

Return of Organization Exempt From Income Tax

2006

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2006 calendar year, or tax year beginning 7/1/2006, and ending 6/30/2007

- B** Check if applicable:
[] Address change
[] Name change
[] Initial return
[] Final return
[] Amended return
[] Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC
Number and street (or P.O. box if mail is not delivered to street address) Room/suite
600 South Clyde Morris Blvd
City or town, state or country, and ZIP + 4
Daytona Beach, FL 32114-3966

D Employer identification number
59 0936101
E Telephone number
(386) 226-6256
F Accounting method: [] Cash [x] Accrual
[] Other (specify) ▶

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? [] Yes [x] No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? [] Yes [] No (If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [x] No

G Website: ▶ www.erau.edu

J Organization type (check only one) ▶ [x] 501(c) (3) ◀ (insert no.) [] 4947(a)(1) or [] 527

K Check here ▶ [] if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

I Group Exemption Number ▶
M Check ▶ [] if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **318,798,000**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with 21 rows and multiple columns for revenue, expenses, and net assets. Includes sub-rows for detailed categories like contributions, program service revenue, and net assets.

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	0	0		
22b	Other grants and allocations (attach schedule) (cash \$ <u>31,170,000</u> noncash \$ <u>0</u>) If this amount includes foreign grants, check here <input type="checkbox"/>	31,170,000	31,170,000		
23	Specific assistance to individuals (attach schedule)	0	0		
24	Benefits paid to or for members (attach schedule)	0	0		
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	500,000	0	500,000	0
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B	0	0	0	0
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
26	Salaries and wages of employees not included on lines 25a, b, and c	108,734,000	84,241,000	23,867,000	626,000
27	Pension plan contributions not included on lines 25a, b, and c	6,010,000	4,628,000	1,262,000	120,000
28	Employee benefits not included on lines 25a - 27	17,753,000	13,670,000	3,728,000	355,000
29	Payroll taxes	8,040,000	6,191,000	1,688,000	161,000
30	Professional fundraising fees	0	0	0	0
31	Accounting fees	210,000	0	210,000	0
32	Legal fees	360,000	5,000	355,000	0
33	Supplies	7,488,000	3,404,000	4,062,000	22,000
34	Telephone	2,153,000	1,349,000	790,000	14,000
35	Postage and shipping	1,135,000	932,000	188,000	15,000
36	Occupancy	6,266,000	2,884,000	3,382,000	0
37	Equipment rental and maintenance	12,425,000	8,248,000	4,177,000	0
38	Printing and publications	1,672,000	1,138,000	514,000	20,000
39	Travel	6,685,000	4,218,000	2,403,000	64,000
40	Conferences, conventions, and meetings	610,000	379,000	223,000	8,000
41	Interest	9,082,000	8,524,000	558,000	0
42	Depreciation, depletion, etc. (attach schedule)	21,220,000	16,446,000	4,774,000	0 Stmt 3
43	Other expenses not covered above (itemize): See Statement 4	36,352,000	17,898,000	18,390,000	64,000
a	-----				
b	-----				
c	-----				
d	-----				
e	-----				
f	-----				
g	-----				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	277,865,000	205,325,000	71,071,000	1,469,000

Joint Costs. Check if you are following SOP 98-2.
 Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

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

What is the organization's primary exempt purpose? ► HIGHER EDUCATION	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a See Statement 5 (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
b (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
c (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services). ►	205,325,000

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45 Cash—non-interest-bearing	0	45	0	
	46 Savings and temporary cash investments	29,523,000	46	43,891,000	
	47a Accounts receivable	47a 13,667,000	12,199,000	47c	13,050,000
	b Less: allowance for doubtful accounts	47b 617,000			
	48a Pledges receivable	48a 7,444,000	3,365,000	48c	5,035,000
	b Less: allowance for doubtful accounts	48b 2,409,000			
	49 Grants receivable	0	49	0	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)	0	50a	0	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	0	50b	0	
	51a Other notes and loans receivable (attach schedule) See Statement 6	51a 9,963,000	9,573,000	51c	9,783,000
	b Less: allowance for doubtful accounts	51b 180,000			
	52 Inventories for sale or use	2,505,000	52	2,393,000	
	53 Prepaid expenses and deferred charges	2,606,000	53	3,678,000	
	54a Investments—publicly-traded securities	0	159,112,000	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54a 0
	b Investments—other securities (attach schedule)	0		<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	54b 110,106,000 Stmt 7
	55a Investments—land, buildings, and equipment: basis	55a 0	0	55c	0
	b Less: accumulated depreciation (attach schedule)	55b 0			
	56 Investments—other (attach schedule)	0	56	0	
	57a Land, buildings, and equipment: basis	57a 390,163,000	194,848,000	57c	213,156,000
	b Less: accumulated depreciation (attach schedule) Stmt 8	57b 177,007,000			
58 Other assets, including program-related investments (describe See Statement 9)	7,797,000	58	7,035,000		
59 Total assets (must equal line 74). Add lines 45 through 58	421,528,000	59	408,127,000		
Liabilities	60 Accounts payable and accrued expenses	26,360,000	60	29,251,000	
	61 Grants payable	0	61	0	
	62 Deferred revenue	7,562,000	62	7,366,000	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)	0	63	0	
	64a Tax-exempt bond liabilities (attach schedule) See Statement 10	223,857,000	64a	177,669,000	
	b Mortgages and other notes payable (attach schedule) Stmt 11	3,283,000	64b	3,507,000	
	65 Other liabilities (describe See Statement 12)	14,788,000	65	15,578,000	
66 Total liabilities. Add lines 60 through 65	275,850,000	66	233,371,000		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	126,200,000	67	153,037,000	
	68 Temporarily restricted	10,410,000	68	11,197,000	
	69 Permanently restricted	9,068,000	69	10,522,000	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds		70		
	71 Paid-in or capital surplus, or land, building, and equipment fund		71		
	72 Retained earnings, endowment, accumulated income, or other funds		72		
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	145,678,000	73	174,756,000	
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	421,528,000	74	408,127,000	

Part VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		✓
	b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b _____		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	✓	
	b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	✓	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		✓
	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	84b _____		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	c Dues, assessments, and similar amounts from members		
	85c _____		
	d Section 162(e) lobbying and political expenditures		
	85d _____		
	e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		
	85e _____		
	f Taxable amount of lobbying and political expenditures (line 85d less 85e)		
	85f _____		
	g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	85g _____		
	h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	85h _____		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12		
	86a _____		
	b Gross receipts, included on line 12, for public use of club facilities		
	86b _____		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders		
	87a _____		
	b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	87b _____		
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	✓	
	b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	✓	
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ _____ 0 ; section 4912 ▶ _____ 0 ; section 4955 ▶ _____ 0		
	b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		✓
	c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____ 0		
	d Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ _____ 0		
	e <i>All organizations.</i> At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		✓
	f <i>All organizations.</i> Did the organization acquire a direct or indirect interest in any applicable insurance contract?		✓
	g <i>For supporting organizations and sponsoring organizations maintaining donor advised funds.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		✓
	89g _____		
90a	List the states with which a copy of this return is filed ▶ <u>CA,FL</u>		
	b Number of employees employed in the pay period that includes March 12, 2006 (See instructions.)	90b _____	3448
91a	The books are in care of ▶ <u>WARD C MEAD</u> Telephone no. ▶ <u>386-226-6256</u>		
	Located at ▶ <u>600 SOUTH CLYDE MORRIS BLVD, DAYTONA BEACH, F</u> ZIP + 4 ▶ <u>32114-3966</u>		
	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	No
	If "Yes," enter the name of the foreign country ▶ <u>See Statement 17</u>	✓	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No
 If "Yes," enter the name of the foreign country ▶ **See Statement 18**

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ **92**

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a TUITION					213,875,000
b FLIGHT & OTHER FEES					29,271,000
c AUXILIARY SERVICES					18,680,000
d EDUCATIONAL SALES					8,726,000
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies	561499	2,542,000			6,168,000
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	1,725,000	
96 Dividends and interest from securities			14	4,771,000	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	9,966,000	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		2,542,000		16,462,000	276,720,000
105 Total (add line 104, columns (B), (D), and (E)) ▶					295,724,000

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	See Statement 19

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
See Statement 20	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers **to** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				0

107 Did the reporting organization **receive** any transfers **from** a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	✓

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- -----			
b	----- -----			
c	----- -----			
Totals				0

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	✓

Please 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 _____
ERIC WEEKES, VICE PRESIDENT-CFO
 Type or print name and title

Paid Preparer's Use Only Preparer's signature _____ Date _____ Check if self-employed Preparer's SSN or PTIN (See Gen. Inst. X) _____
 Firm's name (or yours if self-employed), address, and ZIP + 4 _____ EIN _____
 Phone no. _____ () _____



SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

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

OMB No. 1545-0047

2006

Name of the organization EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC	Employer identification number 59 0936101
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 2 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
KAREN B SHEHI 600 South Clyde Morris Blvd, Daytona Beach, FL 32114-3966, US	Staff 40	217,446	64,762	0
MASSOUD BAZARGAN 600 South Clyde Morris Blvd, Daytona Beach, FL 32114-3966, US	Staff 40	175,728	53,477	0
MARTIN A SMITH 600 South Clyde Morris Blvd, Daytona Beach, FL 32114-3966, US	Staff 40	168,894	51,628	0
THOMAS CONNOLLY 600 South Clyde Morris Blvd, Daytona Beach, FL 32114-3966, US	Staff 40	162,417	49,877	0
SARAH PATRICIA RAMSEY 600 South Clyde Morris Blvd, Daytona Beach, FL 32114-3966, US	Staff 40	160,537	49,368	0
Total number of other employees paid over \$50,000 . . . ▶	665			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
ERNST YOUNG PO BOX 406725, ATLANTA, GA 30384, US	AUDITING SERVICES	210,000
COBB COLE PO BOX 2491, DAYTONA BEACH, FL 32115, US	LEGAL SERVICES	161,327
KORN FERRY INTERNATIONAL NW 5064, MINNEAPOLIS, MN 55485-5064, US	RECRUITMENT SERVICES	139,828
ALVIN B JACKSON JR PO BOX 551, KENSINGTON, MD 20895, US	LEGAL SERVICES	119,952
LOMBARDI LOPER CONANT LLP 1999 HARRISON STREET, OAKLAND, CA 94612-3541, US	LEGAL SERVICES	71,909
Total number of others receiving over \$50,000 for professional services . . . ▶	3	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SODEXHO INC AFFILIATES 600 SOUTH CLYDE MORRIS BLVD, DAYTONA BEACH, FL 32114-3966, US	DINING SERVICES	1,959,174
CHARTWELLS P O BOX 91337, LOS ANGELES, CA 90074-1337, US	DINING SERVICES	1,719,832
WFF FACILITY SERVICES P O BOX 958204, ST LOUIS, MO 63195, US	CLEANING SERVICES	1,204,551
MEMORIAL HEALTH SERVICES 875 STERTHAUS STREET, ORMOND BEACH, FL 32174, US	MEDICAL SERVICES	210,000
DATAROAD INC 10151 DEERWOOD PARK BLVD, JACKSONVILLE, FL 32256, US	CONSULTANTS	90,448
Total number of other contractors receiving over \$50,000 for other services . . . ▶	8	

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ <u>445,239</u> (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1	✓
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)	See Statement 21	
a Sale, exchange, or leasing of property?	2a	✓
b Lending of money or other extension of credit?	2b	✓
c Furnishing of goods, services, or facilities?	2c	✓
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	✓
e Transfer of any part of its income or assets?	2e	✓
3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.) Stmt.22	3a	✓
b Did the organization have a section 403(b) annuity plan for its employees?	3b	✓
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c	✓
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d	✓
4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g	4a	✓
b Did the organization make any taxable distributions under section 4966?	4b	✓
c Did the organization make a distribution to a donor, donor advisor, or related person?	4c	✓
d Enter the total number of donor advised funds owned at the end of the tax year ▶	_____	
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶	_____	
f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶	_____ 0	
g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶	_____ 0	

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: **(1) more than 33½%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33½%** 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). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					0

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 7 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)					
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18.					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2002 through 2005 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e) ▶					26c
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____ ▶					26d
e Public support (line 26c minus line 26d total) ▶					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2) , enter the sum of these differences (the excess amounts) for each year: (2005) _____ (2004) _____ (2003) _____ (2002) _____					
c Add: Amounts from column (e) for lines: 15 _____ 16 _____ 17 _____ 20 _____ 21 _____ ▶					27c
d Add: Line 27a total _____ and line 27b total _____ ▶					27d
e Public support (line 27c total minus line 27d total) ▶					27e
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) ▶					27f
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)). ▶					27h %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2002 through 2005, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 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?	✓	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	✓	
31 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, attach a separate statement.) See Statement 23	✓	

32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	✓	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	✓	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	✓	
d Copies of all material used by the organization or on its behalf to solicit contributions?	✓	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		

33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		✓
b Admissions policies?		✓
c Employment of faculty or administrative staff?		✓
d Scholarships or other financial assistance?		✓
e Educational policies?		✓
f Use of facilities?		✓
g Athletic programs?		✓
h Other extracurricular activities?		✓
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		

34a Does the organization receive any financial aid or assistance from a governmental agency?	✓	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement. Stmnt 24		✓
35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	✓	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is— The lobbying nontaxable amount is—		
	Not over \$500,000	20% of the amount on line 40	}
	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	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

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 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See page 13 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		✓	
b Paid staff or management (Include compensation in expenses reported on lines c through h .)	✓		
c Media advertisements		✓	
d Mailings to members, legislators, or the public		✓	
e Publications, or published or broadcast statements		✓	
f Grants to other organizations for lobbying purposes		✓	
g Direct contact with legislators, their staffs, government officials, or a legislative body	✓		445,239
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		✓	
i Total lobbying expenditures (Add lines c through h .)			445,239
If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.			Stmt 25

Statement 1

Form: 990

Page: 1

Part: I

Question: 8

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Sales of Assets Other than Inventory****Noninventory Asset**

Description: FURNITURE & FIXTURES
Sold To: NUMERIOUS

Sales Price:	\$90,000.00	Date Sold:	06/30/2007
Expense of Sale:	\$0.00	Date acquired:	07/01/2001
Cost or value when acquired:	\$471,000.00	How acquired:	
Depreciation since acquisition:	\$386,000.00		PURCHASE
Net Sale:	\$5,000.00		

Noninventory Asset

Description: COMPUTER EQUIPMENT
Sold To: NUMERIOUS

Sales Price:	\$74,000.00	Date Sold:	06/30/2007
Expense of Sale:	\$0.00	Date acquired:	07/01/2001
Cost or value when acquired:	\$938,000.00	How acquired:	
Depreciation since acquisition:	\$875,000.00		PURCHASED
Net Sale:	\$11,000.00		

Noninventory Asset

Description: VEHICLES
Sold To: NUMERIOUS

Sales Price:	\$33,000.00	Date Sold:	06/30/2007
Expense of Sale:	\$0.00	Date acquired:	06/01/2002
Cost or value when acquired:	\$139,000.00	How acquired:	
Depreciation since acquisition:	\$124,000.00		PURCHASES
Net Sale:	\$18,000.00		

Noninventory Asset

Description: BUILDINGS & IMPROVEMENTS
Sold To: NUMERIOUS

Sales Price:	\$6,933,000.00	Date Sold:	06/30/2007
Expense of Sale:	\$0.00	Date acquired:	07/01/1987
Cost or value when acquired:	\$8,577,000.00	How acquired:	
Depreciation since acquisition:	\$5,060,000.00		PURCHASE
Net Sale:	\$3,416,000.00		

Noninventory Asset

Description: AIRCRAFT SALES
Sold To: VARIOUS

Sales Price:	\$1,030,000.00	Date Sold:	06/30/2007
Expense of Sale:	\$0.00	Date acquired:	09/01/2001
Cost or value when acquired:	\$1,164,000.00	How acquired:	

Depreciation since acquisition:	\$421,000.00	PURCHASED
Net Sale:	\$287,000.00	

Publicly Traded Securities

Description:
Sold To:

Sales Price:	\$13,661,000.00	Date Sold:
Expense of Sale:	\$0.00	Date acquired:
Cost or value when acquired:	\$7,432,000.00	How acquired:
Depreciation since acquisition:	\$0.00	
Net Sale:	\$6,229,000.00	

Statement 2

Form: 990

Page: 2

Part: II

Question: 22

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Grants and Allocations

Classification Misc Awards Numerous

Date:

Type: Cash **Address:** 600 South Clyde Morris Blvd

Grant Amt \$1,148,000.00 Daytona Beach, FL 32114-3966
United States

Purp of payment to affiliate
Relationship: Students
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification Scholarships Numerous

Date:

Type: Cash **Address:** 600 South Clyde Morris Blvd

Grant Amt \$27,669,000.00 Daytona Beach, FL 32114-3966
United States

Purp of payment to affiliate
Relationship: Students
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Classification Grants in aid Numerous

Date:

Type: Cash **Address:** 600 South Clyde Morris Blvd

Grant Amt \$2,353,000.00 Daytona Beach, FL 32114-3966
United States

Purp of payment to affiliate
Relationship: Students
Description of Property:

How Determined

Book Value of Property:
FMV of Property:

Total Grants: \$31,170,000.00

Statement 3

Form: 990

Page: 2

Part: II

Question: 42

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Depreciation and Depletion

Asset	Current Deprec.
BUILDINGS & EQUIPMENT	\$21,220,000.00
Total	\$21,220,000.00

Statement 4

Form: 990

Page: 2

Part: II

Question: 43

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Attachment listing other expenses for Part II

Description	Total:	Pgm Services	Mgt and General	Fundraising
GENERAL SERVICES	\$22,761,000.00	\$8,674,000.00	\$14,023,000.00	\$64,000.00
FUEL AND OIL	\$2,931,000.00	\$2,709,000.00	\$222,000.00	\$0.00
ADVERTISING	\$1,743,000.00	\$1,422,000.00	\$321,000.00	\$0.00
INSURANCE	\$5,537,000.00	\$2,774,000.00	\$2,763,000.00	\$0.00
RENT	\$3,380,000.00	\$2,319,000.00	\$1,061,000.00	\$0.00
Total:	\$36,352,000.00	\$17,898,000.00	\$18,390,000.00	\$64,000.00

Statement 5

Form: 990

Page: 3

Part: III

Question:

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Program Services

Achievement	Pgm. Svc. Exp.
Higher Education: All revenue and expenses are directly related to providing a comprehensive education leading to undergraduate and graduate degrees, seminars, short courses and research activity. (7157 Students)	\$205,325,000.0
Grants and Allocations: \$31,170,000.00 This amount includes foreign grants: No	
	Total: \$205,325,000.00

Statement 6

Form: 990

Page: 4

Part: IV

Question: 51 C

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Schedule of Other Notes and Loans Receivable**

Borrower's Name: Numerous Students**Borrower's Title:****Original Amount:** \$9,573,000.00**Balance Due:** \$9,963,000.00**Date of Note:** 07/01/1996**Maturity Date:** 07/02/2007**Repayment Terms:** 0**Interest Rate:** 0**Security Provided by Borrower:** None**Purpose of Loan:** Student Loans**Description of Consideration:** None**FMV of Consideration:** \$0.00**Relationship of Borrower/Lender:** None

Total Due: **\$9,963,000.00**

Statement 7

Form: 990

Page: 4

Part: IV

Question: 54

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Investments - Securities**

Security	Valuation Type	Amount
MONEY MARKET ACCOUNTS	FMV	\$49,375,000.00
MUTUAL FUNDS	FMV	\$60,731,000.00
Total:		\$110,106,000.00

Statement 8

Form: 990

Page: 4

Part: IV

Question: 57

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Schedule of Land, Buildings and Equipment**

Description	Cost	Depreciation	Book Value
BUILDINGS & EQUIPMENT	\$324,588,000.00	\$177,007,000.00	\$147,581,000.00
LAND	\$31,156,000.00	\$0.00	\$31,156,000.00
CONSTRUCTION IP	\$34,419,000.00	\$0.00	\$34,419,000.00
Total:	\$390,163,000.00	\$177,007,000.00	\$213,156,000.00

Statement 9

Form: 990

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Part: IV

Question: 58

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Other Assets**

Asset Description	BOY Amount	EOY Amount
UNAMORTIZED BOND COSTS	\$7,354,000.00	\$6,669,000.00
OTHER ASSETS	\$443,000.00	\$366,000.00
Total:	\$7,797,000.00	\$7,035,000.00

Statement 10

Form: 990

Page: 4

Part: IV

Question: 64a

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Tax Exempt Bond Liabilities**

Purpose:	CONSTRUCTION & REFUNDING
Issue Date:	08/01/2003
Original Amount:	\$39,531,000.00
Amount of issue outstanding:	\$34,108,000.00
Unexpended Proceeds:	\$0.00
Facility used by 3rd Party:	No
Percent used by 3rd Party:	
Obligation is a Mortgage:	No
Maturity Date:	
Repayment Terms:	
Interest Rate:	
Security Provided by Borrower:	
Contingent Liability:	No

If 'Yes', this record will not be included in the total returned to the Form 990:

Purpose:	CONSTRUCTION
Issue Date:	09/01/1974
Original Amount:	\$1,555,000.00
Amount of issue outstanding:	\$625,000.00
Unexpended Proceeds:	\$0.00
Facility used by 3rd Party:	Yes
Percent used by 3rd Party:	38
Obligation is a Mortgage:	No
Maturity Date:	
Repayment Terms:	
Interest Rate:	
Security Provided by Borrower:	
Contingent Liability:	No

If 'Yes', this record will not be included in the total returned to the Form 990:

Purpose:	REFUNDING
Issue Date:	07/13/1999
Original Amount:	\$30,993,000.00
Amount of issue outstanding:	\$29,517,000.00
Unexpended Proceeds:	\$0.00
Facility used by 3rd Party:	No
Percent used by 3rd Party:	
Obligation is a Mortgage:	No
Maturity Date:	
Repayment Terms:	
Interest Rate:	
Security Provided by Borrower:	
Contingent Liability:	No

If 'Yes', this record will not be included in the total returned to the Form 990:

Purpose:	ACADEMIC FACILITIES
Issue Date:	07/13/1999
Original Amount:	\$12,291,000.00
Amount of issue outstanding:	\$12,291,000.00
Unexpended Proceeds:	\$0.00
Facility used by 3rd Party:	No

Percent used by 3rd Party:

Obligation is a Mortgage: No

Maturity Date:

Repayment Terms:

Interest Rate:

Security Provided by Borrower:

Contingent Liability: No

If 'Yes', this record will not be included in the total returned to the Form 990:

Purpose: CONSTRUCTION & REFUNDING

Issue Date: 08/15/2005

Original Amount: \$104,544,000.00

Amount of issue outstanding: \$101,038,000.00

Unexpended Proceeds: \$35,121,000.00

Facility used by 3rd Party: Yes

Percent used by 3rd Party: 6

Obligation is a Mortgage: No

Maturity Date:

Repayment Terms:

Interest Rate:

Security Provided by Borrower:

Contingent Liability: No

If 'Yes', this record will not be included in the total returned to the Form 990:

Purpose: DORMITORY CONSTRUCTION

Issue Date: 06/30/1967

Original Amount: \$1,423,000.00

Amount of issue outstanding: \$65,000.00

Unexpended Proceeds: \$0.00

Facility used by 3rd Party: Yes

Percent used by 3rd Party: 0

Obligation is a Mortgage: No

Maturity Date:

Repayment Terms:

Interest Rate:

Security Provided by Borrower:

Contingent Liability: No

If 'Yes', this record will not be included in the total returned to the Form 990:

Purpose: ACADEMIC FACILITIES

Issue Date: 05/01/1967

Original Amount: \$1,169,000.00

Amount of issue outstanding: \$25,000.00

Unexpended Proceeds: \$0.00

Facility used by 3rd Party: No

Percent used by 3rd Party:

Obligation is a Mortgage: No

Maturity Date:

Repayment Terms:

Interest Rate:

Security Provided by Borrower:

Contingent Liability: No

If 'Yes', this record will not be included in the total returned to the Form 990:

Total Due: \$177,669,000.00

Statement 11

Form: 990

Page: 4

Part: IV

Question: 64b

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Mortgages and Other Notes Payable**

Type: Non-Mortgage
Lender's Name: ORACLE CORPORATION

Original Amount: \$436,000.00
Balance Due: \$149,000.00
Date of Note: 06/30/2005
Maturity Date: 06/30/2009
Repayment Terms: ANNUALLY
Interest Rate: 4.45
Security Provided by Borrower: NONE
Purpose of Loan: ACQUIRE SOFTWARE
Description of Consideration: SOFTWARE
FMV of Consideration: \$385,000.00
Relationship: NONE

Type: Non-Mortgage
Lender's Name: VOLUSIA COUNTY FLORIDA

Original Amount: \$850,000.00
Balance Due: \$2,157,000.00
Date of Note: 03/01/2000
Maturity Date: 05/01/2026
Repayment Terms: MONTHLY
Interest Rate: 6.58
Security Provided by Borrower: LAND & BUILDING
Purpose of Loan: ACQUIRE LAND & BUILDING
Description of Consideration: LAND & BUILDING
FMV of Consideration: \$2,400,000.00
Relationship: NONE

Type: Non-Mortgage
Lender's Name: DEPT OF HOUSING

Original Amount: \$1,169,000.00
Balance Due: \$563,000.00
Date of Note: 01/01/1982
Maturity Date: 01/01/2021
Repayment Terms: SEMI-ANNUALLY
Interest Rate: 3
Security Provided by Borrower: BUILDING & FURNISHINGS
Purpose of Loan: ACQUIRE BUILDING & FURNISHINGS
Description of Consideration: BUILDING & FURNISHINGS
FMV of Consideration: \$1,169,000.00
Relationship: NONE

Type: Non-Mortgage
Lender's Name: WACHOVIA

Original Amount: \$7,522,000.00
Balance Due: \$328,000.00
Date of Note: 10/01/1987
Maturity Date: 10/01/2007
Repayment Terms: MONTHLY

Interest Rate: 12.25
Security Provided by Borrower: LAND & BUILDING
Purpose of Loan: ACQUIRE LAND & BUILDING
Description of Consideration: LAND & BUILDING
FMV of Consideration: \$7,522,000.00
Relationship: NONE

Type: Non-Mortgage
Lender's Name: BANC ONE LEASING

Original Amount: \$1,118,000.00
Balance Due: \$310,000.00
Date of Note: 09/25/2000
Maturity Date: 08/25/2010
Repayment Terms: MONTHLY
Interest Rate: 7.75
Security Provided by Borrower: MODULAR BUILDINGS
Purpose of Loan: ACQUIRE MODULAR BUILDINGS
Description of Consideration: MODULAR BUILDINGS
FMV of Consideration: \$1,118,000.00
Relationship: NONE

Total Due: **\$3,507,000.00**

Statement 12

Form: 990

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Part: IV

Question: 65

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Other Liabilities

Liability Description	BOY Amount	EOY Amount
ADVANCES FOR STUDENT LOANS	\$9,287,000.00	\$9,459,000.00
STUDENT DEPOSITS & ADVANCES	\$5,501,000.00	\$6,119,000.00
Total:	\$14,788,000.00	\$15,578,000.00

Statement 13

Form: 990

Page: 5

Part: IV-A

Question: d(2)

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Revenue Audit Line d(2)

Description	Amount
SCHOLARSHIPS RECLASSIFIED TO FUNCTIONAL EXPENSES	\$29,809,000.00
REALIZED GAIN ON NONOPERATING ACTIVITIES	\$26,078,000.00
Total:	\$55,887,000.00

Statement 14

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Page: 5

Part: IV-B

Question: d(2)

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Expense Audit Line d(2)**

Description	Amount
CASUALTY LOSS EXPENSES	\$5,948,000.00
SCHOLARSHIPS RECLASSIFIED TO FUNCTIONAL EXPENSES	\$29,809,000.00
LOSS ON EXTINGUISHMENT OF DEBT	\$1,910,000.00
Total:	\$37,667,000.00

Statement 15

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Part: V

Question:

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Officers, Directors, Trustees, and Key Employees**

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
ERIC B WEEKES Title: Vice President Addr 1: 5266 SHORELINE CIRCLE Addr 2: CSZ: SANFORD, FL 32771-7168 Country: United States	50	\$161,331.00	\$48,131.00	\$0.00
JAMES O'CONNOR Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States	5	\$0.00	\$0.00	\$0.00
WILLIAM W SPRUANCE Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States	5	\$0.00	\$0.00	\$0.00
JOHN C ADAMS Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States	5	\$0.00	\$0.00	\$0.00
LAWRENCE W CLARKSON Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States	10	\$0.00	\$0.00	\$0.00
KENNETH DUFOUR Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States	5	\$0.00	\$0.00	\$0.00

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
JIM W HENDERSON	12	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
JOHN P JOHNSON	55	\$299,371.00	\$84,228.00	\$0.00
Title: President Addr 1: 37 OLD CANYON LANE Addr 2: CSZ: ORMOND BEACH, FL 32174-3081 Country: United States				
MORI HOSSEINI	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
DANIEL M IZARD	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
JOSEPH MARTIN	10	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
JAMES KOLBE	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
JOHN O'BRIEN	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966				

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Country: United States				
HARRY ROBERTSON	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
RAYMOND SIGAFOOS	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
PAUL BANKIT	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
CURTIS JAMES	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
ELEANOR BAUM	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
NATHAN CLAPPER	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
DAVID SLICK	10	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2:				

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
CSZ: Daytona Beach, FL 32114-3966 Country: United States				
THOMAS W STAED	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
JAMES HAGEDORN	10	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
JEFFREY FEASEL	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
KAREN HOLBROOK	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
GLENN S RITCHEY	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
JOHN WING	10	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
JOFFRE LANDER	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd				

Name and Address	Ave. Hrs/week	Comp.	Benefits	Expenses
Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
ROBERT OXLEY	5	\$0.00	\$0.00	\$0.00
Title: Board Member Addr 1: 600 South Clyde Morris Blvd Addr 2: CSZ: Daytona Beach, FL 32114-3966 Country: United States				
TOTALS		\$460,702.00	\$132,359.00	\$0.00

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Part: V-B

Question:

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC**59-0936101****Former Officers, Directors, Trustees, and Key Employees**

Name and Address	Loans and Advances	Comp.	Benefits	Expenses
ROBERT JOST	\$0.00	\$157,609.00	\$48,576.00	\$0.00
Addr: 600 South Clyde Morris Blvd				
Addr 2:				
CSZ: Daytona Beach, FL 32114-3966				
Country: United States				
TOTALS	\$0.00	\$157,609.00	\$48,576.00	\$0.00

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Form: 990

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Part: VI

Question: 91b

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Foreign Accounts

Foreign Account List

Luxembourg

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Form: 990

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Part: VI

Question: 91c

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Foreign Offices

Foreign Office List

Luxembourg

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Part: VIII

Question:

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Relationship of Activities

Line No	Relationship of Activities to the Accomplishment of Exempt Purposes
93 c	PAYMENTS RECEIVED TO SUPPORT THE NUMEROUS EXTRA CURRICULAR FUNCTIONS OF THE UNIVERSITY
93 g	PAYMENTS RECEIVED FOR INSTRUCTION AND RESEARCH PERFORMED FOR VARIOUS LOCAL, STATE, AND FEDERAL AGENCIES
93 a	TUITION PAYMENTS TO SUPPORT ACADEMIC FUNCTIONS OF THE UNIVERSITY
93 b	FLIGHT FEES USED TO SUPPORT FLIGHT COURSES REQUIRED FOR RELATED UNIVERSITY DEGREES
93 d	PAYMENTS RECEIVED FOR NUMEROUS EDUCATIONAL SALES AND SERVICES PERFORMED BY THE UNIVERSITY

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Form: 990

Page: 8

Part: IX

Question:

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC

59-0936101

Taxable Subsidiaries

Name and Address	Pct	Income	Assets
ERAU HOLDINGS INC	100.00 %	\$0.00	\$0.00
EIN 06-1638801			
Addr: 600 SOUTH CLYDE MORRIS BLVD			
Addr 2:			
CSZ: DAYTONA BEACH, FL 32114-3966			
Cntry: United States			
Nature of Bus. Activities HOLDING COMPANY			

Statement 21
Form: Schedule A
Page: 2
Part: III
Question: 2

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC
59-0936101

Transaction Explanations

Line	Explanation
2d	PAID FOR SERVICES RENDERED BY INSURANCE COMPANY IN WHICH TWO TRUSTEES OF THE UNIVERSITY ARE PRINCIPLES.
2c	TWO TRUSTEES OF THE UNIVERSITY ARE PRINCIPLES OF THE COMPANY THAT PROVIDE INSURANCE COVERAGE TO THE UNIVERSITY.

Statement 22
Form: Schedule A
Page: 2
Part: III
Question: 3a

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC
59-0936101

Explanation of Grant Determination

Explanation of grant qualifications

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY AWARDS SCHOLARSHIPS TO STUDENTS BASED ON ACADEMIC ACHIEVEMENT, PARTICIPATION IN ON-CAMPUS AND OFF-CAMPUS ACTIVITIES/EMPLOYMENT, ESSAY COMPLETION, STUDY ABROAD PROGRAMS, AND FINANCIAL NEED.

Statement 23
Form: Schedule A
Page: 4
Part: V
Question: 31

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC
59-0936101

Publicize Racially Nondiscriminatory Policy

Explanation/Description

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY ADHERES TO THE PRINCIPLE OF EQUAL EDUCATION AND EMPLOYMENT OPPORTUNITY WITHOUT REGARD TO RACE, SEX, COLOR, CREED, OR NATIONAL ORIGIN. THIS POLICY EXTENDS TO ALL PROGRAMS AND ACTIVITIES INVOLVING OR SUPPORTED BY THE UNIVERSITY. EMBRY-RIDDLE DOES NOT DISCRIMINATE ON THE BASIS OF HANDICAP IN THE RECRUITMENT AND ADMISSION OF STUDENTS. THE RECRUITMENT AND EMPLOYMENT OF FACULTY AND STAFF, AND THE OPERATION OF ANY OF ITS PROGRAMS AND ACTIVITIES, AS SPECIFIED BY FEDERAL LAWS AND REGULATIONS. A COORDINATOR FOR COMPLIANCE WITH SECTION 504 OF THE REHABILITATION ACT OF 1973, AS AMENDED, HAS BEEN APPOINTED FOR EACH CAMPUS.

Statement 24
Form: Schedule A
Page: 4
Part: V
Question: 34

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC
59-0936101

Financial Assistance

Explanation

THE UNIVERSITY RECEIVES FINANCIAL AID FROM LOCAL, STATE, & FEDERAL AGENCIES IN SUPPORT OF NUMEROUS EDUCATIONAL AND RESEARCH PROGRAMS PROVIDED FOR OUR STUDENTS.

Statement 25
Form: Schedule A
Page: 5
Part: VI-B
Question:

EMBRY-RIDDLE AERONAUTICAL UNIVERSITY INC
59-0936101

Description of Lobbying Activity

Explanation of Lobbying Activities

THE UNIVERSITY ENGAGED THE SERVICES OF EMPLOYEES TO ASSIST IN IDENTIFYING GOVERNMENT FUNDING OPPORTUNITIES AND LEGISLATIVE MATTERS IN SUPPORT OF THE UNIVERSITY'S MISSION. AND TO ADVISE THE UNIVERSITY ON GOVERNMENTAL MATTERS IMPORTANT TO HIGHER EDUCATION, AVIATION, AND AIRPORT MATTERS.