF HIGHER EDUCATION. THE SEARCH FIRM THEN MANAGES THE ENTIRE RECRUITMENT PROCESS, INCLUDING JOBS SEARCH POSTINGS, SCREENINGS OF APPLICANTS AND THEIR CREDENTIALS AS WELL AS THE COORDINATION OF CANDIDATE INTERVIEWS WITH SELECTED MEMBERS FROM THE FISK BOARD OF TRUSTEES.

SUCH SEARCHES ARE CONDUCTED ON A 'HIGHLY CONFIDENTIAL' BASIS AND DO NOT INVOLVE THE OFFICE OF HUMAN RESOURCES UNTIL SUCH TIME AS THE BOARD OF TRUSTEES SELECTS AND ANNOUNCES THE PRESIDENTIAL CANDIDATE. IN ADDITION, THE BOARD OF TRUSTEES, USES ITS LEGAL COUNSEL TO FORMULATE AND/OR REVIEW ALL PRESIDENTIAL CONTRACTS FOR THE UNIVERSITY.

ARTICLE V, SECTION 1 OF FISK UNIVERSITY'S ("FISK" OR THE "UNIVERSITY")

AMENDED AND RESTATED BYLAWS (THE "BYLAWS") CONFERS TO ITS BOARD OF TRUSTEES



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(THE "BOARD") THE AUTHORITY TO APPOINT THE PRESIDENT, WHO SERVES AS THE UNIVERSITY'S CHIEF EXECUTIVE OFFICER. SPECIFICALLY, ARTICLE V, SECTION 1 OF THE BYLAWS STATES THAT THE BOARD IS RESPONSIBLE FOR THE SELECTION OF THE INSTITUTION'S PRESIDENT.

PURSUANT TO ARTICLE IV, SECTION 1 OF THE BYLAWS, THE EXECUTIVE COMMITTEE OF THE BOARD IS CHARGED WITH RESPONSIBILITY OF EVALUATING THE PRESIDENT'S PERFORMANCE AND SETTING HIS OR HER COMPENSATION. UNDER THIS PROVISION OF THE BYLAWS, THE EXECUTIVE COMMITTEE IS COMPRISED OF THE BOARD CHAIRMAN, VICE-CHAIRMAN, THE SECRETARY OF THE BOARD, THE CHAIRPERSONS OF EACH OF THE BOARD'S STANDING COMMITTEES, AND THE PRESIDENT. THE EXECUTIVE COMMITTEE IS STAFFED BY THE GENERAL COUNSEL AND SECRETARY, WHO SERVES AS AN EX OFFICIO MEMBER OF THE COMMITTEE. THE BYLAWS DIRECT THE EXECUTIVE COMMITTEE TO DEVELOP, IMPLEMENT AND EVALUATE THE PRESIDENT'S PERFORMANCE MANAGEMENT PROGRAM, COMPENSATION, AND CONDITIONS OF EMPLOYMENT.

THE EMPLOYMENT AGREEMENT BETWEEN THE UNIVERSITY AND THE UNIVERSITY'S CURRENT PRESIDENT ALSO SETS FORTH A PROCESS FOR THE PRESIDENT'S EVALUATION. THE EMPLOYMENT AGREEMENT REQUIRED THE PRESIDENT TO DEVELOP A PERFORMANCE PLAN UNDER WHICH SHE IS TO BE EVALUATED. SPECIFICALLY, SECTION 3(B) OF THE AGREEMENT CONTEMPLATES THAT THE BOARD MAY PERFORM AN ANNUAL OR PERIODIC PERFORMANCE REVIEW OF THE PRESIDENT. THE DATE(S) AND FREQUENCY OF SUCH PERFORMANCE REVIEW(S) TO OCCUR ARE TO BE DETERMINED IN THE SOLE DISCRETION OF THE UNIVERSITY'S BOARD OF TRUSTEES, THROUGH THE APPLICABLE COMMITTEE OF THE BOARD (THE "COMMITTEE"). SECTION 3(B) OF THE EMPLOYMENT AGREEMENT ALSO STATES THAT THE PRESIDENT'S INITIAL PERFORMANCE PLAN SHALL BE ADJUSTED ANNUALLY BY THE COMMITTEE AND THE PRESIDENT PRIOR TO THE CLOSE OF EACH FISCAL YEAR.

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COMPENSATION DATA IS EVALUATED UTILIZING SALARY DATA PROVIDED BY CUPA-HR SO AS TO COMPARE FISK COMPENSATION DATA WITH COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS.

COMPENSATION DATA FOR THE PRESIDENT, OTHER OFFICERS AND/OR KEY EMPLOYEES OF THE UNIVERSITY ARE KEPT IN THEIR RESPECTIVE PERSONNEL FILES WITHIN THE OFFICE OF HUMAN RESOURCES. COMPENSATION DATA FOR THE PRESIDENT AND PROVOST ARE ALSO RETAINED BY THE UNIVERSITY'S LEGAL COUNSEL.

FORM 990, PART VI, SECTION C, LINE 19: FISK UNIVERSITY HAS COPIES OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ON FILE TO BE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

INTEREST AND DIVIDENDS 77,798

NON-OPERATING ACTIVITIES CONTRIBUTIONS: 333,711