

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

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

OMB No. 1545-0047

2009**Open to Public
Inspection****A For the 2009 calendar year, or tax year beginning** 07/01, 2009, and ending 06/30, 2010

B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization DUKE UNIVERSITY		D Employer identification number
		Doing Business As		56-0532129
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite		E Telephone number
		324 BLACKWELL STREET, DUKE BOX # 104132 STE. 920		(919) 684-2006
		City or town, state or country, and ZIP + 4		G Gross receipts \$ 14285916052.
		DURHAM, NC 27701		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		F Name and address of principal officer: RICHARD BRODHEAD		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No
		324 BLACKWELL STREET, DURHAM, NC 27701		If "No," attach a list. (see instructions)
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (03) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶		
J Website: ▶ WWW.DUKE.EDU				
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1841 M State of legal domicile: NC		

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROVIDE A SUPERIOR LIBERAL EDUCATION, TO PREPARE FUTURE MEMBERS OF LEARNED PROFESSIONS, TO ADVANCE THE FRONTIERS OF KNOWLEDGE, AND TO HELP THOSE WHO SUFFER, CURE DISEASE, AND PROMOTE HEALTH.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	36
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	29
	5 Total number of employees (Part V, line 2a)	5	26,773
	6 Total number of volunteers (estimate if necessary)	6	
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
7b Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	1,004,165,159.	1,131,249,755.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	717,523,039.	744,856,946.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-131,513,316.	259,133,753.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	44,099,254.	42,999,116.
		1,634,274,136.	2,178,239,570.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	208,375,154.	229,904,961.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,204,056,373.	1,221,532,256.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses, Part IX, column (D), line 25) ▶ 24,142,680.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	882,084,587.	895,079,957.
Net Assets or Fund Balances	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,294,516,114.	2,346,517,174.
	19 Revenue less expenses. Subtract line 18 from line 12	-660,241,978.	-168,277,604.
	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	8,920,329,845.	9,378,030,720.
	22 Net assets or fund balances. Subtract line 21 from line 20	2,799,520,463.	2,968,970,088.
		6,120,809,382.	6,409,060,632.

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer		Date	
Paid Preparer's Use Only	Preparer's signature		Date	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4		EIN	Preparer's identifying number (see instructions)
			Phone no.	

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

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. *

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Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission:

ATTACHMENT 4

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

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

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

4a (Code:) (Expenses \$ 1,267,990,342. including grants of \$ 196,478,314.) (Revenue \$ 577,682,285.)
 DUKE UNIVERSITY CONFERS UNDERGRADUATE, GRADUATE, AND PROFESSIONAL
 DEGREES TO APPROXIMATELY 4300 STUDENTS ANNUALLY

4b (Code:) (Expenses \$ 720,117,744. including grants of \$ 30,929,292.) (Revenue \$ 586,089,845.)
 DUKE UNIVERSITY ENGAGES IN WORLD-RENOWNED RESEARCH WORK
 SPONSORED BY NUMEROUS FEDERAL, STATE, AND LOCAL AGENCIES

4c (Code:) (Expenses \$ 176,075,685. including grants of \$ 2,497,355.) (Revenue \$ 91,591,676.)
 DUKE UNIVERSITY AUXILIARY ENTERPRISES PROVIDE SUPPORT
 SERVICES TO THE DUKE UNIVERSITY COMMUNITY

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

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

4e Total program service expenses ► 2,164,183,771.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	<input checked="" type="checkbox"/>	
5 Sections 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<input checked="" type="checkbox"/>	
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input checked="" type="checkbox"/>	
11 Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	<input checked="" type="checkbox"/>	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>		
• 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? <i>If "Yes," complete Schedule D, Part X.</i>		
12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>		<input checked="" type="checkbox"/>
12A Was the organization included in consolidated, independent audited financial statement for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.</i>	<input checked="" type="checkbox"/>	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	<input checked="" type="checkbox"/>	
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input checked="" type="checkbox"/>	
14b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	<input checked="" type="checkbox"/>	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II.</i>	<input checked="" type="checkbox"/>	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	<input checked="" type="checkbox"/>	
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>	<input checked="" type="checkbox"/>	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<input checked="" type="checkbox"/>	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		<input checked="" type="checkbox"/>
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		<input checked="" type="checkbox"/>

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Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	<input checked="" type="checkbox"/>	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	<input checked="" type="checkbox"/>	
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>	<input checked="" type="checkbox"/>	
24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to question 25.</i>	<input checked="" type="checkbox"/>	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<input checked="" type="checkbox"/>	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		<input checked="" type="checkbox"/>
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		<input checked="" type="checkbox"/>
25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		<input checked="" type="checkbox"/>
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>		<input checked="" type="checkbox"/>
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		<input checked="" type="checkbox"/>
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>	<input checked="" type="checkbox"/>	
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	<input checked="" type="checkbox"/>	
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>	<input checked="" type="checkbox"/>	
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>	<input checked="" type="checkbox"/>	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	<input checked="" type="checkbox"/>	
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>	<input checked="" type="checkbox"/>	
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		<input checked="" type="checkbox"/>
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i>	<input checked="" type="checkbox"/>	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	<input checked="" type="checkbox"/>	
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>	<input checked="" type="checkbox"/>	
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>		<input checked="" type="checkbox"/>
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O.	<input checked="" type="checkbox"/>	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

	Yes	No
1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a 9,530	
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 X	
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	2a 26,773	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return. (see instructions)	2b X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a X	
b If "Yes," enter the name of the foreign country: <u>ATTACHMENT 5</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c X	
d If "Yes," indicate the number of Forms 8282 filed during the year	7d 1	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	X
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?	9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a 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:		
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
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	12b	

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body	1a 36		
b Enter the number of voting members that are independent	1b 29		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6 Does the organization have members or stockholders?	6		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X	
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
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	9a		X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **► ATTACHMENT 6**

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

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

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **► DUKE UNIVERSITY, 324 BLACKWELL ST. SUITE 920, DURHAM, NC 27701**
 919-684-2006

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- 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. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ANNE T BASS TRUSTEE	1.00	X						0.	0.	0.
THE HONORABLE DANIEL TERRY BLUE JR TRUSTEE	1.00	X						0.	0.	0.
JACK O BOVENDER JR TRUSTEE	1.00	X						0.	0.	0.
RICHARD H BRODHEAD PRESIDENT/TRUSTEE	40.00	X		X				786,745.	0.	90,825.
PAULA PHILLIPS BURGER TRUSTEE	1.00	X						0.	0.	0.
PAULA HANNAWAY CROWN TRUSTEE	1.00	X						0.	0.	0.
FRANK E EMORY JR TRUSTEE	1.00	X						0.	0.	0.
ROBIN A FERRACONE TRUSTEE	1.00	X						0.	0.	0.
DAVID GERGEN TRUSTEE	1.00	X						0.	0.	0.
THOMAS M GORRIE TRUSTEE	1.00	X						0.	0.	0.
JANET HILL TRUSTEE	1.00	X						0.	0.	0.
KENNETH W HUBBARD TRUSTEE	1.00	X						0.	0.	0.
KIMBERLY J JENKINS TRUSTEE	1.00	X						0.	0.	0.
BRUCE A KARSH TRUSTEE	1.00	X						0.	0.	0.
J J KISER III TRUSTEE	1.00	X						0.	0.	0.
ELIZABETH KISS TRUSTEE	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARGUERITE W KONDRACKE TRUSTEE	1.00	X						0.	0.	0.
JOHN J MACK TRUSTEE	1.00	X						0.	0.	0.
MICHAEL MARSICANO TRUSTEE	1.00	X						0.	0.	0.
BISHOP J LAWRENCE MCCLESKEY TRUSTEE	1.00	X						0.	0.	0.
NANCY A NASHER TRUSTEE	1.00	X						0.	0.	0.
CLARENCE G NEWSOME TRUSTEE	1.00	X						0.	0.	0.
DAVID M RUBENSTEIN TRUSTEE	1.00	X						0.	0.	0.
ALAN D SCHWARTZ TRUSTEE	1.00	X						0.	0.	0.
REVEREND CHARLES M SMITH TRUSTEE	40.00	X						30,000.	0.	0.
SUSAN M STALNECKER TRUSTEE	1.00	X						0.	0.	0.
G RICHARD WAGONER JR TRUSTEE	1.00	X						0.	0.	0.
BENJAMIN S ABRAM TRUSTEE	1.00	X						0.	0.	0.
XIQING GAO TRUSTEE	1.00	X						0.	0.	0.
1b Total CONTINUED AT SCHEDULE J-2								18,779,670.	18,250.	2,244,186.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **1,993**

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3	X	
4	X	
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 7		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **597**

Part VIII Statement of Revenue

56-0532129

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	4,752,280.			
	d	Related organizations	1d	87,070,875.			
	e	Government grants (contributions) . .	1e	579,002,585.			
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	460,424,015.			
	g	Noncash contributions included in lines 1a-1f: \$		4,095,441.			
	h	Total. Add lines 1a-1f		1,131,249,755.			
Program Service Revenue				Business Code			
	2a	TUITION AND FEES	611600	527,996,523.	527,996,523.		
	b	CONFERENCE FEES	611600	7,566,880.	7,566,880.		
	c	CONTINUING EDUCATION	611600	42,118,882.	42,118,882.		
	d	ACADEMIC MEDICAL RESEARCH	611600	7,087,260.	7,087,260.		
	e	ANCILLARY STUDENT SERVICES	611600	91,591,676.	91,591,676.		
	f	All other program service revenue	611600	68,495,725.	68,495,725.		
	g	Total. Add lines 2a-2f		744,856,946.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		75,877,067.			75,877,067.
	4	Income from investment of tax-exempt bond proceeds . . .		469,558.			469,558.
	5	Royalties		17,829,391.			17,829,391.
			(i) Real (ii) Personal				
	6a	Gross Rents.	6,266,755.				
	b	Less: rental expenses . . .	3,810,998.				
	c	Rental income or (loss) . .	2,455,757.				
	d	Net rental income or (loss)		2,455,757.			2,455,757.
			(i) Securities (ii) Other				
	7a	Gross amount from sales of assets other than inventory	12,284,722,466.	106,422.			
	b	Less: cost or other basis and sales expenses	12,100,169,000.	1,872,760.			
	c	Gain or (loss)	184,553,466.	-1,766,338.			
	d	Net gain or (loss)		182,787,128.			182,787,128.
	8a	Gross income from fundraising events (not including \$ 4,752,280. of contributions reported on line 1c). See Part IV, line 18	a	1,037,567.			
	b	Less: direct expenses	b	1,823,724.			
	c	Net income or (loss) from fundraising events		-786,157.			-786,157.
	9a	Gross income from gaming activities. See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities		0.			
	10a	Gross sales of inventory, less returns and allowances	a				
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory		0.				
Miscellaneous Revenue			Business Code				
11a	MISC. SALES	900099	5,940,459.	5,940,459.			
b	STUDENT DUES	900099	1,886,133.	1,886,133.			
c	VARIOUS FEES AND FINES	900099	1,909,328.	1,909,328.			
d	All other revenue	900099	13,764,205.	13,764,205.			
e	Total. Add lines 11a-11d		23,500,125.				
12	Total Revenue. See instructions		2,178,239,570.	768,357,071.	0.	278,632,744.	

Part IX Statement of Functional Expenses**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.****All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	1,815,396.	1,815,396.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	227,321,557.	227,321,557.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	768,008.	768,008.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	10,713,466.	680,584.	4,272,510.	5,760,372.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	818,479.	478,329.	340,150.	0.
7 Other salaries and wages	912,619,847.	792,294,884.	112,530,801.	7,794,162.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . .	59,909,269.	49,724,693.	8,986,390.	1,198,186.
9 Other employee benefits	166,500,578.	138,205,717.	26,226,883.	2,067,978.
10 Payroll taxes	70,970,617.	61,034,730.	9,226,180.	709,707.
11 Fees for services (non-employees):				
a Management	0.	0.	0.	0.
b Legal	3,777,980.	-1,992,802.	5,762,993.	7,789.
c Accounting	751,508.	257,878.	493,630.	0.
d Lobbying	0.	0.	0.	0.
e Professional fundraising services. See Part IV, line 17	0.			0.
f Investment management fees	17,221,745.	0.	17,221,745.	0.
g Other	116,477,685.	89,029,781.	25,247,652.	2,200,252.
12 Advertising and promotion	3,621,201.	3,497,709.	0.	123,492.
13 Office expenses	101,214,445.	51,493,672.	49,180,396.	540,377.
14 Information technology	0.	0.	0.	0.
15 Royalties	24,060,139.	15,414,411.	8,645,728.	0.
16 Occupancy	110,546,792.	105,231,279.	5,011,516.	303,997.
17 Travel	48,390,695.	45,866,905.	1,666,035.	857,755.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	2,368.	0.	2,368.	0.
19 Conferences, conventions, and meetings	28,154,453.	22,281,130.	3,480,875.	2,392,448.
20 Interest	84,179,448.	57,514,170.	26,665,278.	0.
21 Payments to affiliates	8,173,129.	8,173,129.	0.	0.
22 Depreciation, depletion, and amortization . . .	170,741,373.	159,640,163.	11,101,210.	0.
23 Insurance	10,128,699.	10,120,206.	0.	8,493.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a POSTAGE & SHIPPING -----	6,444,242.	5,130,665.	894,906.	418,671.
b EQUIPMENT RENTAL & MAINTANAN -----	56,495,506.	27,377,543.	28,776,701.	341,262.
c PRINTING & PUBLICATION -----	11,288,326.	8,494,954.	2,443,298.	350,074.
d OTHER -----	72,772,139.	267,109,375.	-193,386,713.	-950,523.
e COST OF GOODS SOLD -----	20,638,084.	17,219,705.	3,400,191.	18,188.
f All other expenses -----				
25 Total functional expenses. Add lines 1 through 24f	2,346,517,174.	2,164,183,771.	158,190,723.	24,142,680.
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	146,777,497.	2	149,162,129.
	3 Pledges and grants receivable, net	405,841,762.	3	282,238,452.
	4 Accounts receivable, net	101,421,272.	4	120,619,586.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	45,245,449.	7	42,626,126.
	8 Inventories for sale or use	18,918,329.	8	17,294,810.
	9 Prepaid expenses and deferred charges	88,927,730.	9	63,408,408.
	10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3486122630.		
	b Less: accumulated depreciation	10b 1766744057.		
	11 Investments - publicly traded securities	1,174,268,000.	11	1,309,282,148.
	12 Investments - other securities. See Part IV, line 11	4,602,711,596.	12	5,079,099,000.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	616,904,504.	15	594,921,488.
16 Total assets. Add lines 1 through 15 (must equal line 34)	8,920,329,845.	16	9,378,030,720.	
Liabilities	17 Accounts payable and accrued expenses	258,211,177.	17	246,395,009.
	18 Grants payable		18	
	19 Deferred revenue	188,441,456.	19	191,019,725.
	20 Tax-exempt bond liabilities	1,091,930,000.	20	1,090,590,000.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	6,660,000.	23	6,510,000.
	24 Unsecured notes and loans payable to unrelated third parties	792,910,356.	24	790,190,512.
	25 Other liabilities. Complete Part X of Schedule D	461,367,474.	25	644,264,842.
	26 Total liabilities. Add lines 17 through 25	2,799,520,463.	26	2,968,970,088.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	2,630,017,800.	27	2,782,818,260.
	28 Temporarily restricted net assets	1,481,975,979.	28	1,607,026,888.
	29 Permanently restricted net assets	2,008,815,603.	29	2,019,215,484.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	6,120,809,382.	33	6,409,060,632.
	34 Total liabilities and net assets/fund balances	8,920,329,845.	34	9,378,030,720.

Form **990** (2009)

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b Were the organization's financial statements audited by an independent accountant?	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
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.	X	

Form **990** (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☒ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

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

h Provide the following information about the supported organization(s).

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

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

Schedule A (Form 990 or 990-EZ) 2009

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3 % support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2009

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 under section 513						
4 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 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
c 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 (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3 % support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions**

OMB No. 1545-0047

2009

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization DUKE UNIVERSITY	Employer identification number 56-0532129
--	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1** Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2** Political expenditures ▶ \$ 0.
- 3** Volunteer hours 0

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1** Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ 0.
- 2** Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ 0.
- 3** If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a** Was a correction made? ☐ Yes ☐ No
- b** If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3** Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
- 4** Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5** Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2009

JSA
9E1264 2.000

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**A** Check ☐ if the filing organization belongs to an affiliated group.**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?		X	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c	Media advertisements?		X	
d	Mailings to members, legislators, or the public?		X	
e	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		X	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		163,465.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i	Other activities? If "Yes," describe in Part IV	X		25,009.
j	Total. Add lines 1c through 1i			188,474.
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		X	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

MEMBERSHIP DUES

SCHEDULE C, PART II-B, LINE 1I

DUKE UNIVERSITY PAYS MEMBERSHIP DUES TO OTHER ORGANIZATION. PER THE

MEMBERSHIP DUES INVOICES, SOME OF THESE ORGANIZATIONS PROVIDE A

DISCLOSURE OF LOBBYING PERCENTAGE OF THE DUES RECEIVED.

[illegible]

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

DUKE UNIVERSITY

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2009

Open to Public
Inspection

Employer identification number

56-0532129

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if
the organization answered "Yes" to Form 990, Part IV, line 6.

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

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

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

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

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

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

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

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ 71,413.

(ii) Assets included in Form 990, Part X ► \$ 29,545,634.

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

a Revenues included in Form 990, Part VIII, line 1 ► \$ 0.

b Assets included in Form 990, Part X ► \$ 0.

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

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

- a** ☒ Public exhibition **d** ☒ Loan or exchange programs
b ☒ Scholarly research **e** ☐ Other _____
c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☒ **Yes** ☐ **No**

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XI V and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XI V.

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

	(a) Current Year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	4,430,172,000.	6,112,750,000.			
b Contributions	86,145,000.	73,482,915.			
c Net investment earnings, gains, and losses	530,625,628.	-1,506,464,915.			
d Grants or scholarships	55,616,571.	52,113,849.			
e Other expenditures for facilities and programs	189,275,057.	197,482,151.			
f Administrative expenses					
g End of year balance	4,802,051,000.	4,430,172,000.			

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

- a** Board designated or quasi-endowment ▶ 32.0000 %
b Permanent endowment ▶ 68.0000 %
c Term endowment ▶ %

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

	Yes	No
(i) unrelated organizations	3a(i) <input checked="" type="checkbox"/>	
(ii) related organizations	3a(ii) <input checked="" type="checkbox"/>	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b <input checked="" type="checkbox"/>	

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		23,016,502.		23,016,502.
b Buildings		229,709,297.	100,549,731.	1,291,595,660.
c Leasehold improvements		130,548,061.	71,940,269.	58,607,792.
d Equipment		579,187,318.	410,323,397.	168,863,921.
e Other		456,277,772.	278,983,074.	177,294,698.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,719,378,573.

Schedule D (Form 990) 2009

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other ATTACHMENT 1		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	5,079,099,000.	

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

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

(a) Description	(b) Book value
DEPOSITS WITH BOND TRUSTEE	19,403,509.
INTEREST IN PERPETUAL TRUST HELD BY OTHERS	575,517,979.
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	594,921,488.

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

1. (a) Description of liability	(b) Amount	
Federal income taxes		
ANNUITY AND SPLIT INTEREST OBLIGATIONS	41,330,735.	
POSTRETIREMENT HEALTHCARE BENEFIT OBLIGATIONS	207,964,956.	
FUNDS HELD FOR OTHERS	35,055,293.	
CONDITIONAL ASSET RETIREMENT	35,789,045.	
MINORITY INTEREST	264,898,338.	
REFUNDABLE FEDERAL STUDENT LOANS	59,226,475.	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	644,264,842.	

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

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

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

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

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

Part XIV Supplemental Information

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

SEE PAGE 5

Part XIV Supplemental Information (continued)

ART COLLECTION

SCHEDULE D, PART III, LINE 4

DUKE UNIVERSITY'S COLLECTION OF ART, INCLUDING THOSE PIECES MAINTAINED IN THE NASHER MUSEUM OF ART AT DUKE UNIVERSITY, FOSTERS THE UNDERSTANDING AND APPRECIATION OF THE VISUAL ARTS BY PROVIDING DIRECT EXPERIENCES WITH ORIGINAL WORKS OF ART SUPPORTED BY A RANGE OF EXHIBITIONS, PROGRAMS AND PUBLICATIONS FOR THE UNIVERSITY AND BROADER COMMUNITY. THE MUSEUM DRAWS ON THE INTELLECTUAL RESOURCES OF THE RESEARCH UNIVERSITY AND SERVES AS A LABORATORY OF THE ARTS DEDICATED TO MULTIDISCIPLINARY APPROACHES TO LEARNING.

USE OF ENDOWMENT FUNDS

SCHEDULE D, PART V, LINE 4

THE INTENDED USES OF THE ENDOWMENT FUNDS ARE FOR INSTRUCTION, RESEARCH, LIBRARY AND FINANCIAL AID.

LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER FIN 48

SCHEDULE D, PART X

DUKE UNIVERSITY ADOPTED THE REQUIREMENTS OF FIN 48 AND CONSIDERED ITS TAX POSITION. BASED ON THAT ANALYSIS, THE PROVISIONS OF FIN 48 ARE DEEMED IMMATERIAL TO THE UNIVERSITY'S FINANCIAL STATEMENTS, AND THEREFORE, NO FIN 48 SPECIFIC DISCLOSURES ARE MADE IN THE UNIVERSITY'S AUDITED FINANCIAL STATEMENTS FOR THE FISCAL YEAR ENDED JUNE 30, 2010.

ATTACHMENT 1SCHEDULE D, PART VII - INVESTMENTS - OTHER SECURITIES

<u>DESCRIPTION</u>	<u>BOOK VALUE</u>	<u>COST OR FMV</u>
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Part XIV Supplemental Information *(continued)*ATTACHMENT 1 (CONT'D)SCHEDULE D, PART VII - INVESTMENTS - OTHER SECURITIES

<u>DESCRIPTION</u>	<u>BOOK VALUE</u>	<u>COST OR FMV</u>
SHORT TERM INVESTMENTS	258,921,000.	FMV
US GOVERNMENT SECURITIES	4,320,000.	FMV
REAL ESTATE	607,856,000.	FMV
DOMESTIC BONDS AND		
LONG TERM NOTES	122,692,000.	FMV
DOMESTIC STOCKS	424,144,000.	FMV
INTERNATIONAL STOCKS	1,018,446,000.	FMV
INTERNATIONAL BONDS AND		
LONG TERM NOTES	75,635,000.	FMV
PRIVATE INVESTMENTS	868,820,000.	FMV
HEDGE STRATEGIES	1,053,817,000.	FMV
OTHER INVESTMENTS	71,629,000.	FMV
REAL ASSETS	572,819,000.	FMV
TOTALS	<u>5,079,099,000.</u>	

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
DUKE UNIVERSITY

Schools

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

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Employer identification number
56-0532129

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Schedule O (Form 990) <u>ATTACHMENT 11</u>	X	
4 Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Schedule O (Form 990).	X	
5 Does the organization discriminate by race in any way with respect to: a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Schedule O (Form 990).		X
6a Does the organization receive any financial aid or assistance from a governmental agency? . . . <u>ATTCH 12</u> . .	X	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990).		X
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 Schedule O Form (990)	X	

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

Schedule E (Form 990 or 990-EZ) 2009

**Schedule F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

- **Complete if the organization answered "Yes" to Form 990, Part IV, line 14b line 15, or line 16.**
► **Attach to Form 990. ► See separate instructions.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

- 2 For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States.

- 3 Activities per Region.** (Use Schedule F-1 (Form 990) if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
CENTRAL AMERICA/CARIBBEAN	0	5	FUNDRAISING		7,743.
CENTRAL AMERICA/CARIBBEAN	0	1	GRANTMAKING		22,635.
CENTRAL AMERICA/CARIBBEAN	1	26	PROGRAM SERVICES	RESEARCH	99,482.
CENTRAL AMERICA/CARIBBEAN	3	67	PROGRAM SERVICES	STUDY ABROAD	190,862.
CENTRAL AMERICA/CARIBBEAN	0	0	SEND AGENTS TO SEMINAR		99,077.
EAST ASIA AND THE PACIFIC	0	58	FUNDRAISING		333,021.
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		15,661.
EAST ASIA AND THE PACIFIC	1	64	PROGRAM SERVICES	RESEARCH	488,090.
EAST ASIA AND THE PACIFIC	1	101	PROGRAM SERVICES	STUDY ABROAD	1,483,341.
EAST ASIA AND THE PACIFIC	0	0	SEND AGENTS TO SEMINAR		1,607,723.
EUROPE	0	44	FUNDRAISING		128,118.
EUROPE	0	2	GRANTMAKING		11,201.
EUROPE	0	0	PROGRAM SERVICES	DONATION OF EQUIPMENT	79,190.
EUROPE	1	332	PROGRAM SERVICES	RESEARCH	824,739.
EUROPE	1	10	PROGRAM SERVICES	STUDY ABROAD	3,405,536.
EUROPE	0	0	SEND AGENTS TO SEMINAR		3,496,384.
MIDDLE EAST AND NORTH AFRICA	0	3	FUNDRAISING		29,678.
Totals ►					

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

Schedule F (Form 990) 2009

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ☐
 Use Schedule F-1 (Form 990) if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			CENT. AMERICA/CARIBBEAN	BUILD CLINIC			20,295.	BUILD CLINIC	FMV
			EUROPE/ICELAND/GREENLAND	GENERAL SUPPORT	15,175.	WIRE			
			SUB-SAHARAN AFRICA	MEDICAL EQUIPMENT			79,190.	EQUIPMENT	FMV
			SOUTH ASIA	GENERAL SUPPORT	7,100.	WIRE			
			SUB-SAHARAN AFRICA	BUILD SCHOOL	127,705.	WIRE			
			SUB-SAHARAN AFRICA	BULD SCHOOL			24,610.	INSURANCE	FMV
			SUB-SAHARAN AFRICA	BUILD SCHOOL	347,658.	WIRE			
			SUB-SAHARAN AFRICA	GENERAL SUPPORT	68,000.	WIRE			
			CENT. AMERICA/CARIBBEAN	COMPUTER EQUIPMENT			6,500.	COMP. EQUIP	FMV
			SUB-SAHARAN AFRICA	MEDICAL SUPPORT			71,775.	MED. EQUIP	FMV

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter **11**

3 Enter total number of other organizations or entities **11**

Part IV **Supplemental Information**

Complete this part to provide the information required in Part I, line 2, and any additional information.

PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS OUTSIDE U.S.

FORM 990, SCHEDULE F, LINE 2

DUKE UNIVERSITY PERIODICALLY APPROVES GRANTS AND TRANSFERS GRANT FUNDS TO

NUMEROUS ORGANIZATIONS OUTSIDE THE UNITED STATES. IN PARTICULAR FOR

SUBGRANT RECIPIENTS, A SERIES OF INTERNAL CONTROLS HAVE BEEN ESTABLISHED

WHICH INCLUDE DETERMINATION OF WHETHER AN AUDIT WILL BE REQUIRED. DUKE

UNIVERSITY HAS ESTABLISHED A DETAILED AND COMPETITIVE APPLICATION PROCESS

WHICH ENSURES PROPER PURPOSE AND USE OF THESE GRANT FUNDS PRIOR TO

ENGAGEMENT. FOLLOWING THE PROCUREMENT PROCESS, DUKE UNIVERSITY MONITORS

SUBSEQUENT BILLING AND PERFORMANCE OF THE GRANT RECIPIENTS. INVOICES

MUST BE SUBMITTED ACCORDING TO THE TERMS AND CONDITIONS WHICH MIRROR THE

TERMS AND CONDITIONS OF THE ULTIMATE GRANTOR. PRIOR TO PAYMENT

CENTRALIZED DEPARTMENTS REVIEW DOCUMENTATION TO ENSURE THE EXPENSES ARE

ALLOWABLE WITHIN THE TERMS OF THE GRANT. ULTIMATELY, THE ORGANIZATIONS

AWARDED THESE GRANT FUNDS MUST MONITOR THE APPROPRIATE DISTRIBUTION OF

THESE GRANT FUNDS IN THE ORDINARY COURSE OF BUSINESS AND REPORT SUCH

INFORMATION TO DUKE UNIVERSITY.

**SCHEDULE F-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule F (Form 990)

► Attach to Form 990 to list additional information for
Schedule F (Form 990) Part I, line 3; Part II, line 1; or Part III.
► See instructions for Schedule F (Form 990).

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
MIDDLE EAST AND NORTH AFRICA	0	24	PROGRAM SERVICES	RESEARCH	179,379.
MIDDLE EAST AND NORTH AFRICA	1	37	PROGRAM SERVICES	STUDY ABROAD	933,026.
MIDDLE EAST AND NORTH AFRICA	0	0	SEND AGENTS TO SEMINAR		160,003.
NORTH AMERICA	0	8	FUNDRAISING		8,563.
NORTH AMERICA	0	65	PROGRAM SERVICES	RESEARCH	68,024.
NORTH AMERICA	2	13	PROGRAM SERVICES	STUDY ABROAD	154,332.
NORTH AMERICA	0	0	SEND AGENTS TO SEMINAR		342,101.
RUSSIA/INDEPENDENT STATES	0	1	FUNDRAISING		7,287.
RUSSIA/INDEPENDENT STATES	0	10	PROGRAM SERVICES	RESEARCH	80,644.
RUSSIA/INDEPENDENT STATES	2	23	PROGRAM SERVICES	STUDY ABROAD	346,648.
RUSSIA/INDEPENDENT STATES	0	0	SEND AGENTS TO SEMINAR		55,648.
SOUTH AMERICA	0	4	FUNDRAISING		3,681.
SOUTH AMERICA	0	0	GRANTMAKING		1,000.
SOUTH AMERICA	0	50	PROGRAM SERVICES	RESEARCH	168,891.
SOUTH AMERICA	0	10	PROGRAM SERVICES	STUDY ABROAD	158,647.
SOUTH AMERICA	0	0	SEND AGENTS TO SEMINAR		322,123.
SOUTH ASIA	0	7	FUNDRAISING		129,319.
SOUTH ASIA	0	0	GRANTMAKING		7,100.
SOUTH ASIA	0	49	PROGRAM SERVICES	RESEARCH	299,635.
SOUTH ASIA	1	50	PROGRAM SERVICES	STUDY ABROAD	930,679.
SOUTH ASIA	0	0	SEND AGENTS TO SEMINAR		247,438.
SUB-SAHARAN AFRICA	0	26	FUNDRAISING		9,601.
Totals					

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

Schedule F-1 (Form 990) 2009

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Continuation Sheet for Schedule F (Form 990)

OMB No. 1545-0047

2009

Open to Public Inspection

▶ Attach to Form 990 to list additional information for Schedule F (Form 990) Part I, line 3; Part II, line 1; or Part III.
▶ See instructions for Schedule F (Form 990).

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	GRANTMAKING		622,536.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	DONATION OF EQUIPMENT	695.
SUB-SAHARAN AFRICA	0	18	PROGRAM SERVICES	EDUCATION/RESEARCH	36,911.
SUB-SAHARAN AFRICA	2	91	PROGRAM SERVICES	RESEARCH	519,394.
SUB-SAHARAN AFRICA	0	40	PROGRAM SERVICES	STUDY ABROAD	270,680.
SUB-SAHARAN AFRICA	0	0	SEND AGENTS TO SEMINAR		502,653.
Totals ▶	16	1,239			18,889,119.

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

Schedule F-1 (Form 990) 2009

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

DUKE UNIVERSITY

**Supplemental Information Regarding
Fundraising or Gaming Activities**

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

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

OMB No. 1545-0047

2009

**Open To Public
Inspection**

Employer identification number

56-0532129

Part I

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

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

- | | |
|---|--|
| a <input checked="" type="checkbox"/> Mail solicitations | e <input checked="" type="checkbox"/> Solicitation of non-government grants |
| b <input checked="" type="checkbox"/> Internet and email solicitations | f <input checked="" type="checkbox"/> Solicitation of government grants |
| c <input checked="" type="checkbox"/> Phone solicitations | g <input checked="" type="checkbox"/> Special fundraising events |
| d <input checked="" type="checkbox"/> In-person solicitations | |

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
GRENZEBACH GLIER AND ASSOCIATES	CAMPAIGN CONSULTING		X	0.	24,595.	0.
ADVANCEMENT RESOURCES	TRAINING		X	0.	46,000.	0.
Total				0.	70,595.	0.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 TORCH RELAY (event type)	(b) Event #2 FUNDRAISER WALK (event type)	(c) Other Events 12 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,551,056.	1,480,606.	2,758,185.	5,789,847.
	2 Less: Charitable contributions	1,550,932.	1,412,120.	1,789,228.	4,752,280.
	3 Gross income (line 1 minus line 2)	124.	68,486.	968,957.	1,037,567.
Direct Expenses	4 Cash prizes	0.	0.	23,344.	23,344.
	5 Noncash prizes	0.	895.	231,399.	232,294.
	6 Rent/facility costs	0.	0.	41,105.	41,105.
	7 Food and beverages	0.	6,569.	143,498.	150,067.
	8 Entertainment	0.	0.	12,218.	12,218.
	9 Other direct expenses	298,302.	68,825.	997,569.	1,364,696.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(1,823,724.)
	11 Net income summary. Combine line 3, column (d), and line 10				-786,157.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				(0.)
	8 Net gaming income summary. Combine line 1, column d, and line 7				0.

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If "No," explain: _____		
10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If "Yes," explain: _____		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

13 Indicate the percentage of gaming activity operated in:

- | | | | Yes | No |
|----------|-----------------------------|--------------|-----|----|
| a | The organization's facility | 13a % | | |
| b | An outside facility | 13b % | | |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? **15a**

- b**
- If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

- c**
- If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions:

- a**
- Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- 17a**

- b**
- Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

DUKE UNIVERSITY

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Employer identification number

56-0532129

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

1	(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 non-cash assistance	(h) Purpose of grant or assistance
	ALBERT SCHWEITZER FELLOWSHIP 330 BROOKLINE AVE., BOSTON, MA 02215	13-1982786	501 (C) (3)	20,000.				FELLOWSHIP PROGRAM PAYMENT
	AMERICAN COUNCIL OF LEARNED SOCIETIES 633 THIRD AVE., NEW YORK, NY 10017	13-1851145	501 (C) (3)	50,000.				ACLS UNIV CONSORTIUM
	AMERICAN MATHEMATICAL SOCIETY PO BOX 6248, PROVIDENCE, RI 02904-2213	05-0264797	501 (C) (3)	5,644.				GENERAL SUPPORT
	CARTER COMMUNITY SCHOOL 1305 W. CLUB BLVD, DURHAM, NC 27705	20-2701540	501 (C) (3)	7,000.				GENERAL SUPPORT
	CITY OF DURHAM 101 CITY HALL PLAZA, DURHAM, NC 27701	56-6000225	GOV'T ENTITY	300,000.				FIRE CONTRIBUTION
	DOC ARTS, INC 324 BLACKWELL ST., DURHAM, NC 27701	02-0548261	501 (C) (3)	180,000.				FESTIVAL SPONSORSHIP
	DURHAM CHAMBER LEGACY FOUNDATION PO BOX 3829, DURHAM, NC 27702	13-1132350	501 (C) (3)	51,250.				GENERAL SUPPORT
	DURHAM COMMUNITY LAND TRUSTEES 1208 W CHAPEL HL ST., DURHAM, NC 27701	56-1203878	501 (C) (3)	21,100.				COMMUNITY AFFAIRS
	DURHAM COUNTY 215 NORTH CHURCH ST., DURHAM, NC 27701	56-6000297	GOV'T ENTITY	27,500.				GENERAL SUPPORT
	DURHAM ECONOMIC RESOURCE CENTER 904 N ROXBORO RD., DURHAM, NC 27701	23-7208424	501 (C) (3)	13,250.				GENERAL SUPPORT
	EL CENTRO HISPANO INC 201 W MAIN STREET, DURHAM, NC 27701	56-2011661	501 (C) (3)	7,000.				DWI PREVENTION
	EMILY KRZYZEWSKI FAMILY CENTER 904 W CHAPEL HILL ST., DURHAM, NC 27701	56-2230469	501 (C) (3)	13,927.				COMMUNITY AFFAIRS

2 Enter total number of section 501(c)(3) and government organizations 62

3 Enter total number of other organizations 5

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

Schedule I (Form 990) 2009

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
2009 TEAM WORK AWARD	10	1,000.			
NATHAN AWARD	1	2,500.			
GLOBAL VENT CHALLENGE AWARD	1	1,250.			
2009 DURDENT PRIZE	4	3,000.			
LP SMITH AWARD IN MATHEMATICS 08-09	2	5,000.			
DISSERTATION AWARD 08-09	1	1,563.			
PROPOSAL AWARD 08-09	1	781.			

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

ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN U.S.

FORM 990, SCHEDULE I, LINE 2

DUKE UNIVERSITY PERIODICALLY APPROVES GRANTS AND TRANSFERS GRANT FUNDS TO

NUMEROUS ORGANIZATIONS WITHIN THE UNITED STATES. FOR SUBGRANT

RECIPIENTS, A SERIES OF INTERNAL CONTROLS HAVE BEEN ESTABLISHED WHICH

INCLUDE DETERMINATION OF WHETHER AN AUDIT WILL BE REQUIRED. DUKE

UNIVERSITY HAS ESTABLISHED A DETAILED AND COMPETITIVE APPLICATION PROCESS

WHICH ENSURES PROPER PURPOSE AND USE OF THESE GRANT FUNDS PRIOR TO

ENGAGEMENT. FOLLOWING THE PROCUREMENT PROCESS, DUKE UNIVERSITY MONITORS

SUBSEQUENT BILLING AND PERFORMANCE OF THE GRANT RECIPIENTS. INVOICES

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

MUST BE SUBMITTED ACCORDING TO THE TERMS AND CONDITIONS WHICH MIRROR THE

TERMS AND CONDITIONS OF THE ULTIMATE GRANTOR. PRIOR TO PAYMENT,

CENTRALIZED DEPARTMENTS REVIEW DOCUMENTATION TO ENSURE THE EXPENSES ARE

ALLOWABLE WITHIN THE TERMS OF THE GRANT. ULTIMATELY, THE ORGANIZATIONS

AWARDED THESE GRANTS MUST MONITOR THE APPROPRIATE DISTRIBUTION OF THESE

GRANT FUNDS IN THE ORDINARY COURSE OF BUSINESS AND REPORT SUCH

INFORMATION TO DUKE UNIVERSITY. STUDENTS' INSTITUTIONAL SCHOLARSHIPS AND

FINANCIAL AID IS POSTED DIRECTLY TO THEIR BURSAR ACCOUNTS. THEREFORE,

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

SUCH FUNDS ARE DIRECTLY APPLIED TO APPROPRIATE CHARGES WITHIN THE

STUDENTS' ACCOUNTS. GRANT/FELLOWSHIP PAYMENTS ARE PROCESSED ACCORDING TO

AWARD LETTERS, WHICH ARE REVIEWED AND SUBMITTED TO THE RECIPIENT IN

ADVANCE OF ACCEPTING FOR THE APPLICABLE SEMESTER. EACH PAYMENT IS

PREPARED ACCORDING TO THE AWARD LETTER BY A DEPARTMENTAL REPRESENTATIVE,

WHICH IS THEN REVIEWED AND APPROVED BY A DEPARTMENTAL SUPERVISOR. PRIOR

TO ISSUANCE A FINAL REVIEW AND APPROVAL IS PROCESSED BY THE CENTRAL

PAYMENT PROCESSING DEPARTMENT.

**SCHEDULE I-1
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

DUKE UNIVERSITY

Continuation Sheet for Schedule I (Form 990)► Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047

2009**Open to Public
Inspection****Employer identification number**

56-0532129

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
FAMILY HEALTH MINISTRIES, INC PO BOX 16725, CHAPEL HILL, NC 27516-6725	56-2206165	501(C)(3)	14,823.				HAITI SUPPORT
FOOD BANK OF NORTH CAROLINA 3808 TARHEEL DR., RALEIGH, NC 27609	56-1283426	501(C)(3)	10,000.				GENERAL SUPPORT
FOREST VIEW ELEMENTARY 3007 MOUNT SINAI RD., DURHAM, NC 27705-7906	56-6001021	GOV'T ENTITY	5,250.				SUMMER CONNECTIONS
NATIONAL FEDERATION OF PRIESTS 333 N MICHIGAN AVE., CHICAGO, IL 60601-4002	23-7003892	501(C)(3)	10,000.				SPE MINI-GRANT
NATIONAL HUMANITIES CENTER 7 ALEXANDER DR., RTP, NC 27709	59-1735367	501(C)(3)	85,000.				GENERAL SUPPORT
NEW HORIZONS (ACADEMY OF EXCELLENCE) 121 HUNT STREET, DURHAM, NC 27701	56-2202818	501(C)(3)	6,300.				GENERAL SUPPORT
PARTNERS FOR YOUTH 1313 HALLEY STREET, DURHAM, NC 27707	35-2206640	501(C)(3)	6,175.				COMMUNITY AFFAIRS
PROGRESSIVE HEALTH PARTNERSHIP 3040 FRESNO LANE, HOMEWOOD, IL 60430	11-7812367	501(C)(3)	12,000.				UGANDA MISSION PROJECT
R.C.G FARM 38 TAUNTON HILL RD., NEWTON, CT 06877	91-2158638		8,693.				HORSE SHOW PRIZE
RONALD MCDONALD HOUSE 506 ALEXANDER AVE., DURHAM, NC 27705	56-1220376	501(C)(3)	7,789.				GENERAL SUPPORT
SABI LLC 2616 ERWIN ROAD, DURHAM, NC 27705	27-2800770		25,000.				START UP CHALLENGE GRAND PRIZE WINNER
SCOTT CARTER FOUNDATION PO BOX 700448, TULSA, OK 74170-0448	73-1437230	501(C)(3)	20,000.				GENERAL SUPPORT
SPECIAL OLYMPICS OF NORTH CAROLINA 2200 GATEWAY CTR, MORRISVILLE, NC 27560	56-1149607	501(C)(3)	20,000.				ANNUAL DONATION
ST. MICHAELS EPISCOPAL CHURCH 647 DUNDEE AVE., BARRINGTON, IL 60010	36-2541957	501(C)(3)	6,000.				RENK OFFERING
ST. PAULS EVANGELICAL LUTHERAN CHURCH PO BOX 90974, DURHAM, NC 27708	56-0934772	501(C)(3)	10,000.				GENERAL SUPPORT

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

Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

DUKE UNIVERSITY

Continuation Sheet for Schedule I (Form 990)► Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.

OMB No. 1545-0047

2009**Open to Public
Inspection****Employer identification number**

56-0532129

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
STARS AND BARS FARM, INC PO BOX 1020, SOUTHERN PINES, NC 28388	23-2091105		5,650.				HORSE SHOW PRIZE
STUDENT ACTION WITH FARMWORKER 1317 W PETTIGREW ST., DURHAM, NC 27705	56-1789014	501(C)(3)	21,000.				GENERAL SUPPORT
STUDENT U 3601 RIDGE RD., DURHAM, NC 27705	56-0538019	501(C)(3)	19,000.				GENERAL SUPPORT
UNITED METHODIST COMMITTEE PO BOX 9068, NEW YORK, NY 10116	13-5562279	501(C)(3)	7,168.				HAITI EARTQUAKE RELIEF OFFERING
UNIVERSITY OF FLORIDA 339 WEIL HALL, GAINESVILLE, FL 32611	59-6002052	GOV'T ENTITY	90,000.				GENERAL SUPPORT
UNIVERSITY OF NORTH CAROLINA 100 EUROPA DR., CHAPEL HILL, NC 27217	56-1258660	GOV'T ENTITY	7,900.				GENERAL SUPPORT
WASHINGTON UNIVERSITY SCHOOL OF MEDICINE 660 S EULCID AVE., ST LOUIS, MO 63110	43-0653611	501(C)(3)	90,000.				GENERAL SUPPORT
ABUNDANT LIFE GHURCH OF GOD IN CHRIST 4400 OLD POOLE ROAD, RALEIGH, NC 27610	06-1074947	501(C)(3)		7,708.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
BARBEES CHAPEL 5517 BARBEE CHPL RD, CHAPEL HILL, NC 27514	56-2273364	501(C)(3)		6,500.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
CASA ESPERANZA MONTESSORI CHARTER SCHOOL 2600 SUMNER BLVD, RALEIGH, NC 27616	56-2243027	501(C)(3)		6,500.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
CENTRAL PARK SCHOOL FOR CHILDREN 724 FOSTER ST, DURHAM, NC 27701	04-3636336	501(C)(3)		16,181.	FMV	COMPUTER EQUIPMENT	GERNERAL SUPPORT
CHRISTIAN LIFE ACADEMY 6551-131 MERIDIEN DR, RALEIGH, NC 27616				8,100.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
CLEAN ENERGY OF DURHAM 1409 ALABAMA AVE, DURHAM, NC 27705-3107	71-1032962	501(C)(3)		5,949.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
DURHAM CRISIS RESPONSE CENTER PO BOX 52028, DURHAM, NC 27717	58-1496427	501(C)(3)		5,353.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
DURHAM PUBLIC SCHOOLS PO BOX 30002, DURHAM, NC 27702	56-6001021	GOV'T ENTITY		222,747.	FMV	FURNITURE/COMPUTERS	GENERAL SUPPORT

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

Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)****Continuation Sheet for Schedule I (Form 990)**

OMB No. 1545-0047

2009**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service**► Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.**

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
DURHAM RESCUE MISSION PO BOX 11858, DURHAM, NC 27703	58-1482590	501(C)(3)		71,812.	FMV	FURNITURE/EQUIPMENT	GENERAL SUPPORT
THE EVANGELISTIC PRAYER BAND, INC 1003 E MAIN ST, DURHAM, NC 27701	56-1372686	501(C)(3)		7,800.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
FRIENDSHIP FELLOWSHIP OUTREACH CENTER PO BOX 11294, DURHAM, NC 27703-0294	56-2279699	501(C)(3)		7,000.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
GREATER WORKS OUTREACH 3811 WILDROSE DR, DURHAM, NC 27704				7,800.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
HABITAT FOR HUMANITY, INC 419 WEST CHURCH ST, AMERICUS, GA 31709	91-1914868	501(C)(3)		6,817.	FMV	FURNITURE	GENERAL SUPPORT
HOLD YOUR HEAD UP 3709 FREEDOM RD, DURHAM, NC 27703	80-0192817	501(C)(3)		9,259.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
HOUSE OF REFUGE 947 E MAIN ST, DURHAM, NC 27701	56-1988451	501(C)(3)		24,585.	FMV	FURNITURE/EQUIPMENT	GENERAL SUPPORT
J-JIREH SERVICES, INC PO BOX 352, SOUTH HILL, VA 23970	02-0783242	501(C)(3)		5,693.	FMV	FURNITURE/EQUIPMENT	GENERAL SUPPORT
KESTREL HEIGHTS SCHOOL 4700 SOUTH ALSTON AVE, DURHAM, NC 27713	56-1996482	501(C)(3)		7,066.	FMV	FURNITURE/EQUIPMENT	GENERAL SUPPORT
LINCOLN MEMORIAL BAPTIST CHURCH 1500 S ROXBORO ST, DURHAM, NC 27707	56-1750968	501(C)(3)		7,000.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
THE LOVE CENTER 3509 N DUKE ST, DURHAM, NC 27704		501(C)(3)		7,112.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
MILLBROOK ELEMENTARY 3317 DERBYSHIRE PLACE, RALEIGH, NC 27604	56-1137759	501(C)(3)		7,480.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
MOUNT ZION CHRISTIAN CHURCH 3519 FAYETTEVILLE ST, DURHAM, NC 27707	56-1443711	501(C)(3)		7,000.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
MUSTARD SEED 1405 NEW BERN AVE, RALEIGH, NC 27610	56-1765360	501(C)(3)		7,000.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
NORTHERN ORANGE EMPOWERMENT GROUP 4515 ORANGE GROVE RD,	72-1557400	501(C)(3)		7,000.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT

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Schedule I-1 (Form 990) 2009

**SCHEDULE I-1
(Form 990)**

Continuation Sheet for Schedule I (Form 990)

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

► **Attach to Form 990 to list additional information for
Schedule I (Form 990), Part II or Part III.**

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(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 non-cash assistance	(h) Purpose of grant or assistance
OE ENTERPRISES, INC ELIZABETH BRADY RD, HILLSBOROUGH, NC 27278	57-0740781	501(C)(3)		11,901.	FMV	FURNITURE/EQUIPMENT	GENERAL SUPPORT
OXFORD HOUSE 203 PEKOE ST, DURHAM, NC 27707	52-1582231	501(C)(3)		7,227.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
PINES COMMUNITY CENTER, INC 107 JOHNSON ST, CHAPEL HILL, NC 27514	56-1898531	501(C)(3)		6,500.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
SHAW UNIVERSITY 118 E SOUTH ST, RALEIGH, NC 27601	56-0530235	501(C)(3)		61,967.	FMV	FURNITURE	GENERAL SUPPORT
STAR FOUNDATION 7805 SENTER FARM RD, APEX, NC 27539	65-1175267	501(C)(3)		7,061.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
TRAINING FOR SUCCESS 121 HUNT ST, DURHAM, NC 27701	75-3064545	501(C)(3)		5,850.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
TROSA 1820 JAMES ST, DURHAM, NC 27707	56-1861158	501(C)(3)		34,756.	FMV	FURNITURE	GENERAL SUPPORT
WARREN COUNTY TRAINING SCHOOL PO BOX 549, NORLIN, NC 27563	56-1768226	501(C)(3)		7,945.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT
WASHINGTON COUNTY REGIONAL MEDICAL CTR 610 SPARTA RD, SANDERSVILLE, GA 32810		GOV'T ENTITY		11,328.	FMV	FURNITURE	GENERAL SUPPORT
WORLD HARVEST INTERNATIONAL FELLOWSHIP 1230 AVONDALE DR, DURHAM, NC 27703	52-1837602	501(C)(3)		6,980.	FMV	COMPUTER EQUIPMENT	GENERAL SUPPORT

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Schedule I-1 (Form 990) 2009

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
OUTSTANDING DEPARTMENTAL SERVICE AWARD 08-09	1	781.			
2009 MIDDLESWORTH AWARD	7	4,000.			
OUTSTANDING TEACHING ASSISTANTSHIP AWARD	1	500.			
OUTSTANDING MASTER'S THESIS AWARD 08-09	1	500.			
OUTSTANDING RESEARCH AWARD 08-09	1	250.			
BEST AWARD PRIZE WINNER 2009	1	6,250.			
DAMON RUNYON AWARD	1	2,000.			
2009 GRAD STUDENT SYMPOSIUM WEBSITE DESIGN	1	150.			
SPEAKER AWARD	9	1,000.			
COVER ART AWARD	4	484.			
NATHAN AWARD	1	2,500.			
SPEECH CONTEST	2	150.			
POSTER AWARD	25	4,088.			
EMERGENCY GRANT	1	1,500.			
AWARD	3	650.			
DART AWARD	2	781.			
WOMEN'S AWARD	1	500.			
ELEVATOR PITCH WINNER	14	3,250.			
HEALTH SERVICE WINNER	1	100.			

Schedule I-1 (Form 990) 2009

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CASE BOWL WINNER	12	3,500.			
ELECTRICAL COMPUTER & ENGINEERING AWARD	2	150.			
WINTER FORUM START UP COMPETITION	10	2,564.			
IBM CASE COMPETITION	18	7,495.			
LASA CASE COMPETITION	2	5,000.			
CC ANNUAL MEETING AWARD	1	500.			
DUKE HONOR COUNCIL SPRING ESSAY CONTEST	2	750.			
BLUE DEVIL WEEKEND AWARD	1	184.			
LOUIS SUDLER PRIZE	1	2,000.			
MERIT AWARD	1	1,000.			
RESEARCH PROJECT AWARD	5	4,796.			
ERNESTINE FRIEDL AWARD	3	4,000.			
DORA ANNE LITTLE SERVICE AWARD	1	1,500.			
DUKE HONOR COUNCIL ART CONTEST AWARD	4	500.			
GENDER & RACE RESEARCH MERIT AWARD	1	1,000.			
ALEX COHEN AWARD	2	3,450.			
OUTSTANDING STUDENT AWARD	9	4,975.			
UTKU AWARD	3	853.			
WILLIAM KLENZ AWARD	1	225.			

Schedule I-1 (Form 990) 2009

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
HENRY SCHUMAN MUSIC PRIZE	1	350.			
JULIA WILKINSON MUELLER PRIZE	1	300.			
JAMESON JONES PREACHING AWARD	3	1,500.			
MCMURRY RICHEY AWARD	5	750.			
TRAVEL AWARD	5	9,900.			
2010 GRADUATION DEAN'S RECOGNITION AWARD	1	200.			
THOMAS JEFFERSON AWARD	1	250.			
DUKE RELAY LIFE SPONSORSHIP	1	500.			
JUDITH MCDADE PRIZE	1	100.			
JOHN HOPE FRANKLIN AWARD	6	6,000.			
PAUL FARMER AWARD	1	156.			
STUDENT IMPACT AWARD	1	100.			
VISUAL STUDIES INITIATIVE AWARD	2	600.			
VISUAL ART AWARD	2	600.			
SUE & LEE NOEL AWARD	2	600.			
NANCY KANEB ART HISTORY AWARD	2	600.			
ESSAY AWARD	4	1,000.			
STUDY POSTER SESSION AWARD	3	323.			
SHERRERD AWARD 09-10	1	781.			

Schedule I-1 (Form 990) 2009

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
09-10 SEAGER AWARD	2	1,281.			
09-10 VAIL AWARD	5	2,500.			
TEACHERS ASSISTANT AWARD	9	1,500.			
DANCE AWARD	2	500.			
VIDEO CONTEST	4	6,300.			
HAL BRODY AWARD	1	250.			
SARA LABOSKEY MEMORIAL FUND	2	1,000.			
AWARD HIGHEST THESIS HONORS	2	400.			
TERRY WELBY TYLER JR AWARD	1	1,000.			
SCHUTTE SENIOR AWARD	1	1,000.			
ANNE FLEXNER MEMORIAL AWARD	3	1,500.			
DEAN'S AWARD	1	3,000.			
RELAY LIFE EVENT PRIZES	1	262.			
JULIA HARPER AWARD	1	500.			
OUTSTANDING ABSTRACT FOR RESEARCH DAY AWARD	1	500.			
ALLEN STARLING JOHNSON JR POSTER AWARD	7	2,625.			
AMI OUTSTANDING FILMAKER AWARD	1	500.			
IRON CHEF COMPETITION	1	220.			
2010 SMARTHOME INNOVATION PRIZE	3	225.			

Schedule I-1 (Form 990) 2009

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
<u>MOST ORIGINAL THESIS AWARD</u>	1	250.			
<u>DANCE PROJECT AWARD</u>	3	750.			
<u>STAY IN FOCUS FOLLOW UP GRANT</u>	1	500.			
<u>CRITICAL ESSAY AWARD</u>	1	250.			
<u>STANLEY E FISH AWARD</u>	1	250.			
<u>AMERICAN LITERATURE AWARD</u>	1	250.			
<u>2010 ELI SUMMER LEADERSHIP AWARD</u>	3	7,350.			
<u>BH SMITH AWARD</u>	1	390.			
<u>HOLTON PRIZE WINNER</u>	5	1,700.			
<u>MEMS FACULTY AWARD</u>	1	100.			
<u>PI TAU SIGMA AWARD</u>	3	300.			
<u>KARL MENDER AWARD</u>	10	2,047.			
<u>JULIA DALE AWARD</u>	6	1,340.			
<u>DUKE START UP CHALLENGE WINNER</u>	11	12,000.			
<u>TEACHING AWARD</u>	1	350.			
<u>ALDEN AWARD</u>	1	250.			
<u>GRADER AWARD</u>	2	500.			
<u>PILKINGTON MEM. AWARD</u>	1	500.			
<u>LEONARDO DA VINCI AWARD</u>	3	600.			

Schedule I-1 (Form 990) 2009

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
HELMHOLTZ AWARD	2	400.			
BME EXCELLENCE IN MS STUDIES AWARD	1	300.			
LANGUAGE STUDY IN INDIA AWARD	1	500.			
RARE MUSIC COMPETITION	2	200.			
2010 MARY MCLEOD BETHUNE WRITING AWARD	4	450.			
COLE DISSERTATION COMPETITION	3	1,500.			
SPRING CASENOTE WRITING COMPETITION	13	2,500.			
HORSE SHOW PRIZE	15	8,260.			
2009 FITZGERALD POSTER AWARD	1	150.			
2010 DEANS RECOGNITION AWARD	4	800.			
2010 RESEARCH CAREER DAY AWARD	1	500.			
AA PRESIDENT INTERNATIONAL AWARD	1	250.			
DNP OUTSTANDING CAPSTONE PROJECT AWARD	1	250.			
NCCSAS AWARD	3	725.			
CERMAK MDRS AWARD	2	1,000.			
BRUCE J HEIM FND LEADERSHIP MERIT AWARD	2	2,000.			
DISSERTATION AWARD	1	250.			
FOERSTER PRIZE	2	1,250.			
FUQUA START UP AWARD	1	250.			

Schedule I-1 (Form 990) 2009

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
2009 GLOBAL VENTURE CHALLENGE AWARD	2	3,203.			
GRAND CHALLENGE POSTER PRIZE	1	100.			
HAAS ESSAY PRIZE	1	1,200.			
INTER GREEK COUNCIL SCHOLARSHIP AWARD	1	1,000.			
COY JANTZ FELLOWSHIP	2	4,500.			
JOHN HOPKIN FRANKLIN PROGRAM AWARD	2	500.			
KARL E ZENER AWARD	2	200.			
MAX KADE PRIZE	1	1,500.			
MELOSH AWARD	1	781.			
OUTSTANDING ACHIEVEMENT AWARD	1	500.			
DUKE CHAPEL PATHWAYS LILLY FELLOWS	1	500.			
REIMBURSEMENT OF MEDICAL COPAY ASSISTANCE	1	620.			
SCRIPPS NATIONAL BEE	1	2,620.			
SMDB BEST PAPER AWARD	1	500.			
UG RESEARCH AWARD	2	750.			
UTILITY BILL ASSISTANCE	4	484.			
WERC AWARD	5	5,000.			
UNDERGRADUATE SCHOLARSHIPS	3,509	94,190,155.			
GRADUATE SCHOLARSHIPS	3,019	52,919,969.			

Schedule I-1 (Form 990) 2009

Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PRE-DOCTORIAL SCHOLARSHIPS	2,492	32,997,588.			
UNDERGRADUATE ATHLETIC SCHOLARSHIPS	386	10,080,182.	2,029,327.	FMV	ROOM & BOARD
GRADUATE ATHLETIC SCHOLARSHIPS	9	98,547.	16,327.	FMV	ROOM & BOARD
INTERNSHIP STIPEND	39	220,856.			
GRADUATE STIPEND	1,189	17,569,902.			
PRE-DOCTORAL STIPEND	41	217,472.			
UNDERGRADUATE STIPEND	159	1,504,572.			
POSTDOCTORAL STIPEND	24	298,436.			
GRADUATE TUITION SCHOLARSHIP	37	341,433.			
PRE-DOCTORAL TUITION SCHOLARSHIP	1	8,952.			
UNDERGRADUATE TUITION PAYMENT	12	25,341.			

Schedule I-1 (Form 990) 2009

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

▶ **Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.**

▶ **Attach to Form 990.** ▶ **See separate instructions.**

OMB No. 1545-0047

2009

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Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

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

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

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

Yes No

1b

X

2

X

4a

X

4b

X

4c

X

5a

X

5b

X

6a

X

6b

X

7

X

8

X

9

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

Schedule J (Form 990) 2009

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Use Schedule J-1 if additional space is needed.

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

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
PAMELA J BERNARD	(i) 385,377.	0.	16,500.	30,128.	15,083.	447,088.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
KEMEL DAWKINS	(i) 301,172.	33,000.	16,500.	30,128.	15,391.	396,191.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
VICTOR J DZAU MD	(i) 1,020,248.	2,037,328.	15,805.	188,378.	14,407.	3,276,166.	1,045,000.
	(ii) 0.	0.	0.	0.	0.	0.	0.
PETER H LANGE	(i) 488,664.	0.	16,500.	30,128.	7,717.	543,009.	0.
	(ii) 18,250.	0.	0.	0.	0.	18,250.	0.
JAMES S ROBERTS	(i) 297,165.	0.	0.	30,128.	35,742.	363,035.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
TALLMAN TRASK III	(i) 516,172.	0.	16,500.	30,128.	15,813.	578,613.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
NEAL TRIPLET	(i) 427,899.	237,677.	16,500.	559,314.	12,429.	1,253,819.	81,667.
	(ii) 0.	0.	0.	0.	0.	0.	0.
J SCOTT GIBSON	(i) 338,304.	126,406.	16,500.	30,128.	17,325.	528,663.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
RICHARD V RIDDELL	(i) 254,369.	0.	16,500.	30,128.	6,623.	307,620.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
RICHARD H BRODHEAD	(i) 753,273.	0.	33,472.	30,128.	62,151.	879,024.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
DAVID B ADCOCK	(i) 141,527.	0.	0.	17,258.	12,599.	171,384.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
NANCY C ANDREWS	(i) 448,220.	123,316.	16,500.	30,128.	11,200.	629,364.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
ALICE E GOULD	(i) 229,634.	28,392.	0.	68,743.	439.	327,208.	15,188.
	(ii) 0.	0.	0.	0.	0.	0.	0.
ANDERS W HALL	(i) 241,519.	159,280.	16,500.	125,345.	13,445.	556,089.	59,792.
	(ii) 0.	0.	0.	0.	0.	0.	0.
GEORGE L MCLENDON	(i) 370,155.	0.	0.	30,128.	12,320.	412,603.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
ANDREAS RITTER	(i) 174,532.	37,146.	147,338.	30,128.	9,573.	398,717.	32,813.
	(ii) 0.	0.	0.	0.	0.	0.	0.

Schedule J (Form 990) 2009

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

CHARTER TRAVEL

SCHEDULE J, PART 1, LINE 1A

MICHAEL KRZYZEWSKI AND DAVID CUTCLIFFE HAVE USED CHARTER TRAVEL

SERVICES. TO THE EXTENT SUCH TRAVEL WAS NOT FOR BUSINESS PURPOSES, SUCH

AMOUNTS WERE INCLUDED IN TAXABLE INCOME OF THE INDIVIDUAL.

TRAVEL FOR COMPANIONS

SCHEDULE J, PART 1, LINE 1A

COMPANIONS HAVE TRAVELED WITH MICHAEL KRZYZEWSKI. TO THE EXTENT IT WAS

PERSONAL IN NATURE, SUCH AMOUNTS WERE INCLUDED IN HIS TAXABLE INCOME.

TAX INDEMNIFICATION

SCHEDULE J, PART 1, LINE 1A

RICHARD BRODHEAD, DAVID CUTCLIFFE, MICHAEL KRZYZEWSKI, AND KEVIN WHITE

RECEIVED SOME BENEFIT THAT WAS GROSSED UP TO COMPENSATE FOR WITHHOLDING

OF TAXES.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

RESIDENCE FOR PERSONAL USE

SCHEDULE J, PART 1, LINE 1A

RICHARD BRODHEAD WAS PROVIDED WITH ON CAMPUS LIVING FACILITIES AS A

CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF THE UNIVERSITY. KEVIN

WHITE WAS PROVIDED WITH AN ON CAMPUS APARTMENT AS A CONDITION OF

EMPLOYMENT AND FOR THE CONVENIENCE OF THE UNIVERSITY. ACCORDINGLY, SUCH

LODGING IS NOT INCLUDED IN TAXABLE INCOME.

PERSONAL SERVICES

SCHEDULE J, PART 1, LINE 1A

THE UNIVERSITY PROVIDES HOUSEKEEPING SERVICES TO MAINTAIN ALL UNIVERSITY

FACILITIES, INCLUDING THE FACILITY USED BY THE UNIVERSITY'S PRESIDENT. IN

ADDITION TO PROVIDING A PERSONAL RESIDENCE THAT IS FOR THE CONVENIENCE OF

THE UNIVERSITY, THIS FACILITY IS USED THROUGHOUT THE YEAR FOR NUMEROUS

DUKE RELATED FUNCTIONS. RICHARD BRODHEAD WAS PROVIDED WITH PERSONAL

FINANCIAL SERVICES. VICTOR J DZAU WAS PROVIDED WITH PERSONAL LEGAL

SERVICES. TO THE EXTENT SUCH SERVICES WERE NOT FOR BUSINESS PURPOSES,

SUCH AMOUNTS WERE INCLUDED IN THE TAXABLE INCOME OF THESE INDIVIDUALS.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

CLUB DUES

SCHEDULE J, PART 1, LINE 1A

DAVID CUTCLIFFE WAS PROVIDED WITH A CLUB MEMBERSHIP. THE AMOUNT WAS
INCLUDED IN TAXABLE INCOME.

POLICY

SCHEDULE J, PART 1, LINE 1B

DUKE POLICY GOVERNS THE NATURE AND TYPE OF ALLOWABLE EXPENDITURES AND
PAYMENTS, INCLUDING REQUIREMENTS TO PROVIDE SUPPORTING DOCUMENTATION
DETAILING THE TRANSACTION AND BUSINESS PURPOSE. ANY APPROVED EXCEPTIONS
TO POLICY ARE DOCUMENTED IN CORRESPONDENCE OR EMPLOYMENT AGREEMENTS.

SEVERANCE PAYMENT

SCHEDULE J, PART 1, LINE 4A

ANDREAS RITTER RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$147,338 IN
2009. THE TERMS AND CONDITIONS OF THE AGREEMENT DID NOT REQUIRE
PARTICIPATION.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN

SCHEDULE J, PART I, LINE 4B

THE FOLLOWING INDIVIDUALS PARTICIPATED IN AND RECEIVED PAYMENTS UNDER A

DEFERRED COMPENSATION PLAN DESCRIBED UNDER SECTION 457(F) OF THE INTERNAL

REVENUE CODE:

VICTOR J DZAU MD \$ 1,013,017

NEAL F TRIPLETT \$ 237,677

ALICE E GOULD \$ 28,392

ANDERS W HALL \$ 159,280

ANDREAS RITTER \$ 36,804

MICHAEL W KRZYZEWSKI \$ 576,814

SUCH AMOUNTS WERE SUBJECT TO A SUBSTANTIAL RISK OF FORFEITURE AS DEFINED

UNDER IRC SECTION 457(F).

**SCHEDULE J-1
(Form 990)**

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule J (Form 990)

- ▶ **Attach to Form 990 to list additional information for Schedule J (Form 990), Part II.**
▶ **See Instructions for Schedule J (Form 990).**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (Schedule J, Part II)

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
DAVID N CUTCLIFFE	(i)	1,392,666.	302,186.	20,175.	30,128.	17,740.	1,762,895.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
MICHAEL W KRZYZEWSKI	(i)	1,978,031.	2,222,543.	63,417.	420,128.	15,451.	4,699,570.	675,000.
	(ii)	0.	0.	0.	0.	0.	0.	0.
RALPH SNYDERMAN	(i)	1,029,171.	0.	2,579.	30,128.	15,163.	1,077,041.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
KEVIN M WHITE	(i)	775,920.	315.	71,320.	30,128.	30,976.	908,659.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
B HOFER MILAM	(i)	325,862.	0.	16,500.	30,128.	13,518.	386,008.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JOHN NOONAN	(i)	247,711.	0.	0.	30,128.	15,304.	293,143.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
GAVIN BRITZ	(i)	521,542.	240,000.	0.	30,128.	8,488.	800,158.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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

Schedule J-1 (Form 990) 2009

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SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the Organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RALPH EADS III TRUSTEE	1.00	X						0.	0.	0.
PAUL FARMER TRUSTEE	1.00	X						0.	0.	0.
PETER J KAHN TRUSTEE	1.00	X						0.	0.	0.
MARTHA L MONSERRATE TRUSTEE	1.00	X						0.	0.	0.
ANN PELHAM TRUSTEE	1.00	X						0.	0.	0.
RYAN TODD TRUSTEE	1.00	X						0.	0.	0.
XING ZONG TRUSTEE	20.00	X						23,842.	0.	0.
PAMELA J BERNARD VP & UNIVERSITY COUNSEL	40.00			X				401,877.	0.	44,478.
VICTOR J DZAU MD CHANCELLOR HEALTH AFFAIRS	40.00			X				3,073,381.	0.	200,764.
PETER H LANGE PROVOST	40.00			X				505,164.	18,250.	36,909.
TALLMAN TRASK III EXECUTIVE VICE PRESIDENT	40.00			X				532,672.	0.	44,951.
RICHARD V RIDDELL VP & UNIVERSITY SECRETARY	40.00			X				270,869.	0.	36,275.
B HOFER MILAM VP OF FINANCE & TREASURER	40.00			X				342,362.	0.	43,029.
KEMEL DAWKINS VP CAMPUS SERVICES	40.00				X			350,672.	0.	44,951.
JAMES S ROBERTS EXEC VICE-PROVOST FIN & ADMIN	40.00				X			297,165.	0.	65,310.
NEAL TRIPLET CHIEF INVESTMENT OFFICER	40.00				X			682,076.	0.	570,916.
J SCOTT GIBSON EXEC VICE DEAN OF ADMIN, SOM	40.00				X			481,210.	0.	46,812.
NANCY C ANDREWS VICE CHAN OF ACADEMIC AFFAIRS	40.00				X			588,036.	0.	40,472.
ALICE E GOULD INVESTMENT MANAGER	40.00				X			258,026.	0.	68,743.
ANDERS W HALL INVESTMENT MANAGER	40.00				X			417,299.	0.	136,751.
GEORGE L MCLENDON DEAN, TRINITY COLLEGE OF A & S	40.00				X			370,155.	0.	41,724.

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

Schedule J-2 (Form 990) 2009

Continuation Sheet for Form 990

OMB No. 1545-0047

2009

Open to Public Inspection

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

▶ See the Instructions for Form 990.

Name of the Organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

[illegible]

**SCHEDULE K
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

DUKE UNIVERSITY

Supplemental Information on Tax-Exempt Bonds**► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information on Schedule O (Form 990).****► Attach to Form 990. See separate instructions.**

OMB No. 1545-0047

2009**Open to Public
Inspection****Employer identification number**

56-0532129

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer	
						Yes	No	Yes	No
A NORTH CAROLINA CAPITAL FACILITIES FINANCE AGENCY	56-1592154	65819GCF3	06/24/2005	216,311,656.	SEE SCHEDULE O		X		X
B NORTH CAROLINA CAPITAL FACILITIES FINANCE AGENCY	56-1592154	65819GDR6	11/02/2006	397,964,337.	SEE SCHEDULE O		X		X
C NORTH CAROLINA CAPITAL FACILITIES FINANCE AGENCY	56-1592154	65819GES3	01/09/2007	128,278,030.	SEE SCHEDULE O		X		X
D NORTH CAROLINA CAPITAL FACILITIES FINANCE AGENCY	56-1592154	65819GFT0	02/25/2009	252,585,282.	SEE SCHEDULE O		X		X
E NORTH CAROLINA CAPITAL FACILITIES FINANCE AGENCY	56-1592154	65818NVA9	12/15/2009	1,118,782,000.	SEE SCHEDULE O		X		X

Part II Proceeds

	A		B		C		D		E	
1 Total proceeds of issue	220,393,639.		404,922,865.		128,278,030.		253,118,585.		26,549,000.	
2 Gross proceeds in reserve funds	0.		0.		0.		0.		0.	
3 Proceeds in refunding or defeasance escrows	69,239,409.		262,529,249.		127,234,526.		109,568,000.		26,549,000.	
4 Other unspent proceeds	0.		0.		0.		19,403,507.		0.	
5 Issuance costs from proceeds	1,656,696.		2,793,592.		1,043,504.		2,182,144.		0.	
6 Working capital expenditures from proceeds	226,594.		0.		0.		0.		0.	
7 Capital expenditures from proceeds	149,270,939.		139,600,024.		0.		121,964,934.		0.	
8 Year of substantial completion	2007		2008		2004				2004	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
9 Were the bonds issued as part of a current refunding issue?	X		X			X	X		X	
10 Were the bonds issued as part of an advance refunding issue?		X	X		X			X		X
11 Has the final allocation of proceeds been made?	X		X		X			X		X
12 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X		X	

Part III Private Business Use

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X				X		X
2 Are there any lease arrangements with respect to the financed property which may result in private business use?		X		X				X		X

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

Schedule K (Form 990) 2009

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Part III Private Business Use (Continued)

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts with respect to the financed property which may result in private business use?	X		X				X		X	
b Are there any research agreements with respect to the financed property which may result in private business use?	X		X				X		X	
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X		X				X		X	
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶										
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶										
6 Total of lines 4 and 5										
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X				X		X	

Part IV Arbitrage

	A		B		C		D		E	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X		X
2 Is the bond issue a variable rate issue?		X		X		X		X	X	
3a Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		X		X		X		X		X
b Name of provider										
c Term of hedge										
4a Were gross proceeds invested in a GIC?	X		X			X		X		X
b Name of provider	MORGAN STANLEY & CO		MORGAN STANLEY & CO							
c Term of GIC	1.800		1.900							
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X			X						
5 Were any gross proceeds invested beyond an available temporary period?	X			X		X		X		X
6 Did the bond issue qualify for an exception to rebate?		X	X		X			X		

Schedule K (Form 990) 2009

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

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

OMB No. 1545-0047

2009

**Open To Public
Inspection**

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No

Total ▶ \$

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
2 RECIPIENTS		378,688. RESEARCH GRANTS
1 RECIPIENT		7,400. AWARD

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
ATTACHMENT 13					

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

Schedule L (Form 990 or 990-EZ) 2009

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2009

**Open To Public
Inspection**

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art-Works of art	X	18	71,413.	FMV
2 Art-Historical treasures				
3 Art-Fractional interests				
4 Books and publications	X		227,552.	FMV
5 Clothing and household goods	X		14,832.	FMV
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities-Publicly traded	X	414	3,295,955.	FMV
10 Securities-Closely held stock				
11 Securities-Partnership, LLC, or trust interests				
12 Securities-Miscellaneous				
13 Qualified conservation contribution-Historic structures				
14 Qualified conservation contribution-Other				
15 Real estate-Residential	X	1	158,187.	FMV
16 Real estate-Commercial				
17 Real estate-Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>ATCH 2</u>)		2,087.	324,686.	
26 Other ▶ (<u> </u>)				
27 Other ▶ (<u> </u>)				
28 Other ▶ (<u> </u>)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 13

	Yes	No
30 a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2009

JSA

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Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

USE OF THIRD PARTIES TO SOLICIT, PROCESS, OR SELL NONCASH CONTRIBUTIONS

SCHEDULE M, PART 1, LINE 32B

DUKE UNIVERSITY USES INVESTMENT BROKERS TO SELL SECURITIES. DUKE

UNIVERSITY MAY OCCASSIONALLY USE THIRD PARTIES TO SELL OTHER TYPES OF

NON-CASH CONTRIBUTIONS, AS THE NEED ARISES.

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.ATTACHMENT 2SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
RECREATIONAL EVENT TICKET	X	1948	232,197.	FMV
MISCELLANEOUS	X	132	56,800.	FMV
EQUIPMENT	X	7	35,689.	FMV
TOTALS		<u>2,087.</u>	<u>324,686.</u>	

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

DUKE UNIVERSITY

Employer identification number

56-0532129

ATTACHMENT 3

BUSINESS RELATIONSHIPS

PART VI, SECTION A, LINE 2

TRUSTEES BRUCE KARSH, THE HONORABLE DANIEL TERRY BLUE JR., PRESIDENT

RICHARD BRODHEAD, EXECUTIVE VICE PRESIDENT TALLMAN TRASK III, AND CHIEF

INVESTMENT OFFICER NEAL TRIPLETT ARE ALL DIRECTORS OF DUMAC, LLC.

ELECTION OF GOVERNING BODY MEMBERS

PART VI, SECTION A, LINE 7A

OF THE 36 ELECTED TRUSTEES FOR DUKE UNIVERSITY, TWELVE ARE ELECTED BY THE

NORTH CAROLINA CONFERENCE OF THE UNITED METHODIST CHURCH AND ANOTHER

TWELVE ARE ELECTED BY THE WESTERN NORTH CAROLINIA CONFERENCE OF THE

UNITED METHODIST CHURCH.

REVIEW OF 990 BY BOARD

PART VI, SECTION B, LINE 11

DUKE UNIVERSITY'S DRAFT FORM 990 IS DISTRIBUTED TO THE AUDIT COMMITTEE OF

THE UNIVERSITY TRUSTEES IN ADVANCE OF THE MEETING. AT THE MEETING, THE

DUKE UNIVERSITY TAX DIRECTOR, THE PERSON RESPONSIBLE FOR THE PREPARATION

OF THE UNIVERSITY'S FORM 990, REVIEWS THE FORM 990 WITH THE COMMITTEE.

THE COMMITTEE IS OFFERED AN OPPORTUNITY TO ASK QUESTIONS BOTH AT THE

MEETING AND ANYTIME THEREAFTER BY CONTACTING THE TAX DIRECTOR OR DUKE

UNIVERSITY'S TAX ATTORNEY, WHO IS ALSO INVOLVED WITH THE PREPARATION OF

DUKE UNIVERSITY'S FORM 990.

SUBSEQUENTLY, A DRAFT FORM 990 IS DISTRIBUTED TO THE FULL BOARD OF

Name of the organization DUKE UNIVERSITY	Employer identification number 56-0532129
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ATTACHMENT 3 (CONT'D)

TRUSTEES OF THE UNIVERSITY PRIOR TO FILING AND IN ADVANCE OF A MEETING.

THERE IS OPPORTUNITY FOR THE TRUSTEES TO ASK QUESTIONS OF THE TAX
DIRECTOR AND UNIVERSITY COUNSEL AT THE MEETING OR ANYTIME THEREAFTER.

CONFLICT OF INTEREST POLICY

PART VI, SECTION B, LINE 12C

THE PRESIDENT, OFFICERS, AND EMPLOYEES WITH ADMINISTRATIVE
RESPONSIBILITIES SHALL EXERCISE THE UTMOST GOOD FAITH IN ALL TRANSACTIONS
TOUCHING UPON THEIR DUTIES TO DUKE UNIVERSITY AND ITS PROPERTY. IN THEIR
DEALINGS WITH AND ON BEHALF OF THE INSTITUTION, THEY SHALL BE HELD TO A
STRICT RULE OF HONEST AND FAIR DEALINGS BETWEEN THEMSELVES AND THE
UNIVERSITY. THEY SHALL NOT USE THEIR POSITIONS, OR KNOWLEDGE GAINED
THEREFROM, IN SUCH A WAY THAT A MATERIAL CONFLICT WOULD ARISE BETWEEN THE
INTEREST OF THE UNIVERSITY AND THAT OF THE INDIVIDUAL. COMPLIANCE IS
MONITORED WITH AN ANNUAL SURVEY. IDENTIFIED CONFLICTS ARE ANALYZED AND
MANAGED ACCORDINGLY.

COMPENSATION REVIEW

PART VI, SECTION B, LINE 15A & 15B AND SCHEDULE J, LINE 3

THE DUKE UNIVERSITY COMPENSATION COMMITTEE, COMPRISED OF MEMBERS OF THE
DUKE UNIVERSITY BOARD OF TRUSTEES, REVIEWS AND APPROVES ALL EXECUTIVE
COMPENSATION FOR ALL DISQUALIFIED PERSONS AND OTHER KEY EMPLOYEES. DUKE
UNIVERSITY HAS ADOPTED A STATEMENT OF COMPENSATION PHILOSOPHY THAT
ARTICULATES BROAD OBJECTIVES TO HELP GUIDE THE DUKE UNIVERSITY
COMPENSATION COMMITTEE IN ITS MISSION. THE DUKE UNIVERSITY COMPENSATION
COMMITTEE ENGAGES THE SERVICES OF AN OUTSIDE EXECUTIVE COMPENSATION
CONSULTING FIRM TO ESTABLISH COMPARABILITY DATA OF OTHER UNIVERSITIES OF

Name of the organization	Employer identification number
DUKE UNIVERSITY	56-0532129

ATTACHMENT 3 (CONT'D)

SIMILAR SIZE AND COMPLEXITY AS DUKE UNIVERSITY. THE DUKE UNIVERSITY
COMPENSATION COMMITTEE REVIEWS THE MARKET ANALYSIS THEN DETERMINES THE
REASONABLENESS AND APPROPRIATENESS OF ALL ASPECTS OF EXECUTIVE
COMPENSATION. THE DELIBERATIONS AND CONCLUSIONS OF THE DUKE UNIVERSITY
COMPENSATION COMMITTEE ARE KEPT BY THE UNIVERSITY SECRETARY WHO RECORDS
THE MINUTES OF THE COMMITTEE MEETING.

GOVERNING DOCUMENTS AVAILABILITY TO PUBLIC

PART VI, SECTION C, LINE 19

DUKE UNIVERSITY'S DOCUMENTS (ARTICLES OF INCORPORATION AND ANY SUBSEQUENT
AMENDMENTS OR RESTATEMENTS) ARE AVAILABLE TO THE PUBLIC ON THE NORTH
CAROLINA SECRETARY OF STATE WEBSITE. DUKE UNIVERSITY MAKES ITS CONFLICT
OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON
ITS WEBSITE.

AVERAGE HOURS PER WEEK DEVOTED TO RELATED ORGANIZATIONS

FORM 990, PART VII, SECTION A, COLUMN B

THE FOLLOWING INDIVIDUALS LISTED IN PART VII, SECTION A, COLUMN A DEVOTE
AN AVERAGE OF ONE(1) HOUR PER WEEK TO A RELATED ORGANIZATION OF DUKE
UNIVERSITY:

DUKE UNIVERSITY HEALTH SYSTEM

THE HONORABLE DANIEL T BLUE, JR

JACK O BOVENDER, JR

RICHARD H BRODHEAD

FRANK E EMORY, JR

THOMAS M GORRIE

Name of the organization	Employer identification number
DUKE UNIVERSITY	56-0532129

ATTACHMENT 3 (CONT'D)

SUSAN M STALNECKER

VICTOR J DZAU MD

NANCY C ANDREWS MD

HIGH POINT REALTY ASSOCIATES, INC.

B. HOFER MILAM

DURHAM REALTY, INC.

B. HOFER MILAM

DUKE MANAGEMENT COMPANY

BRUCE A KARSH

NEAL F TRIPLETT

DUKE ALUMNI ASSOCIATION, INC.

ANN PELHAM

TALLMAN TRASK, III

THE FSB SUPPORT FUND, INC.

TALLMAN TRASK, III

DUKE GIFT PROPERTIES, INC.

B. HOFER MILAM

DUKE SCHOLARLY EXHIBITS, INC.

Name of the organization	Employer identification number
DUKE UNIVERSITY	56-0532129

ATTACHMENT 3 (CONT'D)

B. HOFER MILAM

JAMES S ROBERTS

DURHAM ASSET MANAGEMENT COMPANY, INC.

J. SCOTT GIBSON

THE LORD FOUNDATION OF NORTH CAROLINA

KIMBERLY J JENKINS

PETER LANGE

DUKE GLOBAL, INC.

PETER LANGE

TALLMAN TRASK, III

B. HOFER MILAM

JAMES S ROBERTS

J. SCOTT GIBSON

DUKE UNIVERSITY SPECIAL VENTURES FUND, INC.

NEAL F TRIPLETT

GOTHIC CORPORATION

NEAL F TRIPLETT

RUTH K BROAD BIOMEDICAL RESEARCH FOUNDATION

RALPH SNYDERMAN MD

Name of the organization	Employer identification number
DUKE UNIVERSITY	56-0532129
ATTACHMENT 3 (CONT'D)	

DUKE CORPORATE EDUCATION

PETER LANGE

TALLMAN TRASK, III

DUKE UNIVERSITY SCHOOL OF MEDICINE RESEARCH FOUNDATION

VICTOR J DZAU MD

J. SCOTT GIBSON

NANCY C ANDREWS MD

DAVID H MURDOCK RESEARCH INSTITUTE

VICTOR J DZAU MD

RESEARCH TRIANGLE INSTITUTE

PETER LANGE

DUKE MEDICINE GLOBAL SUPPORT CORPORATION

THOMAS M GORRIE

VICTOR J DZAU MD

TALLMAN TRASK, III

J. SCOTT GIBSON

THE CENTER FOR DOCUMENTARY STUDIES, INC.

JAMES S ROBERTS

Name of the organization

Employer identification number

DUKE UNIVERSITY

56-0532129

ATTACHMENT 3 (CONT'D)

DUKE MEDICAL STRATEGIES, INC.

VICTOR J DZAU MD

DUMAC, LLC

THE HONORABLE DANIEL T BLUE, JR

RICHARD H BRODHEAD

BRUCE A KARSH

TALLMAN TRASK, III

NEAL F TRIPLETT

ATLANTIC COAST CONFERENCE

RICHARD H BRODHEAD

TAX-EXEMPT BONDS

FORM 990, SCHEDULE K, PART 1(C)

CUSIP NUMBER OF TAX-EXEMPT BONDS

BOND ISSUE (C):

FORM 8038 LISTS THE CUSIP NUMBER AS 65819GEQ7, 65819GER5, 65819GES3. ALL
CUSIPS HAVE THE SAME MATURITY DATE.

BOND ISSUE (E):

FORM 8038 LISTS THE CUSIP NUMBER AS VARIOUS DUE TO THE NATURE OF THE
NOTES ISSUED, I.E., COMMERCIAL PAPER. THE CUSIP # LISTED HAS THE LATEST
MATURITY DATE OF THE NOTES OUTSTANDING AS OF 6/30/2010.

TAX-EXEMPT BONDS

FORM 990, SCHEDULE K, PART 1(E)

BOND ISSUE (E):

Name of the organization DUKE UNIVERSITY	Employer identification number 56-0532129
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ATTACHMENT 3 (CONT'D)

REPRESENTS MAXIMUM PRINCIPAL AMOUNT OF NEW MONEY COMMERCIAL PAPER NOTES (\$1,092,233,000) AND FIRST GENERATION CURRENT REFUNDING COMMERCIAL PAPER NOTES (\$26,549,000) THAT CAN BE ISSUED PURSUANT TO THIS COMMERCIAL PAPER PROGRAM.

TAX-EXEMPT BONDS

FORM 990, SCHEDULE K, PART 1(F)

PURPOSE OF TAX-EXEMPT BONDS

BOND ISSUE (A):

TO (1) REFUND \$69,038,000 AGGREGATE PRINCIPAL AMOUNT OF TAX-EXEMPT COMMERCIAL PAPER NOTES ISSUED MARCH 17, 2005 TO PROVIDE INTERIM FINANCING FOR CONSTRUCTING AND EQUIPPING FOUR PROJECTS LOCATED ON THE WEST CAMPUS OF DUKE UNIVERSITY (2005A PROJECTS), AND (2) PAY AND REIMBURSE THE UNIVERSITY FOR PAYING A PORTION OF THE COST OF CONSTRUCTING AND EQUIPPING THE 2005A PROJECTS.

BOND ISSUE (B):

TO (1) REFUND THE OUTSTANDING 1996B BONDS ISSUED 7/9/1996, (2) REFUND A PORTION OF THE 2001A BONDS ISSUED 1/8/2002, (3) REFUND \$92,699,000 AGGREGATE PRINCIPAL AMOUNT OF TAX-EXEMPT COMMERCIAL PAPER NOTES ISSUED 9/18/2006 AND \$3,260,000 OF TAXABLE COMMERCIAL PAPER NOTES ISSUED TO PROVIDE INTERIM FINANCING FOR CONSTRUCTION AND EQUIPPING 20 PROJECTS LOCATED ON THE WEST AND EAST CAMPUS OF DUKE UNIVERSITY (2006A PROJECTS), AND (4) PAY AND REIMBURSE THE UNIVERSITY FOR PAYING A PORTION OF COST OF CONSTRUCTING AND EQUIPPING THE 2006A PROJECTS.

BOND ISSUE (C):

TO REFUND THE OUTSTANDING 2002A BONDS ISSUED 7/30/2002.

BOND ISSUE (D):

Name of the organization DUKE UNIVERSITY	Employer identification number 56-0532129
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ATTACHMENT 3 (CONT'D)

TO (1) REFUND \$104,184,000 AGGREGATE PRINCIPAL OF TAX-EXEMPT COMMERCIAL PAPER NOTES ISSUED 5/13/2008 AND \$5,384,000 OF TAXABLE COMMERCIAL PAPER NOTES ISSUED TO PROVIDE INTERIM FINANCING FOR CONSTRUCTION AND EQUIPPING 28 PROJECTS LOCATED ON WEST, EAST, AND CENTRAL CAMPUS OF DUKE UNIVERSITY (2009B PROJECTS), AND (2) PAY AND REIMBURSE THE UNIVERSITY FOR PAYING A PORTION OF THE COST OF CONSTRUCTING AND EQUIPPING THE 2009B PROJECTS.

BOND ISSUE (E) :

COMMERCIAL PAPER PROGRAM, THE PURPOSES OF WHICH ARE TO (1) REFUND COMMERCIAL PAPER NOTES ISSUED UNDER A PRIOR PROGRAM WITH AN ISSUE DATE OF 5/13/2008, AND (2) FINANCE PROJECTS ON THE WEST, EAST, AND CENTRAL CAMPUS OF DUKE UNIVERSITY

TAX-EXEMPT BONDS

FORM 990, SCHEDULE K, PART II, LINE 8

BOND ISSUE (D) :

NO YEAR IS PROVIDED AT THIS TIME, BECAUSE NOT ALL PROJECTS ARE SUBSTANTIALLY COMPLETE.

TAX-EXEMPT BONDS

FORM 990, SCHEDULE K, PART IV

LINE 4D

BOND ISSUE (B) :

ONLY TWO BIDS WERE RECEIVED FROM SIX PROVIDERS SOLICITED

LINE 6

BOND ISSUE (E) :

SALES PROCEEDS ALLOCATED UPON ISSUANCE AND NOT INVESTED

Name of the organization

DUKE UNIVERSITY

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ATTACHMENT 4FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

"JAMES B. DUKE FOUNDING INDENTURE OF DUKE UNIVERSITY DIRECTED THE MEMBERS OF THE UNIVERSITY TO 'PROVIDE REAL LEADERSHIP IN THE EDUCATIONAL WORLD' BY CHOOSING INDIVIDUALS OF 'OUTSTANDING CHARACTER, ABILITY, AND VISION' TO SERVE AS ITS OFFICERS, TRUSTEES AND FACULTY; BY CAREFULLY SELECTING STUDENTS OF 'CHARACTER, DETERMINATION AND APPLICATION;' AND BY PURSUING THOSE AREAS OF TEACHING AND SCHOLARSHIP THAT WOULD 'MOST HELP TO DEVELOP OUR RESOURCES, INCREASE OUR WISDOM, AND PROMOTE HUMAN HAPPINESS.'

"TO THESE ENDS, THE MISSION OF DUKE UNIVERSITY IS TO PROVIDE A SUPERIOR LIBERAL EDUCATION TO UNDERGRADUATE STUDENTS, ATTENDING NOT ONLY TO THEIR INTELLECTUAL GROWTH BUT ALSO THEIR DEVELOPMENT AS ADULTS COMMITTED TO HIGH ETHICAL STANDARDS AND FULL PARTICIPATION AS LEADERS IN THEIR COMMUNITIES; TO PREPARE FUTURE MEMBERS OF THE LEARNED PROFESSIONS FOR LIVES OF SKILLED AND ETHICAL SERVICE BY PROVIDING EXCELLENT GRADUATE AND PROFESSIONAL EDUCATION; TO ADVANCE THE FRONTIERS OF KNOWLEDGE AND CONTRIBUTE BOLDLY TO THE INTERNATIONAL COMMUNITY OF SCHOLARSHIP; TO PROMOTE AN INTELLECTUAL ENVIRONMENT BUILT ON A COMMITMENT TO FREE AND OPEN INQUIRY; TO HELP THOSE WHO SUFFER, CURE DISEASE, AND PROMOTE HEALTH, THROUGH SOPHISTICATED MEDICAL RESEARCH AND THOUGHTFUL PATIENT CARE; TO PROVIDE WIDE RANGING EDUCATIONAL OPPORTUNITES, ON AND BEYOND OUR CAMPUSES, FOR TRADITIONAL STUDENTS, ACTIVE PROFESSIONALS AND LIFE-LONG LEARNERS USING THE POWER OF INFORMATION TECHNOLOGIES; AND TO PROMOTE A DEEP APPRECIATION FOR THE RANGE OF HUMAN DIFFERENCE AND POTENTIAL, A SENSE OF THE OBLIGATIONS AND REWARDS OF CITIZENSHIP, AND A COMMITMENT TO LEARNING, FREEDOM AND TRUTH.

Name of the organization

DUKE UNIVERSITY

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ATTACHMENT 4 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

"BY PURSUING THESE OBJECTIVES WITH VISION AND INTEGRITY, DUKE UNIVERSITY SEEKS TO ENGAGE THE MIND, ELEVATE THE SPIRIT, AND STIMULATE THE BEST EFFORT OF ALL WHO ARE ASSOCIATED WITH THE UNIVERSITY; TO CONTRIBUTE IN DIVERSE WAYS TO THE LOCAL COMMUNITY, THE STATE, THE NATION AND THE WORLD; AND TO ATTAIN AND MAINTAIN A PLACE OF REAL LEADERSHIP IN ALL THAT WE DO."

ATTACHMENT 5FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

SPAIN

ECUADOR

ITALY

GERMANY

UNITED KINGDOM

SINGAPORE

CHINA

ATTACHMENT 6FORM 990, PART VI, LINE 17 - STATES

AK,AZ,CA,

DC,HI,MD,MA,MI,

NH,NJ,NY,OR,

SC,WA,

ATTACHMENT 7

Name of the organization DUKE UNIVERSITY	Employer identification number 56-0532129
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ATTACHMENT 7 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
BOVIS LEND LEASE INC. PO BOX 32755 CHARLOTTE, NC 28232-2755	CONSTRUCTION SERVICE	35,250,647.
BALFOUR BEATTY 5420 WADE PARK BLVD, STE 200 RALEIGH, NC 27607	CONSTRUCTION SERVICE	15,741,070.
LECHASE CONSTRUCTION 324 BLACKWELL STREET, SUITE 1200 DURHAM, NC 27701	CONSTRUCTION SERVICE	16,740,941.
UNIVERSITY OF NORTH CAROLINA 104 AIRPORT DR, SUITE 2200 CHAPEL HILL, NC 27599-1350	RESEARCH	9,489,712.
PAREXEL INTERNATIONAL 5239 PAYSPHERE CIRCLE CHICAGO, IL 60674	CONSULTING SERVICE	12,452,345.
TOTAL COMPENSATION		<u>89,674,715.</u>

ATTACHMENT 8

FORM 990, PART X - NOTES AND LOANS RECEIVABLE

<u>BORROWER:</u>	<u>NOTES AND LOANS RECEIVABLE</u>
BEGINNING BALANCE DUE	45,245,449.
ENDING BALANCE DUE	<u>42,626,126.</u>
TOTAL BEGINNING NOTES AND LOANS RECEIVABLE	<u>45,245,449.</u>
TOTAL ENDING NOTES AND LOANS RECEIVABLES	<u>42,626,126.</u>

ATTACHMENT 9

Name of the organization DUKE UNIVERSITY	Employer identification number 56-0532129
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ATTACHMENT 9 (CONT'D)FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
PUBLICLY TRADED SECURITY	1,309,282,148.	FMV
TOTALS	<u>1,309,282,148.</u>	

ATTACHMENT 10FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE

LENDER: WELLS FARGO

INTEREST RATE: 0.090000

BEGINNING BALANCE DUE	6,660,000.
ENDING BALANCE DUE	<u>6,510,000.</u>

TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE	<u>6,660,000.</u>
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TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE	<u>6,510,000.</u>
--	-------------------

ATTACHMENT 11SCHEDULE E - EXPLANATION FOR LINE 3

DUKE UNIVERSITY PROHIBITS DISCRIMINATION AND HARASSMENT IN ALL ASPECTS OF EDUCATION AND EMPLOYMENT; AND PROVIDES EQUAL EMPLOYMENT OPPORTUNITY WITHOUT REGARD TO RACE, COLOR, RELIGION, NATIONAL ORIGIN, DISABILITY, VETERAN STATUS, SEXUAL ORIENTATION, GENDER IDENTITY, SEX, OR AGE. DUKE IS COMMITTED TO AND MAKES EVERY GOOD FAITH EFFORT TO RECRUIT, HIRE, AND PROMOTE QUALIFIED MINORITIES, WOMEN, INDIVIDUALS WITH DISABILITIES, AND VETERANS.

IN ACCORDANCE WITH TITLE IX OF THE EDUCATION AMENDMENT OF 1972, DUKE PROHIBITS DISCRIMINATION ON THE BASIS OF SEX IN ALL OF ITS EDUCATIONAL

Name of the organization

DUKE UNIVERSITY

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ATTACHMENT 11 (CONT'D)SCHEDULE E - EXPLANATION FOR LINE 3

PROGRAMS AND ACTIVITIES.

POLICIES AND RELATED PROCEDURES ARE COMMUNICATED TO ALL MEMBERS OF THE DUKE COMMUNITY THROUGH VARIOUS PUBLICATIONS, POSTINGS, ELECTRONIC MEDIA AND TRAINING SESSIONS FOR MANAGERS.

PUBLICATIONS OF THE UNIVERSITY PICTURE BOTH MINORITY AND NON-MINORITY MEN AND WOMEN AND PERSONS WITH DISABILITIES. ALL RECRUITING ADVERTISEMENTS STATE THAT THE UNIVERSITY IS AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER.

ATTACHMENT 12SCHEDULE E - EXPLANATION FOR LINE 6A

IN FURTHERANCE OF ITS EDUCATIONAL MISSIONS, DUKE UNIVERSTIY RECEIVES FUNDS IN SUPPORT OF ITS UNDERGRADUATE AND GRADUATE STUDENTS. THESE FUNDS INCLUDE FINANCIAL AID PROGRAMS SUCH AS FEDERAL COLLEGE WORK STUDY, FEDERAL PERKINS FUNDS, FEDERAL STAFFORD LOAN FUNDS, FEDERAL PELL GRANT FUNDS, FEDERAL SEOG FUNDS, ACADEMIC COMPETITIVENESS GRANT (ACG) FUNDS, NATIONAL SCIENCE AND MATHEMATICS ACCESS TO RETAIN TALENT (SMART) GRANT FUNDS, FEDERAL HEALTH PROFESSION LOANS, FEDERAL NURSING LOANS, AND FEDERAL PLUS, ETC. ADDITIONAL STUDENT FINANCIAL AID IS RECEIVED IN THE FORM OF FELLOWSHIP SUPPORT FROM A VARIETY OF FEDERAL AGENCIES, INCLUDING NIH UNDER ITS INDIVIDUAL AND GRADUATE FELLOWSHIP PROGRAMS. IN ADDITION, DUKE UNIVERSITY RECEIVES COOPERATIVE AGREEMENTS FOR BOTH RESEARCH AND EDUCATIONAL PROGRAMS. ALTHOUGH THIS SUPPORT COMES FROM A WIDE VARIETY OF

Name of the organization

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ATTACHMENT 12 (CONT'D)SCHEDULE E - EXPLANATION FOR LINE 6A

FEDERAL AGENCIES, THE NATIONAL INSTITUTE OF HEALTH, THE NATIONAL SCIENCE FOUNDATION, THE DEPARTMENT OF DEFENSE, AND THE DEPARTMENT OF ENERGY PROVIDE THE MAJORITY OF GRANTS AND COOPERATIVE AGREEMENTS.

ATTACHMENT 13SCHEDULE L, PART IV

(A) NAME OF INTERESTED PERSON	(B) RELATIONSHIP	(C) AMOUNT	(D) DESCRIPTION OF TRANSACTION	(E) YES NO
CYNTHIA BRODHEAD	FAMILY MEM OF PRESIDENT	132,500.	SALARY PAID	X
CHRISTOPHER GERGEN	FAMILY MEMBER OF TRUSTEE	30,500.	SALARY PAID	X
DEBORAH WONG	FAMILY MEM OF OFFICER	60,150.	SALARY PAID	X
NEXTEL COMMUNICATIONS	DIRECTOR IS TRUSTEE	91,710.	PAYMENT FOR GOODS OR SERVICES	X
BRIGHT HORIZONS	DIRECTOR IS TRUSTEE	1,091,826.	PAYMENT FOR GOODS OR SERVICES	X
MADISON SQUARE GARDEN, INC	DIRECTOR IS TRUSTEE	198,141.	PAYMENT FOR GOODS OR SERVICES	X
BERNARD MATHEY-PREVOT	FAMILY MEMBER OF KEY EMP	139,725.	SALARY PAID	X
MEDTRONIC, INC.	DIRECTOR IS OFFICER	20,556.	PAYMENT FOR GOODS OR SERVICES	X
PEPSI CO.	DIRECTOR IS OFFICER	232,497.	PAYMENT FOR GOODS OR SERVICES	X
LORI LEACHMAN	FAMILY MEMBER OF OFFICER	72,550.	SALARY PAID	X
DEBORAH JAKUBS	FAMILY MEMBER OF KEY EMP	232,250.	SALARY PAID	X

**SCHEDULE R
(Form 990)**Department of the Treasury
Internal Revenue Service**Related Organizations and Unrelated Partnerships**

- **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36 or 37.**
► **Attach to Form 990.** ► **See separate instructions.**

OMB No. 1545-0047

2009**Open to Public
Inspection****Name of the organization**

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Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
DUKE UK TRUST LIMITED 98-0555714 ALDER CASTLE, 10 NOBLE, EC2V 7	DEVELOPMENT	UK	206,072.	45,791.	N/A
WASHINGTON DUKE INN, LLC 56-1917939 300 FULLER STREET, STE 333 DURHAM, NC 27705	RENTAL	NC	1,103,148.	50,288,882.	HIGH POINT R
GRETMAR PARTNERS LLC 56-1776668 406 BLACKWELL STREET, SUITE 30 DURHAM, NC 27701	INVESTMENTS	NC	3,088,874.	25,120,005.	GOTHIC CORP
SPECIAL VENTURES LLC 56-1465177 406 BLACKWELL STREET, SUITE 30 DURHAM, NC 27701	INVESTMENTS	NC	0.	0.	DUSVF, INC.
DUKE CE LLC 42-1672476 310 BLACKWELL STREET DURHAM, NC 27701	EDUC CONSULT	NC	0.	0.	DUKE CE

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
AMERICAN ASSOCIATION OF GIFTED CHILDREN 56-1686219 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
DUKE SCHOLARLY EXHIBITS, INC. 56-1701245 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
DUKE ALUMNI ASSOCIATION, INC. 56-1594088 614 CHAPEL DRIVE, DURHAM, NC 27708	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
DUKE GIFT PROPERTIES, INC. 57-1211078 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
DUKE MANAGEMENT COMPANY 56-1748858 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	INVESTMENTS	NC	501 (C) (3)	11 TYPE 1	N/A
DUKE GLOBAL, INC. 61-1588319 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
DUKE UNIVERSITY PHILANTHROPIES, INC. 57-1211099 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A

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

Schedule R (Form 990) 2009

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No
DUMAC, LLC 65-1319939 BLACKWELL ST, DURHAM, NC 27701	INVESTMENTS	NC	DUKE UNIVERSITY	INVESTMENTS-EXCLUDED	1,238,960.	2,405,790.			0.		
CD FUND, LP 27-0130641 MCKINNEY AVE, DALLAS, TX 75201	INVESTMENTS	TX	GOTHIC CORP	INVESTMENT-EXCLUDED	-4,206,372.	34,212,268.		X	0.		X
DREVER OPP FUND, LP 54-2063549 PORTWEST DR, HOUSTON, TX 77024	INVESTMENTS	TX	GOTHIC CORP	INVESTMENT-EXCLUDED	968,972.	19,068,332.		X	0.		X
LIQUID REALTY PTR 05-0537755 MONTG ST., SAN FRANC, CA 94104	INVESTMENTS	DE	GOTHIC CORP	INVESTMENT-EXCLUDED	-44,523.	3,808,589.		X	-7,712.		X
BLACKWELL PTR, LLC 20-8075455 BLACKWELL ST, DURHAM, NC 27701	INVESTMENTS	GA	GOTHIC CORP	INVESTMENT-EXCLUDED	5,374,031.	778,892,384.		X	0.	X	
GMO FORESTRY 6-B LP 48-1294791 ROWES WHARF, BOSTON, MA 02110	INVESTMENTS	DE	GOTHIC CORP	INVESTMENT-EXCLUDED	715,176.	3,229,822.		X	48,308.		X
CANYON BLUE INV FD 27-0186996 AVE OF STARS, L.A., CA 90067	INVESTMENTS	DE	GOTHIC CORP	INVESTMENT-EXCLUDED	2,277,280.	77,934,199.		X	0.		X

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
DUKE MEDICAL STRATEGIES, INC 56-1993799 324 BLACKWELL STREET, STE 920 DURHAM, NC 27701	HEALTHCARE	NC	N/A	C CORP	609,021.	1,040,024.	100.0000
COLCHESTER ALPHA FUND (BERMUDA), LTD 54-62 TOWNSEND ST 2 DUBLIN, IRELAND	INVESTMENTS	BD	GOTHIC CORP	C CORP	1,190,665.	51,953,798.	50.1027
COLCHESTER BETA THREE FUND, LTD CENTURY HOUSE 16 PAR-LA VILLE RD HM HX, HAMILTON, BERMUDA	INVESTMENTS	BD	GOTHIC CORP	C CORP	2,080,782.	38,392,963.	65.2635
RA CAPITAL HEALTHCARE INTERNATIONAL FUND PO BOX 309GT UGLAND HOUSE, GEORGETOWN, GRAND CAYMAN	INVESTMENTS	CJ	GOTHIC CORP	C CORP	-13,639,119.	17,085,934.	51.6373
GOTHIC INTERNATIONAL, LTD 113 S CHURCH STREET, KY1-110, QUEENSGATE HOUSE, GRAND CAY	INVESTMENTS	CJ	GOTHIC CORP	C CORP	12,463,865.	73,023,928.	100.0000
ZAIS MATRIX VI-D, LTD. PO BOX 1373GT AALL BUILDING, GEORGETOWN, GRAND CAYMAN	INVESTMENTS	CJ	GOTHIC CORP	C CORP	13,426,703.	54,884,354.	66.6666
JOHN & PATRICIA KOSKINEN NIMCRUT 56-6532340 PO BOX 185, PITTSBURGH, PA 15230-0185	INVESTMENTS	PA	N/A	TRUST			

Schedule R (Form 990) 2009

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?		
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to other organization(s)	1b	X
c Gift, grant, or capital contribution from other organization(s)	1c	X
d Loans or loan guarantees to or for other organization(s)	1d	X
e Loans or loan guarantees by other organization(s)	1e	X
f Sale of assets to other organization(s)	1f	X
g Purchase of assets from other organization(s)	1g	X
h Exchange of assets	1h	X
i Lease of facilities, equipment, or other assets to other organization(s)	1i	X
j Lease of facilities, equipment, or other assets from other organization(s)	1j	X
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	X
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	X
m Sharing of facilities, equipment, mailing lists, or other assets	1m	X
n Sharing of paid employees	1n	X
o Reimbursement paid to other organization for expenses	1o	X
p Reimbursement paid by other organization for expenses	1p	X
q Other transfer of cash or property to other organization(s)	1q	X
r Other transfer of cash or property from other organization(s)	1r	X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a–r)	(c) Amount involved
(1) DURHAM ASSET MANAGEMENT COMPANY, INC.	B	583,801.
(2) THE LORD FOUNDATION OF NORTH CAROLINA	C	743,815.
(3) DUKE SCHOLARLY EXHIBITS, INC.	B	85,000.
(4) HIGH POINT REALTY ASSOCIATES, INC.	C	2,712,000.
(5) DUKE GIFT PROPERTIES, INC.	C	125,000.
(6) DURHAM REALTY, INC.	R	482,509.

Schedule R (Form 990) 2009

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 to list additional information for Schedule R (Form 990), Part I; Part II; Part III; Part IV; Part V, line 2; or Part VI.**

OMB No. 1545-0047

2009

**Open to Public
Inspection**

DUKE UNIVERSITY

Employer identification number

56-0532129

Part I Continuation of Identification of Disregarded Entities

[illegible]

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

Schedule R-1 (Form 990) 2009

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
DUKE UNIV SCH OF MED RESEARCH FOUNDATION 56-2247203 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
DUKE UNIV SPECIAL VENTURES FUND, INC. 56-1465177 406 BLACKWELL STREET, DURHAM, NC 27701	INVESTMENTS	NC	501 (C) (3)	11 TYPE 1	N/A
DURHAM ASSET MANAGEMENT COMPANY, INC. 56-1757238 324 BLACKWELL STREET, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
DURHAM REALTY, INC. 56-1917936 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
THE FSB SUPPORT FUND 56-1849290 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
GOTHIC CORPORATION 56-1776668 406 BLACKWELL STREET, DURHAM, NC 27701	INVESTMENTS	NC	501 (C) (3)	11 TYPE 1	N/A
HIGH POINT REALTY ASSOCIATES, INC. 56-1917939 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
THE LORD FOUNDATION OF NORTH CAROLINA 56-1415423 305 TEER BLDG, DURHAM, NC 27708	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
RUTH K BROAD BIOMEDICAL RES. FOUNDATION 65-0045051 324 BLACKWELL STREET, STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
DUKE HOSPITAL AUXILIARY, INC. 56-1825604 PO BOX 2895, DURHAM, NC 27710	SUPPORT	NC	501 (C) (3)	11 TYPE III	N/A
DUKE MEDICINE GLOBAL SUPPORT CORP. 61-1593721 324 BLACKWELL ST., STE 920, DURHAM, NC 27701	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
THE CENTER FOR DOCUMENTARY STUDIES 56-1655039 1317 PETTIGREW STREET, DURHAM, NC 27705	SUPPORT	NC	501 (C) (3)	11 TYPE 1	N/A
DUKE UNIVERSITY HEALTH SYSTEM, INC 56-2070036 615 DOUGLAS ST., DURHAM, NC 27705	HEALTHCARE	NC	501 (C) (3)	3	N/A
DUKE CORPORATE EDUCATION 42-1672476 310 BLACKWELL ST., DURHAM, NC 27701	EDUCATION	NC	501 (C) (3)	11 TYPE 1	N/A
ANGIER B. DUKE MEMORIAL, INC. 13-6113895 100 NORTH TRYON ST., CHARLOTTE, NC 28202	SCHOLARSHIPS	NC	501 (C) (3)	11 TYPE III	N/A
NANALINE H. DUKE TRUST 23-7270511 100 NORTH TRYON STREET, CHARLOTTE, NC 28202	MED. SUPPORT	NY	501 (C) (3)	11 TYPE III	N/A
GOTHIC HSP CORPORATION 27-1325761 406 BLACKWELL STREET, SUITE 30 DURHAM, NC 27701	INVESTMENTS	NC	501 (C) (3)	11 TYPE 1	DUHS
DAVID H MURDOCK RESEARCH INSTITUTE 20-8730759 150 RESEARCH CAMPUS DR KANNAPOLIS, NC 28081	RESEARCH	NC	501 (C) (3)	11 TYPE 1	N/A

Schedule R-1 (Form 990) 2009

[illegible]

Part III Continuation of Identification of Related Organizations Taxable as a Partnership

Schedule R-1 (Form 990) 2009

Part IV Continuation of Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
DUKE_UNIV_QUADRANGLE_FUND_56-6218971 PO BOX 185 PITTSBURGH, PA 15230-0185	INVESTMENTS	PA	N/A	TRUST			
DUKE_UNIVERSITY_TOWER_FUND_56-6147362 PO BOX 185 PITTSBURGH, PA 15230-0185	INVESTMENTS	PA	N/A	TRUST			
INDOCHINA LAND INV 3 CORP DORSET HOUSE TAIKOO PL 979 KINGS RD HONG KONG, HONG KONG	INVESTMENT	CJ	GOTHIC CORP	C CORP	-276,730.	550,374.	8.9165
DUSVF EUROPEAN LP_98-0346042 7 CAVENISH SQUARE W1G 0PE LONDON, UNITED KINGDOM	INVESTMENTS	UK	GOTHIC CORP	C CORP	107,705.	221,003.	100.0000
MARATHON BLUE CAYMAN FUND REGATTA OFFICE PARK, WEST BAY RD, KY1-12 GRAND CAYMAN,	INVESTMENTS	CJ	GOTHIC CORP	C CORP	2,086,583.	37,908,951.	87.2302
RICHMOND PARTNERS LTD PO BOX 309 BWI GEORGETOWN, GRAND CAYMAN	INVESTMENTS	CJ	GOTHIC CORP	C CORP	7,157,728.	46,857,457.	60.4230
DUKE_CORPORATE_EDUCATION_LIM_42-1672476 165 FLEET STREET EC4A 2DY LONDON,	EDU CONSULT	UK	DUKE CE	C CORP	-1,255,534.	4,585,189.	70.0000
DUKE_CORP_EDU_INDIA_PRIVATE_42-1672476 ACADEMIC BLOCK, NEW CAMPUS 380015 VASTRAPUR, AHMEDABAD,	CONSULTING	IN	DUKE CE	C CORP	-491,343.	968,573.	100.0000
DUKE_CORPORATE_EDUCATION_RSA_42-1672476 GROUND FLOOR, TWICKEHNHAM BLDG 02021 BRYANSTON, JOHANNESB	CONSULTING	SF	DUKE CE	C CORP	537,105.	1,491,845.	100.0000
DUKE_CE_LS_INC_20-2004016 310 BLACKWELL STREET DURHAM, NC 27701	REAL ESTATE	NC	DUKE CE	C CORP	-148,937.	867,179.	100.0000
DUKE_GLOBAL_CONSULTING_(KUNS 1666 WEI CHEN NAN RD, 215300 KUNSHAN PR, KUNSHAN	CONSULTING	CH	DUKE GLOBAL	C-CORP		147,475.	100.0000
DUKE_MEDICINE_ASIA_PTE. LTD 5 SHENTON WAY # 07-00 UIC BLD, SING 0688 SINGAPORE,	MEDICAL RESEARCH	SN	DUKE MEDICINE	C CORP	0.	0.	100.0000

Schedule R-1 (Form 990) 2009

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved
(7) DUKE UNIVERSITY FEDERAL CREDIT UNION	N	2,145,878.
(8) BLACKWELL PARTNERS LLC	B	140,597,875.
(9) CANYON BLUE CREDIT INVESTMENT FUND	B	82,000,000.
(10) CANYON BLUE CREDIT INVESTMENT FUND	R	7,883,603.
(11) CD FUND LP	B	10,000,000.
(12) DREVER OPPORTUNITY FUND LP	R	3,876,730.
(13) GMO FORESTRY FUND 6-B LP	R	2,304,242.
(14) LIQUID REALTY PARTNERS LLC	B	125,606.
(15) DUKE GLOBAL CONSULTING (KUNSHAN) CO. LTD.	B	168,480.
(16) RA CAPITAL HEALTHCARE INTERNATIONAL FUND	R	21,205,408.
(17) ZAIS MATRIX VI-D LTD	B	58,915,365.
(18) ZAIS MATRIX VI-D LTD	R	82,365,767.
(19) MARATHON BLUE CAYMAN FUND LTD	B	13,328,791.
(20) MARATHON BLUE CAYMAN FUND LTD	R	6,843,509.
(21) INDOCHINA LAND INVESTMENT 3 CORPORATION	B	980,823.
(22) RICHMOND PARTNERS LIMITED	B	679,543.
(23) RICHMOND PARTNERS LIMITED	R	3,431,953.
(24) COLHESTER ALPHA FUND	R	8,794,468.

Schedule R-1 (Form 990) 2009

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved
(7) COLCHESTER BETA THREE FUND	R	4,918,885.
(8) DUKE CORPORATE EDUCATION LIMITED	A1	91,080.
(9) DUKE CORPORATE EDUCATION LIMITED	A111	437,275.
(10) DUKE CORPORATE EDUCATION LIMITED	O	555,298.
(11) DUKE CORPORATE EDUCATION LIMITED	P	1,974,477.
(12) DUKE CORPORATE EDUCATION LIMITED	Q	1,129,000.
(13) DUKE CORPORATE EDUCATION INDIA PRIVATE, LTD	A111	22,778.
(14) DUKE CORPORATE EDUCATION INDIA PRIVATE, LTD	O	431,229.
(15) DUKE CORPORATE EDUCATION INDIA PRIVATE, LTD	P	185,111.
(16) DUKE CORPORATE EDUCATION RSA	A1	65,586.
(17) DUKE CORPORATE EDUCATION RSA	A111	118,253.
(18) DUKE CORPORATE EDUCATION RSA	O	1,062,240.
(19) DUKE CORPORATE EDUCATION RSA	P	749,908.
(20) DUKE CORPORATE EDUCATION RSA	Q	3,101,684.
(21) RESEARCH TRIANGLE INSTITUTE	C	105,577.
(22) NANALINE H DUKE TRUST	C	600,000.
(23) ANGIER B. DUKE MEMORIAL, INC.	C	430,000.
(24) RUTH K. BROAD BIOMEDICAL RESEARCH FOUNDATION	C	320,840.

Schedule R-1 (Form 990) 2009

Part V Continuation of Transactions With Related Organizations (Schedule R (Form 990), Part V, line 2)

(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved
(7) DUKE GLOBAL, INC.	B	3,554,278.
(8) DUKE ALUMNI ASSOCIATION, INC.	C	664,134.
(9) DUKE UNIVERSITY PHILANTHROPIES, INC.	C	1,014,374.
(10) DUKE UK TRUST LIMITED	R	623,447.
(11) RESEARCH TRIANGLE INSTITUTE	Q	76,466.
(12) DUKE CORPORATE EDUCATION	C	1,178,801.
(13) DUKE UNIVERSITY SPECIAL VENTURES FUND	C	9,256,477.
(14) DUKE UNIVERSITY SPECIAL VENTURES FUND	B	2,719,673.
(15) GOTHIC CORPORATION	C	1,164,679,029.
(16) GOTHIC CORPORATION	B	1,051,101,750.
(17) ATLANTIC COAST CONFERENCE	R	731,826.
(18) DUKE MEDICAL STRATEGIES, INC	R	134,523.
(19) DUKE CORPORATE EDUCATION	J	302,992.
(20) CENTER FOR DOCUMENTARY STUDIES, INC	D	354,970.
(21) CENTER FOR DOCUMENTARY STUDIES, INC	C	47,383.
(22) CENTER FOR DOCUMENTARY STUDIES, INC	B	376,747.
(23) DUKE GLOBAL CONSULTING (KUNSHAN)	B	168,480.
(24)		

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