DLN: 93493084009051

OMB No. 1545-0047

2019

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

		nue Service							
			alendar year, or tax year beging C Name of organization	nning 07-01-2019 , and ending (06-30-20	20	D. Faradan	:_	
	ck if ap dress c	pplicable:	Lynn University Inc						fication number
	me cha	-					59-102	3117	
	tial retu		Doing business as						
	al return, nended	/terminated	Number and street (or P.O. hov if n	nail is not delivered to street address) Roo	om/suite		E Telephor	ne number	
		n pending	3601 North Military Trail	iali is not delivered to street address/	only suite		(561) 2	37-7181	
•			City or town, state or province, cou	ntry, and ZIP or foreign postal code			(000)		
			Boca Raton, FL 33431				G Gross re	ceipts \$ 1	44,312,737
			F Name and address of principa	al officer:	H(a) Is this	a group re	turn for	
			Kevin Ross 3601 North Military Trail		`		dinates?		□Yes ☑ No
			Boca Raton, FL 33431		н(b) Are al	l subordinat	es	☐ Yes ☐No
T Ta:	x-exem	npt status:	✓ 501(c)(3)	(insert no.) 4947(a)(1) or 5	27	includ		ist. (see	instructions)
J W	ebsite	e:▶ ww	w.lynn.edu	(stres) = 15 (a)(1) s. = 3	l l		exemption	•	•
K Forr	n of org	ganization:	✓ Corporation ☐ Trust ☐ Ass	ociation 🔲 Other ►	L Ye	ear of forma	tion: 1 962	M State	of legal domicile: FL
		_							
Pa	art I	Sumi	•						
			scribe the organization's mission on of Lynn University is to provide	or most significant activities: e an innovative, global and personaliz	zed educa	tion that e	nables stud	lents to 1	realize their
e Ce		otential.		., 3					
Ē	-								
e E	=								
Activities & Governance	2 (Check thi	s box ▶ ☐ if the organization di	scontinued its operations or disposed	d of more	than 25%	of its net a	ssets.	
౮ *ర	3 1	Number o	of voting members of the governi	ng body (Part VI, line 1a)				3	11
es es	4 1	Number o	of independent voting members o	f the governing body (Part VI, line 1b)			4	10
<u>ş</u>	5	Total nun	nber of individuals employed in ca	alendar year 2019 (Part V, line 2a)				5	1,615
Ę	6	Total nun	nber of volunteers (estimate if ne	cessary)			•	6	10
~	l			t VIII, column (C), line 12				7a	-8,511
	b	Net unrel	ated business taxable income fro	m Form 990-T, line 39	<u> </u>		•	7b	0
						Pri	or Year		Current Year
ā,	l		ions and grants (Part VIII, line 1h				6,652,	781	17,262,425
Ravenue		-	, , ,)	_		110,685,8	_	115,838,185
æ	l		, , , , , , , , , , , , , , , , , , , ,	lines 3, 4, and 7d)	-		890,	_	610,611
	l		renue (Part VIII, column (A), lines				1,731,4		1,682,466
				ust equal Part VIII, column (A), line 1	2)		119,960,		135,393,687
			nd similar amounts paid (Part IX,	* **	-		25,599,2	2/4	32,282,260
	l		paid to or for members (Part IX, c				=======================================		
S 3	l			enefits (Part IX, column (A), lines 5-1	´ -		53,145,	569	53,361,439
Expenses			• • • • • • • • • • • • • • • • • • • •	mn (A), line 11e)	-				
ੜੋ	l		raising expenses (Part IX, column (D),		- -		42.606	156	41 925 620
	l	•	* * * * * * * * * * * * * * * * * * * *	11a-11d, 11f-24e)	-		43,696,:		41,825,630
	l		enses. Add lines 13–17 (must eq less expenses. Subtract line 18 fr		F		-2,480,		127,469,329 7,924,358
ي ج	19	Revenue	less expenses. Subtract line 10 fr	om me 12	·	Reginning	of Current Y		End of Year
Net Assets or Fund Balances						giig	-		
Back	20 -	Total ass	ets (Part X, line 16)				197,249,	246	202,368,133
₹ <u>₽</u>	21 -	Total liab	ilities (Part X, line 26)				91,711,	142	89,699,651
žŽ	22 [Net asset	s or fund balances. Subtract line	21 from line 20			105,538,	104	112,668,482
	rt II		ature Block						
				nined this return, including accompar e. Declaration of preparer (other thar					
	nowle			or property (certain that					
		L *****	k			202	1 02 25		
cian		Signatu	ure of officer			Date	1-03-25		
Sign Here		VEVIN	DOCC DRECIDENT						
			ROSS PRESIDENT r print name and title						
		'	rint/Type preparer's name	Preparer's signature	Date			PTIN	
Paid	ł			_			ck L if if employed	P0132060	3
	a pare	r F	irm's name ► CROWE LLP	-			n's EIN ► 35-	0921680	
	Onl	ı ⊢	irm's address ▶ 401 East Las Olas Blvo	I Suite 1100		DI:	no no (054)	202 0000	
	J.111	ا ا				Pho	ne no. (954)	202-8600	
			Fort Lauderdale, FL 3	33014230					
Mav t	he IRS	S discuss	this return with the preparer sho	wn above? (see instructions)				✓ ∨	res □No

Form	990 (2	2019)					Page 2
Pa	irt III	Statement of	of Program Service	e Accomplis	hments		
		Check if Schedu	ule O contains a respo	nse or note to	any line in this Part III		🗹
1	Briefly	y describe the org	ganization's mission:				
Colle that design	ges and enables In. The re of pr	d Schools Commi s students to real Lynn 2025 strate ride, loyalty and s	ssion on Colleges (SA ize their potential. Th egic plan contains the supportELEVATE: W	CŚCÓC). The ur e institution aim following strate e will elevate th	niversity's mission is to ns to achieve its mission gic priorities: -ENGAGE ne Lynn experience, bu	cational institution accredited provide an innovative, global n through innovative curriculu : We will engage with our corilding on our strong foundation Read the full strategic plan at	m, technology and campus nstituents to further foster a ns to continually improve and
2		ne organization u	, -	int program ser	vices during the year w	hich were not listed on	. □Yes ☑No
	If "Ye	s," describe thes	e new services on Sch	nedule O.			
3	servic	es?			changes in how it cond	ucts, any program	. 🗆 Yes 🗹 No
	If "Ye	s," describe thes	e changes on Schedul	e O.			
4	Section	on 501(c)(3) and		ns are required	to report the amount of	largest program services, as of grants and allocations to ot	
4a	(Code:	:) (Expenses \$	59,642,611	including grants of \$	26,305,115) (Revenue \$	66,775,959)
	•	dditional Data		, ,			
4b	(Code:	: dditional Data) (Expenses \$	26,725,782	including grants of \$	0) (Revenue \$	33,695,020)
4c	(Code:	:) (Expenses \$	22,750,712	including grants of \$	5,977,145) (Revenue \$	14,698,509)
	See Ac	dditional Data		· ·			
	(Code:	<u> </u>) (Expenses \$	1,299,474	including grants of \$	0) (Revenue \$	2,005,506)
	CONSE THE PE DURIN	ERVATORY OF MUSI ERFORMING ARTS C IG THE SUMMER MC	C. ADDITIONALLY, STUD CENTER. MANY OPPORTUI DNTHS BETWEEN ACADEN	ENTS IN THE DRA NITIES TO SHARE 1IC YEARS FOR TR	MA B.F.A. PROGRAM AND I CULTURE AND IDEAS ARE	DENTS, A PORTION OF THE UNIVER	
4d		program service	es (Describe in Schedu 1,299,474 incl	ule O.) uding grants of	\$) (Revenue \$	2,005,506)
4e	Total	program servi	ce expenses ▶	110,418,5	79		

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Par	Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete	1	Yes Yes	No
2	Schedule A	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D</i> ,Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 2	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 2	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 2	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		N
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
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Pai	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes,"</i> complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28 c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No.
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 4,097		163	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	

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Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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)? If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	4a		No
E ~	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No No
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
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			
	Enter the amount of reserves on hand	ļ		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No

Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.	"No" respo	onse to	
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		✓
Se	ection A. Governing Body and Management			
1.	a Enter the number of voting members of the governing body at the end of the tax year 1a	11	Yes	No
14	If there are material differences in voting rights among members of the governing	∸		
	body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b	10		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	er 2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervior of officers, directors or trustees, or key employees to a management company or other person?	sion 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or momentum of the governing body?	ore 7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year the following:	by		
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	. 8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Reve	nue Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates and branches to ensure their operations are consistent with the organization's exempt purposes?	5, 10 b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	ne 11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independen persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	t		
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exem	on pt		
	status with respect to such arrangements?	16b	Yes	
	ection C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed.			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records: Tom Rooney 3601 North Military Trail Boca Raton, FL 33431 (561) 237-7181			

Part VII

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII $\,$. Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

of reportable compensation from the organiz	ation and any re	elated or	ganiz	zatio	ns.					2,000
• List all of the organization's former dire organization, more than \$10,000 of reportable	le compensatior	from tl								2
See instructions for the order in which to list	·									
Check this box if neither the organization (A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position than o	n (do	(C) not ox, u	t che inles ficer rust	eck moss s pers	ore son	(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
(1) Christine Lynn	2.0									
Chairperson		X		Х				0	0	0
(2) Kevin M Ross	40.0									
President		X		Х				1,020,909	0	225,073
(3) Stephen Snyder	2.0									
Trustee/vice chair		X		Х				0	0	0
(4) Brad Osborne	2.0							_		_
Trustee		X						0	0	0
(5) J Hagood Ellison Jr	2.0									
Trustee		X						0	0	0
(6) James Milby	2.0							0	0	-
Trustee		X						0	0	0
(7) Jan Carlsson	2.0	x						0	0	0
Trustee		_ ^						0	0	0
(8) Jeff Perlman	2.0	x						0	0	0
Trustee (starting 05/2020)								0	0	
(9) Paul Robino	2.0	l x						0	0	0
Trustee								, and the second		
(10) Victoria Rixon	2.0	l x						0	0	0
Trustee								,		
(11) William Rehrig	2.0	l x						0	0	0
Trustee										
(12) Anthony Altieri	40.0			Х				169,184	0	11,355
VP for Student Life	40.0							·		
(13) Christian G Boniforti	40.0			Х				243,334	0	39,443
Chief Information Officer	40.0									
(14) Gareth P Fowles	40.0			Х				245,716	0	15,141
VP for Enrollment Management	40.0			_						
(15) Gregory J Malfitano	40.0			Х				356,765	0	38,734
SVP for Development & Administration (16) Katring Corter Tellison	40.0									
(16) Katrina Carter-Tellison VP for Academic Affairs				Х				218,813	0	39,808
(17) Laurie Levine	40.0									
VP for Business and Finance (through 01/2020)				Х				273,395	0	53,707
1. 15. Basiness and Finance (anough 01/2020)						<u> </u>				Form 990 (2019)

Part VII Section A. Officers, Direct	tors, Trustee:	s, Key	Emp	loy	ees	, and	Hig [/]	hest Compensate	d Employees (cor	ntinued)	Page 8
(A) Name and title	(B) Average hours per week (list any hours for related	than o	one b	oox, t an of ctor/t	ot che unles fficer trust	- 	son a	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-	(F Estim amount o compen from organizat	ated of other sation the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	relai organiz	ted
(18) Michael Antonello	40.0			x			1	201,215	o		20,234
General Counsel (19) Sherrie Weldon	40.0		+-	+	+	+	+	-	 		
Chief Marketing Officer	40.0	<u> </u>		Х				226,843	0		59,858
(20) Thomas Rooney	40.0	,		X	\top			0	0		0
CFO and Treasurer (starting 05/2020) (21) Farideh Farazmand	40.0)	\vdash	 ^	\vdash	 	+-				
Professor		<u> </u>		\perp	\perp	×	'	186,761	. 0		6,364
(22) Gregg C Cox	40.0					×		242,725	0		30,238
Senior Advisor to the President (23) Matthew P Chaloux	40.0		\vdash	+	+	+	+	 	 		
Director, Auxiliary Services	40.0	'	_			Х		174,441	. 0		40,797
(24) Ralph J Norcio	40.0					X		197,259	0		32,848
Associate Dean, Business School (25) Ralph T Good		••••	—	\downarrow	\perp	-	-	- ,			
	40.0					×		199,000	o		21,976
Dean College of Business	ļ	-	+-	+	+	+	+	+	 		
Total (add lines 1b and 1c) Total number of individuals (including of reportable compensation from the		to thos		 :ed a	.bov	▶ ve) who	rec	3,956,360	00,000		635,576
3 Did the organization list any former	officer director	or trust	k		-mpl	lovee,	or hi	ighest compensated	amployee on	Yes	No
line 1a? If "Yes," complete Schedule			•	•	•	• •	•		· · 3	, 	No
4 For any individual listed on line 1a, is organization and related organization	the sum of reposes s greater than \$	ortable (\$150,00	comp 0? <i>If</i>	ensa "Ye:	atior s," c	n and c complet	other te Sc	r compensation from chedule J for such			
individual			٠,	•	•				4	l Yes	
5 Did any person listed on line 1a recei- services rendered to the organization									ividual for 5	;	No
Section B. Independent Contract		• • •		_	_						
 Complete this table for your five high from the organization. Report competence 										nsation	
Name :	(A) and business addre	ess						Desc	(B) ription of services		C) nsation
GERRITTS CONSTRUCTION		-						General Cons			3,301,159
8177 GLADES ROAD BOCA RATON, FL 33434											
EAB								Marketing se	rvices	1	1,441,138
PO Box 603519 Charlotte, NC 282603519 MOGO Marketing & Media LLC								Marketing		 	586,850
21 Tamal Vista Blvd 207											,
Corte Madera, CA 29601 Academy Bus LLC				—	—			Transportation	on	+	208,465
111 Paterson Avenue Hoboken, NJ 07030											
CIEE 300 Fore Street								Educational			195,693
Portland, ME 04101 2 Total number of independent contractor	re (including but	+ not lim	nited	to th	——	listed	abo	ve) who received mo	ore than \$100,000 o	f	
compensation from the organization		, 1100				113200	—	7e) Wild receive		<u> </u>	3 (2240)

Form 9 Part		(2019) Statement	of B	Pavanua						Page 9
Part	VIII				a respo	nse or note to any	line in this Part VIII			🗆
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
	18	a Federated campa	igns	S	1 a			Tevenue		312 - 314
ons, Gifts, Grants Similar Amounts	ı	b Membership dues	5.		1 b					
G. G.	'	c Fundraising even			1c					
Sifts lar /	'	d Related organizat			1d	2 422 270				
ıs, (Ι,	e Government grantsf All other contribution			1e	2,423,379				
Contributions, Gifts, Grants and Other Similar Amounts		and similar amounts above q Noncash contributio	s not	included	1f	14,839,046				
a di		lines 1a - 1f:\$			1 g	684,360				
Cont		h Total. Add lines 1	1a-1	f			17,262,425			
		Children Tuikian and a		46		Business Code	99,665,610	99,665,610		
ē	2a	Student Tuition and re	eiate	d rees		611710		,		
Program Service Revenue	_	Residence hall, room	and l	board fees		611710	14,046,641	14,046,641		
le	С	Camp fees				900099	1,407,384	1,407,384		
ı Ser	d	Campus store sales				451211	345,112	345,112		
ogran	е	Student activity incon	ne			611710	373,438	373,438		
₫.	f	All other program	serv	rice revenue	·.		0	0	0	0
		Total. Add lines 2				115,838,185	1	<u> </u>		ı
	3 :	Investment income similar amounts)		luding divid		nterest, and other	255,53	31	-8,511	264,042
		Income from invest								
	5	Royalties	·	(i) Re		(ii) Personal	<u>* </u> 			
	_		_			, ,	1			
		Gross rents Less: rental	6a		497,459		_			
	_	expenses	6b		151,802					
	С	Rental income or (loss)	6с		345,657	,	o			
	c	Net rental income	or (345,65	57		345,657
	7-	Gross amount		(i) Secu	rities	(ii) Other	_			
	/ a	from sales of assets other than inventory	7a	9,	118,779	3,54	9			
	b	Less: cost or other basis and sales expenses	7b	8,	.767,248	;	0			
	С	Gain or (loss)	7c		351,531	3,54	9			
		d Net gain or (loss)	•		· ·	1	355,08	30		355,080
Other Revenue	8a	Gross income from fu (not including \$ contributions reported	d on I	of line 1c).						
}ev€		See Part IV, line 18			8a					
erF		Less: direct expense Net income or (los			8b sina eve	ents •				
							1			
	9a	Gross income from a See Part IV, line 19		ing activities • •	9a					
	b	Less: direct expens	ses		9b					
	c	Net income or (los	s) fr	om gaming	activiti	es >	_			
	10	aGross sales of inve returns and allowa	entor	ry, less						
	ŀ	returns and allowa Less: cost of goods			10a 10b		_			
		Net income or (los				orv >				
		Miscellaneou	us R	evenue		Business Code				
	11	LaCommunity cultur	ral at	ffairs		90009	9 431,93	431,93	1	
	b	Contract revenue				90009	9 310,00	310,00	0	
	c	Commercial Card	Reba	ate		90009	9 234,42	29 234,42	9	
		A All address					200.11	10 200 11	1	
	_	i All other revenue • Total. Add lines 1:					360,44	19 360,44	9 0	0
		2 Total revenue. Se					1,336,80	09		
		Juli Tovellue: 30	JU 11	.55, 4000115	• •	• • • •	135,393,68	117,174,99	-8,511	964,779 Form 990 (2019)

Form 990 (2019)				Page 10
	atement of Functional Expenses				
	ction $501(c)(3)$ and $501(c)(4)$ organizations must co		_		ımn (A).
Ch	eck if Schedule O contains a response or note to any	y line in this Part IX			<u> </u>
	e amounts reported on lines 6b, d 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	other assistance to domestic organizations and overnments. See Part IV, line 21				
2 Grants and Part IV, line	other assistance to domestic individuals. See	32,282,260	32,282,260		
governmen	other assistance to foreign organizations, foreign ts, and foreign individuals. See Part IV, lines 15				
4 Benefits pa	id to or for members				
	ion of current officers, directors, trustees, and vees	3,717,033	948,419	2,193,267	575,347
defined und	ion not included above, to disqualified persons (as der section $4958(f)(1)$) and persons described in $8(c)(3)(B)$	478,968	176,327	95,128	207,513
7 Other salar	ies and wages	39,742,189	33,407,110	3,811,567	2,523,512
	n accruals and contributions (include section 401 (86) employer contributions)	1,637,284	1,480,328	29,386	127,570
9 Other empl	oyee benefits	4,782,412	4,321,424	86,307	374,681
10 Payroll taxe	es	3,003,553	2,713,050	54,388	236,115
11 Fees for se	rvices (non-employees):				
a Manageme	nt				
b Legal .		220,683		220,683	
c Accounting	<u> </u>	116,936		116,936	
		·		•	
	I fundraising services. See Part IV, line 17				
	management fees	627,606		627,606	
g Other (If lir	ne 11g amount exceeds 10% of line 25, column t, list line 11g expenses on Schedule 0)	1,604,545	806,082	260,442	538,021
	and promotion	2,296,816	1,771,849	8,417	516,550
_	nses	7,189,055	6,688,766	218,822	281,467
•	n technology	1,740,411	317,897	1,421,965	549
		1,740,411	317,037	1,421,505	
15 Royalties	<u> </u>	5,694,706	4,865,041	653,022	176,643
16 Occupancy			1,591,562	75,712	
	of travel or entertainment expenses for any	1,735,124	1,591,562	/5,/12	67,850
·	te, or local public officials	141 167	122 102	10.351	7,633
	s, conventions, and meetings	141,167	123,183	10,351	
20 Interest .	_	1,714,977	1,600,606	75,803	38,568
•	o affiliates	0.564.000	0.022.447	422.602	215.010
•	n, depletion, and amortization	9,561,038	8,923,417	422,603	215,018
23 Insurance	-	2,749,634	2,602,404	97,870	49,360
miscellaned exceeds 10	nses. Itemize expenses not covered above (List bus expenses in line 24e. If line 24e amount % of line 25, column (A) amount, list line 24e n Schedule O.)				
·	ent Expenses	1,448,564	1,405,400	43,164	
b Student p	programming	780,033	764,418	9,566	6,049
c Study tou	irs/instructional fees	803,038	803,038		
d Cost of go	pods sold at campus store	167,064	167,064		
e All other	expenses	3,234,233	2,658,934	312,807	262,492
25 Total func	tional expenses. Add lines 1 through 24e	127,469,329	110,418,579	10,845,812	6,204,938
reported in	s. Complete this line only if the organization column (B) joint costs from a combined I campaign and fundraising solicitation.				

Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).

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2

17

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21

23

24

25

26

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28

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33

Liabilities 22

Fund Balances

ō 29

Assets 30 12,200

11,290,939

5,256,931

1,762,689

2,121,072

333.020

275,472

138,199,276

2,934,107

30,904,708

766,974

8,510,745

7,284,148

11,887,073

55.472.550

10,066,967

4,988,913

89.699.651

69.950,085

42,718,397

112,668,482

202,368,133

Form 990 (2019)

202,368,133

(B)

1,683,162

1.889.765

394.529

457,700

141,537,970

7,587,795

29.496.714

852,194

123,540

197,249,246

7,991,274

14,007,488

65.699.430

146,164

3,866,786

91.711.142

75,959,730

29,578,374

105,538,104

197,249,246

0 13

0 5

0 6

4

7

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10c

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Page **11**

Beginning of year End of year 21,200 1 Cash-non-interest-bearing 7,254,863 2 Savings and temporary cash investments . . . 5,949,814 3

3 Pledges and grants receivable, net . . . Accounts receivable, net Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under

Check if Schedule O contains a response or note to any line in this Part IX

section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Notes and loans receivable, net . . . Assets Inventories for sale or use . .

Prepaid expenses and deferred charges . 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D

10a 10b

261,164,656 122,965,380

Less: accumulated depreciation Investments—publicly traded securities . Investments—other securities. See Part IV, line 11 . . . Investments—program-related. See Part IV, line 11 . Intangible assets .

Other assets. See Part IV, line 11 . . .

11 12 13 14 15 16

Total assets. Add lines 1 through 15 (must equal line 34) . Accounts payable and accrued expenses . Grants payable .

Deferred revenue . . . Tax-exempt bond liabilities . . . Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here <a> \square and

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \\ \text{and} \end{align*}

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

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.

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

3a Yes

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form 990 (2019)

Additional Data

Software ID: 19010655

Software Version: 2019v5.0

EIN: 59-1023117

Name: Lynn University Inc

Form 990 (2019)

Form 990, Part III, Line 4a: THE UNIVERSITY OFFERS BACHELOR'S, MASTER'S AND A DOCTORAL DEGREE. THE ACADEMIC PROGRAM IS DESIGNED FOR TRADITIONAL-AGED STUDENTS. AS WELL AS A GROWING POPULATION OF ADULT LEARNERS. LYNN UNIVERSITY HAS APPROXIMATELY 3,250 STUDENTS FROM NEARLY 100 COUNTRIES AND NEARLY ALL 50 STATES. THE UNIVERSITY OFFERS 48 UNDERGRADUATE MAJORS AND 34 GRADUATE SPECIALIZATIONS. LYNN UNIVERSITY IS PROUD OF ITS TRADITION OF EDUCATING MEN AND WOMEN WHO ASSUME POSITIONS OF RESPONSIBILITY AND BECOME LEADERS IN THEIR CHOSEN PROFESSIONS. (CONTINUED ON SCHEDULE O)

Form 990, Part III, Line 4b: A PROGRAM OF ACTIVITIES COMPLEMENTS THE ACADEMIC CURRICULUM. STUDENTS CHOOSE THOSE ACTIVITIES THAT WILL CONTRIBUTE TO THEIR PERSONAL DEVELOPMENT AND ENJOYMENT - STUDENT GOVERNMENT, SERVICE CLUBS, SPORTS, SOCIAL FRATERNITIES, AND NUMEROUS SPECIAL INTEREST ORGANIZATIONS.

(CONTINUED ON SCHEDULE O.)

THE UNIVERSITY MAINTAINS SIX RESIDENCE HALLS THAT PROVIDE FULL LIVING ACCOMMODATIONS FOR THE UNDERGRADUATE AND GRADUATE STUDENT POPULATION. EACH ROOM IS FURNISHED TO MEET STUDENTS' NEEDS, INCLUDING TV CABLE AND WIRELESS INTERNET SERVICE. STUDENTS LIVING ON CAMPUS ARE REQUIRED TO BE ON THE UNIVERSITY MEAL PLAN. SODEXO IS THE FOOD SERVICE VENDOR. COMMUTER STUDENTS. FACULTY. STAFF AND VISITORS CAN PURCHASE BLOCK MEAL PLANS.

THE LYNN UNIVERSITY CAMPUS STORE OFFERS SCHOOL-BRANDED CLOTHING, ACCESSORIES, AND VARIOUS OTHER SUPPLIES.

Form 990, Part III, Line 4c:

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -		DLN: 9	DLN: 93493084009051					
SCI		ULE A	- Dublia (Charity Statu	e and Dul	olic Supp	ort	OMB No. 1545-0047				
	m 99			rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2019				
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i			ormation.	Open to Public Inspection				
Nam	e of th	nue Service he organiza ity Inc	tion				Employer identific					
Lynn (Jniversi	ity Inc					59-1023117					
	rt I		for Public Charity State				See instructions.					
_	rganiz		a private foundation because	•	•							
1		•	onvention of churches, or as									
2	✓		scribed in section 170(b)(`	, ,						
3		A hospital o	or a cooperative hospital serv	vice organization desc	ribed in section	170(b)(1)(A)(iii).					
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's				
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, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).					
7			ation that normally receives a 'O(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the gener	al public described in				
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)						
9			ural research organization de rant college of agriculture. So					ege or university or a				
10		from activit investment	ation that normally receives: ties related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ctions—subject to ceres taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross				
11		An organiza	ation organized and operated	d exclusively to test fo	r public safety. S	See section 509	(a)(4).					
12		more public	ation organized and operated ly supported organizations on through 12d that describes	described in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a					
а		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by					
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar								
c		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio				ted with, its				
d		Type III n	on-functionally integrated integrated integrated. The organization in You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar					
e		Check this	box if the organization received Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally				
f	Enter			· · · · · · · · · · · ·	-		<u> </u>					
g	Provi	de the follow	ing information about the su	pported organization(s).							
	(i) N	Name of supp organization		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
					Yes	No						
Tota			tion Act Notice, see the Ir		Cat. No. 11285		 Schedule A (Form 9					

Schedule A (Form 990 or 990-FZ) 2019

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
•	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support		1				Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	ritvate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

6

7

8

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,	
	describe the designation. If historic and continuing relationship, explain.	1

Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described

in section 509(a)(1) or (2). 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.

3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. 3b

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or 4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support

3с

10b

Schedule A (Form 990 or 990-EZ) 2019

to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI.

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

which the supporting organization also had an interest? If "Yes," provide detail in Part VI. 9c

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below. 10a

	edule A (101111 330 01 330 E2) 2013			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	Total annual distributions. Add lines 1 through 6.	

7 Total annual distributions. Add lines 1 through 6.						
8 Distributions to attentive supported organizations to wh details in Part VI). See instructions	sive (provide					
9 Distributable amount for 2019 from Section C, line 6	Distributable amount for 2019 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount						
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019			
1 Distributable amount for 2019 from Section C, line 6						
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI).						

8 Distributions to attentive supported organizations to wh details in Part VI). See instructions							
9 Distributable amount for 2019 from Section C, line 6							
10 Line 8 amount divided by Line 9 amount							
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019				
1 Distributable amount for 2019 from Section C, line 6							
Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.							
3 Excess distributions carryover, if any, to 2019:							
a From 2014							
b From 2015							
c From 2016		-					

10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			

h Applied to 2019 distributable amount i Carryover from 2014 not applied (see

j Remainder. Subtract lines 3g, 3h, and 3i from 3f. 4 Distributions for 2019 from Section D, line 7:

a Applied to underdistributions of prior years **b** Applied to 2019 distributable amount c Remainder. Subtract lines 4a and 4b from 4.

instructions)

d Excess from 2018. e Excess from 2019.

\$

5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2015		
b Excess from 2016	_	
c Excess from 2017	·	·

Schedule A (Form 990 or 990-EZ) (2019)

Schedule A (hedule A (Form 990 or 990-EZ) 2019							
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test							
990 Sched	dule A, Supplemen	tal Information	-					
Ret	urn Reference	Explanation]					
Schedule A Explanation	, Part II, Line 3 of filing	TO QUALIFY FOR LIMITED DONOR DISCLOSURE UNDER THE SPECIAL RULE ON SCHEDULE B, THE PUBLIC S UPPORT TEST HAS BEEN COMPLETED TO DEMONSTRATE THE UNIVERSITY MEETS THE QUANTITATIVE SUPPOR T TEST UNDER SECTION 509(A)(1) OF THE INTERNAL REVENUE CODE, WHICH REQUIRES AN ORGANIZATIO N TO RECEIVE A SUBSTANTIAL PART OF ITS SUPPORT FROM A GOVERNMENTAL UNIT OR FROM THE GENERA L PUBLIC.						

Return Reference	Explanation
Schedule A, Part II, Line 10 Other Income	DESCRIPTION - GROSS INCOME FROM FUNDRAISING EVENTS, COLUMN A - 48058.0, COLUMN B - 58485.0, COLUMN C - 58562.0, COLUMN D - 56014.0, COLUMN E - 0.0, COLUMN F - 221119.0; DESCRIPTION - GROSS INCOME FROM GAMING, COLUMN A - 6677.0, COLUMN B - 6097.0, COLUMN C - 4545.0, COLUMN D - 5060.0, COLUMN E - 0.0, COLUMN F - 22379.0; DESCRIPTION - COMMUNITY CULTURAL AFFAIR

990 Schedule A, Supplemental Information

F - 3108787.0:

MN D - 5060.0, COLUMN E - 0.0, COLUMN F - 22379.0; DESCRIPTION - COMMONITY CULTURAL AFFAIR
S, COLUMN A - 436357.0, COLUMN B - 464193.0, COLUMN C - 431999.0, COLUMN D - 465841.0, COL
UMN E - 431931.0, COLUMN F - 2230321.0; DESCRIPTION - OTHER INCOME, COLUMN A - 313063.0, C
OLUMN B - 466427.0, COLUMN C - 506107.0, COLUMN D - 918312.0, COLUMN E - 904878.0, COLUMN

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

DLN: 93493084009051

OMB No. 1545-0047

Supplemental Financial Statements

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

Open to Public

Internal Revenue Service

(Form 990)

Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization **Employer identification number** Lynn University Inc 59-1023117 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 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? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 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:

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

 ${f c}$ Leasehold improvements

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

e Other . .

Sche	edule D (Form 990) 2019							Page 2
Par	t IIII Organizations M	aintaining Collections o	of Art, Histo	rical Treas	ures, or Othe	er Similar As	sets (con	tinued)
3	Using the organization's acq items (check all that apply):	juisition, accession, and other :	records, checl	cany of the f	ollowing that are	e a significant ι	ise of its co	llection
а	✓ Public exhibition		d	Loai	n or exchange p	rograms		
b	Scholarly research		е	☐ Oth	er			
С	✓ Preservation for future	e generations						
4	Provide a description of the Part XIII.	organization's collections and	l explain how t	hey further th	ne organization's	exempt purpo	se in	
5		anization solicit or receive do nds rather than to be maintai					☐ Yes	☑ No
Pa		todial Arrangements. ganization answered "Yes	" on Form 99	0, Part IV,	line 9, or repo	rted an amou	ınt on For	n 990, Part
1a		t, trustee, custodian or other X?					☐ Yes	□ No
b	If "Yes." explain the arrange	ement in Part XIII and comple	ete the followin	g table:		Δ	mount	
C	, ,			-	1c	^		
d								
е		r						
f								
2a	-	an amount on Form 990, Pa				· liability2		 □ No
_	•	,	,			•	_	□ NO
b			e if the explana	ition has bee	n provided in Pa	rt XIII	Ш	
- 6		ganization answered "Yes	" on Form 99	0, Part IV,	line 10.			
		(a) Curre		Prior year	(c) Two years ba	ck (d) Three yea	ars back (e)	Four years back
1 a	Beginning of year balance .	27	,608,363	26,639,336	25,875,7	764 24,	031,367	24,273,813
b	Contributions		,112,039	969,027	486,1		965,224	658,401
C	Net investment earnings, gair	ns, and losses	,407,994	348,743	1,558,7	700 2,	068,241	-900,847
d	Grants or scholarships		730,664	187,077	676,9	75	625,584	
е	Other expenditures for faciliti and programs	es	637,254	161,666	604,3	313	563,484	
f	Administrative expenses .							
g	End of year balance		,760,478	27,608,363	26,639,3	336 25,	875,764	24,031,367
2 a	Provide the estimated perce Board designated or quasi-e	entage of the current year endendowment > 0.87 %	d balance (line	1g, column (a	a)) held as:			
b	Permanent endowment >	89.17 %						
С	Temporarily restricted endo	wment ▶ 9.96 %						
	The percentages on lines 2a	, 2b, and 2c should equal 10	0%.					
3a	Are there endowment funds organization by:	not in the possession of the	organization th	at are held a	nd administered	for the		Yes No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)) No
b	. ,,	lated organizations listed as i	•				3b	
4		ended uses of the organizatio	n's endowmen	t funds.				
Pa	rt VI Land, Buildings, Complete if the or	and Equipment. ganization answered "Yes	" on Form 99	0. Part IV	line 11a. See I	Form 990. Pa	rt X. line 1	0.
	Description of property	(a) Cost or other basis (investment)	(b) Cost or oth					Book value
12	Land	110,000		1,145,045	5			1,255,045
	Buildings	113,000		192,307,145		68,226,228		124,080,917
		i .	i .		1			

52,724,587

14,877,879

7,792,583

5,070,731

138,199,276

44,932,004

9,807,148

	Complete if the organization answered "Yes" on		e 11b.See Form 990,	Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value		od of valuation: f-year market value
	Il derivatives			
(3) Other _	ive investments	30,004,700		
(B)	ve investments	30,904,708		<u>F</u>
(C)				
(D)				
(E)				
(F)				
(G)		+		
(H)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)	▶ 30,904,708		
Part VIII		•	2 11c See Form 990	Part V line 13
	(a) Description of investment	10mm 990, Farc 1v, mie	(b) Book value	(c) Method of valuation:
				Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col.(B) line 13.)		•	
Part IX	Other Assets. Complete if the organization answered 'Yes' on I	Form 990, Part IV, line	11d. See Form 990, Pa	rt X, line 15.
(1)	(a) Description	on		(b) Book value
(2)				
(3)				
(4)				
(5) ————				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	other Liabilities.			•
Fait X	Complete if the organization answered 'Yes' on		11e or 11f.See Form	990, Part X, line 25.
1.	(a) Description of	liability		(b) Book value
	income taxes compensation payable			775,000
(3) Capital leases payable			1,307,176	
(4) Due to Digital Media Arts College (5) Financial derivatives			2,906,737	
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col.(B) line 25.)			4,988,913
	or uncortain tay positions. In Bart VIII, provide the toyt	C	anization's financial state	

2

а

b

1

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Schedule D (Form 990) 2019

Page 4

1,684,698

100,156,945

94,711,265

151,802

94,559,463

32,909,866

127,469,329

Schedule D (Form 990) 2019

2c Recoveries of prior year grants d Other (Describe in Part XIII.) 2d 151,802

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

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Total expenses and losses per audited financial statements

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities . .

Prior year adjustments

Subtract line 2e from line 1

Add lines **4a** and **4b**

Supplemental Information

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

Net unrealized gains (losses) on investments

Donated services and use of facilities

2a

2b

2a 2b

2c

2d

4a

4b

Explanation

e 2e Subtract line 2e from line 1 3 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a 627,606 4b 34,609,136 b

Add lines **4a** and **4b** 4c C Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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

35,236,742 135,393,687 Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2e

3

4c

5

1,532,896

151,802

627,606

32,282,260

hedule D (Form 990) 2019		Page 5
Part XIII	Supplemental Info	rmation (continued)
Return Reference		Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: 19010655 **Software Version:** 2019v5.0

EIN: 59-1023117

Name: Lynn University Inc

Supplemental Information

Return Reference	Explanation
Collections of art - description of collections	The University has a collection of African Art, displayed in the library. The collection of African Art includes sculptures, carvings and textile arts, which are displayed in open areas of the University library for the enjoyment of the public. The study of these pieces is any intercept and into courses in art history, art appreciation and Intercultural studies.

Supplemental Information	
Return Reference	Explanation
funds	The University's endowment consists of approximately 70 individual funds established for a variety of educational purposes, scholarly development, and to enhance student life on ca mpus. Its endowment includes both donor-restricted endowment funds and funds, classified b y the Board of Trustees, to function as endowments and to further these goals.

Supplemental Information		
Return Reference	Explanation	
Schedule D, Part X, Line 2 FIN 48 (ASC 740) footnote	The University is exempt from federal income taxation as defined by Sections 501(c)(3) of the Internal Revenue Code and is generally exempt from state income taxes under the provis ions of the Florida Nonprofit Corporation Act. Therefore, no provision for income taxes has been reflected in the accompanying financial statements. Management evaluated the University's tax positions and concluded that the University had taken no uncertain tax position s that require adjustment to the financial statements to comply with the provisions of the Income Taxes Topic of the Financial Accounting Standards Board Accounting Standards Codif	

ication (FASB ASC).

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 2(d) Other revenues in audited financial statements not in form 990	Rental Expenses - 151802

_

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XI, Line 4(b) Other revenues in form 990 not in audited financial statements	Student Aid - 32282260 LOSS ON FINANCIAL DERIVATIVES - 2315980 LOSS ON CHANGE OF VALUE OF SPLIT INTEREST AGREEMENT - 10896

Cupplemental Information

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 2(d) Other expenses in audited financial statements not in form 990	Rental Expenses - 151802

_

Supplemental Information	
Return Reference	Explanation
Schedule D, Part XII, Line 4(b) Other expenses in form 990 not in audited financial statements	Student Aid - 32282260

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493084009051 OMB No. 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Go to www.irs.gov/Form990EZ for the latest information. Inspection Department of the Treasury Namel Retherosganization **Employer identification number** Lynn University Inc 59-1023117 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, 1 Yes 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? Yes 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," Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Yes **d** Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain. If you need more space, use Part II. Does the organization discriminate by race in any way with respect to: 5a Nο **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? . 5c Νo **d** Scholarships or other financial assistance? . 5d Νo e Educational policies? . . 5e No f Use of facilities? . . 5f No **g** Athletic programs? 5g Νo 5h Νo 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? Yes 6a b Has the organization's right to such aid ever been revoked or suspended? No If you answered "Yes" to either line 6a or line 6b, explain on Part II. 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II. Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Cat. No. 50085D Schedule E (Form 990 or 990-EZ) (2019)

Page 2

Schedule E (Form 990 or 990EZ) (2019)

efile GRAPHIC print - DO NOT PROCESS DLN: 93493084009051 As Filed Data -OMB No. 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2019 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** Lvnn University Inc. 59-1023117 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. Activites per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (such as, program service, describe for and investments region and independent fundraising, program specific type of in the region contractors in the services, investments, grants service(s) in the region region to recipients located in the region) See Add'l Data 743.038 3a Sub-total . b Total from continuation sheets to Part I . . . 743,038 c Totals (add lines 3a and 3b)

	uplicated if addit	(c) Number of		(a) Mannay of as -1-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	(b) Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sche	dule F (Form 990) 2019		Page 4
Pai	rt IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	⊻ Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	□Yes	✓ No
		□ 1e5	E 140
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)		
		✓ Yes	∐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(see Instructions for Form 6865)	☐Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713; don't file with Form 990)	☐ Yes	✓ No

Part V Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. 990 Schedule F, Supplemental Information	Schedule F	chedule F (Form 990) 2019 Page				
990 Schedule F, Supplemental Information	Part V	Provide the in amounts of in method); and	nformation required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method nvestments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting d Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide			
Return Reference Explanation	Returr	n Reference	Explanation			

Return Reference	Explanation
Schedule F, Part V Method Used to Account for	The University accounts for revenue and expenditures on the accrual basis. Direct expenditures for study tours are tracked separately. Description of Study Abroad Program: Lynn University offers its students a variety of study abroad opportunities all around the world.
Expenditures	These programs provide Intercultural and historical perspectives, enhancing the educational mission of the school.

Additional Data

Central America and the

East Asia and the Pacific

Caribbean

Software ID: 19010655 Software Version: 2019v5.0 **EIN:** 59-1023117

Name: Lynn University Inc

Form 990 Schedule F Par	t 1 - Activities	Outside The C	Inited States
(a) Region	(b) Number of	(c) Number of	(d) Activities cor

(a) Region	(b) Number of	(c) Number of	(a) Activities co
	offices in the	employees or	in region (by ty
	region	agents in	fundraising, p
		region	services, gra

gram

STUDY TOURS

y listed in (d) am service, describe specific type of service(s) in region

(f) Total expenditures for region

53,100

142,002

offices in the	employees or	in region (by type)
region	agents in	fundraising, prog

0

side ille c	mileu States
Number of	(d) Activities conducted

0 Program Services

J	nited	States
	(d) A	ctivities conducted

States	
tivities conducted on (by type) (i.e.,	

STUDY TOURS AND

SEMESTER ABROAD

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (f) Total expenditures (d) Activities conducted offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program services, grants to service(s) in region reaion recipients located in the reaion) Europe (Including Iceland and 0 | Program Services 547,936 ISTUDY TOURS AND Greenland) SEMESTER ABROAD

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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I

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

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

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

2019

DLN: 93493084009051

Open to Public Inspection

nternal Revenue Service		P GO to WII	101	the latest illioi mati	SIII.		
lame of the organization						Employer identific	cation number
ynn University Inc						59-1023117	
Part I General Inform	nation on Grants	and Assistance					
 Does the organization main the selection criteria used Describe in Part IV the organization Part II Grants and Other 	to award the grants ganization's procedur	or assistance? res for monitoring the u	se of grant funds in the U	nited States.			✓ Yes □ No
that received more	than \$5,000. Part II	can be duplicated if ad	ditional space is needed.	ents. Complete ii the o	rganization answered Tes	on Form 990, Part IV, line	: 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
7)							
(8)							
9)							
10)							
11)							
(12)		_					

(Form 990)

Department of the

Page 2

Schedule I (Form 990) 2019

(2) ACADEMIC SCHOLARSHIP AWARDS 1498 16,420,133 (3) NEED BASED SCHOLARSHIP AWARDS 2235 11,243,060 (3)

(4) (5)

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Return Reference Explanation

THE UNIVERSITY AWARDS GRANTS AND LOANS BASED ON A SCHOLARSHIP PROGRAM AND THE FEDERAL GOVERNMENT REQUIREMENTS FOR ALL PROGRAMS. THE

FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) MUST BE FILLED OUT AND ELIGIBILITY IS DETERMINED BASED ON THE INFORMATION PROVIDED. THE

(6) (7)

IGRANT AWARDED IS CREDITED TO THEIR TUITION ACCOUNT AT LYNN UNIVERSITY.

Schedule I (Form 990) 2019

Schedule I, Part I, Line 2 Procedures for monitoring use of

grant funds.

efil	e GRAPHIC pr	int - DO NOT PROCESS As	Filed Data	a -	DLN: 934	9308	4009	051
Sch	edule J	Com	pensati	ion Information	ОМ	1B No.	1545-0	0047
(For	n 990)	For certain Officers,	2019					
		► Complete if the organiz	zation answ	ated Employees vered "Yes" on Form 990, Part IV, li	ne 23.	ZU	115	•
Depar	tment of the Treasury	► Go to <u>www.irs.gov/F</u>		to Form 990. instructions and the latest informa	tion.		o Pul	
	al Revenue Service ne of the organiza	ation		T E.	mployer identificat		ectio	
	n University Inc	auon				ion ne	illibei	
D a	rt I Questi	ons Regarding Compensation	•		9-1023117			
Га	Questi	ons Regarding Compensation	1				Yes	No
1a				the following to or for a person listed on the following to or for a person listed on the following these			100	
	First-class	s or charter travel	\checkmark	Housing allowance or residence for pe	rsonal use			
	_	companions		Payments for business use of personal				
		nification and gross-up payments	✓	Health or social club dues or initiation				
	☑ Discretion	nary spending account	Ш	Personal services (e.g., maid, chauffer	ur, chef)			
b				follow a written policy regarding payme ve? If "No," complete Part III to explain		1b	Yes	
2		ation require substantiation prior to			1 - 2	2	Yes	
	directors, truste	es, officers, including the CEO/Exect	utive Director	r, regarding the items checked on Line	la?			
3	organization's C	EO/Executive Director. Check all tha	at apply. Do r					
	used by a relate	ed organization to establish compens	sation of the (CEO/Executive Director, but explain in F	Part III.			
	•	ation committee		Written employment contract				
		ent compensation consultant	✓	Compensation survey or study				
	✓ Form 990	of other organizations	✓	Approval by the board or compensatio	n committee			
4	During the year related organiza		Part VII, Se	ction A, line 1a, with respect to the filin	g organization or a			
а	Receive a sever	ance payment or change-of-control	payment? .			4a		No
b	Participate in, o	r receive payment from, a suppleme	ntal nonqual	ified retirement plan?		4b	Yes	
c	•			nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and pro	ovide the app	olicable amounts for each item in Part II	1.			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) org	ganizations	must complete lines 5-9.				
5	For persons liste	ed on Form 990, Part VII, Section A, ontingent on the revenues of:	-	•				
а	The organization	1?				5a		No
b						5b		No
	If "Yes," on line	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section A, ontingent on the net earnings of:	line 1a, did	the organization pay or accrue any				
а	The organization	1?				6a		No
b						6b		No
	•	6a or 6b, describe in Part III.						
7				the organization provide any nonfixed rt III		7		No
8	subject to the in		Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," desc				
9	If "Yes" on line	8, did the organization also follow th	e rebuttable	presumption procedure described in Re	gulations section	8		No
For F		iction Act Notice, see the Instruc			53T Schedule J		9901	2019

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 on Schedule J. report compensation from the organization on row (i) and from related organizations, described in the

For each individual whose compensation must be reported on Schedule J, report instructions, on row (ii). Do not list any individuals that are not listed on Form 99	compen: 30. Part	sation fro VII.	om the organization	on row (i) and fro	m related organiza	tions, described i	n the		
Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the to	tal amou	ınt of Fo	rm 990, Part VII, Se	ection A, line 1a, ap					
(A) Name and Title	((B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other	(D) Nontaxable benefits	columns	(F) Compensation in	
	(i) comp	Base ensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table									
	_								
	+-								

Schedule J (Form 990) 2019

Kevin Ross has a discretionary spending account which is part of his employment contract and is included in his taxable compensation. Schedule J. Part I. Line 1a Discretionary spending account

The President of Lynn University is required to occupy university-owned housing as a condition of employment. The annual fair rental value of the housing and Schedule J, Part I, Line 1a Housing allowance or residence for personal use utilities of \$84,030 is Included in the President's compensation as a nontaxable benefit. The benefit is excluded from taxable compensation pursuant to IRC Section Schedule J, Part I, Line 1a Health or

The University pays for country club memberships for the purpose of fundraising and development for Greg Malfitano, SVP for Development and Administration. It social club dues or initiation fees was determined that 100% of such fees paid during the year were related to business use. The entire amount of these fees was treated as taxable compensation to the individual

Schedule J, Part I, Line 4b The Lynn University board of trustees engaged compensation and benefits experts to develop a reasonable executive compensation strategy to encourage retention Supplemental nonqualified retirement and incentivize the achievement of key milestones in the university's strategic plan. The executive compensation strategy includes a comprehensive review of the plan entire compensation package, which includes base salary, incentive and deferred compensation, retirement plans, and other benefits. As is common for private universities, Lynn offers a deferred compensation plan to officers and executives. Annual deferrals into the plan become taxable when they are distributed, which can often result in large amounts included in taxable income because several years of deferrals are paid out at once. Multiple years of deferred and incentive compensation came to fruition in 2019. This compensation was awarded to Dr. Ross in consideration for his long tenure, which is more than double the average college president tenure, and for the completion of the university's Lynn 2020 strategic plan two years ahead of schedule. Under his leadership, the university has added 27 new undergraduate majors and 11 new graduate majors; raised over \$100 million in capital and endowed gifts; transformed campus with enhanced technology and nearly 200,000 square feet of new facilities; and increased overall enrollment by 53 percent in the past 10 years, which includes a 48 percent increase in undergraduate enrollment and 72 percent growth in graduate enrollment. On June 30, 2019, President Ross received a distribution from a nongualified supplemental deferred compensation plan in the amount of \$337,462, which includes \$300,000 previously reported as deferred compensation and \$37,462 of plan

earnings. The University also accrued \$100,000 into this plan for President Ross during 2019. Additionally, the University maintains a deferred compensation plan for Sherrie Weldon, which provides her each a one-time distribution of \$75,000 if she is still employed at Lynn at the end of three years. The University accrued \$25,000 during 2019 for Sherrie Weldon.

Page 3

(i)

(ii)

(i)

12Matthew P Chaloux

13Farideh Farazmand

Professor

Director, Auxiliary Services

167,781

186,761

Software ID: 19010655

Software Version: 2019v5.0

EIN: 59-1023117

Name: Lynn University Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (A) Name and Title

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total or columns					
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990				
1Kevin M Ross	(i)	500,685	117,239	402,985	115,400	109,673	1,245,982	300,000				
President	(ii)	0	0	0	0	0	0	0				
1 Gregory J Malfitano	(i)	327,558	0	29,207	15,400	23,334	395,499	0				
SVP for Development & Administration	(ii)	0	0	0	0	0	0	0				
2 Laurie Levine	(i)	273,395	0	0	15,385	38,322	327,102	0				
VP for Business and Finance (through 01/2020)	(ii)	0	0	0	0	0	0	0				
3Sherrie Weldon	(i)	226,843	0	0	37,899	21,959	286,701	0				
Chief Marketing Officer	(ii)	0	0	0	0	0	0	0				
4 Christian G Boniforti	(i)	243,334	. 0	0	13,658	25,785	282,777	0				
Chief Information Officer	(ii)	0	0	0	0	0	0	0				
5 Gareth P Fowles	(i)	245,716	0	0	13,511	1,630	260,857	0				
VP for Enrollment Management	(ii)	0	0	0	0	0	0	0				
6 Katrina Carter-Tellison	(i)	218,813	0	0	12,007	27,801	258,621	0				
VP for Academic Affairs	(ii)	0	0	0	0	0	0	0				
7Michael Antonello	(i)	201,215	0	0	11,336	8,898	221,449	0				
General Counsel	(ii)	0	0	0	0	0	0	0				
8 Anthony Altieri	(i)	169,184	0	0	9,349	2,006	180,539	0				
VP for Student Life	(ii)	0	0	0	0	0	0	0				
9 Gregg C Cox	(i)	242,725	0	0	13,714	16,524	272,963	0				
Senior Advisor to the President	(ii)	0	0	0	0	0	0	0				
10Ralph J Norcio	(i)	192,819	0	4,440	5,226	27,622	230,107	0				
Associate Dean, Business School	(ii)	0	0	0	0	0	0	0				
11Ralph T Good	(i)	199,000	0	0	11,103	10,873	220,976	0				
Dean College of Business	(ii)	0	0	0	0	0	0	0				
			 		<u> </u>		l					

6,660

8,928

5,352

31,869

1,012

215,238

193,125

0

(E) Total of columns

(F) Compensation in

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Schedule K

(Form 990)

Department of the Treasury

Internal Revenue Service

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions,

▶Go to www.irs.gov/Form990 for instructions and the latest information.

explanations, and any additional information in Part VI. ▶ Attach to Form 990.

OMB No. 1545-0047

DLN: 93493084009051

Open to Public Inspection

Employer identification number Name of the organization Lvnn University Inc 59-1023117 Part I **Bond Issues** (c) CUSIP # (g) Defeased (a) Issuer name (b) Issuer EIN (d) Date issued (e) Issue price (f) Description of purpose (h) On (i) Pool behalf of financing issuer Yes No Yes No Yes No Palm Beach County Educational 05-23-2012 11,077,544 purchase energy conservation 52-1562288 Χ Χ Χ Facilities Authority equipment Palm Beach County Educational 52-1562288 06-19-2013 Refinance 2001 and 2009 bond Χ Х Χ Facilities Authority issues and fund construction projects PALM BEACH COUNTY 52-1562288 04-13-2016 19,315,100 CONSTRUCTION OF NEW UPPER-Χ Χ **EDUCATIONAL FACILITIES** CLASSMEN DORMITORY **AUTHORITY** Palm Beach County Educational 52-1562288 08-28-2017 25,000,000 | Construction of new student center Χ Χ Χ Facilities Authority Part II **Proceeds** С 4.530.556 5,255,600 1.554.800 12,932,300 2 3 25,000,000 19,315,100 25,000,000 11,096,806 4 5 0 369,131 3,731 6 0 7 64,700 300,709 231,655 258,104 8 9 10 11,032,106 4,331,060 18,130,161 24,738,165 11 20,368,231 584,153 12 2018 13 2014 2013 2017 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue of tax-exempt 14 Χ Χ Χ Were the bonds issued as part of an advance refunding issue of taxable 15 Х Χ Χ Χ Χ Χ 16 Χ Χ Does the organization maintain adequate books and records to support the final allocation of Χ Χ Χ Χ Part **Ⅲ Private Business Use** Α D Yes Yes No No Yes No Yes No

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

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

Χ

Χ

Χ

Χ

Χ

Χ

counsel to review any research agreements relating to the financed property?

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Are there any management or service contracts that may result in private business use of

If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

counsel to review any management or service contracts relating to the financed property?

Are there any research agreements that may result in private business use of bond-financed

Private Business Use (Continued)

Penalty in Lieu of Arbitrage Rebate?

If "No" to line 1. did the following apply?

Exception to rebate?

Was the hedge superintegrated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Schedule K (Form 990) 2019

Part III

За

b

C

d

6

8a

Part IV

b

C

Arbitrage

Х

Χ

0 %

0 %

0 %

Χ

No

Х

Χ

Χ

850 %

Χ

Х

C

Χ

Х

Yes

Χ

Χ

Χ

BankUnited NA

Χ

Χ

0 %

0 %

0 %

В

Yes

Χ

Χ

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BankUnited NA

Χ

No

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2500 %

Χ

Χ

Χ

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Χ

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Χ

Χ

Χ

Α

Yes

Χ

Page 2

No

Χ

Χ

0 %

0 %

0 %

Χ

Χ

No

Χ

Χ

850 %

Χ

Х

D

Χ

Χ

7.67 %

7.67 %

Χ

Yes

Χ

Χ

Χ

BankUnited NA

Schedule K (Form 990) 2019

D

Χ

Χ

Χ

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

Schedule K (Form 990) 2019

requirements of section 148? . . .

Return Reference

Schedule K, Part II, Line 3 Proceeds of

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

(GIC)?

period?

Part V

Part VI

issue

Χ

No

Explanation

Yes

Χ

The total proceeds of issue reported in Schedule K, Part II, Line 3 for the 2012 bond issue includes \$19,262 of interest earnings.

Χ

R

No

Yes

Χ

Yes

Page 3

Х

Nο

D

Nο

Yes

Χ

Return Reference	Explanation
	Management is reviewing future rental use of the property financed by this bond. For the fiscal year ended June 30, 2021, private business use for this bond will be 0%.

efile GRAPHI	C print - I	DO NO	T PROCES	S As Fi	led Data -					DL	.N: 93	4930	8400	09051		
Schedule L			Tran	sactio	ns with Ir	ntereste	d Persor	าร			01	4B No.	1545	-0047		
Form 990 or 990	-EZ) ▶ C	Complet	e if the orga	anization a	nswered "Yes	s" on Form 9	90, Part IV, li	ines 25	a, 2	25b, 20	5,	20	11	O		
			27, 28a,	28b, or 28 ► Attac	Sc, or Form 99 th to Form 99	0-EZ, Part V, 0 or Form 99	, line 38a or 4 0-EZ.	10 Ь.				40	/ 	7		
Department of the Treatment Revenue Serv		⊳ G	o to <u>www.ii</u>		<u>m990</u> for inst			formati	ion.		(open Insp	to Pu ectio			
Name of the org								Em	ploy	er ide	entifica	tion n	umbe	er		
Lynn University Inc								59-	102	3117						
Part I Exce	ss Benef	it Tran	sactions (section 501	(c)(3), section !	501(c)(4), and	section 501(c	:)(29) o	rgar	nization	s only	١.				
					orm 990, Part											
1 (a) Name of	disqualif	ied person	(b)	Relationship be	etween disqual organization	lified person ar	nd (•	escript ansacti		<u> </u>		rected?		
						51 ga1112 a a a a					-	Y .	es	No		
					nanagers or dis											
4958 3 Enter the a	nount of ta	ex, if any	, on line 2, a	above, reimi	oursed by the o	· • • •				•	\$ —— \$ ——					
Cor	nplete if the	e organi	From Inter zation answe n Form 990, l	red "Yes" or	n Form 990-EZ,	, Part V, line 3	8a, or Form 99	90, Part	IV,	line 26	; or if	the org	anizat	tion		
(a) Name of			elationship (c) Purpose (d				(f) Balance due	(g) In default?		(h) Approved by board or			(i) Written agreement?			
										comr			mittee?			
				То	From			Yes	No	Yes	No	Yes	l	No		
otal .						\$										
					ested Perso		line 27									
(a) Name of inter	•	on (b)	Relationshiperested perso	between	(c) Amount		(d) Type (of assist	tanc	e	(e) Pu	rpose o	of assi	stance		
			organizat													
1) NA		N/A				73,817	SCHOLARSHI	PS		T	uition A	ssistar	ice			
										+						

No

Nο

Nο

Nο

Nο

organization's revenues? Yes

Page 2

(2) STEPHANIE JACKSON
(3) ASHLEIGH FOWLES
(4) GISELLE GERBER

(1) DONALD ROSS

Part V

(a) Name of interested person

	organization
ROSS	FATHER OF KEVIN ROSS, PRESIDENT
NIE JACKSON	WIFE OF ANTHONY ALTIERI, VP FOR STUDENT LIFE
H FOWLES	SISTER OF GARETH FOWLES, VP FOR ENROLLMENT
GERBER	FAMILY MEMBER OF CHRISTIAN BONIFORTI, CHIEF INFORMATION OFFICER
Supplemental Information Provide additional information and in	nation tion for responses to questions on S
. D.	

(b) Relationship between interested

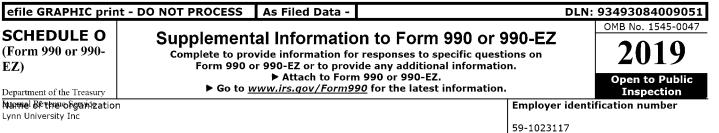
person and the

Part IV, line 28a	a, 28b, or 28c.
c) Amount of transaction	(d) Description of transaction
207,513	COMPENSATION
113,679	COMPENSATION
95,128	COMPENSATION
48,168	COMPENSATION
ule L (see instruction	ons).
Explanation	on
PROVIDED SCHOLA	/ SCHOOLS ARE NOT REQUIRED T ARSHIPS, FELLOWSHIPS, AND SIN NS TO FORM 990, SCHEDULE L, PA

Provide additional information for Schedu Return Reference HOOLS ARE NOT REQUIRED TO IDENTIFY Schedule L, Part III GRANTS OR COLLEGES, UNIVERSITIES AND PRIMARY ASSISTANCE BENEFITING INTERESTED PERSONS TO WHOM THEY IIPS, FELLOWSHIPS, AND SIMILAR INTERESTED PERSONS FINANCIAL ASSISTANCE. PURSUANT TO O FORM 990, SCHEDULE L, PART III. COLUMNS (A) AND (B) HAVE BEEN MARKED N/A.

DLN: 93493084009051 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** Lynn University Inc 59-1023117 **Types of Property** (d) (a) (b) (c) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . . 2 Art—Historical treasures 3 Art—Fractional interests Books and publications 2,020 Market value Clothing and household goods Cars and other vehicles . . 7 Boats and planes . . . Intellectual property . . . Securities—Publicly traded . Χ 647,540 Market value 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution—Historic structures 14 Oualified conservation contribution-Other . . . Real estate—Residential . Real estate—Commercial . 17 Real estate—Other . . Collectibles 18 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . . . 23 Scientific specimens . . 24 Archeological artifacts . . . Musical 34,800 Opinions of experts instrument -Violin and Other ▶ (Violin Bows 25 Other ▶ (_____ 27 Other ► (___ 28 Number of Forms 8283 received by the organization during the tax year for contributions 0 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J Schedule M (Form 990) (2019)

Schedule M (Form 990) (2019)	Page 2				
Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.					
Return Reference	Explanation				
reporting method for number of	Other - Musical instrument - Violin and Violin Bows - Number of items received Securities - Publicly trac IUMBER OF CONTRIBUTIONS Books and publications - Learning tools - Drama Books - Number of ontributions				
	Schedule M (Form 990) (2019)				



Return Reference	Explanation
Form 990, Part III, Line 4a PROGRAM ACCOMPLISHMENTS	(CONTINUED FROM PART III) THE UNIVERSITY IS COMMITTED TO STUDENT-CENTERED LEARNING, WHERE FACULTY AND STAFF PROVIDE PERSONALIZED ATTENTION TO STUDENTS WHO HAVE VARYING LEVELS OF AC ADEMIC PROFICIENCY AND ARE MOTIVATED TO EXCEL. A FULL RANGE OF ACADEMIC AND SUPPORT PROGRA MS ARE COORDINATED TO SERVE THE INCREASINGLY DIVERSE NEEDS OF UNDERGRADUATE AND GRADUATE S TUDENTS. ADDITIONAL AND SPECIALIZED ACADEMIC SUPPORT SERVICES ARE OFFERED TO PROVIDE ACADE MIC ASSISTANCE TO HELP STUDENTS REMAIN IN COLLEGE AND GRADUATE. THESE SERVICES ARE OFFERED TO STUDENTS IN A VARIETY OF FORMS WITH A VARYING FEE SCHEDULE. AN ACADEMIC RESOURCE NAMED THE INSTITUTE FOR ACHIEVEMENT AND LEARNING IS AVAILABLE TO ALL STUDENTS, INCLUDING THOSE WITH DIAGNOSED LEARNING DIFFERENCES. MATH, COMPUTER AND OTHER SUBJECT-AREA TUTORS ASSIST S TUDENTS. THE UNIVERSITY, SMALL BY DESIGN, PROVIDES AN ENVIRONMENT WITHIN AND OUTSIDE THE C LASSROOM IN WHICH A COMMUNITY OF LEARNERS CAN PURSUE ACADEMIC EXCELLENCE AND DEVELOP THEIR SKILLS AS RESPONSIBLE GLOBAL CITIZENS. FACULTY, STAFF AND STUDENTS CONTRIBUTE TO AN ATMOS PHERE THAT NURTURES CREATIVITY, FOSTERS ACHIEVEMENT, VALUES DIVERSITY AND ENCOURAGES VOLUN TARISM, EACH JAN. 12, ALL FACULTY, STAFF AND STUDENTS PERFORM COMMUNITY SERVICE DURING 'NI IGHTS UNITE DAY OF CARING," A PROGRAM WHICH HONORS THE FOUR STUDENTS AND TWO PROFESSORS WHO DIED IN THE HAITI EARTHQUAKE IN 2010 WHILE PERFORMING COMMUNITY SERVICE DURING 'NI IGHTS UNITE DAY OF CARING," A PROGRAM WHICH HONORS THE FOUR STUDENTS AND TWO PROFESSORS WHO DIED IN THE HAITI EARTHQUAKE IN 2010 WHILE PERFORMING COMMUNITY SERVICE DURING STUCE LAND THE PRACTICAL, ALONG WITH OPPORTUNITIES TO BECOME INVOLVED IN COMMUNITY SERVICE DURING STAPE SERVICE. A PROGRAM SARE STRUCTURED TO PROVIDE A BALANCE BETWEEN THE THE CHANGING NEEDS OF THE LOCAL AND GLOBAL COMMUNITY. THIS INTEGRATIVE DESIGN PREPARES OUR GRADUATES TO MEET THE DYNAMIC NEEDS OF THE EMERGING GLOBAL SOCIETY. A RIGOROUS CORE CURRICULUM-THE DIALOGUES-WAS LAUNCHED IN FALL 2008. CORE COURSES ARE REQUIRED TO MEE

990 Schedule O, Supplemental Information

Return Reference

Form 990, Part III,	. STUDENTS ACCESS COURSE MATERIALS USING CANVAS AND TEXTBOOKS ON ITUNES U, AND EXPERIENCE	l
Line 4a PROGRAM	ENGAGING MOBILE CONTENT DELIVERED THROUGH LYNN'S DISCUSSION-DRIVEN DIALOGUES CORE	ı
ACCOMPLISHMENTS	CURRICUL UM. THEY ALSO SAVE UP TO 90 PERCENT IN TEXTBOOK COSTS. APPLE NAMED LYNN AN APPLE	ı
	DISTINGUI SHED SCHOOL THREE TIMES. MOREOVER, IT RECOGNIZED SEVERAL FACULTY MEMBERS AS	ı
	APPLE DISTINGU ISHED EDUCATORS AND CERTIFIED MANY OTHERS. INSIDE HIGHER ED AND THE	ı
	CHRONICLE OF HIGHER ED UCATION HIGHLIGHTED LYNN'S PIONEERING WORK, AND U.S. NEWS & WORLD	ı
	REPORT TWICE LISTED LYNN AMONG AMERICA'S MOST INNOVATIVE COLLEGES.	ı

Explanation

Return Reference	Explanation
Form 990, Part III, Line 4b PROGRAM ACCOMPLISHMENTS	(CONTINUED FROM PART III) SOCIAL ACTIVITIES INCLUDE GAME SHOWS, DANCES, COMEDIANS, LIVE MUSIC, INTERNATIONAL FESTIVALS, FILMS, POOL PARTIES, SPORTS DAYS, INTRAMURAL SPORTS, AWARD DINNERS AND NOVELTY ENTERTAINMENT. INDIVIDUAL INTERESTS RANGING FROM THE FINE ARTS TO PROFESSIONAL FOOTBALL, BASEBALL, BASKETBALL AND HOCKEY TO GOURMET DINING CAN BE FOUND IN SOUTH FLORIDA. LYNN UNIVERSITY HOLDS MEMBERSHIP IN THE NATIONAL COLLEGIATE ATHLETIC ASSOCIATION (NCAA), DIVISION II, AND THE SUNSHING STATE ATHLETIC CONCERENCE. INTERCOLLEGIATE ATHLETIC PROGRAMS ARE OPEN TO ALL STUDENTS IN ACCORDANCE WITH NCAA AND INSTITUTIONAL ELIGIBILITY STANDARDS. INTERCOLLEGIATE TEAMS INCLUDE MEN'S AND WOMEN'S SOCCER, MEN'S AND WOMEN'S BASKETBALL, MEN'S AND WOMEN'S GOLF, MEN'S AND WOMEN'S SOCCER, MEN'S AND WOMEN'S BASKETBALL, MEN'S AND WOMEN'S GOLF, MEN'S AND WOMEN'S SOCCER, MEN'S AND WOMEN'S SWIMMING AND VOLLEYBALL. ALL STUDENT-ATHLETES ARE REQUIRED TO ATTEND SEMINARS ON SUBSTANCE ABUSE AND NCAA STANDARDS THROUGHOUT THE SCHOOL YEAR. IN 2019-20, 78 PERCENT OF THE STUDENT-ATHLETES EARNED A 3.00 GPA OR HIGHER AND 11 PERCENT EARNED A PERFECT 4.00 GPA. IN ADDITION TO INTERCOLLEGIATE SPORTS, STUDENTS ARE ENCOURAGED TO PARTICIPATE IN A WIDE RANGE OF INTRAMURAL PROGRAMS, INCLUDING FLAG FOOTBALL, SOFTBALL, SOCCER AND VOLLEYBALL. AT LEAST ONE REGISTERED NURSE OR PHYSICIAN'S ASSISTANT IS ON DUTY DURING DAYTIME HOURS IN THE HEALTH CENTER, AND WORKS IN CONJUNCTION WITH COMMUNITY MEDICAL SERVICES TO PROVIDE AMPLE HEALTH CENTER FALL SHEEDED, REFERRALS ARE MADE TO LOCAL PHYSICIANS AND HEALTH CARE AGENCIES. ANOTHER HEALTH CENTER FAFT MEMBER ORGANIZES WELLNESS ACTIVITIES INCLUDING YOGA AND EXERCISE CLASSES AS WELL AS STUDENTS AS CHECK THE MINING IN LYNN'S FITNESS CENTER. COUNSELING IS PROVIDED ON A PRIVATE OR GROUP BASIS, AND RECORDS ARE MAINTAINED IN STRICT CONFIDENCE BY THE DIRECTOR OF COUNSELING. STUDENTS ASSISTING STUDENTS IN ADDITION, ALL OF WHOM ARE PROFESSIONALLY FOCUSED ON ASSISTING STUDENTS. IN ADDITION, ALC OHN DUBSTANCE ABUSE LITERATURE AND REFERRAL

ATTEND PINE TREE CAMPS SUMMER SESSIONS.

Return

Reference	·
Form 990,	(Expenses \$ 1,299,474 including grants of \$ 0)(Revenue \$ 2,005,506) CLASSICAL MUSIC IS PROVIDED TO THE UNIVERSITY
Part III, Line	COMMUNITY AS WELL AS THE GENERAL PUBLIC BY STUDENTS AND FACULTY IN THE LYNN UNIVERSITY
4d	CONSERVATORY OF MUSIC. ADDITIONALLY, STUDENTS IN THE DRAMA B.F.A. PROGRAM AND PROFESSIONAL
Description	ACTORS AND MUSICIANS PERFORM ON CAMPUS IN THE PERFORMING ARTS CENTER. MANY OPPORTUNITIES TO
of other	SHARE CULTURE AND IDEAS ARE OFFERED THROUGH LECTURE SERIES AND COMMUNITY DISCOURSE. DURING THE
program	SUMMER MONTHS BETWEEN ACADEMIC YEARS FOR TRADITIONAL COLLEGE STUDENTS, A PORTION OF THE
services	UNIVERSITY'S EDUCATIONAL FACILITIES ARE USED TO PROVIDE INSTRUCTION TO CHILDREN AGED 3-13 WHO

Explanation

Return

Reference	
Form 990, Part VI, Line 1a Delegate broad authority to a committee	The executive committee shall have a minimum of three members, all of whom shall be members of the board. Between meetings of the board, the executive committee shall have general supervision of the administration and property of the corporation except that, unless specifically empowered by the board to do so, it may not take any action inconsistent with a prior act of the board of trustees, award degrees, alter these by-laws, locate permanent buildings on tax-exempt property held for the corporation's purposes, remove or appoint the president of the corporation, or take any action which has been reserved for the board.

Explanation

Return Explanation
Reference

	CHRISTINE LYNN AND JAN CARLSSON - Family relationship
VI, Line 2	
Family/business	
relationships	
amongst	
interested	
persons	

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Line 11b Review of form 990 by governing body	A draft of Form 990 was reviewed by Crowe based on audited financial statements and other information provided by University management. Following a review by the CFO and Director of Accounting, minor revisions were incorporated into a revised draft, which was posted to the Board portal prior to filing.

Return Reference	Explanation
Part VI, Line 12c Conflict	Each year, all officers, directors, trustees and key employees are required to sign a disclosure letter detailing any relationships or business transactions where a potential conflict might exist. These disclosures are reviewed by the CFO. In the event of a conflict of Interest, or the appearance of any such conflict, it is incumbent upon the relevant Board member(s) or director(s) to notify the Board of the conflict and recuse themselves from participation in the discussion and vote regarding any related issues or
policy	transactions.

Return Reference	Explanation
Form 990, Part VI, Line 15a Process to establish compensation of top management official	The Lynn University board of trustees engaged compensation and benefits experts to develop a reasonable executive compensation strategy to encourage retention and incentivize the achievement of key milestones in the university's strategic plan. The executive compensation strategy includes a comprehensive review of the entire compensation package, which includes base salary, incentive and deferred compensation, retirement plans, and other benefits. The Executive Committee of the Board of Trustees reviews the President's compensation and determines his raise. The Executive Committee then communicates the percentage of the President's raise to the Vice President for Business and Finance, who speaks with outside compensation counsel to confirm that the President's raise is comparable and reasonable based on market conditions. This process is documented in the Executive Committee meeting minutes. This process was undertaken during the fall of 2019.

Return

Reference	
Form 990, Part VI, Line 15b Process to establish compensation of other employees	The President conducts annual performance reviews of all officers, based on pre-determined goals. He then makes recommendations regarding compensation to the Chair of the Board for approval. The University retained an outside expert to perform a compensation study of all employees, including officers of the organization. This comprehensive study was performed years ago; however, the University receives ongoing guidance regarding annual increases to ensure that these annual increases are comparable and reasonable based on market conditions. As new positions are created, or as market conditions warrant, this expert is consulted on a case-by-case basis. The University provides benefits according to written standard policies. If any benefit is provided outside of these policies, Board approval is required. This process was undertaken during the year ended June 30, 2020, and is documented in each employee's file.

Explanation

	Reference	Explanation
П	Form 990, Part VI, Line 19 Required	Financial statements and governing documents are not required disclosures pursuant to internal revenue code (IRC) section 6104. Therefore, these documents are not available to the public at this time. The Conflict of Interest policy is provided upon request.

Evolunation

19 Required documents available to the public

Return

Return Reference	Explanation
Form 990, Part VIII, Line 11d Other Miscellaneous Revenue	Unrelated Business Revenue: , Revenue Excluded from Tax Under Sections 512, 513, or 514: ;

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part XI, Line 9 Other changes in net assets or fund balances	Gain (Loss) on financial derivatives2315980; Change in value of split interest agreement10896;