



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



Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047 2009 Open to Public Inspection
---	---	--

A For the 2009 calendar year, or tax year beginning 06-01-2009 and ending 05-31-2010					
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization UNIVERSITY OF PORTLAND		D Employer identification number 93-0401259	
		Doing Business As		E Telephone number (503) 943-7337	
		Number and street (or P O box if mail is not delivered to street address) Room/suite 5000 N Willamette Blvd		G Gross receipts \$ 330,563,241	
		City or town, state or country, and ZIP + 4 Portland, OR 972035798			
	F Name and address of principal officer Rev E William Beauchamp 5000 N Willamette Blvd Portland, OR 97203		H(a) Is this a group return for affiliates? ☐ Yes ☒ No		
I Tax-exempt status ☒ 501(c) (3) ☐ (Insert no) ☐ 4947(a)(1) or ☐ 527		H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions)		H(c) Group exemption number	
J Website: www.up.edu					
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other		L Year of formation 1935		M State of legal domicile OR	

Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities The University of Portland, an independently governed Catholic university guided by the Congregation of Holy Cross, addresses significant questions of human concern through interdisciplinary studies of the arts, sciences, and humanities and through studies in majors and professional programs at the undergraduate and graduate levels. As a diverse community of scholars dedicated to excellence and innovation, we pursue teaching and learning, faith and formation, leadership and service in the classroom, residence halls, and all activities of campus life. Because we value the development of the entire person, the university honors faith and reason as ways of knowing, promotes ethical reflection, and prepares people who respond to the needs of the world and its human family.		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	49
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	43
	5	Total number of employees (Part V, line 2a)	5	2,645
Revenue	6	Total number of volunteers (estimate if necessary)	6	200
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	306,302
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	-112,789
	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)		11,832,490
Expenses	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		127,789,481
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-2,990,570
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0	-13,850
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		136,617,551
	14	Benefits paid to or for members (Part IX, column (A), line 4)		44,252,248
Net Assets or Fund Balances	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		54,332,682
	b	Total fundraising expenses (Part IX, column (D), line 25) 2,009,751		0
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		36,167,852
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	0	134,752,782
	19	Revenue less expenses. Subtract line 18 from line 12	0	1,864,769
			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	299,129,989	312,174,958
	21	Total liabilities (Part X, line 26)	111,015,224	107,044,647
	22	Net assets or fund balances. Subtract line 21 from line 20	188,114,765	205,130,311

Part II

Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer		2011-01-03 Date	
	Eric Barger, Controller Type or print name and title			
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed ☐	Preparer's identifying number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4			EIN
				Phone no.

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

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization’s mission

The University of Portland, an independently governed Catholic university guided by the Congregation of Holy Cross, addresses significant questions of human concern through interdisciplinary studies of the arts, sciences, and humanities and through studies in majors and professional programs at the undergraduate and graduate levels. As a diverse community of scholars dedicated to excellence and innovation, we pursue teaching and learning, faith and formation, leadership and service in the classroom, residence halls, and all activities of campus life. Because we value the development of the entire person, the university honors faith and reason as ways of knowing, promotes ethical reflection, and prepares people who respond to the needs of the world and its human family.

2

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

If “Yes,” describe these new services on Schedule O

3

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

If “Yes,” describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 44,252,248 including grants of \$ 44,252,248) (Revenue \$ 0)

Student Financial Aid Programs. A high-quality, personalized education at the University of Portland is an investment in each student’s future success. We recognize that some students and their families may need assistance to meet some of their college costs and strive to help fill the gap between the cost of attendance and funds available to each student. We connect students with a wide range of internal and external funding options, but the expenses included in this category reflect scholarships and grants through institutional funds, annual and endowed gifts, and matching of government funds.

4b

(Code) (Expenses \$ 37,656,217 including grants of \$ 0) (Revenue \$ 108,313,655)

Postsecondary Education. The primary mission of the University of Portland is education. 3,706 students were enrolled in 2009-10 in the College of Arts and Science, Pamplin School of Business, School of Education, School of Nursing, and/or the School of Engineering. The University has been repeatedly recognized as one of the top ten master’s universities in the west.

4c

(Code) (Expenses \$ 22,170,456 including grants of \$ 0) (Revenue \$ 17,865,488)

Extracurricular Programs. The University of Portland recognizes that an education should develop the entire person and accordingly maintains diverse and comprehensive extracurricular programs on campus. Expenses and revenues listed here include residence halls, dining, NCAA Division I athletics, and conferences.

4d

Other program services. (Describe in Schedule O) **See also Additional Data for Description**

(Expenses \$ 11,481,393 including grants of \$ 0) (Revenue \$ 1,610,337)

4e

Total program service expenses \$ 115,560,314

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	No
5	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? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	11	Yes
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15	No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16	Yes
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	No

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) 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>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	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>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	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	1a233		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	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	2a2,645		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country: AU See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d2		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		

Part VI

Governance, Management, and Disclosure

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . . .	1a	49	
b	Enter the number of voting members that are independent . . .	1b	43	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶OR
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 ▶ Eric Barger 5000 N Willamette Blvd Portland, OR 972035798 (503) 943-7337

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Form 990 (2009)

1b	Total	2,670,638	0	472,507
----	-------	-----------	---	---------

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 44

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Todd Construction Inc PO Box 949 Tualatin, OR 97062	Construction	15,548,558
Turner Construction Company 1200 NW Naito Pkwy Ste 300 Portland, OR 97209	Construction	4,982,041
Bon Appetit Management Co 100 Hamilton Ave Ste 400 Palo Alto, CA 94301	Food Services	4,418,128
Kaiser Foundation Health Plan of the NW 3600 N Interstate Ave Portland, OR 97227	Health Plan	3,898,100
Fortis Construction Inc 1705 SW Taylor St Ste 200 Portland, OR 97205	Construction	1,037,636

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 48

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a	0				
	b	Membership dues	1b	0				
	c	Fundraising events	1c	110,061				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	1,296,474				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	10,425,955				
	g	Noncash contributions included in lines 1a-1f \$ 1,059,024						
	h	Total. Add lines 1a-1f		11,832,490				
Program Service Revenue			Business Code					
	2a	Tuition and Fees	900,099	103,664,385	103,664,385	0	0	
	b	Room and Board	721,000	15,321,600	15,321,600	0	0	
	c	Off-Campus Programs	900,099	4,724,274	4,724,274	0	0	
	d	Athletics	900,099	1,675,184	1,382,351	292,833	0	
	e							
	f	All other program service revenue		2,404,038	2,157,925	13,469	232,644	
	g	Total. Add lines 2a-2f		127,789,481				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		766,559	0	0	766,559	
	4	Income from investment of tax-exempt bond proceeds . .		49,586	0	0	49,586	
	5	Royalties		8,633	0	0	8,633	
	6a	(i) Real		(ii) Personal				
		Gross Rents						
		b	Less rental expenses					
		c	Rental income or (loss)	0	0			
	d	Net rental income or (loss)						
	7a	(i) Securities		(ii) Other				
		Gross amount from sales of assets other than inventory	189,902,000	165,000				
		b	Less cost or other basis and sales expenses	193,780,222	93,493			
		c	Gain or (loss)	-3,878,222	71,507			
	d	Net gain or (loss)		-3,806,715	0	0	-3,806,715	
	8a	Gross income from fundraising events (not including \$ 110,061 of contributions reported on line 1c) See Part IV, line 18						
		a	47,492					
		b	Less direct expenses	b	71,275			
	c	Net income or (loss) from fundraising events . .		-23,783	-23,783	0	0	
	9a	Gross income from gaming activities See Part IV, line 19						
		a	2,000					
		b	Less direct expenses	b	700			
c	Net income or (loss) from gaming activities . .		1,300	1,300	0	0		
10a	Gross sales of inventory, less returns and allowances							
	a							
	b	Less cost of goods sold	b					
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d		0					
12	Total revenue. See Instructions		136,617,551	127,228,052	306,302	-2,749,293		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	42,849,103	42,849,103		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	1,403,145	1,403,145		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	1,976,055	790,690	1,016,198	169,167
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	38,966,662	32,008,083	5,901,891	1,056,688
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,003,730	2,459,120	466,961	77,649
9	Other employee benefits	7,217,867	4,972,560	2,164,501	80,806
10	Payroll taxes	3,168,368	2,545,884	529,961	92,523
11	Fees for services (non-employees)				
a	Management	0	0	0	0
b	Legal	266,734	0	266,734	0
c	Accounting	101,370	0	101,370	0
d	Lobbying	0	0	0	0
e	Professional fundraising See Part IV, line 17	0			0
f	Investment management fees	135,709	0	135,709	0
g	Other	1,040,193	705,864	334,329	0
12	Advertising and promotion	331,270	129,851	191,027	10,392
13	Office expenses	3,273,311	1,971,633	1,272,214	29,464
14	Information technology	962,852	31,470	931,173	209
15	Royalties	44,115	44,115	0	0
16	Occupancy	4,035,304	2,981,451	1,053,712	141
17	Travel	2,017,269	1,798,512	143,255	75,502
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	2,067,475	1,357,441	586,838	123,196
20	Interest	3,516,069	3,129,444	386,625	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	5,694,793	3,597,320	2,097,473	0
23	Insurance	58,779	52,427	0	6,352
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	Non-capitalized library acquisitions	859,453	859,453	0	0
b	Non-professional services	4,615,149	3,073,776	1,390,273	151,100
c	Dining hall service	3,620,308	3,620,308	0	0
d	Allocation of indirect expenses reported in Column C	-108,078	3,007,246	-3,216,448	101,124
e	Other expenses	3,635,777	2,171,418	1,428,921	35,438
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	134,752,782	115,560,314	17,182,717	2,009,751
26	Joint costs. Check here ☐ 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
Assets	1	Cash—non-interest-bearing			15,707	1	15,182
	2	Savings and temporary cash investments			5,695,249	2	6,688,868
	3	Pledges and grants receivable, net			16,013,903	3	18,510,708
	4	Accounts receivable, net			4,260,490	4	4,164,246
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			0	6	0
	7	Notes and loans receivable, net			6,753,657	7	4,522,171
	8	Inventories for sale or use			0	8	0
	9	Prepaid expenses and deferred charges			1,048,469	9	887,852
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	245,459,467	164,510,500	10c	170,120,944
	b	Less accumulated depreciation	10b	75,338,523			
	11	Investments—publicly traded securities			69,345,910	11	22,831,152
	12	Investments—other securities See Part IV, line 11			29,364,439	12	82,373,573
	13	Investments—program-related See Part IV, line 11			0	13	
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			2,121,665	15	2,060,262
	16	Total assets. Add lines 1 through 15 (must equal line 34)			299,129,989	16	312,174,958
Liabilities	17	Accounts payable and accrued expenses			8,828,371	17	6,523,961
	18	Grants payable			0	18	0
	19	Deferred revenue			8,568,574	19	8,894,030
	20	Tax-exempt bond liabilities			83,052,833	20	80,971,359
	21	Escrow or custodial account liability Complete Part IV of Schedule D			0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities Complete Part X of Schedule D			10,565,446	25	10,655,297
	26	Total liabilities. Add lines 17 through 25			111,015,224	26	107,044,647
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			102,004,027	27	108,387,508
	28	Temporarily restricted net assets			30,322,851	28	36,189,513
	29	Permanently restricted net assets			55,787,887	29	60,553,290
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			188,114,765	33	205,130,311
	34	Total liabilities and net assets/fund balances			299,129,989	34	312,174,958

Part XI **Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
b Were the organization's financial statements audited by an independent accountant?	Yes	
c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .	Yes	

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization UNIVERSITY OF PORTLAND	Employer identification number 93-0401259
--	--

Part I

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

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

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- e

☐

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

☐

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

☐

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

(i)

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

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

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

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.)

Section A. Public Support

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

Section B. Total Support

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

Section C. Computation of Public Support Percentage

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

Part IIISupport 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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years 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 stop here						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private 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. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
UNIVERSITY OF PORTLAND

Employer identification number

93-0401259

Part I

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

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

Part II

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

1	Purpose(s) of conservation easements held by the organization (check all that apply)											
	☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Protection of natural habitat ☐ Preservation of open space	☐ Preservation of an historically importantly land area ☐ Preservation of a certified historic structure										
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year											
		<table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>2a</td><td></td></tr><tr><td>2b</td><td></td></tr><tr><td>2c</td><td></td></tr><tr><td>2d</td><td></td></tr></table>		Held at the End of the Year	2a		2b		2c		2d	
	Held at the End of the Year											
2a												
2b												
2c												
2d												
a	Total number of conservation easements											
b	Total acreage restricted by conservation easements											
c	Number of conservation easements on a certified historic structure included in (a)											
d	Number of conservation easements included in (c) acquired after 8/17/06											
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____											
4	Number of states where property subject to conservation easement is located ▶ _____											
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?											
	☐ Yes ☐ No											
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____											
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____											
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?											
	☐ Yes ☐ No											
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements											

Part III

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

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
	(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ 200
	(ii) Assets included in Form 990, Part X	▶ \$ 121,095
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items	
a	Revenues included in Form 990, Part VIII, line 1	▶ \$ 0
b	Assets included in Form 990, Part X	▶ \$ 0

Part III

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

3

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

a

☒

Public exhibition

d

☐

Loan or exchange programs

b

☒

Scholarly research

e

☐

Other

c

☒

Preservation for future generations

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

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
1a Beginning of year balance	74,082,444	99,889,494			
b Contributions	4,788,487	2,676,606			
c Investment earnings or losses	11,472,608	-23,703,012			
d Grants or scholarships	1,732,782	2,033,521			
e Other expenditures for facilities and programs	1,435,256	2,747,123			
f Administrative expenses	0	0			
g End of year balance	87,175,501	74,082,444			

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment 21 % %

b

Permanent endowment 79 % %

c

Term endowment 0 % %

3a

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

(i)

unrelated organizations

3a(i)

Yes

(ii)

related organizations

3a(ii)

Yes

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	4,038,339		4,038,339
b Buildings	0	171,626,023	30,824,597	140,801,426
c Leasehold improvements	0	0	0	0
d Equipment	0	38,777,561	33,877,234	4,900,327
e Other	0	31,017,544	10,636,692	20,380,852
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				170,120,944

Schedule D (Form 990) 2009

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	136,617,551
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	134,752,782
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,864,769
4	Net unrealized gains (losses) on investments	4	15,150,782
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	449
9	Total adjustments (net) Add lines 4 - 8	9	15,151,231
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	17,016,000

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	107,983,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	15,150,782
b	Donated services and use of facilities	2b	394,540
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIV)	2d	72,375
e	Add lines 2a through 2d	2e	15,617,697
3	Subtract line 2e from line 1	3	92,365,303
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIV)	4b	44,252,248
c	Add lines 4a and 4b	4c	44,252,248
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	136,617,551

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	90,967,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	394,540
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIV)	2d	71,926
e	Add lines 2a through 2d	2e	466,466
3	Subtract line 2e from line 1	3	90,500,534
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIV)	4b	44,252,248
c	Add lines 4a and 4b	4c	44,252,248
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	134,752,782

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
SchD_P03_S00_L04	Schedule D, Part III, Line 4	The mission of the University of Portland Archives and Museum is to collect, access, arrange, preserve, and make available records and artifacts of enduring historical value created or received by the University of Portland for research, instructional, or administrative use. Archival materials collected include University publications and records, photographs, blueprints and architectural drawings, pamphlets and posters, and books published by or about members of the University community. Museum materials collected include historical, religious, educational and cultural objects related to the University, artwork of or by the University and its members, photographs, and printed or published items to support museum displays. Collections are projected to remain limited, of high quality, and focused in the areas noted above.
SchD_P05_S00_L03a	Schedule D, Part V, Line 3a(i)	The University invests most of its endowment with a religious affiliate that shares the University's Catholic ministry and education mission. These assets are held in the affiliate's endowment and are invested for the University's benefit.
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The endowment supports a wide spectrum of campus life including student scholarships, faculty development efforts, the library, and a variety of other academic and student service programs.
SchD_P10_S00_L00	Schedule D, Part X	The University is a tax-exempt organization and is not subject to federal or state income taxes, except for unrelated business income, in accordance with Section 501(c)(3) of the Internal Revenue Code. In addition, the University qualified for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not a private foundation. Unrelated business income tax, if any, is insignificant and no tax provision has been made in the accompanying financial statements. The University adopted the provisions of ASC 740-10, Accounting for Uncertainty in Income Taxes, on June 1, 2007. The University had no unrecognized tax benefits which would require an adjustment to the June 1, 2009 beginning balance of net assets. The University had no unrecognized tax benefits at May 31, 2010 or at May 31, 2009.
SchD_P11_S00_L08	Schedule D, Part XI, Line 8	Other reconciliation amount of \$449 is adjustment for rounding in financial statements.
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Other adjustments include: Fundraising expenses included in Part VIII (\$71,275), gaming expenses in Part VIII (\$700), and a \$400 rounding adjustment.
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Scholarships of \$44,252,248 are included in our financial statements as contra-revenue. They are an expense in the 990.
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	Other adjustments include: Fundraising expenses included in Part VIII (\$71,275), gaming expenses included in Part VIII (\$700), and a rounding adjustment of -\$49.
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	Scholarships of \$44,252,248 are included in our financial statements as contra-revenue. They are an expense in the 990.

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
UNIVERSITY OF PORTLAND

Employer identification number

93-0401259

		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain	3	Yes
	An advertisement stating our racially nondiscriminatory policy was placed in the primary regional newspaper in the spring Additionally, the policy is featured on our website		
4	Does the organization maintain the following?	4a	Yes
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	4b	Yes
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4c	Yes
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4d	Yes
	d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
5	Does the organization discriminate by race in any way with respect to	5a	No
	a Students' rights or privileges?	5b	No
	b Admissions policies?	5c	No
	c Employment of faculty or administrative staff?	5d	No
	d Scholarships or other financial assistance?	5e	No
	e Educational policies?	5f	No
	f Use of facilities?	5g	No
	g Athletic programs?	5h	No
	h Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes
	b Has the organization's right to such aid ever been revoked or suspended?	6b	No
If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990)			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 990)	7	Yes

Employer identification number
93-0401259

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

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W **Schedule F (Form 990) 2009**

[illegible]

3 Enter total number of other organizations or entities ►

Part IIIGrants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Scholarships for tuition, fees, and room & board	Europe (including Iceland and Greenland)	102	1,160,494	Credit to student account	0		
Scholarships for tuition, fees, and room & board	East Asia and the Pacific	24	242,651	Credit to student account	0		

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

Schedule F (Form 990) 2009

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

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

1

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

a

☐ Mail solicitations

e

☐ Solicitation of non-government grants

b

☐ Internet and e-mail solicitations

f

☐ Solicitation of government grants

c

☐ Phone solicitations

g

☐ Special fundraising events

d

☐ In-person solicitations

2a

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

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

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
		Golf Tournament (event type)	Golf Tournament (event type)	1 (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	98,750	39,068	19,735
	2	Less Charitable contributions	87,670	15,500	6,891
	3	Gross income (line 1 minus line 2)	11,080	23,568	12,844
Direct Expenses	4	Cash prizes	0	0	0
	5	Non-cash prizes	0	3,668	844
	6	Rent/facility costs	27,679	15,500	1,344
	7	Food and beverages	0	6,272	7,010
	8	Entertainment	0	0	2,500
	9	Other direct expenses	3,218	553	2,686
	10	Direct expense summary Add lines 4 through 9 in column (d)			71,274
	11	Net income summary Combine lines 3, column d, and line 10.			-23,782

Part III Gaming.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
7 Direct expense summary Add lines 2 through 5 in column (d)					
8 Net gaming income summary Combine lines 1, column d, and line 7					

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

		Yes	No
13	Indicate the percentage of gaming activity operated in		
a	The organization's facility 13a		
b	An outside facility 13b		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
Name ► _____			
Address ► _____			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
b	If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____		
c	If "Yes," enter name and address		
Name ► _____			
Address ► _____			
16	Gaming manager information		
Name ► _____			
Gaming manager compensation ► \$ _____			
Description of services provided ► _____			
☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions		
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$		

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
--	---------	------------------------------------	--------------------------	-----------------------------------	--	--	------------------------------------

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☒ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☒ Health or social club dues or initiation fees ☐ Discretionary spending account ☒ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment? b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4a	No
		4b	No
		4c	No
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization? b Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5a	Yes
		5b	No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? b Any related organization? If "Yes," to line 6a or 6b, describe in Part III	6a	No
		6b	No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Rev E William Beauchamp CSC	(i)	280,900	0	20,633	30,899	42,181	374,613	0
	(ii)	0	0	0	0	0	0	0
Bro Donald Stabrowski CSC	(i)	169,500	0	4,600	18,645	5,589	198,334	0
	(ii)	0	0	0	0	0	0	0
Mr Jim Lyons	(i)	132,898	0	8,481	15,316	18,923	175,618	0
	(ii)	0	0	0	0	0	0	0
Mr John Goldrick	(i)	145,666	0	5,239	16,544	42,572	210,021	0
	(ii)	0	0	0	0	0	0	0
Mr Denis Ransmeier	(i)	181,177	0	0	0	5,967	187,144	0
	(ii)	0	0	0	0	0	0	0
Mr Jim Ravelli	(i)	160,913	0	0	0	6,785	167,698	0
	(ii)	0	0	0	0	0	0	0
Rev Thomas Doyle CSC	(i)	134,000	0	4,600	14,740	5,205	158,545	0
	(ii)	0	0	0	0	0	0	0
Mr Robin Anderson	(i)	206,611	0	13,200	23,335	14,896	258,042	0
	(ii)	0	0	0	0	0	0	0
Mr Zia Yamayee	(i)	154,496	0	80	17,004	5,143	176,723	0
	(ii)	0	0	0	0	0	0	0
Ms Joanne Warner	(i)	152,900	0	0	16,995	6,719	176,614	0
	(ii)	0	0	0	0	0	0	0
Mr Larry Williams	(i)	143,353	0	6,550	10,903	14,042	174,848	0
	(ii)	0	0	0	0	0	0	0
Mr Eric Reveno	(i)	198,953	15,520	20,838	25,647	14,273	275,231	0
	(ii)	0	0	0	0	0	0	0
Mr Mojtaba Takallou	(i)	90,024	0	93,937	20,514	14,957	219,432	0
	(ii)	0	0	0	0	0	0	0
Mr Howard Feldman	(i)	140,155	0	6,180	16,474	13,612	176,421	0
	(ii)	0	0	0	0	0	0	0
Mr Bahram Adrangi	(i)	120,824	24,198	1,150	14,755	9,707	170,634	0
	(ii)	0	0	0	0	0	0	0

Part III

Supplemental Information

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

Ident if ier	Ret urn Reference	Explanation
SchJ_P01_S00_L01a	Schedule J, Part I, Line 1a	University residences (on-campus) are only provided to University officers who are required to be available on campus at all hours, the President is also provided with basic housekeeping services. Social/business association memberships are provided in limited circumstances when required for development activities.
SchJ_P01_S00_L05	Schedule J, Part I, Line 5	Professor Bahram Adrangi taught two summer classes. His compensation was based on a percentage of tuition billed for those classes (subject to a maximum).

Schedule K (Form 990)	Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.	OMB No 1545-0047
		2009
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	
Name of the organization UNIVERSITY OF PORTLAND	Employer identification number 93-0401259

Part I

Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
						Yes	No	Yes	No
A State of Oregon-Oregon Facilities Authority	93-6001787	00068608J	12-20-2007	86,727,005	See Schedule O		X		X

Part II

Proceeds

		A	B	C	D	E	
1	Total proceeds of issue	86,727,005					
2	Gross proceeds in reserve funds	6,026,350					
3	Proceeds in refunding or defeasance escrows	32,582,827					
4	Other unspent proceeds	0					
5	Issuance costs from proceeds	1,031,436					
6	Working capital expenditures from proceeds	0					
7	Capital expenditures from proceeds	47,003,879					
8	Year of substantial completion	2010					
		Yes	No	Yes	No	Yes	No
9	Were the bonds issued as part of a current refunding issue?	X					
10	Were the bonds issued as part of an advance refunding issue?	X					
11	Has the final allocation of proceeds been made?	X					
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X					

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X								
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X								
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 1 %								
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %								
6	Total of lines 4 and 5		0 1 %								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X									

Part IV

Arbitrage

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

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?
			YesNo

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

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

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

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

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
Mary Francis Louie	Family member of Thomas Doyle, Executive Vice President	41,363	Employment		No
Kristin Bryant	Family member of Nancy Bryant, Regent	52,671	Employment		No
Noel Peterson	Family member of Allen Lund, Regent	12,805	Employment		No

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	1	1	\$1 see Part II
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		5	\$1 see Part II
5 Clothing and household goods	X		3	\$1 see Part II
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	28	948,190	Market quote
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential	X	1	70,466	Independent appraisal
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles	X	3	3	\$1 see Part II
19 Food inventory	X	6	1,882	\$1, retail receipts
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens	X	1	17,540	Independent appraisal
24 Archeological artifacts				
25 Other ► (Camera Equipment)	X	3	3	\$1 see Part II
26 Other ► (Classroom equipment and lab)	X	3	6,388	\$1, retail price
27 Other ► (Concert tickets)	X	1	1	\$1 see Part II
28 Other ► (Musical Instruments)	X	2	2	\$1 see Part II
Other ► (Travel Vouchers)	X	2	6,961	\$1, Retail price
Other ► (Auto lease)	X	1	7,578	Retail price
Other ► (Golf Cart)	X	1	1	\$1 see Part II
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29			1
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a			No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	Yes		
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part II

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

Identifier	Return Reference	Explanation
SchM_P01_S00_L01	Schedule M, Part I, Line 1	"\$1 see Part II" - When a third party valuation (such as market price or independent appraisal) is not readily available for a non-cash gift the University of Portland recognizes revenue of \$1 per gift
SchM_P01_S00_L32b	Schedule M, Part I, Line 32b	A realtor was hired to assist with the disposal of a piece of property. An auction house was used to sell jewelry received as a bequest. In both cases the value of the gift was booked at appraised value.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

Identifier	Return Reference	Explanation
F990_P05_S00_L03b	Form 990, Part V, Line 3b	Form 990-T will be filed concurrently with this Form 990
F990_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	The bylaws grant the Congregation of Holy Cross the right to appoint up to eleven board members
F990_P06_S0B_L11	Form 990, Part VI, Section B, Line 11	The Audit Subcommittee reviewed and approved the filing, which was subsequently distributed to the entire board electronically through a website. A summary of Schedule B rather than the full Schedule was distributed to the Board and Audit Subcommittee to maintain donor confidentiality.
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	An annual disclosure/conflict of interest questionnaire is collected from all board members each year. Additionally, the board chair invites recusals on board matters of likely conflict. The board has a history of active voluntary recusal.
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The salaries of all officers and key employees are reviewed by the Audit Subcommittee of the Board of Regents annually. All salaries (except the Men's Head Basketball Coach) are compared to two CUPA (College & University Personnel Association) benchmarks (Masters Schools and Private Religious Schools) as well as the prior year compensation provided for the position. The Men's Head Basketball Coach salary is compared with other Men's Head Basketball Coach salaries for teams in the West Coast Conference.
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	Financial statements are available on www.up.edu. Governing documents and conflict of interest policy are available to the public upon request.
F990_P07_S0A_L01a	Form 990, Part VII, Section A, Line 1a	Rev. Francis J. Murphy, CSC, is employed by the university as Pastoral Care Counselor and Adjunct Instructor. All of Fr. Murphy's compensation listed in Part VII is related to his employment; he received no compensation connected to his membership on the Board of Regents.
SchK_P01_S00_L00e	Schedule K, Part I, Column e	The correct issuance amount of \$86,727,005 is listed. The Form 8038 that accompanied the bond issuance listed the correct amount in Row 18 but erroneously listed \$87,727,005 in Row 21. University of Portland's 2008 Form 990 Schedule K included the incorrect issuance amount of \$87,727,005.

Identifier	Return Reference	Explanation
SchK_P01_S00_L00f	Schedule K, Part I, Column f	Description of purpose for tax-exempt bond: Land acquisition and building projects - \$47,003,879, Bond issuance costs - \$1,031,436, Reserve fund - \$6,108,863, Refunding of 1997 and 2000 issues - \$32,582,827.

Additional Data

Software ID:
Software Version:
EIN: 93-0401259
Name: UNIVERSITY OF PORTLAND

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services			
(Code)	(Expenses \$ 8,118,838	including grants of \$ 0)	(Revenue \$ 1,610,337)
Student Services Programs The University of Portland provides comprehensive support programs for our student to enable and promote their academic pursuits as well as their personal growth Expenses in this category include International Student Services, Health and Career Services, Admissions, Registrar, Student Government and Activities, Financial Aid, and Intramurals			
(Code)	(Expenses \$ 3,362,555	including grants of \$ 0)	(Revenue \$ 0)
Library Programs The Wilson W Clark Memorial Library serves the University of Portland community as a dynamic teaching library The library accomplishes this through interactive instruction, by acquiring and organizing multi-format collections that support the curriculum, and by facilitating access to resources in the library and beyond			

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mr Joseph B Allegretti Trustee	0	X						0	0	0
Mr Thomas D Arndorfer Trustee	0	X						0	0	0
Mr Richard Baek Trustee	0	X						0	0	0
Mr John M Becker Trustee	0	X						0	0	0
Mr Ralph G Bliquez Trustee	0	X						0	0	0
Mr John G Block Trustee	0	X						0	0	0
Ms Mary R Boyle Trustee	0	X						0	0	0
Ms Nancy K Bryant Trustee	0	X						0	0	0
Ms Annie T Buell Trustee	0	X						0	0	0
Mr Matthew W Chapman Trustee	0	X						0	0	0
Mr Earle M Chiles Trustee	0	X						0	0	0
Mr Russell E Danielson Trustee	0	X						0	0	0
Mr Frank D Dulcich Trustee	0	X						0	0	0
Rev Carl F Ebey CSC Trustee	0	X						0	0	0
Mr John R Emrick Trustee	0	X						0	0	0
Mr Robert W Franz Trustee	0	X						0	0	0
Mr Mark B Ganz Trustee	0	X						0	0	0
Rev Peter A Jarret CSC Trustee	0	X						0	0	0
Ms Patricia K Johnson Trustee	0	X						0	0	0
Mr Patrick H Kessi Trustee	0	X						0	0	0
Rev James R Lackenmier CSC Trustee	0	X						0	0	0
Mr Keith R Larson Trustee	0	X						0	0	0
Mr D Allen Lund Trustee	0	X						0	0	0
Mr Luis Machuca Trustee	0	X						0	0	0
Rev Edward A Malloy CSC Trustee	0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mr Ralph Miller Trustee	0	X						0	0	0
Rev Wilson D Miscamble CSC Trustee	0	X						0	0	0
Mr Timothy J Morgan Trustee	0	X						0	0	0
Rev Francis J Murphy CSC Trustee	30	X						33,065	0	10,171
Mr Jerry A Parsons Trustee	0	X						0	0	0
Rev Mark L Poorman CSC Trustee	0	X						0	0	0
Mr James T Price Trustee	0	X						0	0	0
Ms Larree M Renda Trustee	0	X						0	0	0
Dr Don V Romanaggi Trustee	0	X						0	0	0
Mr Stephen L Shepard Trustee	0	X						0	0	0
Mr Karl A Smith Trustee	0	X						0	0	0
Mr Edwin A Sweo Trustee	0	X						0	0	0
Mr William R Tagmyer Trustee	0	X						0	0	0
Mr Thomas J Tomjack Trustee	0	X						0	0	0
Ms Kay Dean Toran Trustee	0	X						0	0	0
Rev David T Tyson CSC Trustee	0	X						0	0	0
Ms Sharon D VanSickle-Robbins Trustee	0	X						0	0	0
Ms Summer Anne-Widmer Trustee	0	X						0	0	0
Mr Ted R Winnowski Trustee	0	X						0	0	0
Mr Eugene J Wizer Trustee	0	X						0	0	0
Mr Darryl P Wong Trustee	0	X						0	0	0
Dr Carolyn Y Woo Trustee	0	X						0	0	0
Mr Randall L Yoakum Trustee	0	X						0	0	0
Rev E William Beauchamp CSC President	40	X		X				301,533	0	73,080
Bro Donald Stabrowski CSC Provost	40			X				174,100	0	24,233

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mr Jim Lyons Vice President - University Relations	40			X				141,378	0	34,239
Mr John Goldrick Vice President - Enrollment Management and Student Life	40			X				150,905	0	59,115
Mr Denis Ransmeier Vice President - Financial Affairs	40			X				181,177	0	5,966
Mr Jim Ravelli Vice President - Information Services	40			X				160,913	0	6,785
Rev Thomas Doyle CSC Executive Vice President	40			X				138,600	0	19,944
Mr Robin Anderson Dean	40				X			219,811	0	38,231
Mr Zia Yamayee Dean	40				X			154,576	0	22,147
Ms Joanne Warner Dean	40				X			152,900	0	23,713
Mr Larry Williams Athletic Director	40					X		149,903	0	24,945
Mr Eric Reveno Men's Basketball Coach	40					X		235,311	0	39,920
Mr Mojtaba Takallou Professor	40					X		183,960	0	35,471
Mr Howard Feldman Associate Dean	40					X		146,334	0	30,085
Mr Bahram Adrangi Professor	40					X		146,172	0	24,462

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Non-capitalized library acquisitions	859,453	859,453	0	0
Non-professional services	4,615,149	3,073,776	1,390,273	151,100
Dining hall service	3,620,308	3,620,308	0	0
Allocation of indirect expenses reported in Column C	-108,078	3,007,246	-3,216,448	101,124
Other expenses	3,635,777	2,171,418	1,428,921	35,438