

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990** 

# 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)

Department	of the	Treasury
Internal Rev	enue S	Service

Inter	nal Rev	enue S	ervice	► The organization may	have to use a copy of this	return to satis	fy state reporting re	quire	ments.	Inspection
A F	or the	e 200	2 cale	ndar year, or tax year beginning	07	/01 ,2	002, and ending	06	/30/2003	
B ci	eck If app		Piease	C Name of organization VANDE	BILT UNIVERSITY			D E	nployer Identific	ation number
Г	Addres		use IRS	C/O OFFICE OF ACCOUNT	ING			62	-0476822	
Г	Name	change	label or print or	Number and street (or P.O. bo	x if mail is not delivered to st	reet address)	Room/suite		elephone numbe	r
	Initial a	return	type.			·	· [		-	
	Final re	eturn	See Specific	BOX 6310, STATION B				(6	15) 343-6	501
	Amend		instruc-	City or town, state or country, a	nd ZIP + 4			F Ac	counting thod: Cas	h X Accruel
	Applica	ation	tions.	NASHVILLE, TN 37235				Г	Other (specify)	<b>&gt;</b>
		•	• S	ection 501(c)(3) organizations and	4947(a)(1) nonexempt cha	ritable	H and I are not app	licable	to section 527 c	organizations.
				usts must attach a completed Scho			H(a) Is this a group	returr	n for affiliates?	Yes X No
G	Web sh	te: 🛌	r.www	ANDERBILT.EDU			H(b) If "Yes," ente	r numb	er of affiliates	N/A
j	Organi	zation	type (ch	eck only one) ▶ 🗶 501(c) (3 ) <b>◄</b> (	insert no ) 4947(a)(1) <b>or</b>	527	H(c) Are all affiliate			Yes X No
	Check i		<b>&gt;</b>	if the organization's gross receipts a		25,000 The	(If "No," attac H(d) Is this a separat		See instructions	<u> </u>
	organiz	zation r	need no	t file a return with the IRS, but if the o	rganization received a Form 9	990 Package			a group ruling?	Yes X No
				file a return without financial data. Some st			I Enter 4-digit G	EN 🏲	•	N/A
							Mi Check ▶	it	the organization	is not required
L	Gross i	receipt	s: Add h	nes 6b, 8b, 9b, and 10b to line 12	1,846,18	7,584.	to attach Sch	B (Fo	rm 990, 990-EZ,	or 990-PF)
Pa	rt l	Rev	enue, l	Expenses, and Changes in Net	Assets or Fund Balance	s (See page	17 of the instru	ctions	i.)	
	1			ons, gifts, grants, and similar amount				W.		
				olic support		1	03,056,571.	]		
	Ι.,			ublic support		o		] ] [		
				ent contributions (grants)	ه ا	1	96,829,789.	]*		
	1			nes 1a through 1c) (cash \$276, 75		23,	129,561.	1d	299	,886,360.
	2	Pro	ogram s	service revenue including governmen	nt fees and contracts (from F	Part VII, line 9	3)	2	1,460	<u>,482,186.</u>
	3		_					3		
	4			n savings and temporary cash investr	nents			4		
	5							5	60	),575,236.
	6	a Gr	oss rent	is	64	a	17,969,777.	1 1		
	- 1			al expenses	lei	b		1 1		
				income or (loss) (subtract line 6b fro	m line 6a)			6c	1	<u>7,969,777.</u>
9	7			estment income (describe	OTHER INVES	TMENT I	NCOME )	7		41,336.
Revenue	8			ount from sales of assets other	(A) Securities	(B)	Other	4		
8				ntory	8:	a		1		
				t or other basis and sales expenses	81	b		1 1		
				oss) (attach schedule) STMT .1.	-30,839,861.8	c		4		
				or (loss) (combine line 8c, columns (A	) and (B))			8d	-30	0,839,861.
	9		-	vents and activities (attach schedule)						
	Ì	a Gr	oss rev	venue (not including \$1,5	68,596. of	1				
				ons reported on line 1a)		a	603,738.	4		
	1	b Le	ss: dire	ect expenses other than fundraising ex	penses 91	b	676,056.	<b>↓  </b>		_
		c Ne	et incon	ne or (loss) from special events (sub	ract line 9b from line 9a) 👝	1		7.5	<del></del>	<u>-72,318.</u>
	10	a Gr	oss sa	les of inventory, less returns and allow	ances <u>10</u>	a	<u>15,932,420.</u>	7 5 4		
		h la	ee. coa	t of goods sold	ho	b	6,134,088.	-} ``		
	+	G-GI	OSS III	of (loss) from sales of inventory	attach schedule) (subtract li	ne 10b from l	ine 10a) STMT 1	10c		9,798,332.
	\ 11	1 6	her rev	enue (from Part //II, line 103)				111		1,536,392.
	12	To	otal re	venue (add lines 1d, 2, 3, 4, 5, 6c,	7, 8d, 9c, 10c, and 11) · ·			12		9,377,440.
	193		<b>Adran</b>	services (from life 14, column (B)) .				13		9,892,927.
\$68	93 44			nent and general (from line 44, colum						5,532,603.
Expenses	15	5-天	pennie	month of line 44, column (D))				15	1	<u>8,646,968.</u>
Ä	116	s (e)	wilden!	To affiliates (attach schedule)				16		
	47	T	otal ex	penses (add lines 16 and 44, colum	ın (A))	<u></u>	<u></u>	17		<u>4,072,498.</u>
Ş	18	B E	cess o	r (deficit) for the year (subtract line 1	7 from line 12)			18		<u>4,695,058.</u>
55	19	9 N	et asse	ts or fund balances at beginning of y	ear (from line 73, column (A	))		19		6,995,020.
Net Assets	20	0 0	ther ch	anges in net assets or fund balances	(attach explanation)	STMT.	3	20		2,283,772
ž	21	1 N	et asse	ts or fund balances at end of year (c	ombine lines 18, 19, and 20)			21	3,13	4,583,734

JSA For Paperwork Reduction Act Notice, see the separate instructions. 2E1010 1 000

Form 990 (2002)

Page 2



	Do not include emounts mandad on line	CHOIL	4947(a)(1) nonexempt char		(C) Management	· · · · · · · · · · · · · · · · · · ·
	Do not Include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
?	Grants and allocations (attach schedule)					
	(cash \$ 122,245,082, noncash \$ NONE)	22	122,245,082.	122,245,082.		
	Specific assistance to individuals (attach schedule)	23		•		
	Benefits paid to or for members (attach schedule)	24				
	Compensation of officers, directors, etc.	-	4,637,744.		4,637,744.	
	Other salaries and wages	26	854,048,915.	808,493,625.	35,972,562.	9,582,72
	Pension plan contributions	27	42,206,323.	41,894,384.	311,939.	3,002,11
	Other employee benefits	28	88,583,948.	75,900,437.	11,046,654.	1,636,85
	Payroll taxes	29	43,630,899.	39,498,771.	3,325,915.	806,21
	Professional fundraising fees	30	319,813.	33,430,171.	3,323,313.	319,8
		31	348,479.	65,473.	283,006.	343,03
	Accounting fees	32	3,334,372.	1,450,255.	1,884,117.	
	Legal fees	33		127,086,105.	5,589,253.	1,036,56
	Supplies	$\overline{}$	133,711,923.		797,012.	242,05
	Telephone	34	13,446,043.	12,406,979.	242,502.	535,10
	Postage and shipping	35	5,449,140.	4,671,531.	2,434,922.	551,94
	Occupancy	36	205,390,420.	202,403,556.	3,613,438.	348,1
	Equipment rental and maintenance	37	81,140,228.	77,178,618.	431,027.	1,318,7
	Printing and publications	38	16,906,477.	15,156,698.	523,595.	575,44
	Travel	39	15,910,075.	14,811,032. 10,634,846.	678,545.	328,32
	Conferences, conventions, and meetings .	40	11,641,716.		0/0,545.	320,32
	Interest STMT 1	41	19,530,295.	19,530,295. 88,247,221.		
	Depreciation, depletion, etc (attach schedule).	42	88,247,221.	108,218,019.	3,760,372.	1,364,99
	Other expenses not covered above (itemize) \$ TMT 5	43a	113,343,385.	108,218,019.	3,700,372.	1,304,0.
		43b				
		43c				
þ		43d		l		
		100-				
0		43e				
:_	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15  t Costs. Check  if you are follow	. 44	1,864,072,498. SOP 98-2			
in e : Y	it Costs. Check if you are followany joint costs from a combined educational es," enter (I) the aggregate amount of these j	. 44 wing camp	1,864,072,498. SOP 98-2. paign and fundralsing solipsts \$	icitation reported in (B) Pro	gram services? ated to Program services	Yes X
in e : Y	any joint costs from a combined educational es," enter (i) the aggregate amount of these j	wing campoint concerns	1,864,072,498. SOP 98-2. paign and fundraising solicits	icitation reported in (B) Pro ; (ii) the amount alloca ; and (iv) the amount a	gram services?	Yes X
in e : Y(	it Costs. Check  if you are following joint costs from a combined educational es," enter (i) the aggregate amount of these judgment allocated to Management and get it is statement of Program Se	wing campoint coneral strvice	1,864,072,498. SOP 98-2. paign and fundraising solicits sts \$ Accomplishmen	icitation reported in (B) Pro ; (ii) the amount alloca ; and (iv) the amount a	gram services?	Yes X  \$ Program Service
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	artl	V Balance Sheets (See page 24 of the instructions.)			
		Where required, attached schedules and amounts within the description	(A) Beginning of year		(B)
	14-	Cook and interest has in			End of year
	45	Cash - non-interest-bearing		45	
(	46	Savings and temporary cash investments	429,107,623.	46	482,858,071
	47-	Accounts receivable	. ]		
	4/a	Accounts receivable	<del></del>	47-	005 005 055
	6	Less: allowance for doubtful accounts	3. 205,500,742.	4/C	225,295,377.
	482	Pledges receivable			
		Less: allowance for doubtful accounts 48b 3,456,491		480	102,033,729.
	1	Grants receivable		49	102,033,729.
	50	Receivables from officers, directors, trustees, and key employees	'	10	
	**	(attach schedule)		50	
	51a	Other notes and loans receivable (attach	· · · · · · · · · · · · · · · · · · ·		
		schedule)			
ets	b	Less: allowance for doubtful accounts 51b 3,134,625		51c	34,022,636.
Assets		Inventories for sale or use			
•	53	Prepaid expenses and deferred charges	51,639,817.		55,113,548.
	54	Investments - securities (attach schedule) STMT 8 ▶ Cost x FMV	2,368,286,717.	r	
	1	Investments - land, buildings, and			
		equipment: basis			
	b	Less: accumulated depreciation (attach			
		schedule)		55c	
		Investments - other (attach schedule) STMT. 9		56	58,996,950.
	I	Land, buildings, and equipment: basis	<u>.</u>		
	b	Less accumulated depreciation (attach			
		schedule)	7 070 074	5/0	1,203,018,608.
	58	Other assets (describe ▶	7,979,874.	30	NONE
		Total assets (add lines 45 through 58) (must equal line 74)	A 300 77A 173	59	4 501 086 229
	60	Accounts payable and accrued expenses		60	425,042,108.
	61	Grants payable		61	
	62	Deferred revenue		62	31,669,439.
Ð		Loans from officers, directors, trustees, and key employees (attach			
iabilities		schedule)		63	
api	64a	Tax-exempt bond liabilities (attach schedule) STMT. 10	621,641,775.		
3		Mortgages and other notes payable (attach schedule)		64b	
	65	Other liabilities (describe ► STMT 11)	257,318,990.	65	299,856,897.
_	66	Total liabilities (add lines 60 through 65)	1,272,779,153.	66	1,366,502,495.
	Orga	nizations that follow SFAS 117, check here ▶ 🗴 and complete lines			
		67 through 69 and lines 73 and 74.	0 204 017 020	67	2 404 640 066
88	67	Unrestricted		68	161,719,470.
ğ	68	Temporarily restricted			568,215,198.
Ba	69	Permanently restricted	310,031,043.		300/213/130.
Net Assets or Fund Balances	Orga	complete lines 70 through 74.			
F	70	Capital stock, trust principal, or current funds		70	
8	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
se	72	Retained earnings, endowment, accumulated income, or other funds	•	72	
As	73	Total net assets or fund balances (add lines 67 through 69 or lines		F-19-19	
Š	1	70 through 72;			
_		column (A) must equal line 19; column (B) must equal line 21)	3,126,995,020.	73	3,134,583,734.
	74	Total liabilities and net assets / fund balances (add lines 66 and 73)	<u>.  4,399,774,173.</u>	74	4,501,086,229.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Fon	m 990 (2002)							62-04768	822		Page 4
Pa	art IV-A	econciliation of Reven inancial Statements w eturn (See page 26 of	ue ith	per Audited Revenue per instructions		Pa	rt IV-B	Reconciliation Financial Statement Return	on of Expendents w	ses poith Ex	
2	Total revenue	e, gains, and other support				а	Total		losses per		
		nancial statements >		17730666	99.	<u>ا</u>	audited	financial stateme	ents	▶ a	1765477985
b	Amounts incli	uded on line a but not on				b	Amoun	ts included on lin	e a but not		
	line 12, Form	990:					on line	17, Form 990:			
(1)	Net unrealized	gains				(1)	Donated	services		178.1	
	on investments	\$ 51,436,108.					and use	of facilities \$			
(2)	Donated service	es		Per service		(2)	Prior yea	ar adjustments			
	and use of facili	ities \$		1.0		1	reported	on line 20,			
(3)	Recoveries of p	rior			2.4		Form 99	0 <u>\$</u>		_ 33	
	year grants	<u>\$</u>				(3)	Losses r	reported on			
(4)	Other (specify):				A Len	1	line 20, l	Form 990 \$			
			1	Town of the same	,	(4)	Other (sp	oecify)			,
	STMT 12	\$ -117746849.	3.5								A 1 4
	Add amounts	on lines (1) through (4) ▶	<u>b</u>	-66,310,7	41.	ļ		<u> </u>		_  -	
							Add amo	ounts on lines (1) th	rough (4)	▶ <u>b</u>	
C	Line a minus I	line b ▶	C	18393774	<u>40.</u>	С			!	<b>▶</b> <u>C</u>	1765477985
d	Amounts inclu	uded on line 12,				d	Amount	ts included on lin	e 17,		
	Form 990 but	t not on line a:					Form 9	90 but not on line	e <b>a:</b>	1.13	الم المراجع ال
(1)	Investment expe	en <b>se</b> s	1		, , , , , , , , , , , , , , , , , , ,	(1)	investme	ent expenses		134	,
	not included on	line			, ,			ded on line			· 15.
	6b, Form 990	<u>\$</u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	~	l	6b, Form	1 990 <u>\$</u>		_	
(2)	Other (specify):				•	(2)	Other (sp	pecify).			•
				- *,							"
		<u> </u>	١.	*			STMT		3,594,513	- 1 1	00 504 510
		on lines (1) and (2)	d					ounts on lines (1)			98,594,513
9		per line 12, Form 990				e		penses per line			1064070400
	(line c plus line	ed) · · · · · · · · · · · · · · · · · · ·	<u>е</u>	18393774	40.			lus line d) · · ·			1864072498
Pa		f Officers, Directors, 7	rus	stees, and he	y =1:	npio	/ees (Li	st each one ever	i ii not comp	erisale.	su, see page 20 0
	0.0 1.10						d average	(C) Compensation	(D) Contribu		(E) Expense account and other
	(	A) Name and address					er week o position	(If not paid, enter -0)	deferred comp		allowances
SEI	STATEMEN	TS 14 - 19,31						4,637,744	. 590	,161	. NON
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	<u> </u>				1						
	·····				<del>                                     </del>			<del> </del>			
					]						

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule - see page 26 of the instructions

	Yes
--	-----

X	N	c
X		C

Form **990** (2002)

	1 990 (2		76822			age 5
Pai	rt VI	Other Information Dee page 27 of the instructions.)			Yes	No
76	Did the	organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed	description of each activity	76		x
		ny changes made in the organizing or governing documents but not reported to the IRS?		77		x
		" attach a conformed copy of the changes.		15 3	1	
78 a	Did the	organization have unrelated business gross income of \$1,000 or more during the year covered by	this return?	78a	x	
b	If "Yes	" has it filed a tax return on Form 990-T for this year?		78b	х	
		ere a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attac		79		x
		rganization related (other than by association with a statewide or nationwide organization) through		200	****	24.21
		rship, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		80a	x	•
		" enter the name of the organization▶			Sur Arge	,
		and check whether it is X exempt or X nonexempt			,	2
81a	Enter of	irect or indirect political expenditures See line 81 instructions	81a NONE			
		organization file Form 1120-POL for this year?		81b		x
		organization receive donated services or the use of materials, equipment, or facilities at no charge				
		bstantially less than fair rental value?		82a	x	
		" you may indicate the value of these items here. Do not include this amount				•
		nue in Part I or as an expense in Part II. (See instructions in Part III.)	82b			
		organization comply with the public inspection requirements for returns and exemption application		83a	x	
		organization comply with the disclosure requirements relating to quid pro quo contributions?		83b	х	
		organization solicit any contributions or gifts that were not tax deductible?		84a	x	
		" did the organization include with every solicitation an express statement that such contributions				
_		were not tax deductible?		84b	х	
85		4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		85a	N/	A
	. , , ,	organization make only in-house lobbying expenditures of \$2,000 or less?		85b	N/	Α
_		was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	tion			
		d a waiver for proxy tax owed for the prior year.				
c		· •	85c N/A	ļ		
		· · · · · ·	85d N/A			
			85e N/A			
			85f N/A			
		ne organization elect to pay the section 6033(e) tax on the amount on line 85f?		85g	N/	A
h	If secti	on 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 8	5f to its reasonable	Ì		
•-	estima	te of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		85h	N/	A
86	501(c)		86a N/A	]		
	Gross		86b N/A	1		
			87a N/A	1		
		income from other sources (Do not net amounts due or paid to other				
	source	s against amounts due or received from them.)	87b N/A	1		
88	At any	time during the year, did the organization own a 50% or greater interest in a taxable corporation of	r	1		1
	partne	ship, or an entity disregarded as separate from the organization under Regulations sections				
	301.77	01-2 and 301.7701-3? If "Yes," complete Part IX		88	X.	<del> </del>
89 a	501(c)	(3) organizations. Enter: Amount of tax imposed on the organization during the year under:				
	section	1 4911 ► NONE; section 4912 ► NONE; section 4955 ►	NONI	딕	į	
t	501(c)	(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction				
	during	the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach		Ì		ŀ
	a state	ment explaining each transaction		89b	L	X
c	Enter:	Amount of tax imposed on the organization managers or disqualified persons during the year unde	r			
	sectio	ns 4912, 4955, and 4958	· •			NONE
c	Enter:	Amount of tax on line 89c, above, reimbursed by the organization				NONE
90 a	List th	e states with which a copy of this return is filed NONE			1 4 4	
t	Numb	er of employees employed in the pay period that includes March 12, 2002 (See instructions)			16	556
91	The bo	oks are in care of   BETTY PRICE	Telephone no ► <u>615-3</u>	43-6	601	
	Locate	tat ▶ VANDERBILT UNIVERSITY, NASHVILLE, TN	ZIP+4 ▶ <u>37235</u>			
92	Section	n 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here				▶∟⅃
_	and e	ater the amount of tax-exempt interest received or accrued during the tax year	▶   92		N/Z	
				For	m 990	(2002)

JSA

Paid

Preparer's

**Use Only** 

<u>13-5565207</u>

336-275-3394

Form 990 (2002)

EIN

Phone

signature

Firm's name for yours

address, and ZIP + 4

if self-employed),

27401

STREET

NC

ELM

N.

**GREENSBORO** 

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

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k),

501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

VANDERBILT UNIVERSITY

C/O OFFICE OF ACCOUNTING

Employer identification number

62-0476822 Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
JOSEPH A. SMITH	PROFESSOR			
NASHVILLE, TN 37232-2765	40+	1,032,868.	21,781.	NONE
DAVIS C. DRINKWATER, JR.	PROFESSOR			
ASHVILLE, TN 37232-5734	40+	976,263.	21,104.	NON
ŒVIN_E. STALLINGS	ATHLETIC COACH			
NASHVILLE, TN 37212	40+	967,504.	13,542.	NON
JOHN W. BROCK, III	PROFESSOR			
NASHVILLE, TN 37212	40+	875,487.	17,285.	NON
ROBERT D. BEAUCHAMP	PROFESSOR			
NASHVILLE, TN 37232-2730	40+	723,106.	19,592.	NON
Total number of other employees paid over \$50,000	4721			
- 40 640 50 - 110				
Part II Compensation of the Five Hig (See page 2 of the instructions. L	. L . at Bald Indone	n <b>dent Contracto</b> er individuals or fir	ms). If there are nor	al Services ne, enter "None.")
(See page 2 of the instructions. L.  (a) Name and address of each independent contractor	hest Paid Indeper ist each one (whether	er individuals of the	ms). If there are nor	al Services ne, enter "None.") (c) Compensation
(See page 2 of the instructions. L	hest Paid Indeper ist each one (whether	(b) Type	of service	io, onto itolici )
(See page 2 of the instructions. L  (a) Name and address of each independent contractor  ORACLE CORPORATION	hest Paid Indeper ist each one (whether	er individuals of the	of service	(c) Compensation
(See page 2 of the instructions. L  (a) Name and address of each independent contractor  ORACLE CORPORATION  CHICAGO, IL 60694-1028	hest Paid Indeper ist each one (whether	(b) Type	of service	io, ontor recipi
(See page 2 of the instructions. L  (a) Name and address of each independent contractor  ORACLE CORPORATION  CHICAGO, IL 60694-1028  LEWIS COMMUNICATIONS, INC.	hest Paid Indeper ist each one (whether	(b) Type	of service  UPPORT RSING	(c) Compensation 5 , 247 , 291 .
(See page 2 of the instructions. L  (a) Name and address of each independent contractor  ORACLE CORPORATION  CHICAGO, IL 60694-1028  LEWIS COMMUNICATIONS, INC.  BIRMINGHAM, AL 35242	paid more than \$50,000	(b) Type  SOFTWARE ST  AND LICED	of service  UPPORT RSING	(c) Compensation
(See page 2 of the instructions. L  (a) Name and address of each independent contractor  ORACLE CORPORATION  CHICAGO, IL 60694-1028  LEWIS COMMUNICATIONS, INC.  BIRMINGHAM, AL 35242  ROCKY MOUNTAIN HELICOPTERS, INC.	paid more than \$50,000	(b) Type  SOFTWARE ST  AND LICED	of service  JPPORT ISING	(c) Compensation 5,247,291.
(See page 2 of the instructions. L  (a) Name and address of each independent contractor  ORACLE_CORPORATION	paid more than \$50,000	SOFTWARE ST AND LICEN  ADVERTISING	of service  JPPORT ISING	(c) Compensation 5 , 247 , 291 .

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

Schedule A (Form 990 or 990-EZ) 2002

3,172,401

JSA 2E1210 1 000

201

TRANSCRIPTION SERVICES

154

D T S AMERICA, INC

NASHVILLE, TN 37203

Total number of others receiving over \$50,000 for

Done	2

		Charles on the About Activities (Connected the instructions)			- aye
	rt III	Statements About Activities (See page 2 of the instructions.)		Yes	No
1		ng the year, has the organization attempted to influence national, state, or local legislation, including any			l
	atten	npt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid			l
	or inc	curred in connection with the lobbying activities ▶ \$ 275,583. (Must equal amounts on line 38,			1
	Part \	VI-A, or line I or Part VI-B.)	1	X	
	Orga	inizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other			
	огдаг	nizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of			
	the lo	obbying activities.		1/6 1	( e.
2		ng the year, has the organization, either directly or indirectly, engaged in any of the following acts with any			
		tantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or	5. M	e de la companya de l	
		any taxable organization with which any such person is affiliated as an officer, director, trustee, majority	357		
		er, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining			
		., ., ., ., ., ., ., ., ., ., ., ., ., .	3 25	1	17. 15. 1
		ransactions.) STMT 26	1, 1397		1
a	Sale,	exchange, or leasing of property?	2 <b>a</b>	<u> </u>	-
					ŀ
b	Lend	ling of money or other extension of credit?	2 b		X
		STMT 27			ŀ
C	Furni	ishing of goods, services, or facilities?	2 c	<u> </u>	
		STMT 28			
d	Pavm	nent of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2 d	X	
•	. <b></b>	, , , , , , , , , , , , , , , , , , ,			
_	Tron	sfer of any part of its income or assets?	2 e		x
e	((an	ster or any part or its income or assets: , , , ,			<u> </u>
		and the second s		X	1
3	Does	the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below)	3	X	┢
4	Do y	ou have a section 403(b) annuity plan for your employees?	4.		J
		ch a statement to explain how the organization determines that individuals or organizations receiving grants STMT 29			
or lo	ans fro	om it in furtherance of its charitable programs "qualify" to receive payments.		-	
Da	rt IV	Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)			
The	organi	ization is not a private foundation because it is: (Please check only ONE applicable box.)			
5		A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).			
6		A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)			
7		A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).			
8	$\Box$	A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v).			
۵	Н	A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) Enter the hospital's name	, city,		
•					
4.0		An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)	(1)(A)(	iv)	
10					
		(Also complete the <b>Support Schedule</b> in Part IV-A.)  An organization that normally receives a substantial part of its support from a governmental unit or from the general public			
11a		An organization that normally receives a substantial part of its support from a governmental state of the governmental sta			
		Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)			
11t		A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)	ce		
12		An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gro	35 ' -f		
		receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3%	, OI		
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acq	uired		
		by the organization after June 30, 1975 See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)			
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization	ns		
		described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See			
		section 509(a)(3).)			_
		Provide the following information about the supported organizations. (See page 5 of the instructions.)			_
		(b) Line	numt	er	
		(a) Name(s) of supported organization(s) from	above		_
					-
					-
					_

An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions )

2E1220 1 000

No	art IV-A Support Schedule (Complete only if the: You may use the worksheet in the instruction	you checked a book for converting from	ox on line 10, 11, on the accrual to the	or 12.) <b>Use cash m</b> he cash method of a	ethod of actomot accounting.	PLICABLE
	endar year (or fiscal year beginning in) 🕨		(b) 2000	(c) 1999	(d) 1998	(e) Total
15	Gifts, grants, and contributions received. (Do					
	not include unusual grants. See line 28.)					
16	Membership fees received					
17	Gross receipts from admissions, merchandise					
	sold or services performed, or furnishing of					
	facilities in any activity that is related to the					
	organization's charitable, etc., purpose					
18	Gross income from interest, dividends,					
	amounts received from payments on securities			•		
	loans (section 512(a)(5)), rents, royalties, and					
	unrelated business taxable income (less					
	section 511 taxes) from businesses acquired					
	by the organization after June 30, 1975					
19	Net income from unrelated business					
	activities not included in line 18					
20	Tax revenues levied for the organization's					
	benefit and either paid to it or expended on					
	its behalf					
21	The value of services or facilities furnished to					
	the organization by a governmental unit					
	without charge. Do not include the value of					
	services or facilities generally furnished to the					
	public without charge					
22	Other income. Attach a schedule Do not					
	include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22					
	Line 23 minus line 17					
	Enter 1% of line 23					
		Enter 2% of amount	in column (e), line 24	NOT APPLICA	BLE ▶ 26	1
t	Prepare a list for your records to show the r	name of and amou	ant contributed by	each person (other	erthan a	1
	governmental unit or publicly supported organia					
	amount shown in line 26a. Do not file this list	st with your return	n. Enter the total	of all these excess	amounts ▶ 26	b
C	Total support for section 509(a)(1) test: Enter line 24				▶ 26	
d	Add: Amounts from column (e) for lines: 18	19				
			6b		▶ 26	d
e	Public support (line 26c minus line 26d total)				▶ 26	•
f	Public support percentage (line 26e (numerator) d	ivided by line 26c (d	enominator))		<u> ▶ 26</u> 1	<u> </u>
27	Organizations described on line 12: a For	amounts included	d in lines 15, 1	16, and 17 that	were received	from a "disqualified
	person," prepare a list for your records to sho Do not file this list with your return. Enter the sum	w the name of, a	and total amounts	received in each	year from, each	"disqualified person."
	(2001) (2000)			NOT APPLICA	BLE(1998)	
h	For any amount included in line 17 that was re	eceived from each	person (other than	"disqualified persor	ns"), prepare a lis	t for your records to
•	show the name of and amount received for each	vear that was mo	ore than the larger	of (1) the amount	on line 25 for the	e year or (2) \$5,000.
	(Include in the list organizations described in line the difference between the amount received an	es 5 through 11, as	s well as individuals	s.) Do not file this	sum of these di	turn. After computing
	amounts) for each year:	u the larger amou	ill described in (1)	) Of (2), effect the	3411 01 111000 41	1101011000 (1110 0110000
	(2001)(2000)		(1999)		(1998)	
	\\\\\_\\\_\_\_\_\_\_\_\_		, ,			
c	Add: Amounts from column (e) for lines: 15	10	3			
•	17 20	2		<del></del>	▶ 27	c
d	Add: Line 27a total	and line 27b total		—	▶ 27	d
e	Public support (line 27c total minus line 27d total)				▶ 27	9
f	Total support for section 509(a)(2) test: Enter amount	nt from line 23. colum	n (e)	▶ 27f		
	Public support percentage (line 27e (numerator) d	ivided by line 27f (de	enominator))		> 27	g%
9	Investment income percentage (line 18, column (s	e) (numerator) divide	ed by line 27f (denom	ninator))	▶ 27	h%
28	- Hinneyel Grants: For an organization describe	d in line 10. 11	. or 12 that rec	eived anv unusuai	grants during	1996 UNUUYN ZUUI,
	prepare a list for your records to show, for	each year, the na	ime of the contrit	butor, the date an	d amount of the	e grant, and a brief
AZI.	description of the nature of the grant. Do not file this	s list with your retu	rn. Do not include ti	nese grants in line 10	Schedule A (F	orm 990 or 990-EZ) 2002

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Page 4

# Part V Private School Questionnaire (See page 7 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
30	other governing instrument, or in a resolution of its governing body?	29	X	B. 350
30	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?	30	X	10 m
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during		ĸû,	
	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?	31	x	35.5-3-9
	If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement.)	1 1		
	STMT 30	100	, " d	
			,	- "." - "."
		7		ξ.'.ξ
		, '	ź.	
32	Does the organization maintain the following:		· , 3	ľ.
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	<u> </u>	
		226	x	
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32b		<del>                                     </del>
		32c	x	ŀ
	with student admissions, programs, and scholarships?  I Copies of all material used by the organization or on its behalf to solicit contributions?	32d	×	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to:			
_	Students' rights or privileges?	33a		x
a	Students rights of privileges?	UUU		
h	Admissions policies?	33b		x
•				
С	Employment of faculty or administrative staff?	33c		X
				1
d	Scholarships or other financial assistance?	33d		X
е	Educational policies?	33e		X_
		33f		x
f	Use of facilities?	331		<del>                                     </del>
~	Athletic programs?	33g		x
y	Admono programo:			
h	Other extracurricular activities?	33h		x
				İ
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			Ì
				1
		ľ		
24-	Does the organization receive any financial aid or assistance from a governmental agency? STMT 20	34a	х	ŀ
34a	Does the diganization receive any infantial allo of assistance from a governmental agonomy.	¥78		
ь	Has the organization's right to such aid ever been revoked or suspended?	34b		х
	If you answered "Yes" to either 34a or b, please explain using an attached statement.			
35	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," attach an explanation	35	X	<u></u>

JSA 2E1230 1 000

attempt to influence public opinion on a legislative matter or referendum, through the use of. f Grants to other organizations for lobbying purposes g Direct contact with legislators, their staffs, government officials, or a legislative body Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means 

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Schedule A (Form 990 or 990-EZ) 2002

73394B 1985

art VII	Information Regarding	Transfers To and	Transactions and	Relationships With	Noncharitable
	Exempt Organizations	(See page 12 of th	e instructions )		

51 Did the re 501(c) of	eporting organization direct the Code (other than secti	ly or indirectly engage in any of the foll on 501(c)(3) organizations) or in section	owing with any other organization desc	ribed in	sect	ion
a Transfers	s from the reporting organiz	ation to a noncharitable exempt organi	ration of	•	Yes	No
		• • • • • • • • • • • • • • • • • • • •		51a(i)	168	X
(ii) Oth	er assets	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	a(ii)		
(ii) Other assets			• • • • • • • • • • • • • • • • • • • •	ex(II)		X
		with a noncharitable exempt organization	,	L/15		
(ii) Pur	chases of assets from a no	ncharitable exempt examination	'	b(i)		X
(iii) Per	etal of facilities, equipment	ncharitable exempt organization	· · · · · · · · · · · · · · · · · · ·	b(ii)		x
(iii) Rei	ntar or racinties, equipment,	or other assets	• • • • • • • • • • • • • • • • • • • •	b(iii)		X
(IV) Rei	moursement arrangements			b(iv)		X
(v) Loa	ns or loan guarantees		b(v)		<u> </u>	
(VI) Pen	formance of services of me	mbership or fundraising solicitations		b(vi)		<u>_x</u> _
c Sharing o	of facilities, equipment, mail	ing lists, other assets, or paid employee	s	c		X
		(b) should always show the fair market value	of the			
goods, oth	er assets, or services given by	the reporting organization. If the organization	on received less than fair market value in any			
transaction	n or sharing arrangement, sho	w in column (d) the value of the goods, other	assets, or services received:			
(a)	(b)	(c)	, (d)			
Line no.	Amount involved	Name of noncharitable exempt organization	Description of transfers, transactions, and sha	aring arran	ngemer	nts
N/A			**************************************			
- · · · · · ·						
	<del> </del>			<del></del>		
		<del> </del>				
<del></del>	<del> </del>					
					_	
**						
describe	-	ctly affiliated with, or related to, one or ode (other than section 501(c)(3)) or it edule:		X Yes		] No
	(a)	(b)	(c)			
Na 	me of organization	Type of organization	Description of relationshi	р		
V.U. REAL	ESTATE	501(C)(2) TITLE	UNIVERSITY IS THE SOLE M	EMBER		
HOLDIN	GS, INC.	HOLDING CO.		<del></del>		
	· · · · · · · · · · · · · · · · · · ·					
				<del></del>		
				<del></del>		
SA		<u> </u>				
<b>U</b> F1			Schodula A (Earm 9	90 ar 00	いっちアト	7007

### VANDERBILT UNIVERSITY

FOR TAX YEAR ENDED 06/30/2003 FORM 990 SUPPLEMENTAL INFORMATION

PART I - LINE 8

REALIZED LOSS ON SALE OF INVESTMENTS

-30,839,861.

PART I - LINE 10	SALES	COST OF SALES	Net
UNIVERSITY PRESS	403,556	207,536	196,020
DINING SERVICES	11,646,500	4,430,922	7,215,578
HOSPITAL CAFETERIA	3,882,364	1,495,630	2,386,734
	15,932,420	6,134,088	9,798,332

# PART II - LINE 42 - DEPRECIATION AND PART IV - LINE 57(b) - ACCUMULATED DEPRECIATION

### FIXED ASSETS

LAND AND LAND IMPROVEMENTS	80,272,822.
BUILDINGS	1,170,117,878.
EQUIPMENT	578,133,198.
CONSTRUCTION IN PROGRESS	244,758,406.
TOTAL FIXED ASSETS	2,073,282,304.
LESS: ACCUMULATED DEPRECIATION	-870,263,696.
MET FIXED ASSETS	1,203,018,608.

PLANT AND EQUIPMENT ARE STATED AT COST OR ESTIMATED FAIR MARKET VALUE IF ACQUIRED BY GIFT, LESS ACCUMULATED DEPRECIATION, COMPUTED ON A STRAIGHT-LINE BASIS OVER THE USEFUL LIVES OF THE BUILDINGS AND EQUIPMENT. EQUIPMENT IS REMOVED FROM THE ACCOUNTING RECORDS AT THE TIME OF DISPOSAL. DEPRECIATION EXPENSE FOR THE FISCAL YEAR ENDED 06/30/2003 WAS \$88,247,221.

# PART IV - LINE 51 OTHER NOTES AND LOANS RECEIVABLE

STUDENT LOAN RECEIVABLE 37,157,261.

LESS: ALLOWANCE FOR DOUBTFUL ACCOUNTS -3,134,625.

34,022,636.

FORM 990, PART I - SPECIAL FUNDRAISING EVENTS AND ACTIVITIES

Event	De	Description					
	10-ho	10-hour tefethon					
Childrens Miracle Network Telethon	held	held Memorial					
	Day <	Day weekend					
Radiothon							
Iroquois Steeplechase	horse race	horse race over					
	on one	<u> </u>					
	J	Childrens					
	Mira	Miracle Network				Iroquois	
		Telethon	۳	Radiothon	₹ <u></u>	Steeplechase	Total
Gross Receipts	₩	806,875	€>	\$ 110,547	↔	1,254,912	\$2,172,334
Less: Contributions	₩	806,853	₩	\$ 107,002	4	654,741	\$ 1,568,596
Net Exempt Revenue	€	23	ક્ક	3,545	↔	600,171	\$ 603,738
Less: Direct Expense	8	154,908	8	10,716	8	510,432	\$ 676,056
Net Income (Loss)	s	(154,886)	€	(7,171)	မှ	89,739	\$ (72,318)

0

STATEMENT

### FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

DESCRIPTION		AMOUNT
UNREALIZED GAIN ON INVESTMENTS		51,436,108.
CHANGE IN ESTIMATE FOR DISCONTIN	UED	3,164,164.
<b>OPERATIONS</b>		
UNREALIZED LOSS ON CONTRIBUTIONS		-9,452,500.
MARK TO MARKET ADJUSTMENT		-12,864,000.
	TOTAL	32,283,772.

UNIVERSITY	
VANDERBILT UNIVE	

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

62-0476822

RECIPIENT NAME AND ADDRESS GRANTS PAID	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
Undergraduate students	EDUCATIONAL	67,396,513.
GRADUATE STUDENTS	EDUCATIONAL	35,997,998.
PROFESSIONAL STUDENTS	EDUCATIONAL	18,850,571.

122,245,082.	
TOTAL CONTRIBUTIONS PAID	

FORM 990, PART II - OTHER EXPENSES

FUNDRAISING	1,364,994.	1,364,994.
MANAGEMENT AND GENERAL FT	3,760,372.	3,760,372.
PROGRAM SERVICES	82708966. 25509053.	108218019.
TOTAL	87834332. 25509053.	113343385.
DESCRIPTION	PROFESSIONAL SERVICE CONTRACTS AMORTIZATION	TOTALS

STATEMENT

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE 

EDUCATION, RESEARCH, AND HEALTH CARE



### PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

Vanderbilt University is a privately endowed, coeducational, not-for-profit, nonsectarian institution located in Nashville, Tennessee. Founded in 1873, the University operated under the auspices of the Methodist Episcopal Church South until 1914. Since that time, the University has been governed by an independent, self-perpetuation Board of Trust.

Today, Vanderbilt University is internationally recognized as one of the premier research and teaching universities. Vanderbilt University's undergraduate, graduate and professional programs rank among the finest in the world. The University's 6,300 undergraduate students, 4,600 graduate and professional students, and almost 2,300 full time faculty members work together to support multidisciplinary study, academic research and public service. The University also provides health care services through its medical center, which includes Vanderbilt Hospital and The Vanderbilt Clinic. During the current fiscal year, the Hospital performed 28,643 surgeries, admitted 37,867 patients, served 698,960 outpatients and cared for 71,402 patients in its emergency room.

The University maintains state of the art facilities on its 330-acre campus. Vanderbilt's academic enterprise comprises interdisciplinary programs and centers, as well as ten schools and colleges including: The College of Arts and Science, the Graduate School, the Blair School of Music, the Divinity School, the School of Engineering, the Law School, the School of Medicine, the School of Nursing, the Owen Graduate School of Management and Peabody College of education and human development.

The University is a center for scholarly research, informed and creative teaching and service to the community and society at large. Vanderbilt upholds the highest standards and is a leader in the:

- Quest for new knowledge through scholarship;
- > Dissemination of knowledge through teaching and out reach; and
- > Creative experimentation of ideas and concepts.

In pursuit of these goals, Vanderbilt values most highly:

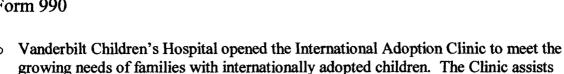
- > Intellectual freedom that supports open inquiry; and
- Equality, compassion, and excellence in all endeavors.

Vanderbilt University has always strived to serve as a national as well as an international leader in teaching, research, patient care and public service. The University's intent on fostering new ideas and new methodologies, on discovering new cures and new methods all stem from its desire to be a great place of learning, a distinguished place of care. Achieving these things is the sole purpose of the University's dedicated faculty, students, staff and other members of the extended Vanderbilt community.

Some of the University's highlights and achievements during the current fiscal year include:

# Vanderbilt University Form 990

children adopted from other countries.



families with medical, developmental and nutritional problems commonly seen in

- o Project GRAD (Graduation Really Achieves Dreams), an educational partnership led by the Inner City Education Foundation, Vanderbilt University and Metro Public Schools, announced its new name "Imagine College". The program, designed to open the door to higher education for inner city students, guarantees scholarship assistance to high school graduates who meet certain requirements.
- o Vanderbilt University Hospital earns a place on the "honor roll" of the nation's best hospitals in rankings released by U.S. News & World Report.
- O Vanderbilt is named among the nation's "most competitive" universities in *Barron's Profiles of American Colleges*. According to Barron's Educational Series, Inc., the schools listed as the most competitive accept "only the best and the brightest students".
- Vanderbilt University Law School received a grant from the U.S. Department of Justice to establish the first domestic violence clinical training program for law students in Middle Tennessee. The Domestic Violence Clinic provides free legal services for victims of domestic violence, sexual assault and stalking.
- O The University opened its new Biological Sciences Building/Medical Research Building III, which is designed to promote study between diverse science disciplines. The state of the art research, laboratories, classrooms and greenhouse will allow undergraduate students an unprecedented degree of access to hands on research projects with faculty, as well as with graduate and professional students.
- Vanderbilt's Blair School of Music received an award from the National Endowment for the Arts to create several new works for the Nashville Ballet.
- O University leadership announced a new Center for the Study of Religion and Culture. The center provides additional resources for the study of religion and critical world issues, like poverty and terrorism, and will better equip the University community to approach these issues from broad, multi-faith perspectives.
- U.S. News & World Report ranked Vanderbilt's School of Medicine 14<sup>th</sup> in the nation for accredited research medical schools.
- The University established a Center for the Americas. The Center provides innovative perspectives on American history, culture and society by bringing together a powerful group of scholars whose research and teaching cuts across the political and geographical boundaries of North, Central and South America.

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### FORM 990, PART IV - INVESTMENTS - SECURITIES

DESCRIPTION	ENDING BOOK VALUE
SHORT-TERM SECURITIES BONDS SECURITIES PARTNERSHIP INVESTMENTS REAL ESTATE, NET OTHER	120,088,542. 420,467,113. 1,049,277,716. 587,149,914. 127,768,486. 16,520,349.
TOTALS	2,321,272,120.

# FORM 990, PART IV - INVESTMENTS - OTHER

DESCRIPTION

ENDING BOOK VALUE \_\_\_\_\_

INTEREST IN TRUSTS HELD BY OTHERS MORTGAGES

46,046,521. 12,950,429.

TOTALS

58,996,950. ============

NOTE PAYABLE

OTHER LONG TERM DEBT

9,508,877.

436,174.

# FORM 990, PART IV - TAX-EXEMPT BOND LIABILITIES

	ENDING
DESCRIPTION	BOOK VALUE
~~~~~~~	
VARIABLE RATE DEBT-1985-2003 SERIES	406,405,000.
FIXED RATE DEBT- 1991-2001 SERIES	192,385,000.
HUD BONDS	1,199,000.

TOTALS 609,934,051.

73394B 1985 706046

DESCRIPTION

\_\_\_\_\_

# FORM 990, PART IV - OTHER LIABILITIES

ENDING BOOK VALUE

\_\_\_\_\_

SECURITIES LENDING PAYABLE ANNUITIES PAYABLE STUDENT LOAN ADVANCES

250,862,267. 33,859,001. 15,135,629.

TOTALS

299,856,897.

# FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN

DESCRIPTION	AMOUNT
FINANCIAL AID EXPENSE	-98,594,513.
UNREALIZED LOSS ON	
CONTRIBUTION RECEIVABLE	<b>-9,452,500</b> .
CHANGE IN ESTIMATE FOR	• •
DISCONTINUED OPERATIONS	3,164,164.
ADJUSTMENT FOR MARK TO MARKET	5,251,255
LOSS ON SWAP	-12,864,000.
TOTAL	-117,746,849.

# FORM 990, PART IV-B - OTHER EXPENSES ON RETURN BUT NOT ON BOOKS

DESCRIPTION -----

AMOUNT

FINANCIAL AID EXPENSE

98,594,513.

TOTAL

98,594,513. 

VANDERBILT UNIVERSITY

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION C	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
GORDON GEE NASHVILLE, TN 37240	CHANCELLOR 40	760,500.	126,709.	NON
HARRY JACOBSON NASHVILLE, TN 37204	V/C HEALTH AFFAIRS 40	1,206,321.	* 33,228.	NONE
WILLIAM SPITZ NASHVILLE, TN 37215	V/C INVEST/TREAS. 40	726,704.	* 310,031.	NONE
MICHAEL SCHOENFELD NASHVILLE, TN 37205	V/C PUBLIC AFFAIRS	330,000.	* 33,282.	NONE
LAUREN BRISKY NASHVILLE, TN 37215	V/C ADMIN/CFO 40	522,500.	* 26,328.	NONE
DAVID WILLIAMS NASHVILLE, TN 37205	V/C AND SECRETARY	524,119.	* 27,271.	NONE
NICHOLAS ZEPPOS NASHVILLE, TN 37205	V/C ACADEMIC/PROVOST 40	567,600.	* 33,312.	NONE
MARTHA R. INGRAM NASHVILLE, TN	CHAIRMAN <1 HOUR	NONE	NONE	NONE
DENNIS C. BOTTORFF NASHVILLE, TN	VICE-CHAIRMAN	NONE	NONE	NONE
DARRYL D. BERGER NEW ORLEANS, LOUISIANA	VICE-CHAIRMAN	NONE	NONE	NO
WILLIAM W. BAIN, JR.	SECRETARY	NONE	NONE	NONE

73394B 1985

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
BOSTON, MA				
MARY BETH ADDERLEY LA JOLLA, CA	TRUSTEE	NONE	NONE	NO
MICHAEL LEWIS AINSLIE PALM BEACH, FL	TRUSTEE	NONE	NONE	NONE
DANIEL M. BARNHARDT LOS ANGELES, CA	TRUSTEE	NONE	NONE	NONE
CAMILLA DIETZ BERGERON NEW YORK, NY	TRUSTEE <1 HOUR	NONE	NONE	NONE
MONROE J. CARELL, JR. NASHVILLE, TN	TRUSTEE <1 HOUR	NONE	NONE	NONE
SHERYLL D. CASHIN WASHINGTON, D.C.	TRUSTEE <1 HOUR	NONE	NONE	NONE
THOMAS F. CONE NASHVILLE, TN	TRUSTEE <1 HOUR	NONE	NONE	NONE
CECIL D. CONLEE ATLANTA, GA	TRUSTEE	NONE	NONE	NONE
BROWNLEE O. CURREY, JR. FRANKLIN, TN	TRUSTEE	NONE	NONE	NONE
MARK F. DALTON GREENWICH, CT	TRUSTEE <1 HOUR	NONE	NONE	NONE

62-0476822

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	NOME	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NC	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE
COMPENSATION	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE
TITLE AND TIME DEVOTED TO POSITION	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR
NAME AND ADDRESS	WILLIAM W. FEATHERINGILL BIRMINGHAM, ALABAMA	JOHN R. HALL LEXINGTON, KY	L. HALL HARDAWAY, JR. HENDERSONVILLE, TN	H. RODES HART BRENTWOOD, IN	JOANNE F. HAYES NASHVILLE, TN	JOHN R. INGRAM NASHVILLE, TN	ORRIN H. INGRAM NASHVILLE, TN	J. HICKS LANIER ATLANTA, GA	REV. EDWARD A. MALLOY, C.S.C. NOTRE DAME, IN	SARAH ANN MC ELVAIN DALLAS, TX	JACKSON W. MOORE

WINDERDIEL ONLYENSILL

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
JAMES H. MORGAN CHARLOTTE, NC	TRUSTEE <1 HOUR	NONE	NONE	NOM
NANCY PEROT MULFORD DALLAS, TX	TRUSTEE <1 HOUR	NONE	NONE	NONE
IBRAHIM, NASMYTH ATLANTA, GA	TRUSTEE <1 HOUR	NONE	NONE	NONE
EDWARD G. NELSON NASHVILLE, TN	TRUSTEE <1 HOUR	NONE	NONE	NONE
FREDERICK B. RENTSCHLER II CAMERON, MT	TRUSTEE <1 HOUR	NONE	NONE	NONE
STEPHEN S. RIVEN NASHVILLE, TN	TRUSTEE	NONE	NONE	NONE
KENNETH L. ROBERTS NASHVILLE, TN	TRUSTEE <1 HOUR	NONE	NONE	NONE
JOE. L. ROBY NEW YORK, NY	TRUSTEE	NONE	NONE	NONE
EUGENE B. SHANKS, JR. GREENWICH, CT	TRUSTEE	NONE	NONE	NONE
MARISSA SHRUM CHATTANOOGA, TN	TRUSTEE	NONE	NONE	NONE

VANDERBILT UNIVERSITY

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

EXPENSE ACCT AND OTHER ALLOWANCES	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NON	NONE
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE
COMPENSATION	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE	NONE
TITLE AND TIME DEVOTED TO POSITION	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE <1 HOUR	TRUSTEE EMERITI	TRUSTEE EMERITI <1 HOUR	TRUSTEE EMERITI
NAME AND ADDRESS	RICHARD H. SINKFIELD ATLANTA, GA	CAL TURNER BRENTWOOD, IN	EUGENE H. VAUGHAN HOUSTON, TX	LEVI WATKINS, JR., M.D. BALTIMOR, MD	DUDLEY BROWN WHITE NASHVILLE, TN	W. RIDLEY WILLS, II FRANKLIN, TN	J. LAWRENCE WILSON ROSEMONT, PA	REBECCA WEBB WILSON MEMPHIS, TN	NELSON C. ANDREWS NASHVILLE, TN	ANDREW B. BENEDICT, JR. NASHVILLE, TN	LEWIS M. BRANSCOMB

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CONCORD, MA		l 		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
MIRIAM MCGAW COWDEN NASHVILLE, TN	TRUSTEE EMERITI <1 HOUR	NONE	NONE	NO
IRWIN B. ESKIND, M.D. NASHVILLE, TN	TRUSTEE EMERITI	NONE	NONE	NONE
FRANK A. GODCHAUX, III ABBEVILLE, LA	TRUSTEE EMERITI <1 HOUR	NONE	NONE	NONE
DELBERT MANN LOS ANGELES, CA	TRUSTEE EMERITI	NONE	NONE	NONE
ALYNE QUEENER MASSEY NASHVILLE, TN	TRUSTEE EMERITI	NONE	NONE	NONE
JUDSON RANDOLPH, M.D. NASHVILLE, TN	TRUSTEE EMERITI	NONE	NONE	NONE
JOHN W. RICH NASHVILLE, TN	TRUSTEE EMERITI <1 HOUR	NONE	NONE	NONE
THOMAS B. WALKER, JR. DALLAS, TX	TRUSTEE EMERITI	NONE	NONE	NONE
JAMES A. WEBB, JR. NASHVILLE, TN	TRUSTEE EMERITI	NONE	NONE	NONE
DAVID K. WILSON NASHVILLE, TN	TRUSTEE EMERITI <1 HOUR	NONE	NONE	NONE
	GRAND TOTALS	4,637,744	. 590,161	* .

<sup>\*</sup>Includes  $378,222^\circ$  of non-qualified deferred compensation awarded during the current fiscal year.

# SCHEDULE A, PART V - EXPLANATION FOR LINE 34A

THE UNIVERSITY PROVIDES FINANCIAL AID, WHICH IS FUNDED BY GIFTS, ENDOWMENT INCOME AND EXTERNALLY SPONSORED AID (INCLUDING GOVERNMENTAL) TO STUDENTS BASED ON NEED AND MERIT. GOVERNMENT ADVANCES TO QUALIFIED STUDENTS ARE FUNDED PRINCIPALLY WITH FEDERAL LOANS TO THE UNIVERSITY UNDER THE PERKINS, NURSING AND HEALTH PROFESSIONS STUDENT LOAN PROGRAMS.

LIABILITY CO.

# FORM 990, PART VI - NAMES OF RELATED ORGANIZATIONS

VU REAL ESTATE HOLDINGS INC - 501(C)(2) TITLE HOLDING CO.

NATIONAL COMMODORE CLUB INC - 501(C)(3) SUPPORTING CORPORATION

VANDERBILT STUDENT COMMUNICATIONS - 501(C)(3) SUPPORTING CORPORATION

LEGEND INTERNATIONAL USA, INC. - NONEXEMPT

ZTIPS, INC. - NONEXEMPT

MEHARRY MEDICAL COLLEGE- VANDERBILT UNIVERSITY SUPPORT FOUNDATION

- 501(C)(3) SUPPORTING CORPORATION

SIGNATURE HEALTH ALLIANCE, INC - NONEXEMPT

VANDERBILT HEALTH SERVICES INC - 501(C)(3) SUPPORTING ORGANIZATION

VANDERBILT- WILLIAMSON CANCER CENTER LLC - WHOLLY OWNED LIMITED

FORM 990, PART VII - PROGRAM SERVICE REVENUE

RELATED OR EXEMPT FUNCTION INCOME	263,634,174. 37,693,606. 19,989,236.	1056692966. 76,193,106.	1454203088.
AMOUNT			
EXCLUSION CODE			. "
AMOUNT	240,297.	6,038,801.	6,279,098.
BUSINESS CODE	611710	621500 446110	
DESCRIPTION	TUITION & FEES ROOM & BOARD AUXILIARY	HEALTH CARE SERVICES COST RECOVERY- RESEARCH	TOTALS

RELATED OR EXEMPT FUNCTION INCOME	8,468,386.	1,594,485. 995,034.	14,092,237.
AMOUNT	7,426,289.		7,426,289.
EXCLUSION CODE	15		
AMOUNT		17,866.	17,866.
BUSINESS CODE		511140	•
DESCRIPTION	EDUCATIONAL SALES/ SERVICES PATENTS/ROYALTIES MEDICAL CENTER	OTHER INCOME PROGRAM INCOME OTHER	TOTALS

STATEMENT 23

FORM 990, PART IX - INFORMATION REGARDING TAXABLE SUBSIDIARIES

ENDING ASSETS	2,346,535.	1,152,978.		5,666,535.	105,759,575.	99, 635, 021.
TOTAL INCOME	10,734.	1,561,002.	181.	1,862,185.	9,026,193.	99,648.
NATURE OF BUSINESS ACTIVITIES	GOLF ACTIV.	MEDICAL SRVC.	INVST. HOLDIN	HEALTHCARE	Investments	Investments
PERCENTAGE OWNERSHIP INTEREST	100.000000	50.00000	100.000000	100.000000 WHOLLY OWNED LLC	92.320000	99.790000
NAME AND ADDRESS EMPLOYER IDENTIFICATION NUMBER	LEGEND INTERNATIONAL USA, INC. 1500 LEGENDS CLUB LANE FRANKLIN, TN 37069	SIGNATURE HEALTH ALLIANCE, INC 618 CHURCH STREET, SUITE 301 NASHVILLE, TN 37219 62-1590293	ZTIPS, INC. 2100 WEST END AVE., SUITE 750 NASHVILLE, TN 37203 65-0769632	VANDERBILT- WILLIAMSON CANCER CENTER LLC NASHVILLE, TN 37203	MARINER COMMODORE FUND LTD GEORGETOWN GRAND CAYMAN, CAYMAN ISLANDS	STINSON CAPITAL PARTNERS II, LP 909 MONTGOMERY ST. SUITE 400 SAN FRANCISCO, CA 94133 94-3264850

# FORM 990, PART IX - INFORMATION REGARDING TAXABLE SUBSIDIARIES

ENDING	15,593,882.
TOTAL INCOME	5,104,120.
NATURE OF BUSINESS ACTIVITIES	Investments
PERCENTAGE OWNERSHIP INTEREST	97.360000
NAME AND ADDRESS EMPLOYER IDENTIFICATION NUMBER	ALTERNATIVE FIXED INCOME FUND 1250 HALLENDALE BEACH BLVD. HALLENDALE, FL 33009 65-0769632

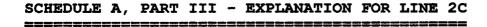
230,155,083.

17,664,063.

TOTAL INCOME

# SCHEDULE A, PART III - EXPLANATION FOR LINE 2A

IN ACCORDANCE WITH THE UNIVERSITY'S TECHNOLOGY DEVELOPMENT POLICIES, A GENERAL OFFICER OF THE UNIVERSITY WAS PROVIDED SHARES OF STOCK IN CORPORATIONS IN WHICH THE UNIVERSITY IS AN INVESTOR.



- 1. THE UNIVERSITY PROVIDES HOUSING AND HOUSEHOLD ASSISTANCE TO THE CHANCELLOR AS A CONDITION OF EMPLOYMENT.
- 2. THE UNIVERSITY PROVIDES AUTOMOBILES AND CLUB MEMBERSHIPS FOR UNIVERSITY BUSINESS PURPOSES FOR SEVERAL OF THE GENERAL OFFICERS, WITH PERSONAL USE REPORTED AS A TAXABLE FRINGE BENEFIT.
- 3. SEVERAL VANDERBILT UNIVERSITY BOARD OF TRUST MEMBERS ALSO SERVE AS OFFICERS AND/OR DIRECTORS OF COMPANIES WITH WHICH THE UNIVERSITY HAS A CONTRACTUAL RELATIONSHIP TO PROVIDE CERTAIN SERVICES SUCH AS TEMPORARY EMPLOYMENT, EXECUTIVE RECRUITMENT, PARKING MANAGEMENT, GENERAL CONSTRUCTION OF FACILITIES, BANKING, AND INVESTMENT SERVICES. ANOTHER BOARD MEMBER SERVES AS AN OFFICER AND DIRECTOR WITH A COMPANY THAT PROVIDES BOOKS AND RELATED MATERIALS TO THE UNIVERSITY. ALL CONTRACTS AND FINANCIAL ARRANGEMENTS BETWEEN AFFECTED INDIVIDUALS AND THE UNIVERSITY ARE UNDERTAKEN AT FAIR MARKET VALUE. PURSUANT TO THE UNIVERSITY'S CONFLICT OF INTEREST POLICIES, THESE ARRANGEMENTS ARE SUBJECT TO REVIEW BY THE UNIVERSITY'S COMPLIANCE OFFICER, THE OFFICE OF GENERAL COUNSEL AND POTENTIAL REVIEW BY THE BOARD OF TRUST AUDIT COMMITTEE.

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D

SEE PART V, FORM 990

# SCHEDULE A, PART III - EXPLANATION FOR LINE 4

GENERALLY SCHOLARSHIPS AND FELLOWSHIPS ARE AWARDED TO VANDERBILT UNIVERSITY STUDENTS BY AN INDEPENDENT COMMITTEE BASED ON NEED, ACADEMIC ABILITY, OR OTHER CRITERIA AS REQUIRED UNDER THE SCHOLARSHIP OR FELLOWSHIP PROGRAM.

### SCHEDULE A, PART V - EXPLANATION FOR LINE 31

THE ORGANIZATION'S NONDISCRIMINATION POLICY, AS ADOPTED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, IS WIDELY DISSEMINATED TO PROSPECTIVE STUDENTS THROUGH PUBLICATIONS IN CATALOGUES, APPLICATION MATERIALS, HANDBOOKS, ETC. COPIES WILL BE MADE AVAILABLE ON REQUEST. IN COMPLIANCE WITH FEDERAL LAW, INCLUDING THE PROVISIONS OF TITLE IX OF EDUCATION AMENDMENTS OF 1972, SECTION 503 OF THE REHABILITION ACT OF 1973, AND THE AMERICANS WITH DISABILITIES ACT OF 1990, VANDERBILT UNIVERSITY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, SEX, RELIGION, COLOR, NATIONAL OR ETHNIC ORIGIN, AGE, DISABILITY, OR MILITARY SERVICE IN ITS ADMINISTRATION OF EDUCATIONAL POLICIES, PROGRAMS, OR ACTIVITIES; ITS ADMISSIONS POLICIES; SCHOLARSHIP AND LOAN PROGRAMS; ATHLETIC AND OTHER UNIVERSITY-ADMINISTERED PROGRAMS; OR EMPLOYMENT.



# Officers Compensation FY 2002/2003 (for Form 990)

General Officer	Reported ompensation art V, Column C)	-	Performance entive/Bonus	(	Current Year Salary
Gorden Gee	\$ 760,500.00	\$	160,500.00	\$	600,000.00
Harry Jacobson	1,206,321.10		406,321.06		800,000.04
William Spitz	726,703.92		170,203.92		556,500.00
Michael Schoenfeld	330,000.00		30,000.00		300,000.00
Lauren Brisky	522,499.96		47,500.00		474,999.96
David Williams	524,119.36		74,119.36		450,000.00
Nick Zeppos	 567,600.00		51,600.00		516,000.00
Total	\$ 4,637,744.34	\$	940,244.34	\$	3,697,500.00

# Form **8868**

(December 2000)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

• if Not	you are	filing for an Additional (	not automatic) 3-Moi	nth Extensi	nly Part I and check this on, complete only Part an automatic 3-month ex	II (on page 2 of this	form).
Not	e: Form s	990-T corporations requ	esting an automatic 6-m	nonth extens	mit original (no copies ion—check this box and co	omplete Part I only .	
retu	rns. Part	porations (including ron Inerships. REMICs and t	n 990-C liiers) must ui rusts must use Form 8	se Form 70 37.36 to real	04 to request an extension Juest an extension of time	in of time to file inco to file Form 1065-1	me tax 066 or 1041
	e or	Name of Exempt Organiz  Vanderbilt U	ation			Employer identifi 62 047682	cation number
File by the Number, street, and room or suite no. If a due date for VII Rox 356310 Station				x, see instru	ctions.		
return	your 1. See ictions.	City, town or post office, Nashville, T	state, and ZIP code. For N 37235-6310	a foreign ad	dress, see instructions.		
Che	ck type	of return to be filed (file	e a separate application	n for each	return):		***************************************
	Form 990 Form 990 Form 990	) )-BL )-EZ	☐ Form 990-T (cor ☐ Form 990-T (sec ☐ Form 990-T (trus ☐ Form 1041-A	poration) . 401(a) or	408(a) trust)	☐ Form 4720 ☐ Form 5227 ☐ Form 6069 ☐ Form 8870	•
• if for t	this is for the whole es and E	r a Group Return, enter e group, check this box ENs of all members the	the organization's four  in the control of the cont	r digit Group It of the gro	ne United States, check to Exemption Number (GE pup, check this box > [	N)  and attach a list	
	to file the		eturn for the organizat	tion named	above. The extension is $\frac{1}{2}$	for the organization's	
2	If this ta	ax year is for less than 1	2 months, check reas	on: 🗌 Init	ial return 🔲 Final return	n   Change in acco	ounting period
3a		application is for Form 9 andable credits. See instruction		, 4720, or	6069, enter the tentative	tax, less any	
b		pplication is for Form 99 nclude any prior year ov			ole credits and estimated	tax payments	
	Balance with FT instructi	D coupon or, if requir	from line 3a. Include yed, by using EFTPS	our paymer (Electronic	t with this form, or, if req Federal Tax Payment	uired, deposit System). See	N/A
Under	r penalties ue, correct	of perjury, I declare that I have , and complete, and that I am	examined this form, including	re and Ver ng accompanyi rm.	<b>ification</b> ng schedules and statements, ar	nd to the best of my know	ledge and belief,
	ture ►	BOAN	io	Title ▶	Controller	Date ► /0-£	31-03
For E	Pananwor	k Peduction Act Notice s	on Instruction		Cat No. 27016D	Form	8868 (12 2000)

Form 8	(12-2000)	Page 2					
Note: O	are filing for an Additional (not automatic) 3-Month Extension, complete only Part II and by complete Part II if you have already been granted an automatic 3-month extension on a part if it is a filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	previously filed Form 8868.					
Part II	Additional (not automatic) 3-Month Extension of Time—Must File Original a						
Type or print	Vanderbilt University	mployer identification number 62 : 0476822					
File by the extended due date for	Office of Accounting, VU Box 356310 Station B	or IRS use only					
filing the return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  Nashville, TN 37235-6310						
	pe of return to be filed (File a separate application for each return):	_					
✓ Form Form	990	Form 5227  Form 8870 Form 6069					
STOP: D	not complete Part II if you were not already granted an automatic 3-month extension on a	previously filed Form 8868.					
• If the	ganization does not have an office or place of business in the United States, check this bo	ox ▶ 🗆					
for the w	ifor a <b>Group Return,</b> enter the organization's four digit Group Exemption Number (GEN)	. If this is and attach a list with the					
	uest an additional 3-month extension of time until	<del></del>					
5 For	calendar year, or other tax year beginning July 1	ne 30 <sub>20</sub> 03					
6 If th	s tax year is for less than 12 months, check reason:  Initial return  Final return						
7 Sta	in detail why you need the extension	••••••					
1. '9''	Additional time is needed to gather information. Selection of Accounting firm to prepare return has not been finalized.						
****							
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions						
tax	b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868						
c Bal with	c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions						
	Signature and Verification						
Under pena it is true, co	ies of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the rect, and complete, and that I am authorized to prepare this form.	e best of my knowledge and belief,					
Signature	Bear Dic Title + Controller	Date > 2 - U-W					
7	Notice to Applicant—To Be Completed by the IRS						
₩ we	ave approved this application. Please attach this form to the organization's return.						
date							
☐ We	We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.						
	We cannot consider this application because it was filed after the due date of the return for which an extension was requested.  Other						
	Ву:						
Director		Date					
	Mailing Address — Enter the address if you want the copy of this application for an addition an address different than the one entered above.	ional 3-month extension EXTENSION APPROVED					
	Name						
Type or print	Number and street (include suite, room, or apt. no.) Or a P.O. box number	FEB 1 2 2001					
huir	City or town, province or state, and country (including postal or ZIP code)	- LINDA WEIGKOFF, FIELD DIKECTOR SUEMISSION PROCESSING, OGDEN					