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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable
- ☐ 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
FORDHAM UNIVERSITY

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
CONTROLLERS OFFICE 441 E FORDHAM

City or town, state or country, and ZIP + 4
BRONX, NY 104585170

D Employer identification number
13-1740451

E Telephone number
(718) 817-1000

G Gross receipts $ 675,826,153

F Name and address of principal officer
JOSEPH M MCSHANE SJ
441 EAST FORDHAM ROAD
BRONX, NY 104585170

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

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

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ www fordham edu

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1841

M State of legal domicile NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO PROVIDE HIGHEST QUALITY EDUCATION TO UNDERGRADUATE AND GRADUATE STUDENTS IN THE JESUIT TRADITION

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	39
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	38
5	Total number of employees (Part V, line 2a)	5	7,154
6	Total number of volunteers (estimate if necessary)	6	794
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	309,531
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-137,451

		Prior Year	Current Year
Revenue 8	Contributions and grants (Part VIII, line 1h)	67,098,897	63,263,068
9	Program service revenue (Part VIII, line 2g)	478,757,752	509,529,728
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-26,834,658	-4,572,600
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	298,149	452,878
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	519,320,140	568,673,074
Expenses 13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	104,353,239	113,341,448
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	261,619,996	270,082,206
16a	Professional fundraising fees (Part IX, column (A), line 11e)	322,648	392,892
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 11,673,075		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	173,668,633	167,809,131
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	539,964,516	551,625,677
19	Revenue less expenses Subtract line 18 from line 12	-20,644,376	17,047,397

		Beginning of Current Year	End of Year
Net Assets or Fund Balances 20	Total assets (Part X, line 16)	1,105,117,818	1,147,448,135
21	Total liabilities (Part X, line 26)	452,354,233	442,197,870
22	Net assets or fund balances Subtract line 21 from line 20	652,763,585	705,250,265

Part II Signature Block

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

Sign Here

****** | 2011-05-10
Signature of officer | Date

Frank Simio Vice President of Finance
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ KPMG LLP | Date | Check if self-empolyed ▶ ☐ | Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ KPMG LLP
345 Park Avenue
New York, NY 101540102

EIN ▶

Phone no ▶ (212) 758-9700

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 MISSION OF THE UNIVERSITY FORDHAM UNIVERSITY, THE JESUIT UNIVERSITY OF NEW YORK, IS COMMITTED TO THE DISCOVERY OF WISDOM AND THE TRANSMISSION OF LEARNING, THROUGH RESEARCH AND THROUGH UNDERGRADUATE, GRADUATE AND PROFESSIONAL EDUCATION OF THE HIGHEST QUALITY GUIDED BY ITS CATHOLIC AND JESUIT TRADITIONS, FORDHAM FOSTERS THE INTELLECTUAL, MORAL AND RELIGIOUS DEVELOPMENT OF ITS STUDENTS AND PREPARES THEM FOR LEADERSHIP IN A GLOBAL SOCIETY

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 $ 485,184,818 including grants of $ 113,341,448) (Revenue $ 508,891,919)

INSTRUCTION, RESEARCH AND PUBLIC SERVICE IN THE GRADUATE (6,700 STUDENTS ENROLLED) AND UNDERGRADUATE (7,615 STUDENTS ENROLLED) SCHOOLS OF THE UNIVERSITY

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)

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

4e **Total program service expenses** ▶ $ 485,184,818

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	Yes	
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, line10? *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	
b	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		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17	Yes	
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? *If "Yes," complete Schedule I, Parts I and II*	**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? *If "Yes," complete Schedule I, Parts I and III*	**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? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	**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? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part 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? *If "Yes," complete Schedule L, Part II*	**26**	Yes	
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? *If "Yes," complete Schedule L, Part III*	**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? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
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? *If "Yes," complete Schedule L, Part IV*	**28c**	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35**	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**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? *If "Yes," complete Schedule R, Part VI*	**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, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0-* if not applicable	1a	756		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	7,154		
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		Yes	
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 ▶ UK 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			No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
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 39		
b	Enter the number of voting members that are independent . .	1b 38		
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	Yes	
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		No
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 ▶

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 ▶

FRANK SIMIO
FORDHAM UNIVERSITY 441 EAST FORDHA
BRONX, NY 104585170
(718) 817-1000

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(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			
See add'l data										

1b Total . . . . . ▶	5,518,872	0	822,532

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 ▶ 487

			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*	**3**	Yes	
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*	**4**	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*	**5**		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
GOTHAM CONSTRUCTION COMPANY LLC 1010 AVENUE OF THE AMERICAS 4TH FL NEW YORK, NY 10018	CONSTRUCTION	43,063,375
EMPIRE HEALTHCHOICE ASSURANCE INC PO BOX 11532A NEW YORK, NY 10256	BENEFIT PROVIDER	16,179,763
SODEXO INC AND AFFILIATES 9801 WASHINGTON BLVD GAITHERBURG, MD 20878	FOOD SERVICES	13,657,946
PEI COBB FREED AND PARTNERS 88 PINE STREET NEW YORK, NY 10005	CONSTRUCTION	8,663,129
SUMMIT SECURITY SERVICES 390 REXCORP PLAZA/LOBBY LEVEL/WEST UNIONDALE, NY 11556	SECURITY SERVICES	5,836,496
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 ▶ 271		

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				
	b	Membership dues	1b				
	c	Fundraising events	1c	1,640,789			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	26,696,067			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	34,926,212			
	g	Noncash contributions included in lines 1a-1f $ 1,478,884					
	h	**Total.** Add lines 1a-1f		63,263,068			
Program Service Revenue			Business Code				
	2a	TUITION & FEES	611,600	446,207,828	446,207,828		
	b	AUXILIARY ENTERPRISES	611,710	55,849,659	55,849,659		
	c	ATHLETIC AND SUMMER PROGRAMS	611,710	3,154,996	3,154,996		
	d	FEES FOR EDUCATIONAL SERVICES	611,600	1,412,041	1,412,041		
	e	VISITING PROFESSORS SALARY REIMBURSEMENTS	611,600	936,835	936,835		
	f	All other program service revenue		1,968,369	1,336,036		632,333
	g	**Total.** Add lines 2a–2f		509,529,728			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		5,771,350			5,771,350
	4	Income from investment of tax-exempt bond proceeds		201,965			201,965
	5	Royalties		364,603			364,603
			(i) Real	(ii) Personal			
	6a	Gross Rents	669,452				
	b	Less rental expenses					
	c	Rental income or (loss)	669,452				
	d	Net rental income or (loss)		669,452			669,452
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory	95,856,319				
	b	Less cost or other basis and sales expenses	106,402,234				
	c	Gain or (loss)	-10,545,915				
	d	Net gain or (loss)		-10,545,915			-10,545,915
	8a	Gross income from fundraising events (not including $ 1,640,789 of contributions reported on line 1c) See Part IV, line 18	a 147,600				
	b	Less direct expenses	b 750,845				
	c	Net income or (loss) from fundraising events		-603,245			-603,245
	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less returns and allowances	a				
	b	Less cost of goods sold	b				
	c	Net income or (loss) from sales of inventory		0			
		Miscellaneous Revenue	Business Code				
	11a	PARKING INCOME - OPEN TO PUBLIC	812,930	16,940		16,940	
	b	TRAVEL TOURS	561,500	5,128		5,128	
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d		22,068			
	12	**Total revenue.** See Instructions		568,673,074	508,897,395	22,068	-3,509,457

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	113,341,448	113,341,448		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,894,156	1,806,786	1,655,859	431,511
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			
7	Other salaries and wages	200,566,568	174,109,882	21,018,049	5,438,637
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	13,351,211	11,861,458	1,225,854	263,899
9	Other employee benefits	38,980,042	30,976,377	6,134,878	1,868,787
10	Payroll taxes	13,290,229	11,807,280	1,220,255	262,694
11	Fees for services (non-employees)				
a	Management	7,845,661	7,000,696	790,456	54,509
b	Legal	1,200,816		1,200,816	
c	Accounting	458,703		458,703	
d	Lobbying	120,672		120,672	
e	Professional fundraising *See Part IV, line 17*	392,892			392,892
f	Investment management fees	1,761,254		1,761,254	
g	Other	0			
12	Advertising and promotion	7,984,070	6,439,337	1,144,643	400,090
13	Office expenses	14,011,310	11,742,791	1,971,693	296,826
14	Information technology	6,522,042	3,739,786	2,779,080	3,176
15	Royalties	81,049	70,116	10,933	
16	Occupancy	43,193,897	35,737,376	6,690,837	765,684
17	Travel	7,221,712	6,694,049	281,263	246,400
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	9,525,989	7,911,260	1,204,057	410,672
20	Interest	9,784,145	9,515,502	268,643	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	31,722,106	29,184,338	1,903,326	634,442
23	Insurance	2,775,261	904,529	1,860,286	10,446
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	STUDENT MEAL COSTS	9,127,487	9,127,487		
b	EXCHANGE STUDENT COSTS	4,483,247	4,483,247		
c	DOUBTFUL ACCOUNTS	3,308,706	3,308,706		
d	LIBRARY MATERIALS	2,668,864	2,668,864		
e	DUES/SUBSCRIPTIONS	1,258,008	935,453	318,669	3,886
f	All other expenses	2,754,132	1,818,050	747,558	188,524
25	**Total functional expenses.** Add lines 1 through 24f	551,625,677	485,184,818	54,767,784	11,673,075
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) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		215,241	1	152,583
	2	Savings and temporary cash investments		36,473,050	2	10,790,518
	3	Pledges and grants receivable, net		75,874,810	3	66,346,651
	4	Accounts receivable, net		13,406,899	4	17,873,790
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		1,573,282	5	1,560,002
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		15,524,777	7	15,656,154
	8	Inventories for sale or use		943,592	8	979,991
	9	Prepaid expenses and deferred charges		10,191,183	9	9,989,969
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 906,828,301			
	b	Less accumulated depreciation	10b 276,963,232	560,195,543	10c	629,865,069
	11	Investments—publicly traded securities		178,577,670	11	176,424,268
	12	Investments—other securities See Part IV, line 11		158,759,349	12	211,052,563
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		53,382,422	15	6,756,577
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		1,105,117,818	16	1,147,448,135
Liabilities	17	Accounts payable and accrued expenses		77,605,407	17	72,912,606
	18	Grants payable			18	
	19	Deferred revenue		24,107,077	19	20,629,407
	20	Tax-exempt bond liabilities		298,695,254	20	289,284,567
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties		1,841,496	23	1,718,069
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		50,104,999	25	57,653,221
	26	**Total liabilities.** Add lines 17 through 25		452,354,233	26	442,197,870
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		299,086,182	27	337,364,070
	28	Temporarily restricted net assets		179,576,222	28	179,095,197
	29	Permanently restricted net assets		174,101,181	29	188,790,998
		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		652,763,585	33	705,250,265
	34	Total liabilities and net assets/fund balances		1,105,117,818	34	1,147,448,135

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?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	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	2c	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?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

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
FORDHAM UNIVERSITY

Employer identification number
13-1740451

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?

	Yes	No
(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? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of support?
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 III Support Schedule for Organizations Described in IRC 509(a)(2)

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

Section A. Public Support

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

Section B. Total Support

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

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶

Part IV **Supplemental Information.** 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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

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

Name of the organization	Employer identification number
FORDHAM UNIVERSITY	13-1740451

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $ _____

3 Volunteer hours _____

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $ _____

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ _____

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

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

Lobbying Expenditures During 4-Year Averaging Period

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

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

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?	Yes		8,950
d	Mailings to members, legislators, or the public?	Yes		23,572
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		123,603
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		21,046
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			177,171
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i

Also, complete this part for any additional information

Identifier	Return Reference	Explanation
OTHER LOBBYING ACTIVITIES	SCHEDULE C, PART II-B	FORDHAM UNIVERSITY'S GOVERNMENTAL RELATIONS AND LOBBYING EFFORTS ON THE STATE, FEDERAL AND LOCAL LEVELS CAN BE BROKEN OUT INTO TWO DISTINCTIVE ASPECTS OR ELEMENTS THE FIRST ELEMENT CAN BE DENOMINATED AS DEFENSIVE LOBBYING, DESIGNED TO ENSURE THAT GOVERNMENT FUNDED EDUCATION PROGRAMS WHICH CURRENTLY BENEFIT FORDHAM AND ITS STUDENTS ARE CONTINUED, MAINTAINED, IMPROVED UPON OR EXPANDED IN ORDER TO MEET BOTH CURRENT STUDENT AND INSTITUTIONAL NEEDS THESE CONSIST OF PROGRAMS THAT BENEFIT THE UNIVERSITY AND/OR ITS STUDENTS, BOTH DIRECTLY AND INDIRECTLY EXAMPLES OF SUCH PROGRAMS AT THE STATE LEVEL INCLUDE THE NEW YORK STATE TUITION ASSISTANCE PROGRAM (TAP), THE HIGHER EDUCATIONAL OPPORTUNITY PROGRAM (HEOP), THE STATE INSTITUTIONAL AID PROGRAM (BUNDY AID FUNDING), AND THE COLLEGIATE SCIENCE AND TECHNOLOGY ENTRY PROGRAM (C-STEP) EXAMPLES OF SUCH PROGRAMS AT THE FEDERAL LEVEL INCLUDE PELL GRANTS, CAMPUS BASED AID SUCH AS FEDERAL WORK STUDY (FWS) OR FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS (FSEOG), PERKINS LOANS, AND FEDERALLY GUARANTEED STUDENT LOANS FEDERAL PROGRAMS ALSO INCLUDE FEDERAL TAX CODE PROVISIONS WHICH SUPPORT THE UNIVERSITY'S MISSION AND/OR ENABLE A BROAD AND DIVERSE ARRAY OF STUDENTS TO ATTEND COLLEGE AND ENROLL IN OTHER HIGHER EDUCATION PROGRAMS, THROUGH BOTH TAX DEDUCTIONS AND TAX CREDITS THE SECOND, MORE FORWARD LOOKING, ELEMENT OF FORDHAM'S LOBBYING EFFORTS FOCUSES ON THE UNIVERSITY'S INSTITUTIONAL ADVANCEMENT INITIATIVES THAT ARE DESIGNED TO OBTAIN FUNDING, AGENCY REGULATORY APPROVAL, AND/OR REGULATORY RELIEF FROM GOVERNMENTAL AGENCIES TO SUPPORT THE UNIVERSITY'S MISSION THESE INITIATIVES OFTEN FOCUS ON SEEKING DISCRETIONARY EARMARKED GRANTS OR APPROPRIATIONS FOR CRITICAL UNIVERSITY PRIORITIES, SUCH AS DEVELOPING AND PRESERVING THE UNIVERSITY'S FACILITIES AND PROMOTING RESEARCH (BOTH FUNDAMENTAL AS WELL AS APPLIED, THAT WILL DIRECTLY OR INDIRECTLY BENEFIT THE GENERAL PUBLIC) PROMINENT EXAMPLES OF THESE INITIATIVES INCLUDE (A) FUNDING FOR UNIVERSITY PHYSICAL INFRASTRUCTURE PROJECTS, SUCH AS THE UNIVERSITY LIBRARY, ENVIRONMENTAL BIOLOGY RESEARCH ON LYME DISEASE, WEST NILE VIRUS, AND OTHER INSECT BORNE DISEASES AT FORDHAM'S CALDER CENTER VECTOR ECOLOGY INSTITUTE, THE PHYSICAL CHEMISTRY METEOR LAB, THE COMPUTER SCIENCE ROBOTICS PROGRAM, FAMILIAL DYSAUTONOMIA RESEARCH IN THE AREA OF CELLULAR BIOLOGY/GENETICS, NEW RESIDENCE HALLS DESIGNED AS LEARNING COMMUNITIES AND EQUIPPED WITH THE LATEST LEARNING TECHNOLOGIES (B) FORDHAM'S "GREEN" INITIATIVES THAT ENABLE FORDHAM TO REDUCE ITS CARBON FOOTPRINT BY INTRODUCING ENERGY EFFICIENCIES AND NEW TECHNOLOGIES, SUCH AS SOLAR AND ELECTRIC POWERED CAMPUS VEHICLES THESE ENVIRONMENTAL INITIATIVES ARE MADE POSSIBLE THROUGH MATCHING GOVERNMENTAL FUNDS AWARDED BY NYSERDA AND FEDERAL STIMULUS FUNDS (C) MAINTAINING PROGRAM ACTIVITIES, SUCH AS FORDHAM'S REGIONAL EDUCATIONAL TECHNOLOGY CENTER (CURRENTLY IN OPERATION AND ENJOYING TREMENDOUS SUCCESS) AND WFUV PUBLIC RADIO FROM FORDHAM UNIVERSITY ARE EXAMPLES OF PROGRAMS SUPPORTED BY A VARIETY OF FEDERAL FUNDING SOURCES, INCLUDING THE CORPORATION FOR PUBLIC BROADCASTING (CPB) (D) THE MASTER REDEVELOPMENT PLAN FOR FORDHAM'S LINCOLN CENTER CAMPUS IN MANHATTAN - THIS IS THE UNIVERSITY'S MOST IMPORTANT PRIORITY WITHIN THE UNIVERSITY'S PHYSICAL DEVELOPMENT ASPECT OF ITS STRATEGIC PLAN THE PLAN RECENTLY RECEIVED APPROVAL FROM THE CITY OF NEW YORK SUBSEQUENT TO THE CITY'S UNIFORM LAND-USE REVIEW PROCEDURE, AND WE HAVE BEGUN TO INAUGURATE THE PLAN'S IMPLEMENTATION WITH THE CONSTRUCTION OF A NEW FORDHAM SCHOOL OF LAW BUILDING AND UNDERGRADUATE RESIDENCE HALL ALL OF THESE INITIATIVES ARE DESIGNED TO MEET CRUCIAL INSTITUTIONAL AND PUBLIC NEEDS FUTURE PROJECTS WOULD INCLUDE SEEKING SUPPORT FOR UNDERGRADUATE SCIENCE TEACHING AND RESEARCH LABORATORY FACILITIES IN PURSUING THIS INITIATIVE, THE UNIVERSITY WOULD SEEK FUNDS NOT ONLY FOR ITS OWN INSTITUTIONAL ADVANCEMENT, BUT ALSO TO FURTHER SCIENCE, CULTURE, AND INTELLECTUAL AND PROFESSIONAL EDUCATION FOR THE LARGER COMMUNITY AND GENERAL PUBLIC FORDHAM GARNERS SUPPORT FROM LOCAL AND NATIONAL ELECTED OFFICIALS FOR THESE KINDS OF INITIATIVES, AS WELL AS FOR MORE CUSTOMARY COMPETITIVE OR "PEER REVIEW" TYPE OF RESEARCH GRANT FUNDING THROUGH NSF, FIPSE, AND THE INSTITUTES OF HEALTH FORDHAM'S GOVERNMENT RELATIONS AND LOBBYING ACTIVITIES MAY INCLUDE COMMUNICATING WITH VARIOUS BRANCHES, AGENCIES, AND COMMITTEES OF THE FEDERAL, STATE, AND LOCAL GOVERNMENT FORDHAM'S COMBINATION OF DEFENSIVE LOBBYING WITH PROACTIVE ADVANCEMENT INITIATIVES BENEFIT THE UNIVERSITY AND THE PUBLIC, WHOM WE ARE CHARTERED TO SERVE, AND IS COMMON TO MOST INSTITUTIONS OF HIGHER LEARNING, BOTH PUBLIC AND INDEPENDENT THIS ACTIVITY REPRESENTS AN APPROPRIATE EXERCISE OF FORDHAM'S FIRST AMENDMENT RIGHTS, WHICH THE UNIVERSITY POSSESSES ALONG WITH ALL OTHER ORGANIZATIONS AND INDIVIDUALS IN AMERICAN SOCIETY, WHO ACT TO PROMOTE THEIR OWN ADVANCEMENT AND SECURE THEIR LIVELIHOOD BY SEEKING APPROPRIATE GOVERNMENTAL PROTECTION, ASSISTANCE, AND SUPPORT FOR INITIATIVES AND PROGRAMS THAT BENEFIT THE BROADER PUBLIC, AS WELL AS THOSE WHOM THEY DIRECTLY SERVE

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

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
FORDHAM UNIVERSITY

Employer identification number
13-1740451

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)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 ▶ $ 0

(ii) Assets included in Form 990, Part X ▶ $ 4,537,812

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 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

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

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

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

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

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

b If "Yes," explain the arrangement in Part 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	330,165,755	434,705,631			
b Contributions	17,452,171	9,458,770			
c Investment earnings or losses	38,740,908	-95,864,896			
d Grants or scholarships	5,644,043	5,067,255			
e Other expenditures for facilities and programs	7,536,061	11,579,969			
f Administrative expenses	1,635,214	1,486,526			
g End of year balance	371,543,516	330,165,755			

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

- a Board designated or quasi-endowment ▶ **32.940 %**
- b Permanent endowment ▶ **67.060 %**
- c Term endowment ▶

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

		Yes	No
(i) unrelated organizations	3a(i)	Yes	
(ii) related organizations	3a(ii)		No
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		12,427,538		12,427,538
b Buildings		503,122,051	177,533,591	325,588,460
c Leasehold improvements		2,391,362	814,510	1,576,852
d Equipment		199,296,147	89,057,682	110,238,465
e Other		189,591,202	9,557,448	180,033,754
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				629,865,069

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other ALTERNATIVE INVESTMENTS	208,007,875	F
OTHER ASSETS	3,044,688	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	211,052,563	

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

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

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

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

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

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	0
POST RETIREMENT BENEFITS OBLIGATIONS	38,869,000
REFUNDABLE ADVANCES	4,711,423
AMOUNTS HELD ON BEHALF OF OTHERS	2,958,062
CAPITALIZED LEASE OBLIGATIONS	1,114,736
BORROWINGS UNDER LINE OF CREDIT	10,000,000
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	57,653,221

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	568,673,074
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	551,625,677
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	17,047,397
4	Net unrealized gains (losses) on investments	4	43,563,751
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-8,124,468
9	Total adjustments (net) Add lines 4 - 8	9	35,439,283
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	52,486,680

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

1	Total revenue, gains, and other support per audited financial statements			1	493,658,160
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	43,563,751		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-117,568,256		
e	Add lines **2a** through **2d**			2e	-74,004,505
3	Subtract line **2e** from line **1**			3	567,662,665
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	1,761,254		
b	Other (Describe in Part XIV)	4b	-750,845		
c	Add lines **4a** and **4b**			4c	1,010,409
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	568,673,074

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

1	Total expenses and losses per audited financial statements			1	433,047,012
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	750,845		
e	Add lines **2a** through **2d**			2e	750,845
3	Subtract line **2e** from line **1**			3	432,296,167
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	1,761,254		
b	Other (Describe in Part XIV)	4b	117,568,256		
c	Add lines **4a** and **4b**			4c	119,329,510
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	551,625,677

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, 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
PART III, LINE 4		THE UNIVERSITY'S MOST SIGNIFICANT COLLECTION IS ITS MUSEUM OF GREEK, ETRUSCAN AND ROMAN ART THE ANTIQUITIES MUSEUM OCCUPIES 4,000 SQUARE FEET OF SPACE AND IT FEATURES MORE THAN 260 ANTIQUITIES DATING FROM THE 10TH CENTURY B C THROUGH THE 3RD CENTURY A D THE COLLECTION SPANS SEVERAL PERIODS - MYCENAEAN, VILLANOVAN, CLASSICAL GREECE, GEOMETRICAL, ARCHAIC ROMAN, IMPERIAL ROMAN, REPUBLICAN, ETRUSCAN, AND SOUTH ITALIAN THERE ARE RED-FIGURE AND RED-AND-BLACK-FIGURE CERAMICS, AND THE SHINY BLACK ETRUSCAN POTTERY KNOWN AS BUCCHERO THERE IS AN ARRAY OF SCULPTURE AND TERRA COTTA HEADS AMONG THE ITEMS ON DISPLAY ARE -A TERRACOTTA PATERA (SHALLOW BOWL) WITH KNOB HANDLES, CA 340 B C , -A KYLIX (DRINKING CUP WITH TWO HANDLES), ATTRIBUTED TO THE PAINTER OF BERLIN 2268, A VASE PAINTER OF THE LATE SIXTH CENTURY B C , -A PORTRAIT OF JULIA AQUILIA SEVERA, THE SECOND AND FOURTH WIFE OF EMPEROR ELAGABALUS, A D 220-222, AND -A PORTRAIT OF THE EMPEROR HADRIAN FROM THE SECOND CENTURY A D THE MUSEUM, WHICH IS FREE OF CHARGE, IS OPEN TO THE GENERAL PUBLIC
PART V, LINE 4		FORDHAM UNIVERSITY'S ENDOWMENT FUNDS ARE INTENDED TO SUPPORT FINANCIAL ASSISTANCE FOR STUDENTS, TO FUND ADDING NEW AND CUTTING EDGE PROGRAMS WHILE MAINTAINING AND IMPROVING EXISTING ONES, AND TO IMPROVE AND MAINTAIN THE CAMPUS TO MEET THE NEEDS OF THE UNIVERSITY COMMUNITY
PART X, LINE 2		IT WAS DETERMINED THAT FIN 48 HAD NO IMPACT ON THE UNIVERSITY'S FINANCIAL STATEMENTS FOR THE JUNE 30, 2010 YEAR, AND THEREFORE THE FINANCIAL STATEMENTS DID NOT INCLUDE A FIN 48 FOOTNOTE
PART XI, LINE 8	OTHER ADJUSTMENTS	CHANGE IN VALUE OF INTEREST RATE SWAP -4,624,468 LOSS NOT YET RECOGNIZED AS A COMPONENT OF NET PERIODIC BENEFIT COST -3,883,000 UNREALIZED CHANGE IN VALUE OF PERPETUAL TRUST 383,000 ---------- -8,124,468 ==========
PART XII, LINE 2D	OTHER ADJUSTMENTS	FINANCIAL AID EXPENSE -117,568,256
PART XII, LINE 4B	OTHER ADJUSTMENTS	SPECIAL EVENT EXPENSES -750,845
PART XIII, LINE 2D	OTHER ADJUSTMENTS	SPECIAL EVENT EXPENSES 750,845
PART XIII, LINE 4B	OTHER ADJUSTMENTS	FINANCIAL AID EXPENSE 117,568,256

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

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
FORDHAM UNIVERSITY

Employer identification number
13-1740451

			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	
	THE UNIVERSITY INCLUDED A STATEMENT OF ITS POLICY ON RACIAL NONDISCRIMINATION TOWARD STUDENTS IN ALL ITS NEWSPAPERS AND BROADCAST SOLICITATIONS FOR STUDENTS			
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
5	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		No
	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	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
FORDHAM UNIVERSITY

Employer identification number
13-1740451

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	1	7	Program Services	GLOBAL STUDIES	1,724,618
Europe (Including Iceland and Greenland)	0	1	Program Services	SUMMER ABROAD GRANADA	146,577
Europe (Including Iceland and Greenland)	0	5	Program Services	SUMMER ABROAD ITALY	92,634
Sub-Saharan Africa	0	0	Program Services	LAW SCHOOL PROGRAM	83,851
East Asia and the Pacific	0	2	Program Services	GRADUATE SCHOOL	91,479
Europe (Including Iceland and Greenland)	0	8	Program Services	LAW SCH SUMMER PROG	274,124
East Asia and the Pacific	0	4	Program Services	SUMMER INSTITUTE	335,016
Central America and the Caribbean	0	0	Investments		
Totals . . . . . ►	1	27			2,748,299

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

1 **(a)** Name of organization	**(b)** IRS code section and EIN (if applicable)	**(c)** Region	**(d)** Purpose of grant	**(e)** Amount of cash grant	**(f)** Manner of cash disbursement	**(g)** Amount of of non-cash assistance	**(h)** Description of non-cash assistance	**(i)** Method of valuation (book, FMV, appraisal, other)

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

3 Enter total number of other organizations or entities . . . . . ▶

Part III **Grants 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)

Part IV Supplemental Information

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

Identifier	ReturnReference	Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

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
FORDHAM UNIVERSITY

Employer identification number
13-1740451

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
- **b** ☑ Internet and e-mail solicitations
- **c** ☑ Phone solicitations
- **d** ☑ In-person solicitations
- **e** ☑ Solicitation of non-government grants
- **f** ☑ Solicitation of government grants
- **g** ☑ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☑ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	**(iii)** No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
GRENZABACH GLIER AND ASSOCIATES	PROF FUNDRAISING		No	0	134,105	0
RUFFALOCODY	PROF FUNDRAISING		No	0	258,787	0
Total . . . . . ▶				0	392,892	0

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

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

		(a) Event #1 FOUNDERS DINNER (event type)	(b) Event #2 (event type)	(c) Other Events 0 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	1,788,389			1,788,389
	2 Less Charitable contributions	1,640,789			1,640,789
	3 Gross income (line 1 minus line 2)	147,600			147,600
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs	350,058			350,058
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	400,787			400,787
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				750,845
	11 Net income summary Combine lines 3, column d, and line 10 ▶				-603,245

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ 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 ▶ $			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

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
FORDHAM UNIVERSITY

Employer identification number
13-1740451

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

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

3 Enter total number of other organizations . . . ▶

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
STUDENT SCHOLARSHIPS	6650	113,341,448	0	N/A	N/A
See Additional Data Table					

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

Identifier	Return Reference	Explanation
MONITORING	SCHEDULE I, PART I, LINE 2	FORDHAM UNIVERSITY PROVIDES VARIOUS TYPES OF FINANCIAL ASSISTANCE TO ENABLE STUDENTS TO AFFORD A FORDHAM EDUCATION THE UNIVERSITY IS PARTICULARLY COMMITTED TO DO ALL WE CAN TO ALLEVIATE THE IMPACT OF THE ECONOMIC DOWNTURN ON STUDENTS AND THEIR FAMILIES FORDHAM'S FINANCIAL AID DEPARTMENT WORKS WITH STUDENTS TO HELP THEM DEVISE A PLAN TO FUND THEIR EDUCATION ASSISTANCE MAY INCLUDE A COMBINATION OF GRANTS, LOANS AND PAYMENT PLANS, DEPENDING ON INDIVIDUAL CIRCUMSTANCES AND RESOURCES SCHOLARSHIP GRANTS ARE AWARDED ON THE BASIS OF FINANCIAL NEED AND/OR SCHOLASTIC ACHIEVEMENT, AND ON A NON-DISCRIMINATORY BASIS STUDENTS MUST COMPLETE CERTAIN QUESTIONNAIRES AND APPLICATIONS TO DEMONSTRATE THEIR QUALIFICATION FOR VARIOUS TYPES OF FEDERAL, STATE, LOCAL, AND INSTITUTIONAL FINANCIAL ASSISTANCE THE VARIOUS FINANCIAL ASSISTANCE PROGRAMS HAVE PARTICULAR REQUIREMENTS FOR SELECTION CRITERIA AND MONITORING THE USE OF GRANT FUNDS, SUCH AS UNDER OMB CIRCULAR NO A-133 THESE REQUIREMENTS MAY INCLUDE A MINIMUM COURSE LOAD, DEMONSTRATED ACADEMIC PROGRESS, AND OTHER SIMILAR REQUIREMENTS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
FORDHAM UNIVERSITY

Employer identification number
13-1740451

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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 orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**		
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**		
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?	**4a**	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured 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				
See Additional Data Table							

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

Identifier	Return Reference	Explanation
SEVERENCE PAY	SCHEDULE J, PART I, LINE 4A	DERECK WHITTENBURG RECEIVED A SEVERENCE PAYMENT OF $130,000

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

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

Name of the organization
FORDHAM UNIVERSITY

Employer identification number
13-1740451

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	DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	64983TPB3	05-06-2004	28,975,948	REFUNDING LC 1994 DEBT ISSUE		X		X
B	DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	649903C33	05-21-2008	96,895,000	REFUNDING LC 2005 DEBT ISSUE		X		X
C	DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	6499032B6	07-25-2008	118,287,807	2008 ISSUE-CAMPBELL RESIDENCE HALL		X		X

Part II Proceeds

		A	B	C	D	E
1	Total proceeds of issue	30,028,437	97,282,370	118,287,807		
2	Gross proceeds in reserve funds	3,727,004		3,727,004		
3	Proceeds in refunding or defeasance escrows	29,162,765	95,869,900			
4	Other unspent proceeds					
5	Issuance costs from proceeds	865,672	1,412,470	3,643,551		
6	Working capital expenditures from proceeds					
7	Capital expenditures from proceeds	110,933,256		110,933,256		
8	Year of substantial completion	2005	2008	2010		

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
9	Were the bonds issued as part of a current refunding issue?		X	X			X				
10	Were the bonds issued as part of an advance refunding issue?	X			X		X				
11	Has the final allocation of proceeds been made?	X		X		X					
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X					

Part III Private Business Use

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X				
2	Are there any lease arrangements with respect to the financed property which may result in private business use?		X		X		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		X	X					
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X		X		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		X		X				
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	1 000 %				1 000 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶										
6	Total of lines 4 and 5	1 000 %				1 000 %					
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X					

Part IV Arbitrage

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X				
2	Is the bond issue a variable rate issue?		X	X			X				
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		X	X			X				
b	Name of provider	MERRILL LYNCH		MERRILL LYNCH							
c	Term of hedge	3 25		3 25							
4a	Were gross proceeds invested in a GIC?		X		X		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		X		X				
6	Did the bond issue qualify for an exception to rebate?		X		X		X				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

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
FORDHAM UNIVERSITY

Employer identification number
13-1740451

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

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

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

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

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

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
JOHN LORDAN - MORTGAGE		X	450,000	300,000		No		No	Yes	
JOHN HOLLWITZ - RELOCATION LOAN		X	592,000	422,502		No		No	Yes	
STEPHEN FREEDMAN - MORTGAGE		X	1,637,500	837,500		No		No	Yes	
Total . . . . . ▶ $				1,560,002						

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
GAMCO INVESTORS INC	SEE SCHEDULE O	203,043	SEE SCHEDULE O		No

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

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
FORDHAM UNIVERSITY

Employer identification number
13-1740451

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				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	64	1,197,345	MARKET QUOTATION
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				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (ANNUITIES)	X	4	272,437	MARKET QUOTATION
26 Other ▶ (EVENT)	X	5	8,867	COST
27 Other ▶ (TICKETS)	X	1	235	COST
28 Other ▶ ( )				

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 |

		Yes	No
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
THIRD PARTIES	SCHEDULE M, PART I, LINE 32B	THE ORGANIZATION UTILIZES A STOCK BROKER TO PROCESS AND SELL DONATED SECURITIES

Additional Data

Software ID:
Software Version:
EIN: 13-1740451
Name: FORDHAM UNIVERSITY

efile GRAPHIC print - DO NOT PROCESS | **As Filed Data -** | **DLN: 93493130005491**

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
FORDHAM UNIVERSITY

Employer identification number
13-1740451

Identifier	Return Reference	Explanation
FAMILY RELATIONSHIP	FORM 990, PART VI, SECTION A, LINE 2	PETER STACE, OFFICER/VP OF ENROLLMENT, HAS A FAMILY RELATIONSHIP WITH MARGARET BALL, OFFICER/UNIVERSITY SECRETARY

Identifier	Return Reference	Explanation
990 REVIEW PROCESS	FORM 990, PART VI, SECTION B, LINE 11A	THE FINANCE DEPARTMENT WORKS CLOSELY WITH KPMG, LLP, THE UNIVERSITY'S INDEPENDENT ACCOUNTING FIRM, TO PREPARE FORM 990 THE FINANCE DEPARTMENT PREPARES AN INITIAL DRAFT, WHICH KPMG REVIEWS TOGETHER WITH VARIOUS SUPPORTING DOCUMENTATION WHEN BOTH KPMG AND THE FINANCE STAFF ARE SATISFIED WITH THE FINAL DRAFT, IT IS THEN CAREFULLY REVIEWED AND EDITED BY THE CFO AND CONTROLLER, WHO THEN PROVIDE THE REVISED RETURN TO THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES FOR REVIEW AND APPROVAL THE BOARD OF TRUSTEES HAS DELEGATED THE RESPONSIBILITY FOR REVIEWING THE RETURN TO THE EXECUTIVE COMMITTEE QUESTIONS AND COMMENTS BY THE EXECUTIVE COMMITTEE ARE INCORPORATED INTO THE FORM 990 AS APPROPRIATE A COPY OF THE FINAL FORM 990 IS PROVIDED TO THE FULL BOARD OF TRUSTEES PRIOR TO FILING WITH THE IRS

Identifier	Return Reference	Explanation
CONFLICT OF INTEREST	FORM 990, PART VI, SECTION B, LINE 12C	THE UNIVERSITY HAS A WRITTEN CONFLICT OF INTEREST POLICY COVERING ALL TRUSTEES, OFFICERS, AND EMPLOYEES THAT REQUIRES, AMOUNG OTHER THINGS, THAT NO INDIVIDUAL MAY PARTICIPATE IN DISCUSSION OR DECISION ON ANY MATTER IN WHICH HE OR SHE HAS A MATERIAL FINANCIAL INTEREST ALL TRUSTEES, OFFICERS AND INDIVIDUALS WHO HAVE SIGNING AUTHORITY ARE REQUIRED TO CERTIFY COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY ON AN ANNUAL BASIS AND TO INDICATE WHETHER THE UNIVERSITY DOES BUSINESS WITH AN ENTITY IN WHICH THEY HAVE A MATERIAL FINANCIAL INTEREST WHEN SUCH RELATIONSHIPS EXIST, MEASURES ARE TAKEN TO MITGATE ANY ACTUAL OR PERCEIVED CONFLICT, INCLUDING REQUIRING THAT SUCH TRANSACTION BE CONDUCTED AT ARM'S LENGTH, FOR GOOD AND SUFFICIENT CONSIDERATION, BASED ON TERMS THAT ARE FAIR AND REASONABLE TO AND FOR THE BENEFIT OF THE UNIVERSITY, AND IN ACCORDANCE WITH RELEVANT STATE CONFLICT OF INTEREST LAWS AND THE UNIVERSITY'S TAX-EXEMPT STATUS UNDER SECTION 501(C)(3)

Identifier	Return Reference	Explanation
COMPENSATION	FORM 990, PART VI, SECTION B, LINE 15	FORDHAM'S BOARD OF TRUSTEES HAS DELEGATED RESPONSIBILITY FOR DETERMINING COMPENSATION FOR CERTAIN MEMBERS OF SENIOR MANAGEMENT TO THE BOARD'S COMPENSATION COMMITTEE HOWEVER, THE APPROVAL OF THE FULL BOARD OF TRUSTEES IS REQUIRED FOR APPROVAL OF THE PRESIDENT'S ANNUAL SALARY ALL TRUSTEES ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST POLICY DISCLOSURE STATEMENT EACH YEAR TO ENSURE INDEPENDENCE THE COMPENSATION COMMITTEE SEEKS TO ENSURE THAT EMPLOYEES ARE PAID WITHIN THE RANGE OF THE GOING MARKET RATE FOR SUCH POSITIONS AT SIMILARLY SITUATED UNIVERSITIES IN SIMILAR GEOGRAPHIC REGIONS, BY REFERENCE TO COMPENSATION SURVEYS AND OTHER INSTITUTIONS' FORM 990 RETURNS FORDHAM KEEPS RECORDS TO DOCUMENT ITS COMPENSATION SETTING PROCESS

Identifier	Return Reference	Explanation
GOVERNING DOCUMENTS	FORM 990, PART VI, SECTION C, LINE 19	FORDHAM UNIVERSITY'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE CURRENTLY AVAILABLE ON THE UNIVERSITY'S WEBSITE FORDHAM UNIVERSITY'S FINANCIAL STATEMENTS MAY BE MADE AVAILABLE UPON REQUEST FROM THE FINANCE AND ACCOUNTING OFFICE

Identifier	Return Reference	Explanation
BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	SCHEDULE L, PART IV	(A)NAME OF PERSON REGINA PITARO (B)RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION REGINA PITARO WAS A TRUSTEE OF THE UNIVERSITY AND MANAGING DIRECTOR OF GAMCO INVESTORS, INC , AN OUTSIDE INVESTMENT MANAGEMENT COMPANY (C)AMOUNT OF TRANSACTION $203,043 (D) DESCRIPTION OF TRANSACTION THE UNIVERSITY HAS ENGAGED GAMCO INVESTORS, INC SINCE JULY 2000 TO MANAGE ONE INVESTMENT FUND IN ACCORDANCE WITH THE UNIVERSITY'S INVESTMENT POLICY, WHICH IS APPROVED BY THE UNIVERSITY'S INVESTMENT COMMITTEE THE INVESTMENT COMMITTEE PERFORMED A THOROUGH REVIEW OF SEVERAL CANDIDATES, AND DETERMINED THAT GAMCO INVESTORS, INC WAS THE BEST CHOICE REGINA PITARO, MANAGING DIRECTOR OF GAMCO INVESTORS, INC , WAS ELECTED TO THE UNIVERSITY'S BOARD OF TRUSTEES IN THE JUNE 30, 2007 YEAR AND CONTINUED TO SERVE DURING THE JUNE 30, 2010 YEAR THE UNIVERSITY'S NOMINANCE AND GOVERNANCE COMMITTEE AND THE FULL BOARD OF TRUSTEES WERE MADE AWARE OF THIS CONFLICT PRIOR TO HER APPOINTMENT AS TRUSTEE, AND THE UNIVERSITY HANDLES ALL RELATED MATTERS CONSISTENTLY WITH ITS CONFLICT OF INTEREST POLICY MS PITARO IS NOT A MEMBER OF THE INVESTMENT COMMITTEE, WHICH ADVISES THE BOARD OF TRUSTEES ON ALL INVESTMENT STRATEGIES AND RELATED DECISIONS, AND SHE RECUSES HERSELF FROM ALL INVESTMENT DISCUSSIONS AT THE BOARD LEVEL (E)SHARING OF ORGANIZATION REVENUES NO

Identifier	Return Reference	Explanation
BONDS	SCHEDULE K, PART IV, LINE 3C, COLUMN B	THE UNIVERSITY PAYS A FIXED RATE OF 3 2475% AND RECEIVES 67% OF THE ONE-MONTH LIBOR ON THE NOTIONAL PRINCIPAL AMOUNT OF OUR 2008A BONDS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493130005491

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
FORDHAM UNIVERSITY

Employer identification number
13-1740451

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
FORDHAM UNIVERSITY (USA) UK PROGRAM LTD 15 St Botolph Street LONDON EC3A 7NJ UK	EDUCATION	UK	N/A	N/A	N/A
FORDHAM UNIVERSITY UK CHARITABLE TRUST 15 St Botolph Street LONDON EC3A 7NJ UK	EDUCATION	UK	N/A	N/A	N/A

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

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

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

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

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	FORDHAM UNIVERSITY (USA) UK PROGRAM LTD	O	674,142
(1)	See Additional Data Table		
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Additional Data

Software ID:
Software Version:
EIN: 13-1740451
Name: FORDHAM UNIVERSITY

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			
JOSEPH M MCSHANE SJ PRESIDENT/TRUSTEE	35 0	X		X				0	0	8,568
LAWRENCE AURIANA TRUSTEE	1 0	X						0	0	0
STEPHEN E BEPLER TRUSTEE	1 0	X						0	0	0
KENNETH BOLLER SJ TRUSTEE	1 0	X						0	0	0
JAMES E BUCKMAN TRUSTEE	1 0	X						0	0	0
RICHARD BUONCORE TRUSTEE	1 0	X						0	0	0
ELIZABETH BURNS TRUSTEE	1 0	X						0	0	0
DONNA M CARROLL TRUSTEE	1 0	X						0	0	0
JOHN CECERO SJ TRUSTEE	1 0	X						0	0	0
EMANUEL CHIRICO TRUSTEE	1 0	X						0	0	0
ROBERT D DALEO TRUSTEE	1 0	X						0	0	0
CAROLYN N DOLAN TRUSTEE	1 0	X						0	0	0
CHRISTINE F DRIESSEN TRUSTEE	1 0	X						0	0	0
CHRISTOPHER F FITZMAURICE TRUSTEE	1 0	X						0	0	0
MICHAEL J GARANZINI SJ TRUSTEE	1 0	X						0	0	0
PATRICIA HELLER TRUSTEE	1 0	X						0	0	0
PETER W HOWE TRUSTEE	1 0	X						0	0	0
DARLENE LUCCIO JORDAN TRUSTEE	1 0	X						0	0	0
JOHN P KEHOE TRUSTEE	1 0	X						0	0	0
V JOHN KRISS TRUSTEE	1 0	X						0	0	0
WILLIAM LOSHERT TRUSTEE	1 0	X						0	0	0
J THOMAS MCCLAIN SJ TRUSTEE	1 0	X						0	0	0
SYLVESTER MCCLEARN TRUSTEE	1 0	X						0	0	0
HENRY S MILLER TRUSTEE	1 0	X						0	0	0
ROBERT O SHEA TRUSTEE	1 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			
REGINA M PITARO TRUSTEE	1 0	X						0	0	0
LORETTA A PRESKA TRUSTEE	1 0	X						0	0	0
THOMAS P SALICE TRUSTEE	1 0	X						0	0	0
JOHN N TOGNINO TRUSTEE	1 0	X						0	0	0
MARK H TUOHEY III TRUSTEE	1 0	X						0	0	0
ROSEMARY T BERKERY TRUSTEE	1 0	X						0	0	0
VINCENT BIAGI S J TRUSTEE	1 0	X						0	0	0
DENNIS FITZSIMONS TRUSTEE	1 0	X						0	0	0
JOHN M KEANE TRUSTEE	1 0	X						0	0	0
T J MALONEY TRUSTEE	1 0	X						0	0	0
JOSEPH P PARKES SJ TRUSTEE	1 0	X						0	0	0
PETER JOHN SACRIPANTI TRUSTEE	1 0	X						0	0	0
VINCENT VIOLA TRUSTEE	1 0	X						0	0	0
LILIAN WU TRUSTEE	1 0	X						0	0	0
JOHN J LORDAN SENIOR VP/CFO/TREASURER	35 0			X				437,167	0	30,049
BRIAN J BYRNE VP OF ADMINISTRATION	35 0			X				281,534	0	49,030
PETER STACE VP ENROLLMENT	35 0			X				286,293	0	46,808
FRANK SIMIO VP FINANCE	35 0			X				246,988	0	66,730
JEFFREY L GRAY VP STUDENT AFFAIRS	35 0			X				249,141	0	64,410
MARGARET BALL UNIVERSITY SECRETARY	35 0			X				144,514	0	16,822
PATRICK RYAN SJ VP OF MISSION & MINISTRY	35 0			X				0	0	8,568
ALBERT CHECCIO VP OF DEVELOPMENT	35 0			X				365,381	0	39,212
FRANK SIRIANNI VP OF INFORMATION TECHNO	35 0			X				239,587	0	49,661
THOMAS A DUNNE VP OF GOV RELATIONS & U	35 0			X				335,266	0	42,589
STEPHEN FREEDMAN SENIOR VP/CHIEF ACADEMIC	35 0			X				421,138	0	47,878

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			
JOSEPH QUINN VP OF MISSION & MINISTRY	35 0			X				52,987	0	3,923
MARCO VALERA VP FOR FACILITIES MGMT	35 0			X				227,224	0	52,066
DERECK WHITTENBURG BASKETBALL COACH	35 0					X		425,173	0	46,893
WILLIAM M TREANOR LAW SCHOOL DEAN	35 0					X		429,127	0	54,229
HOWARD TUCKMAN GBA SCHOOL DEAN	35 0					X		396,174	0	38,169
THOMAS LEE PROFESSOR	35 0					X		317,841	0	49,743
SHEILA FOSTER PROFESSOR	35 0					X		285,135	0	53,303
JOHN HOLLWITZ PROFESSOR/FORMER OFFICER	35 0						X	378,202	0	53,881

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

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
TUITION & FEES	611,600	446,207,828	446,207,828		
AUXILIARY ENTERPRISES	611,710	55,849,659	55,849,659		
ATHLETIC AND SUMMER PROGRAMS	611,710	3,154,996	3,154,996		
FEES FOR EDUCATIONAL SERVICES	611,600	1,412,041	1,412,041		
VISITING PROFESSORS SALARY REIMBURSEMENTS	611,600	936,835	936,835		

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

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
STUDENT MEAL COSTS	9,127,487	9,127,487		
EXCHANGE STUDENT COSTS	4,483,247	4,483,247		
DOUBTFUL ACCOUNTS	3,308,706	3,308,706		
LIBRARY MATERIALS	2,668,864	2,668,864		
DUES/SUBSCRIPTIONS	1,258,008	935,453	318,669	3,886

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 13-1740451
Name: FORDHAM UNIVERSITY

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JOHN HOLLWITZ	(I)	364,114	0	14,088	22,158	31,723	432,083	0
	(II)	0	0	0	0	0	0	0
JOHN J LORDAN	(I)	431,100	0	6,067	26,950	3,099	467,216	0
	(II)	0	0	0	0	0	0	0
BRIAN J BYRNE	(I)	279,713	0	1,821	26,950	22,080	330,564	0
	(II)	0	0	0	0	0	0	0
PETER STACE	(I)	284,396	0	1,897	26,950	19,858	333,101	0
	(II)	0	0	0	0	0	0	0
FRANK SIMIO	(I)	246,142	0	846	26,950	39,780	313,718	0
	(II)	0	0	0	0	0	0	0
JEFFREY L GRAY	(I)	247,911	0	1,230	26,950	37,460	313,551	0
	(II)	0	0	0	0	0	0	0
MARGARET BALL	(I)	143,558	0	956	15,840	982	161,336	0
	(II)	0	0	0	0	0	0	0
ALBERT CHECCIO	(I)	356,303	0	9,078	19,160	20,052	404,593	0
	(II)	0	0	0	0	0	0	0
FRANK SIRIANNI	(I)	237,993	0	1,594	19,160	30,501	289,248	0
	(II)	0	0	0	0	0	0	0
THOMAS A DUNNE	(I)	333,129	0	2,137	19,160	23,429	377,855	0
	(II)	0	0	0	0	0	0	0
STEPHEN FREEDMAN	(I)	418,047	0	3,091	26,950	20,928	469,016	0
	(II)	0	0	0	0	0	0	0
DERECK WHITTENBURG	(I)	292,731	0	132,442	26,950	19,943	472,066	0
	(II)	0	0	0	0	0	0	0
WILLIAM M TREANOR	(I)	427,849	0	1,278	26,950	27,279	483,356	0
	(II)	0	0	0	0	0	0	0
HOWARD TUCKMAN	(I)	393,255	0	2,919	19,160	19,009	434,343	0
	(II)	0	0	0	0	0	0	0
MARCO VALERA	(I)	226,062	0	1,162	25,856	26,210	279,290	0
	(II)	0	0	0	0	0	0	0
THOMAS LEE	(I)	317,321	0	520	22,640	27,103	367,584	0
	(II)	0	0	0	0	0	0	0
SHEILA FOSTER	(I)	284,289	0	846	26,645	26,658	338,438	0
	(II)	0	0	0	0	0	0	0