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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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

2008

Open to Public Inspection

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

A For the 2008 calendar year, or tax year beginning 06-01-2008 and ending 05-31-2009

- B Check if applicable: Address change, Name change, Initial return, Termination, Amended return, Application pending

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

C Name of organization: ROBERT MORRIS UNIVERSITY. Doing Business As. Number and street (or P.O. box if mail is not delivered to street address): 6001 UNIVERSITY BLVD REVERE CENTER. Room/suite. City or town, state or country, and ZIP + 4: MOON TOWNSHIP, PA 15108

D Employer identification number: 25-1120678

E Telephone number: (412) 397-5277

G Gross receipts \$ 108,456,110

F Name and address of Principal Officer: dan kiener, 6001 UNIVERSITY BLVD REVERE CENTER, MOON TOWNSHIP, PA 15108

H(a) Is this a group return for affiliates? Yes No

H(b) Are all affiliates included? Yes No (If "No," attach a list See instructions)

H(c) Group Exemption Number

I Tax-exempt status: 501(c)(3)

J Web site: WWW.RMU.EDU

K Type of organization: Corporation

L Year of Formation: 1921

M State of legal domicile: PA

Part I Summary

Table with 3 columns: Category (Activities & Governance, Revenue, Expenses, Net Assets or Fund Balances), Description, and Amount. Rows include mission statement, revenue breakdown, expenses, and net assets.

Part II Signature Block

Signature block containing declaration of preparer, signature of officer (Gregory G Dell'omo), and date (2010-03-29).

Paid Preparer's Use Only section containing preparer's signature, firm name (DELOITTE TAX LLP), address, and EIN.

May the IRS discuss this return with the preparer shown above? Yes No

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

**1** Briefly describe the organization's mission  
SEE SCHEDULE O

**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 (4) organizations and 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 \$ 27,415,636 including grants of \$ 0 ) (Revenue \$ 66,227,793 )  
INSTRUCTION EXPENSES, DIRECT COSTS OF ALL ACTIVITIES THAT ARE PART OF THE UNIVERSITY'S INSTRUCTION PROGRAMS FROM ACADEMIC DEPARTMENTS

**4b** (Code ) (Expenses \$ 16,596,891 including grants of \$ 16,596,891 ) (Revenue \$ 16,596,891 )  
SCHOLARSHIPS AND FELLOWSHIPS

**4c** (Code ) (Expenses \$ 13,916,496 including grants of \$ 0 ) (Revenue \$ 15,946,170 )  
STUDENT SERVICES INCLUDES EXPENSES FOR THE OFFICES OF FINANCIAL AID ADMIN , ENROLLMENT MANAGEMENT, REGISTRAR, ATHLETICS AND THOSE ACTIVITIES WHOSE PRIMARY PURPOSE IS TO CONTRIBUTE TO THE STUDENT'S EMOTIONAL AND PHYSICAL WELL BEING

(Code ) (Expenses \$ 40,297,387 including grants of \$ ) (Revenue \$ 847,276 )

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses \$ 98,226,410 *Must equal Part IX, Line 25, column (B).*

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	Yes	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors?	Yes	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		No
<b>4</b> Section 501(c)(3) organizations Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II.</i>	Yes	
<b>5</b> Section 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>		No
<b>6</b> Did the organization maintain any donor advised funds or any 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>		No
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		No
<b>9</b> Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		No
<b>10</b> Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>	Yes	
<b>11</b> Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.</i>	Yes	
<b>12</b> Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	Yes	
<b>13</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	Yes	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the U S ?		No
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? <i>If "Yes," complete Schedule F, Part I.</i>	Yes	
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II.</i>		No
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III.</i>		No
<b>17</b> Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I.</i>		No
<b>18</b> Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	Yes	
<b>19</b> Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		No
<b>20</b> Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>		No
<b>21</b> Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	Yes	
<b>22</b> Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	Yes	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J.</i>	Yes	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25.</i>	Yes	
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		No
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		No
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		No
<b>25a</b> 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>		No
<b>b</b> Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I.</i>		No
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i>		No
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i>	Yes	

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

		Yes	No
<b>28</b>	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
<b>a</b>	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> . . . . . 		No
<b>b</b>	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . . 		No
<b>c</b>	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> . . . . . 	Yes	
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> 	Yes	
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . . 		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . . 		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . . 		No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . . 	Yes	
<b>35</b>	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> . . . . . 	Yes	
<b>36</b>	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> . . . . . 		No
<b>37</b>	Did the organization conduct more than 5 percent 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> . . . . . 		No

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable . . . . .		
	<b>1a</b> 230		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .		
	<b>1b</b> 0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	Yes	
<b>2a</b>	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return . . . . .		
	<b>2a</b> 1,663		
<b>b</b>	If at least one is reported in 2a, did the organization file all required federal employment tax returns? . . . . . <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	Yes	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	Yes	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . . . . .		No
<b>b</b>	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .		No
<b>c</b>	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ? . . . . .		
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible? . . . . .		No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		
<b>7</b>	<i>Organizations that may receive deductible contributions under section 170(c).</i>		
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? . . . . .		
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	Yes	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .		
	<b>7d</b>		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .		No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		No
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .		No
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .		No
<b>8</b>	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .		
<b>9</b>	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? . . . . .		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .		
<b>10</b>	<i>Section 501(c)(7) organizations.</i> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .		
<b>11</b>	<i>Section 501(c)(12) organizations.</i> Enter		
<b>a</b>	Gross income from members or shareholders . . . . .		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .		
	<b>11a</b>		
	<b>11b</b>		
<b>12a</b>	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041? . . . . .		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .		
	<b>12b</b>		

**Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)**

**Section A. Governing Body and Management**

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body . . . . .		
<b>1b</b>	Enter the number of voting members that are independent . . . . .		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .		No
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . .		No
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .		No
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .		No
<b>6</b>	Does the organization have members or stockholders? . . . . .		No
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .		No
<b>7b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
<b>8a</b>	the governing body? . . . . .	Yes	
<b>8b</b>	each committee with authority to act on behalf of the governing body? . . . . .	Yes	
<b>9a</b>	Does the organization have local chapters, branches, or affiliates? . . . . .		No
<b>9b</b>	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .		
<b>10</b>	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 . . . . .	Yes	
<b>11</b>	Is there any officer, director or 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 . . . . .		No

**Section B. Policies**

		Yes	No
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No", go to line 13 . . . . .	Yes	
<b>12b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	Yes	
<b>12c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	Yes	
<b>13</b>	Does the organization have a written whistleblower policy? . . . . .	Yes	
<b>14</b>	Does the organization have a written document retention and destruction policy? . . . . .	Yes	
<b>15</b>	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
<b>15a</b>	The organization's CEO, Executive Director, or top management official? . . . . .	Yes	
<b>15b</b>	Other officers or key employees of the organization? . . . . . Describe the process in Schedule O	Yes	
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		No
<b>16b</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

- 17** List the States with which a copy of this Form 990 is required to be filed PA
- 18** Section 6104 requires an organization to make its Form 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. See Additional Data Table
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization  
 JEFFREY A LISTWAK  
 6001 UNIVERSITY BLVD  
 MOON TOWNSHIP, PA 15108  
 (412) 397-5277





**Part VIII Statement of Revenue**

		(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514	
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns . . . <b>1a</b>					
	<b>b</b> Membership dues . . . . .					
	<b>1b</b>					
	<b>c</b> Fundraising events . . . . . 19,725					
	<b>1c</b>					
	<b>d</b> Related organizations . . . <b>1d</b>					
	<b>e</b> Government grants (contributions) <b>1e</b> 2,129,908					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above <b>1f</b> 2,653,741					
<b>g</b> Noncash contributions included in lines 1a-1f \$ 362,399						
<b>h Total (Add lines 1a-1f)</b> . . . . .	4,803,374					
<b>Program Service Revenue</b>	<b>2a</b> TUITION AND FEES	611,710	80,099,282	80,099,282		
	<b>b</b> AUXILIARY ENTERPRISES	611,710	12,197,905	12,197,905		
	<b>c</b> ISLAND SPORTS CENTER	713,940	3,858,669		3,858,669	
	<b>d</b> OTHER REVENUES	611,710	1,851,104	1,851,104		
	<b>e</b> CONFERENCE CENTER RENT	611,710	486,655		486,655	
	<b>f</b> All other program service revenue		801,998	569,028	232,970	
	<b>g Total. Add lines 2a-2f</b> . . . . . \$ 99,295,613					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest other similar amounts) . . . . .		976,432		976,432	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .					
	<b>5</b> Royalties . . . . .					
	<b>6a</b> Gross Rents	(i) Real				
		(ii) Personal				
	<b>b</b> Less rental expenses					
	<b>c</b> Rental income or (loss)					
	<b>d</b> Net rental income or (loss) . . . . .					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	3,210,544			
		(ii) Other				
		<b>b</b> Less cost or other basis and sales expenses	3,328,618			
		<b>c</b> Gain or (loss)	-118,074			
<b>d</b> Net gain or (loss) . . . . .		-118,074		-118,074		
<b>8a</b> Gross income from fundraising events (not including \$ 170,147 of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 . . . . . <b>a</b>						
	<b>b</b> Less direct expenses . . . <b>b</b>					
	<b>c</b> Net income or (loss) from fundraising events . . . . .		97,427	97,427		
<b>9a</b> Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000 <b>a</b>						
	<b>b</b> Less direct expenses . . . <b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities . . . . .					
<b>10a</b> Gross sales of inventory, less returns and allowances . . . <b>a</b>						
	<b>b</b> Less cost of goods sold . . . <b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory . . . . .					
Miscellaneous Revenue	Business Code					
<b>11a</b>						
<b>b</b>						
<b>c</b>						
<b>d</b> All other revenue						
<b>e Total. Add lines 11a-11d</b> . . . . . \$						
<b>12 Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . .		105,054,772	94,814,746	4,578,294	858,358	

**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).**

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b>	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
<b>2</b>	Grants and other assistance to individuals in the U S See Part IV, line 22	16,596,891	16,596,891		
<b>3</b>	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16				
<b>4</b>	Benefits paid to or for members				
<b>5</b>	Compensation of current officers, directors, trustees, and key employees . . . . .	1,939,304	778,841	880,490	279,973
<b>6</b>	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
<b>7</b>	Other salaries and wages	35,056,883	33,860,689		559,840
<b>8</b>	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	2,654,870	2,521,596	74,867	58,407
<b>9</b>	Other employee benefits . . . . .	6,804,527	6,462,939	191,888	149,700
<b>10</b>	Payroll taxes . . . . .	2,590,450	2,460,409	73,051	56,990
<b>11</b>	Fees for services (non-employees)				
<b>a</b>	Management . . . . .				
<b>b</b>	Legal . . . . .	69,626	66,131	1,963	1,532
<b>c</b>	Accounting . . . . .	168,510	160,051	4,752	3,707
<b>d</b>	Lobbying . . . . .	50,247		50,247	
<b>e</b>	Professional fundraising See Part IV, line 17 . . . . .				
<b>f</b>	Investment management fees . . . . .				
<b>g</b>	Other . . . . .	12,458,646	11,880,946	302,504	275,196
<b>12</b>	Advertising and promotion . . . . .	769,649	731,013	21,704	16,932
<b>13</b>	Office expenses . . . . .	3,771,314	3,581,994	106,351	82,969
<b>14</b>	Information technology . . . . .	2,806,879	2,665,974	79,154	61,751
<b>15</b>	Royalties . . . . .				
<b>16</b>	Occupancy . . . . .	3,199,435	3,038,823	90,224	70,388
<b>17</b>	Travel . . . . .	2,213,034	2,101,939	62,408	48,687
<b>18</b>	Payments of travel or entertainment expenses for any Federal, state or local public officials . . . . .				
<b>19</b>	Conferences, conventions and meetings . . . . .				
<b>20</b>	Interest . . . . .	2,743,214	2,605,504	77,359	60,351
<b>21</b>	Payments to affiliates . . . . .				
<b>22</b>	Depreciation, depletion, and amortization . . . . .	6,300,106	5,983,841	177,663	138,602
<b>23</b>	Insurance . . . . .	782,624	743,336	22,070	17,218
<b>24</b>	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)				
<b>a</b>	RECRUITMENT	1,016,516	965,487	28,666	22,363
<b>b</b>	OTHER COSTS	432,561	410,848	12,197	9,516
<b>c</b>	DUES AND SUBSCRIPTIONS	325,451	309,113	9,178	7,160
<b>d</b>	PROFESSIONAL DEVELOP	315,903	300,045	8,908	6,950
<b>f</b>	All other expenses				
<b>25</b>	<b>Total functional expenses.</b> Add lines 1 through 24f	103,066,640	98,226,410	2,911,998	1,928,232
<b>26</b>	<b>Joint Costs.</b> Check <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)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	184,642	<b>1</b>	140,529
	<b>2</b> Savings and temporary cash investments . . . . .	8,513,411	<b>2</b>	15,333,267
	<b>3</b> Pledges and grants receivable, net . . . . .	4,522,770	<b>3</b>	3,992,443
	<b>4</b> Accounts receivable, net . . . . .	547,805	<b>4</b>	387,602
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i> . . . . .		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i> . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .	1,374,174	<b>7</b>	1,373,784
	<b>8</b> Inventories for sale or use . . . . .	141,023	<b>8</b>	105,018
	<b>9</b> Prepaid expenses and deferred charges . . . . .	1,248,379	<b>9</b>	2,500,704
	<b>10a</b> Land, buildings, and equipment cost basis			
		<b>10a</b> 170,742,111		
	<b>b</b> Less accumulated depreciation <i>Complete Part VI of Schedule D</i> . . . . .			
		<b>10b</b> 62,348,895	101,822,004	<b>10c</b> 108,393,216
	<b>11</b> Investments—publicly traded securities . . . . .	20,475,835	<b>11</b>	16,145,635
	<b>12</b> Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i> . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i> . . . . .		<b>13</b>	
<b>14</b> Intangible assets . . . . .		<b>14</b>		
<b>15</b> Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i> . . . . .	2,870,725	<b>15</b>	11,991,011	
<b>16 Total assets. Add lines 1 through 15 (must equal line 34)</b>	141,700,768	<b>16</b>	160,363,209	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	12,475,312	<b>17</b>	14,540,390
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	6,126,296	<b>19</b>	5,470,900
	<b>20</b> Tax-exempt bond liabilities . . . . .	26,676,351	<b>20</b>	47,595,832
	<b>21</b> Escrow account liability <i>Complete Part IV of Schedule D</i> . . . . .		<b>21</b>	
	<b>22</b> Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i> . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	20,231,855	<b>23</b>	19,614,815
	<b>24</b> Unsecured notes and loans payable . . . . .		<b>24</b>	
	<b>25</b> Other liabilities <i>Complete Part X of Schedule D</i> . . . . .	1,835,762	<b>25</b>	1,856,360
	<b>26 Total liabilities. Add lines 17 through 25</b>	67,345,576	<b>26</b>	89,078,297
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	58,701,270	<b>27</b>	58,071,498
	<b>28</b> Temporarily restricted net assets . . . . .	10,453,188	<b>28</b>	7,876,031
	<b>29</b> Permanently restricted net assets . . . . .	5,200,734	<b>29</b>	5,337,383
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	74,355,192	<b>33</b>	71,284,912	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	141,700,768	<b>34</b>	160,363,209	

**Part XI Financial Statements and Reporting**

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> cash <input checked="" type="checkbox"/> accrual <input type="checkbox"/> other		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .	Yes	
<b>c</b>	If "Yes" to lines 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? . . . . .	Yes	
<b>3a</b>	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? . . . . .	Yes	
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? . . . . .	Yes	

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

**Public Charity Status and Public Support**

OMB No 1545-0047

**2008**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.  
Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization  
ROBERT MORRIS UNIVERSITY

Employer identification number

25-1120678

**Part I Reason for Public Charity Status** (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only **one** organization )

- 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)**. (Attach Schedule H )
- 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)**. (See instructions )
- 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?

	Yes	No
<b>11g(i)</b>		
<b>11g(ii)</b>		
<b>11g(iii)</b>		

- (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 the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the organizations the organization supports

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

**Part II Support Schedule for Organizations Described in IRC 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.)

**Public Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add line 1-3						
<b>5</b> The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
<b>6 Public Support</b> subtract line 5 from line 4						

**Total Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
<b>11 Total Support</b> (Add lines 7 through 10)						
<b>12</b> Gross receipts from related activities, etc (See instructions )					<b>12</b>	
<b>13 First Five Years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						<input type="checkbox"/>

**Computation of Public Support Percentage**

<b>14</b> Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	<b>14</b>	
<b>15</b> Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	<b>15</b>	
<b>16a 33 1/3% Test - 2008.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization		<input type="checkbox"/>
<b>b 33 1/3% Test - 2007.</b> If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization		<input type="checkbox"/>
<b>17a 10% Facts and Circumstances Test - 2008.</b> If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
<b>b 10% Facts and Circumstances Test - 2007.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		<input type="checkbox"/>
<b>18 Private Foundation.</b> If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		<input type="checkbox"/>

**Part III Support Schedule for Organizations Described in IRC 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) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total</b> Add lines 1-5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
<b>c</b> Total of lines 7a and 7b						
<b>8 Public Support</b> (Subtract line 7c from line 6)						

**Total Support**

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total Support</b> (Add lines 9, 10c, 11 and 12)						
<b>14 First Five Years</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b> <input type="checkbox"/>						

**Computation of Public Support Percentage**

<b>15</b> Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	<b>15</b>	
<b>16</b> Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	<b>16</b>	

**Computation of Investment Income Percentage**

<b>17</b> Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	<b>17</b>	
<b>18</b> Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h	<b>18</b>	

- 19a 33 1/3% Tests - 2008.** 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% Tests - 2007.** 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 information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

<b>Facts and Circumstances Test</b>

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

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

- 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)

- 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)

- Section 501(c)(4), (5), or (6) organizations complete Part III

Name of the organization ROBERT MORRIS UNIVERSITY

Employer identification number

25-1120678

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations. (See the instructions for Schedule C for details.)

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

Part I-B To be completed by all organizations exempt under section 501(c)(3). (See the instructions for Schedule C for details.)

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$
2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$
3 If the organization incurred in 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 To be completed by all organizations exempt under section 501(c), except section 501(c)(3). (See the instructions for Schedule C for details.)

- 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 internal funds contributed to other organizations for section 527 exempt function activities \$
3 Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b \$
4 Did the filing organization file Form 1120-POL for this year? Yes No
5 State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and 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

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's internal funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization.

**Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)).** (See the instructions for Schedule C for details.)

- 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

<b>Limits on Lobbying Expenditures—</b> (The term "expenditures" means amounts paid or incurred.)	<b>(a)</b> Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)		
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)	58,163	
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)	58,163	
<b>d</b> Other exempt purpose expenditures	103,008,477	
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)	103,066,640	
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns— <b>If the amount on line 1e, column (a) or (b) is:</b>	1,000,000	
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
<b>The lobbying nontaxable amount is:</b>		
20% of the amount on line 1e		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000		
\$225,000 plus 5% of the excess over \$1,500,000		
\$1,000,000		
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
<b>h</b> Subtract line 1g from line 1a Enter -0- if line g is more than line a	0	
<b>i</b> Subtract line 1f from line 1c Enter -0- if line f is more than line c	0	
<b>j</b> 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 1a through 1f of the instructions.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
<b>2a</b> Lobbying non-taxable amount				1,000,000	1,000,000
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					1,500,000
<b>c</b> Total lobbying expenditures				58,163	58,163
<b>d</b> Grassroots non-taxable amount				250,000	250,000
<b>e</b> Grassroots ceiling amount (150% of line d, column (e))					375,000
<b>f</b> Grassroots lobbying expenditures					

**Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** (See the instructions for Schedule C for details.)

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines c through i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
<b>i</b> Other activities If "Yes," describe in Part IV			
<b>j</b> Total lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes" enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes" enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** (See the instructions for Schedule C for details.)

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

**Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes."** (See the instructions for Schedule C for details.)

<b>1</b> Dues, assessments and similar amounts from members	1 \$
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures <i>(do not include amounts of political expenses for which the section 527(f) tax was paid).</i>	
<b>a</b> Current Year	2a \$
<b>b</b> Carryover from last year	2b \$
<b>c</b> Total	2c \$
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$
<b>4</b> 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 \$
<b>5</b> Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	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.

Identifier	Return Reference	Explanation



SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2008

Open to Public Inspection

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Department of the Treasury Internal Revenue Service

Name of the organization ROBERT MORRIS UNIVERSITY

Employer identification number 25-1120678

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor advisement.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, number of easements, acreage, and monitoring details.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures.

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

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

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

**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 Trust, 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 why in Part XIV and complete the following table

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

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

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

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
<b>1a</b> Beginning of year balance . . . . .	21,445,763				
<b>b</b> Contributions . . . . .	1,345,584				
<b>c</b> Investment earnings or losses . . . . .	-4,634,074				
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .	903,767				
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .	17,253,506				

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

- a** Board designated or quasi-endowment ▶ 53 000 %
- b** Permanent endowment ▶ 31 000 %
- c** Term endowment ▶ 16 000 %

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

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

**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) Depreciation	(d) Book value
<b>1a</b> Land . . . . .		2,869,400		2,869,400
<b>b</b> Buildings . . . . .		113,470,067	35,903,915	77,566,152
<b>c</b> Leasehold improvements . . . . .				
<b>d</b> Equipment . . . . .		33,986,951	19,607,699	14,379,252
<b>e</b> Other . . . . .		20,415,693	6,837,281	13,578,412
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .				108,393,216



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

<b>1</b>	Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	105,054,772
<b>2</b>	Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	103,066,640
<b>3</b>	Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	1,988,132
<b>4</b>	Net unrealized gains (losses) on investments	<b>4</b>	-4,960,985
<b>5</b>	Donated services and use of facilities	<b>5</b>	
<b>6</b>	Investment expenses	<b>6</b>	
<b>7</b>	Prior period adjustments	<b>7</b>	
<b>8</b>	Other (Describe in Part XIV)	<b>8</b>	-97,427
<b>9</b>	Total adjustments (net) Add lines 4 - 8	<b>9</b>	-5,058,412
<b>10</b>	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	-3,070,280

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	83,399,469
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains on investments	<b>2a</b>	-4,960,985
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-4,960,985
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	88,360,454
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV)	<b>4b</b>	16,694,318
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	16,694,318
<b>5</b>	Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12)	<b>5</b>	105,054,772

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	86,469,749
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Losses reported on Form 990, Part IX, line 25	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	86,469,749
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV)	<b>4b</b>	16,596,891
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	16,596,891
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18)	<b>5</b>	103,066,640

**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 XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		ESTIMATED PROFIT FROM FUNDRAISING EVENT -97427
Part XII, Line 4b - Other Adjustments		SCHOLARSHIP ALLOWANCES 15600733 HOUSING GRANTS 996158 NET PROFIT FROM FUNDRAISING EVENTS 97427
Part XIII, Line 4b - Other Adjustments		SCHOLARSHIP ALLOWANCES 15600733 HOUSING GRANTS 996158

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

# Schools

OMB No 1545-0047

## 2008

Open to Public Inspection

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
ROBERT MORRIS UNIVERSITY

**Employer identification number**

25-1120678

		YES	NO
<b>1</b>	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?	Yes	
<b>2</b>	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	Yes	
<b>3</b>	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. A STATEMENT CONCERNING THE UNIVERSITY'S NON-DISCRIMINATORY POLICY IS INCLUDED IN ALL ADVERTISING	Yes	
<b>4</b>	Does the organization maintain the following?		
<b>a</b>	Records indicating the racial composition of the student body, faculty, and administrative staff?	Yes	
<b>b</b>	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	Yes	
<b>c</b>	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	Yes	
<b>d</b>	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 )	Yes	
<b>5</b>	Does the organization discriminate by race in any way with respect to		
<b>a</b>	Students' rights or privileges?		No
<b>b</b>	Admissions policies?		No
<b>c</b>	Employment of faculty or administrative staff?		No
<b>d</b>	Scholarships or other financial assistance?		No
<b>e</b>	Educational policies?		No
<b>f</b>	Use of facilities?		No
<b>g</b>	Athletic programs?		No
<b>h</b>	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )		No
<b>6a</b>	Does the organization receive any financial aid or assistance from a governmental agency?	Yes	
<b>b</b>	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 6a or b, please explain using an attached statement		No
<b>7</b>	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	Yes	

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2008

Open to Public Inspection

Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

Department of the Treasury Internal Revenue Service

Name of the organization ROBERT MORRIS UNIVERSITY

Employer identification number

25-1120678

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)

Table with 6 columns: (a) Region, (b) Number of offices in the region, (c) Number of employees or agents in region, (d) Activities conducted in region (by type), (e) If activity listed in (d) is a program service, describe specific type of service(s) in region, (f) Total expenditures in region. Rows include EUROPE, EAST ASIA AND THE PACIFIC, MIDDLE EAST AND NORTH AFRICA, and Totals.







**Software ID:**  
**Software Version:**  
**EIN:** 25-1120678  
**Name:** ROBERT MORRIS UNIVERSITY

**Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States**

(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)
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization ROBERT MORRIS UNIVERSITY

Employer identification number 25-1120678

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations, b Email solicitations, c Phone solicitations, d In-person solicitations, e Solicitation of non-government grants, f Solicitation of government grants, g Special fundraising events.

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 activities? 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. Form 990-EZ filers are not required to complete this table.

Table with 6 columns: (i) Name of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions? (Yes/No), (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. Includes a Total row at the bottom.

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	(b) Event #2	(c) Other Events	(d) Total Events
		<b>WALTON GOLF TOURN.</b> (event type)	<b>ALUMNI GOLF OUTING</b> (event type)	<b>1</b> (total number)	(Add col (a) through col (c))
<b>Revenue</b>	<b>1</b> Gross receipts . . . . .	101,072	73,330	15,020	189,422
	<b>2</b> Less Charitable contributions . . . . .	19,275			19,275
	<b>3</b> Gross revenue (line 1 minus line 2) . . . . .	81,797	73,330	15,020	170,147
<b>Direct Expenses</b>	<b>4</b> Cash Prizes . . . . .				
	<b>5</b> Non-cash Prizes . . . . .	3,044		100	3,144
	<b>6</b> Rent/Facility costs . . . . .	27,078	25,424	7,268	59,770
	<b>7</b> Other direct expenses . . . . .	4,485	5,321		9,806
	<b>8</b> Direct expense summary Add lines 4 through 7 in column (d) . . . . . ▶				72,720
<b>9</b> Net income summary Combine lines 3 and 8 in column (d) . . . . . ▶				97,427	

**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))
		<b>1</b> Gross revenue . . . . .			
<b>Direct Expenses</b>	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Non-cash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
<b>6</b> 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		
<b>7</b> Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶					
<b>8</b> Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶					

		Yes	No
<b>9</b>	Enter the state(s) in which the organization operates gaming activities _____		
<b>a</b>	Is the organization licensed to operate gaming activities in each of these states? . . . . .	<b>9a</b>	
<b>b</b>	If "No," Explain _____ _____		
<b>10a</b>	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	<b>10a</b>	
<b>b</b>	If "Yes," Explain _____ _____		
<b>11</b>	Does the organization operate gaming activities with nonmembers? . . . . .	<b>11</b>	
<b>12</b>	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? . . . . .	<b>12</b>	

**13** Indicate the percentage of gaming activity operated in

- a** The organization's facility . . . . . **13a**
- b** An outside facility . . . . . **13b**

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

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

- 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

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

	Yes	No
<b>13a</b>		
<b>13b</b>		
<b>14</b>		
<b>15a</b>		
<b>16</b>		
<b>17a</b>		
<b>b</b>		

Schedule I (Form 990)

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization ROBERT MORRIS UNIVERSITY

Employer identification number 25-1120678

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
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" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000.

Table with 8 columns: (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, (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Includes one row with data for NEED332 FIFTH AVENUE PITTSBURGH, PA.

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

**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 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
INTERNAL SCHOLARSHIPS AND GRANTS	2772	18,151,928			
EXTERNAL SCHOLARSHIPS AND GRANTS	310	450,013			

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

See Additional Data Table

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Grants (federal/state) passed through to students are monitored using our internal application (Powerfaids), the state(PHEAA) and federal (COD- Common Origination and Disbursement) electronic systems A validation of records among all three systems is conducted periodically throughout the academic year and for semester end reconciliations Those systems verify the criteria for the grants have been met and the dollar amounts received have been distributed appropriately



**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space 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) 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 compensation				
GREGORY G DELL'OMO	(i) (ii)	254,354	70,050	46,890		5,646	376,940	250,197
DAN W KIENER	(i) (ii)	231,564	62,971	960		4,100	299,595	200,106
SIDNEY ZONN	(i) (ii)	209,977	36,884	853		4,806	252,520	161,214
JAY T CARSON	(i) (ii)	179,477	31,136	3,971		4,444	219,028	139,143
DAVID L JAMISON	(i) (ii)	188,921	12,200	1,486		3,296	205,903	124,850
JEFFREY A LISTWAK	(i) (ii)	161,860	28,419	140		4,085	194,504	123,732
PETER K FAIX	(i) (ii)	157,923	27,417	311		4,206	189,857	120,587
LYNDA J DAVIDSON	(i) (ii)	187,237	3,854	715		1,266	193,072	114,905
DERYA A JACOBS	(i) (ii)	184,150	3,666	244		677	188,737	111,958
JOHN E GRAHAM	(i) (ii)	169,961	3,551	987		4,473	178,972	104,819
ELLEN G WIECKOWSKI	(i) (ii)	148,086	25,385	279		2,661	176,411	112,646
MICHAEL T RICE	(i) (ii)	124,012	76,900	82		2,030	203,024	73,328
SAL M BUSCAGLIA	(i) (ii)	109,450	51,816	153		1,146	162,565	69,970
PEGGY M OUTON	(i) (ii)	143,274	12,900	497		2,924	159,595	97,423
WINSTON F EREVELLES	(i) (ii)	149,126	2,959	119		197	152,401	90,509
	(ii)							



**Software ID:**  
**Software Version:**  
**EIN:** 25-1120678  
**Name:** ROBERT MORRIS UNIVERSITY

**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) 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 compensation				
GREGORY G DELL'OMO	(i) (ii)	254,354	70,050	46,890		5,646	376,940	250,197
DAN W KIENER	(i) (ii)	231,564	62,971	960		4,100	299,595	200,106
SIDNEY ZONN	(i) (ii)	209,977	36,884	853		4,806	252,520	161,214
JAY T CARSON	(i) (ii)	179,477	31,136	3,971		4,444	219,028	139,143
DAVID L JAMISON	(i) (ii)	188,921	12,200	1,486		3,296	205,903	124,850
JEFFREY A LISTWAK	(i) (ii)	161,860	28,419	140		4,085	194,504	123,732
PETER K FAIX	(i) (ii)	157,923	27,417	311		4,206	189,857	120,587
LYNDA J DAVIDSON	(i) (ii)	187,237	3,854	715		1,266	193,072	114,905
DERYA A JACOBS	(i) (ii)	184,150	3,666	244		677	188,737	111,958
JOHN E GRAHAM	(i) (ii)	169,961	3,551	987		4,473	178,972	104,819
ELLEN G WIECKOWSKI	(i) (ii)	148,086	25,385	279		2,661	176,411	112,646
MICHAEL T RICE	(i) (ii)	124,012	76,900	82		2,030	203,024	73,328
SAL M BUSCAGLIA	(i) (ii)	109,450	51,816	153		1,146	162,565	69,970
PEGGY M OUTON	(i) (ii)	143,274	12,900	497		2,924	159,595	97,423
WINSTON F EREVELLES	(i) (ii)	149,126	2,959	119		197	152,401	90,509

**Schedule K  
(Form 990)**

**Supplemental Information on Tax Exempt Bonds**

OMB No 1545-0047

**2008**

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a.  
Provide descriptions, explanations, and any additional information in Schedule O.

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
ROBERT MORRIS UNIVERSITY

Employer identification number  
25-1120678

**Part I Bond Issues** (Required for 2008)

	(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
<b>A</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RDY2	04-01-2006	715,000	REFINANCE 1996 BONDS USED FOR JEFFERSON AND HALE CENTERS, ROSS HALL		X		X
<b>B</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RDZ9	04-01-2006	640,000	REFINANCE 1996 BONDS		X		X
<b>C</b>	Allegheny County Higher Education Building Authority	25-1650137	01728REA3	04-01-2006	670,000	REFINANCE 1996 BONDS		X		X
<b>D</b>	Allegheny County Higher Education Building Authority	25-1650137	01728REB1	04-01-2006	695,000	REFINANCE 1996 BONDS		X		X
<b>E</b>	Allegheny County Higher Education Building Authority	25-1650137	01728REC9	04-01-2006	725,000	REFINANCE 1996 BONDS		X		X

**Part II Proceeds** (Optional for 2008)

	A		B		C		D		E	
	Yes	No								
<b>1</b> Total Proceeds of Issue										
<b>2</b> Gross Proceeds in Reserve Funds										
<b>3</b> Proceeds in Refunding or Defeasance Escrows										
<b>4</b> Other Unspent Proceeds										
<b>5</b> Issuance Costs from Proceeds										
<b>6</b> Working Capital Expenditures from Proceeds										
<b>7</b> Capital Expenditures from Proceeds										
<b>8</b> Year of Substantial Completion										
<b>9</b> Were the bonds issued as part of a current refunding issue?										
<b>10</b> Were the bonds issued as part of an advance refunding issue?										
<b>11</b> Has the final allocation of proceeds been made?										
<b>12</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?										

**Part III Private Business Use** (Optional for 2008)

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

**Part III Private Business Use** *(Continued)*

	A		B		C		D		E	
	Yes	No								
<b>3a</b> Are there any management or service contracts with respect to the financed property which may result in private business use?										
<b>3b</b> Are there any research agreements with respect to the financed property which may result in private business use?										
<b>3c</b> 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?										
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
<b>5</b> 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 501(c)(3) organization, or a state or local government										
<b>6</b> Total of lines 4 and 5										
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										

**Part IV Arbitrage** *(Optional for 2008)*

	A		B		C		D		E	
	Yes	No								
<b>1</b> Has a Form 8038-T been filed with respect to the bond issue?										
<b>2</b> Is the bond issue a variable rate issue?										
<b>3a</b> Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
<b>b</b> Name of provider										
<b>c</b> Term of hedge										
<b>4a</b> Were gross proceeds invested in a GIC?										
<b>b</b> Name of provider										
<b>c</b> Term of GIC										
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
<b>5</b> Were any gross proceeds invested beyond an available temporary period?										
<b>6</b> Did the bond issue qualify for an exception to rebate?										

**Schedule K  
(Form 990)**

OMB No 1545-0047

**Supplemental Information on Tax Exempt Bonds**

**2008**

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a.  
Provide descriptions, explanations, and any additional information in Schedule O.

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
ROBERT MORRIS UNIVERSITY

Employer identification number  
25-1120678

**Part I Bond Issues (Required for 2008)**

	(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
<b>A</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RED7	04-01-2006	755,000	REFINANCE 1996 BONDS		X		X
<b>B</b>	Allegheny County Higher Education Building Authority	25-1650137	01728REE5	04-01-2006	785,000	REFINANCE 1996 BONDS		X		X
<b>C</b>	Allegheny County Higher Education Building Authority	25-1650137	01728REF2	04-01-2006	1,480,000	REFINANCE 1996 BONDS		X		X
<b>D</b>	Allegheny County Higher Education Building Authority	25-1650137	01728REG0	04-01-2006	1,270,000	REFINANCE 1996 BONDS		X		X
<b>E</b>	Allegheny County Higher Education Building Authority	25-1650137	01728REH8	04-01-2006	8,410,000	REFINANCE 1996 BONDS		X		X

**Part II Proceeds (Optional for 2008)**

	A		B		C		D		E	
	Yes	No								
<b>1</b> Total Proceeds of Issue										
<b>2</b> Gross Proceeds in Reserve Funds										
<b>3</b> Proceeds in Refunding or Defeasance Escrows										
<b>4</b> Other Unspent Proceeds										
<b>5</b> Issuance Costs from Proceeds										
<b>6</b> Working Capital Expenditures from Proceeds										
<b>7</b> Capital Expenditures from Proceeds										
<b>8</b> Year of Substantial Completion										
<b>9</b> Were the bonds issued as part of a current refunding issue?										
<b>10</b> Were the bonds issued as part of an advance refunding issue?										
<b>11</b> Has the final allocation of proceeds been made?										
<b>12</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?										

**Part III Private Business Use (Optional for 2008)**

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

**Part III Private Business Use** (Continued)

	A		B		C		D		E	
	Yes	No								
<b>3a</b> Are there any management or service contracts with respect to the financed property which may result in private business use?										
<b>3b</b> Are there any research agreements with respect to the financed property which may result in private business use?										
<b>3c</b> 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?										
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
<b>5</b> 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 501(c)(3) organization, or a state or local government										
<b>6</b> Total of lines 4 and 5										
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										

**Part IV Arbitrage** (Optional for 2008)

	A		B		C		D		E	
	Yes	No								
<b>1</b> Has a Form 8038-T been filed with respect to the bond issue?										
<b>2</b> Is the bond issue a variable rate issue?										
<b>3a</b> Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
<b>b</b> Name of provider										
<b>c</b> Term of hedge										
<b>4a</b> Were gross proceeds invested in a GIC?										
<b>b</b> Name of provider										
<b>c</b> Term of GIC										
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
<b>5</b> Were any gross proceeds invested beyond an available temporary period?										
<b>6</b> Did the bond issue qualify for an exception to rebate?										

**Schedule K  
(Form 990)**

**Supplemental Information on Tax Exempt Bonds**

OMB No 1545-0047

**2008**

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a.  
Provide descriptions, explanations, and any additional information in Schedule O.

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
ROBERT MORRIS UNIVERSITY

Employer identification number  
25-1120678

**Part I Bond Issues (Required for 2008)**

	(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
<b>A</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RFM6	08-01-2008	320,000	CAMPUS BUILDING CONSTRUCTION		X		X
<b>B</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RFN4	08-01-2008	330,000	CAMPUS BUILDING CONSTRUCTION		X		X
<b>C</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RFP9	08-01-2008	345,000	CAMPUS BUILDING CONSTRUCTION		X		X
<b>D</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RFQ7	08-01-2008	360,000	CAMPUS BUILDING CONSTRUCTION		X		X
<b>E</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RFR5	08-01-2008	380,000	CAMPUS BUILDING CONSTRUCTION		X		X

**Part II Proceeds (Optional for 2008)**

	A		B		C		D		E	
	Yes	No								
<b>1</b> Total Proceeds of Issue										
<b>2</b> Gross Proceeds in Reserve Funds										
<b>3</b> Proceeds in Refunding or Defeasance Escrows										
<b>4</b> Other Unspent Proceeds										
<b>5</b> Issuance Costs from Proceeds										
<b>6</b> Working Capital Expenditures from Proceeds										
<b>7</b> Capital Expenditures from Proceeds										
<b>8</b> Year of Substantial Completion										
<b>9</b> Were the bonds issued as part of a current refunding issue?										
<b>10</b> Were the bonds issued as part of an advance refunding issue?										
<b>11</b> Has the final allocation of proceeds been made?										
<b>12</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?										

**Part III Private Business Use (Optional for 2008)**

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

**Part III Private Business Use** (Continued)

	A		B		C		D		E	
	Yes	No								
<b>3a</b> Are there any management or service contracts with respect to the financed property which may result in private business use?										
<b>3b</b> Are there any research agreements with respect to the financed property which may result in private business use?										
<b>3c</b> 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?										
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
<b>5</b> 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 501(c)(3) organization, or a state or local government										
<b>6</b> Total of lines 4 and 5										
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										

**Part IV Arbitrage** (Optional for 2008)

	A		B		C		D		E	
	Yes	No								
<b>1</b> Has a Form 8038-T been filed with respect to the bond issue?										
<b>2</b> Is the bond issue a variable rate issue?										
<b>3a</b> Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
<b>b</b> Name of provider										
<b>c</b> Term of hedge										
<b>4a</b> Were gross proceeds invested in a GIC?										
<b>b</b> Name of provider										
<b>c</b> Term of GIC										
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
<b>5</b> Were any gross proceeds invested beyond an available temporary period?										
<b>6</b> Did the bond issue qualify for an exception to rebate?										

**Schedule K  
(Form 990)**

**Supplemental Information on Tax Exempt Bonds**

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a.  
Provide descriptions, explanations, and any additional information in Schedule O.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
ROBERT MORRIS UNIVERSITY

Employer identification number  
25-1120678

**Part I Bond Issues (Required for 2008)**

	(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
<b>A</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RFT1	08-01-2008	820,000	CAMPUS BUILDING CONSTRUCTION		X		X
<b>B</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RFW4	08-01-2008	7,500,000	CAMPUS BUILDING CONSTRUCTION		X		X
<b>C</b>	Allegheny County Higher Education Building Authority	25-1650137	01728RFX2	08-01-2008	11,945,000	CAMPUS BUILDING CONSTRUCTION		X		X

**Part II Proceeds (Optional for 2008)**

		A		B		C		D		E	
<b>1</b>	Total Proceeds of Issue										
<b>2</b>	Gross Proceeds in Reserve Funds										
<b>3</b>	Proceeds in Refunding or Defeasance Escrows										
<b>4</b>	Other Unspent Proceeds										
<b>5</b>	Issuance Costs from Proceeds										
<b>6</b>	Working Capital Expenditures from Proceeds										
<b>7</b>	Capital Expenditures from Proceeds										
<b>8</b>	Year of Substantial Completion										
		Yes	No								
<b>9</b>	Were the bonds issued as part of a current refunding issue?										
<b>10</b>	Were the bonds issued as part of an advance refunding issue?										
<b>11</b>	Has the final allocation of proceeds been made?										
<b>12</b>	Does the organization maintain adequate books and records to support the final allocation of proceeds?										

**Part III Private Business Use (Optional for 2008)**

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

**Part III Private Business Use (Continued)**

	A		B		C		D		E	
	Yes	No								
<b>3a</b> Are there any management or service contracts with respect to the financed property which may result in private business use?										
<b>3b</b> Are there any research agreements with respect to the financed property which may result in private business use?										
<b>3c</b> 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?										
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
<b>5</b> 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 501(c)(3) organization, or a state or local government										
<b>6</b> Total of lines 4 and 5										
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?										

**Part IV Arbitrage (Optional for 2008)**

	A		B		C		D		E	
	Yes	No								
<b>1</b> Has a Form 8038-T been filed with respect to the bond issue?										
<b>2</b> Is the bond issue a variable rate issue?										
<b>3a</b> Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?										
<b>b</b> Name of provider										
<b>c</b> Term of hedge										
<b>4a</b> Were gross proceeds invested in a GIC?										
<b>b</b> Name of provider										
<b>c</b> Term of GIC										
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
<b>5</b> Were any gross proceeds invested beyond an available temporary period?										
<b>6</b> Did the bond issue qualify for an exception to rebate?										

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

Name of the organization ROBERT MORRIS UNIVERSITY

Employer identification number 25-1120678

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

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 3 main columns: (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

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

Table with 7 main columns: (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?

Part III Grants or Assistance Benefitting Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

Table with 3 main columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Table with 5 main columns: (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?

SCHEDULE M (Form 990)

Non-Cash Contributions

OMB No 1545-0047

2008

Open to Public Inspection

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Department of the Treasury Internal Revenue Service

Name of the organization ROBERT MORRIS UNIVERSITY

Employer identification number

25-1120678

Part I Types of Property

Table with 4 columns: (a) Check if applicable, (b) Number of Contributions, (c) Revenues reported on Form 990, Part VIII, line 1g, (d) Method of determining revenues. Rows include Art, Books, Securities, Real estate, etc.

Questions 30a, 31, 32a, 33 regarding contribution policies and reporting requirements.



**SCHEDULE O**  
(Form 990)

**Supplemental Information to Form 990**

OMB No 1545-0047  
**2008**  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

<b>Name of the organization</b> ROBERT MORRIS UNIVERSITY	<b>Employer identification number</b> 25-1120678
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Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	AUXILIARY ENTERPRISES RESIDENCE HALLS, DINING HALLS, RECREATIONAL Expenses \$ 30100071 including grants of \$ 0 Revenue \$ 847276

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	ACADEMIC SUPPORT These are not direct costs of instruction but costs that support the schools but in and of themselves generate no revenue Costs include Academic Support costs such as the Deans of the schools, IT, the Library and a large percentage of Institutional Support (Institutional Advancement, Public Relations, HR, Office of Provost, Financial Administration, Public Safety, Office of President, General University Admn #3250) and Auxiliary (Food service, grounds and building costs, conference centers, ISC operations) Expenses \$ 10081235 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	PUBLIC SERVICES INCLUDES EXPENSES FOR ACTIVITIES THAT ARE ESTABLISHED PRIMARILY TO PROVIDE NON-INSTRUCTIONAL SERVICES BENEFICIAL TO INDIVIDUAL AND GROUPS EXTERNAL TO THE UNIVERSITY (CONFERENCES, INSTITUTES AND HIGH SCHOOL PROGRAMS) Expenses \$ 116081 including grants of \$ 0 Revenue \$ 0

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The form is completed by the Accounting Staff/Controller's Group and is reviewed in detail by both the Controller and the VP of Finance Another internal review is conducted by the Senior VP and the President of the University The return is then reviewed and approved by the Audit and Risk Committee with a copy provided to the full Board of Trustees prior to filing

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Trustees- The policy is discussed annually at a Board of Trustee meeting and the policy and disclosure statements are mailed to each Trustee shortly after the review Any Trustees not returning their disclosures are contacted a second time with a request to complete the disclosure Responses are sent to the University's General Counsel and evaluated for potential conflicts of interest Conflicts are handled in accordance with our conflict of interest policy for trustees, and the trustee shall remove themselves from any discussions or voting pertaining to their conflict Employees- Officers and Key Employees are identified annually shortly after each calendar year end when W-2 wage amounts are calculated and Key Employees can be identified Each Officer and Key Employee is contacted individually referencing the Conflict of Interest portion of the Employee Policy of Ethical Practices which applies to all employees A copy of the Officer and Key Employee Conflict of Interest Form is also sent to that group with a request to complete and send responses to the Controller The Controller and Director of Internal Audit review and evaluate the responses Exceptions are disclosed to the Executive Committee of the Board

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		All salary increases and compensation payments must have two levels of approval If two levels of approval are not available internally, the Compensation Committee meets annually (or more frequently if needed for new employees or out of cycle amendments to existing arrangements) to approve in advance any payments The Committee will only have members without a conflict of interest with respect to the compensation arrangements being discussed The Committee considers duties and external benchmark data to consider wages and benefits, including non-standard fringes, and will contemporaneously document in writing how its decisions were reached (including date, terms, data used, members of committee present and voting, and the recusal of any members due to a conflict and nature of the conflict)

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		OUR FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST AND OUR 990 IS ON GUIDESTAR AND AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
PART III, LINE 1 - MISSION STATEMENT		A private university in Pittsburgh's suburban hills, Robert Morris University provides academic excellence with a professional focus With 60 career-oriented undergraduate degree programs and 20 masters and doctoral programs to choose from, RMU is dedicated to working with students to build foundations for career success About 5,000 full- and part-time undergraduate and graduate students from nearly every state and 40 countries are enrolled RMU is a teaching-centered institution, featuring small classes taught by professors and a student-faculty ratio of 15 1 The university has long enjoyed an excellent reputation in the business fields of accounting, finance, marketing, and management Today the university's five schools offer programs in communications, information systems, actuarial sciences, engineering, mathematics, science, education, social sciences, pre-medicine, and nursing The beautiful, 230-acre residential campus is a short drive from the bustle of downtown Pittsburgh, with its myriad cultural offerings and excellent internship and career prospects RMU stresses engaged learning with its Student Engagement Transcript, which records and rewards work outside the classroom, including community service, research, study abroad, and internships It is indicative of the RMU commitment to career preparation, and helps explain why 92 percent of graduates have jobs or attend graduate school within six months of getting their diploma The university is growing in many ways full-time faculty has doubled in less than a decade, and soon RMU will break ground on a new business school building with a simulated stock trading floor Students and alumni enjoy cheering on the university's 23 NCAA Division I sports teams, which have won numerous league titles Visiting international scholars and a variety of opportunities to study abroad -- for a semester or just a few weeks -- enrich our students' global perspectives Above all, at RMU students have a private university education that is still one of the most affordable in Pennsylvania

Identifier	Return Reference	Explanation
		PART IV, LINE 5 - THIS QUESTION IS NOT APPLICABLE BECAUSE THE UNIVERSITY IS EXEMPT UNDER 501(C) (3)

Identifier	Return Reference	Explanation
FORM 990, PART V, LINES 7G AND 7H		THE UNIVERSITY DID NOT RECEIVE ANY CONTRIBUTIONS OF QUALIFIED INTELLECTUAL PROPERTY, CARS, BOATS, AIRPLANES OR OTHER VEHICLES DURING THE YEAR ENDED MAY 31, 2009 THEREFORE, THE UNIVERSITY WAS NOT REQUIRED TO FILE FORMS 8899 OR 1098-C

Identifier	Return Reference	Explanation
SCHEDULE L, PART IV, COLUMN D - JEFFREY BROADHURST		TRUSTEE IS PART OWNER OF A BUSINESS PROVIDING DINING SERVICES TO ROBERT MORRIS UNIVERSITY

Identifier	Return Reference	Explanation
SCHEDULE L, PART IV, COLUMN D - THOMAS WHITFORD		TRUSTEE IS AN OFFICER OF A BUSINESS PROVIDING BANKING AND ADVISORY SERVICES TOR ROBERT MORRIS UNIVERSITY

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2008**

**Open to Public Inspection**

▶ **Attach to Form 990. To be completed by organizations that answer "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.**  
▶ **See separate instructions.**

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
ROBERT MORRIS UNIVERSITY

**Employer identification number**  
25-1120678

**Part I Identification of Disregarded Entities**

(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

**Part II 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
RMC COLONIAL CORPORATION 6001 UNIVERSITY BOULEVARD MOON TOWNSHIP, PA15108 25-1499278	INACTIVE	PA	501(c)(3)	509(A)(2)	ROBERT MORRIS UNIVERSITY
ROBERT MORRIS COLLEGE PITTSBURGH FOLK FESTIVAL INC 6001 UNIVERSITY BOULEVARD MOON TOWNSHIP, PA15108 25-1645377	INACTIVE	PA	501(c)(3)	509(a)(2)	ROBERT MORRIS UNIVERSITY

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

(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, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H) Disproportionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

**Part IV 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

**Part V Transactions with Related Organizations**

**Note.** Complete line 1 if any entity is listed in Parts II, III or IV

**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 **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)
  
- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)
  
- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees
  
- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses
  
- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

	Yes	No
<b>1a</b>		No
<b>1b</b>		No
<b>1c</b>		No
<b>1d</b>		No
<b>1e</b>		No
<b>1f</b>		No
<b>1g</b>		No
<b>1h</b>		No
<b>1i</b>		No
<b>1j</b>		No
<b>1k</b>		No
<b>1l</b>		No
<b>1m</b>		No
<b>1n</b>		No
<b>1o</b>		No
<b>1p</b>		No
<b>1q</b>		No
<b>1r</b>		No

**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(s)	(B) Transaction type(a-r)	(C) Amount Involved
<b>(1)</b> RMC COLONIAL CORPORATION	Q	0
<b>(2)</b> ROBERT MORRIS COLLEGE PITTSBURGH FOLK FESTIVAL INC	Q	0
<b>(3)</b>		
<b>(4)</b>		
<b>(5)</b>		
<b>(6)</b>		



**Additional Data**

**Software ID:**

**Software Version:**

**EIN:** 25-1120678

**Name:** ROBERT MORRIS UNIVERSITY

**Form 990, Part VII - Section Aaa**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(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			
JOSEPH W NOCITO , CHAIRMAN	2 00	X						0	0	0
GARY R CLAUS , VICE CHAIRMAN	2 00	X						0	0	0
DAVID J MALONE , VICE CHAIRMAN	2 00	X						0	0	0
MICHAEL BARBARITA , TRUSTEE	2 00	X						0	0	0
JEFFREY S BROADHURST , TRUSTEE	2 00	X						0	0	0
CATHERINE A CAPONI , TRUSTEE (THRU 5-1-2009)	2 00	X						0	0	0
RENEE CAVALOVITCH , TRUSTEE (FROM 5-15-2009)	2 00	X						0	0	0
CHARLES L COST , TRUSTEE	2 00	X						0	0	0
WELLING W FRUEHAUF , TRUSTEE	2 00	X						0	0	0
PATRICK A GALLAGHER , TRUSTEE	2 00	X						0	0	0
VICTOR GREGOVITS , TRUSTEE (FROM 5-15-2009)	2 00	X						0	0	0
RICHARD J HARSHMAN , TRUSTEE	2 00	X						0	0	0
CHARLES I HOMAN , TRUSTEE	2 00	X						0	0	0
THOMAS A HUNLEY , TRUSTEE - ALUMNI REP	2 00	X						0	0	0
OLA JACKSON , TRUSTEE	2 00	X						0	0	0
STEPHEN W KLEMASH , TRUSTEE	2 00	X						0	0	0
VINCENT W LOCHER , TRUSTEE	2 00	X						0	0	0
TERRI L MARTS , TRUSTEE	2 00	X						0	0	0
BARBARA A MCNEES , TRUSTEE	2 00	X						0	0	0
NORMAN MITRY , TRUSTEE (FROM 9-19-2008)	2 00	X						0	0	0
FRANK A MOLINERO , TRUSTEE	2 00	X						0	0	0
GERD D MUELLER , TRUSTEE	2 00	X						0	0	0
ROBERT W ROGERS , TRUSTEE	2 00	X						0	0	0
PATRICIA R ROONEY , TRUSTEE	2 00	X						0	0	0
JAMES A RUDOLPH , TRUSTEE	2 00	X						0	0	0
WILLY SCHERF , TRUSTEE	2 00	X						0	0	0
OFFICERS AND TRUSTEES , CONTINUED ON SCHEDULE J-		X						0	0	0
GREGORY SPENCER , TRUSTEE	2 00	X						0	0	0
ROBERT W STASIK , TRUSTEE (THRU 10-2008)	2 00	X						0	0	0
THOMAS W STERLING , TRUSTEE	2 00	X						0	0	0

**Form 990, Part VII - Section Aaa**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(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			
MELVIN D TEETZ , TRUSTEE (THRU 2-2009)	2 00	X						0	0	0
STEPHEN A VAN OSS , TRUSTEE	2 00	X						0	0	0
THOMAS K WHITFORD , TRUSTEE	2 00	X						0	0	0
WILLIAM COPELAND , TRUSTEE EMERITUS	0 00	X						0	0	0
ELIZABETH DICKEY , TRUSTEE EMERITA	0 00	X						0	0	0
CAESAR GAROFOLI , TRUSTEE EMERITUS	0 00	X						0	0	0
NICK PRATER , TRUSTEE EMERITUS	0 00	X						0	0	0
ALVIN ROGAL , TRUSTEE EMERITUS	0 00	X						0	0	0
THERESA SCHEETZ , TRUSTEE EMERITA	0 00	X						0	0	0
JOHN VIEHMAN , TRUSTEE EMERITUS	0 00	X						0	0	0
GREGORY G DELL'OMO , PRESIDENT	40 00			X				371,294	0	5,646
DAN W KIENER , SR VP, BUSINESS AFFAIRS	40 00			X				295,495	0	4,100
SIDNEY ZONN , VP & GEN COUNSEL, SECRET	40 00			X				247,714	0	4,806
JAY T CARSON , VP, INST ADVANCEMENT	40 00			X				214,584	0	4,444
DAVID L JAMISON , PROVOST, SR VP ACAD	40 00			X				202,607	0	3,296
JEFFREY A LISTWAK , VP, FINANCIAL OPERATIONS	40 00			X				190,419	0	4,085
PETER K FAIX , VP, HUMAN RESOURCES	40 00			X				185,651	0	4,206
MICHAEL J FRANTZ , VP ENROLLMENT (FROM 3-09)	40 00			X				0	0	0
LYNDA J DAVIDSON , DEAN, SN & HEALTH	40 00				X			191,806	0	1,266
DERYA A JACOBS , DEAN, SCH BUSINESS	40 00				X			188,060	0	677
JOHN E GRAHAM , DEAN, SCH EDU	40 00				X			174,499	0	4,473
ELLEN G WIECKOWSKI , CHIEF INFO OFFICER	40 00				X			173,750	0	2,661
MICHAEL T RICE , MEN'S BASKETBALL COACH	40 00					X		200,994	0	2,030
SAL M BUSCAGLIA , WOMEN'S BASKETBALL COACH	40 00					X		161,419	0	1,146
PEGGY M OUTON , DIR BAYER CTR FOR NP MGT	40 00					X		156,671	0	2,924
WINSTON F FEREVELLES , DEAN ENG MATH & SCIENCE	40 00					X		152,204	0	197
LOIS BRYAN , ASSOC DEAN SCH OF BUS	40 00					X		146,418	0	1,566

**Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -**

	<b>Business Code</b>	<b>(A) Total Revenue</b>	<b>(B) Related or Exempt Function Revenue</b>	<b>(C) Unrelated Business Revenue</b>	<b>(D) Revenue Excluded from Tax under IRC 512, 513, or 514</b>
<b>a</b> TUITION AND FEES	611,710	80,099,282	80,099,282		
<b>b</b> AUXILIARY ENTERPRISES	611,710	12,197,905	12,197,905		
<b>c</b> ISLAND SPORTS CENTER	713,940	3,858,669		3,858,669	
<b>d</b> OTHER REVENUES	611,710	1,851,104	1,851,104		
<b>e</b> CONFERENCE CENTER RENT	611,710	486,655		486,655	