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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)

2009

OMB No 1545-0047

Open to Public Inspection

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

A Fo	r the :	2009 ca	alendar yea	r, or tax year beginning 07-01-2009	and ending 06-30-20	10				
B Che	eck if a	pplicable	Please	C Name of organization Saint Xavier University			D Employer ide	ntification number		
☐ Add	Iress ch	ange	use IRS label or	Doing Business As	36-217713 E Telephone nu					
Name change print or type. See (773) 2										
┌ Init	ıal retu	rn	Specific Instructions. Number and street (or P O box if mail is not delivered to street address) Room/suite (773) 298-300 G Gross receipts \$ 10							
┌ _{Ter}	mınate	d					G Gross receipts	\$ 107,108,477		
┌ Am	ended	return		City or town, state or country, and ZIP	+ 4		1			
┌ App	olication	pending		Chicago, IL 60655						
			F Nan	ne and address of principal officer		H(a) Ic th	■ ıs a group returr	, for		
			Raymoi	nd P Catania			ates?	⊤Yes ▼ No		
				Vest 103rd St o,IL 60655						
				-,			II affiliates includ			
I Ta	x-exem	pt status	▼ 501(c)	(3) ◄ (insert no)	□ 527		o, attach a list up exemption nu	(see instructions) mber ►		
	ebsit <i>e</i>	• • ww	w sxu edu				.,			
						1				
			-	ion		L Year of fo	ormation 1846 M	State of legal domicile IL		
Pa	1 I			e organization's mission or most si	anificant activities					
	•			rsity (SXU), a Catholic institution i		of the Sisters	of Mercy of the A	mericas, educates		
ω.				search for the truth, to think critic	ally, to communicate eff	ectively, and t	o serve wisely ar	nd compassionately in		
ဋ		support	or numan c	dignity and the common good						
Ë										
Governance										
	2	Check	this box 🛏	f the organization discontinued it	s operations or dispose	d of more than	25% of its net a	issets		
న ్ కగ	3	Number	r of voting r	nembers of the governing body (Pa	rt V I , line 1a)		3			
Activities	4	Number	r of ındepen	dent voting members of the govern	iing body (Part VI, line 1	lb)	. 4	23		
Ę,	5	Total n	umber of en	nployees (Part V , line 2a)			5	1,994		
ă	6	Total n	umber of vo	lunteers (estimate if necessary)			6	1		
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12						7a	829,256		
	ь	Net unr	elated busi	ness taxable ıncome from Form 99	0-T, line 34		7b	-955,270		
						Pric	or Year	Current Year		
а.	8	Contri	butions and	i grants (Part VIII, line 1h)			3,092,968	3,398,990		
Revenue	9	Progra	am service	revenue (Part VIII, line 2g)		93,948,817	97,081,604			
9.5	10	Invest	tment incor	ne (Part VIII, column (A), lines 3,		422,761	-1,600,706			
	11		-), lines 5, 6d, 8c, 9c, 10c, and 11e)			1,636,998		
	12			dd lines 8 through 11 (must equal i		ne	99,942,908	100,516,886		
	13				paid (Part IX, column (A), lines 1-3)			21,814,595		
	14			r for members (Part IX, column (A)			20,678,134	21,014,393		
	15			ompensation, employee benefits (Pa		5-		<u> </u>		
8	15	10)	es, other co	impensation, employee benefits (1	art IX, column (A), mies	5-	46,817,953	45,554,511		
Expenses	16a	Profes	sional fund	raısıng fees (Part IX, column (A), l	ne 11e)		0	0		
ੜੇ	ь	Total fu	ındraısıng exp	enses (Part IX, column (D), line 25) 🛌 1,00						
ш	17			Part IX, column (A), lines 11a-11		29,423,166	33,316,291			
	18			Add lines 13–17 (must equal Part :			96,919,253	100,685,397		
_	19	Reven	ue less exp	enses Subtract line 18 from line 1			3,023,655	-168,511		
<u>ያ</u>						_	g of Current	End of Year		
Not Assets or Fund Balances		_					/ear			
A 55 G	20			t X, line 16)			147,729,786	136,202,077		
end G	21			Part X, line 26)			90,568,278	77,556,885		
	22			d balances Subtract line 21 from l	ine 20		57,161,508	58,645,192		
Pai	t II	_	ature Blo							
				rjury, I declare that I have examined this correct, and complete Declaration of prepared						
			,	, , , , , , , , , , , , , , , , , , , ,				,y-		
Sign		****					-05-16			
Here	2	Sign	ature of office	er		Date				
				na Chief Financial Officer						
		Туре	e or print nam	e and title	,		1			
		Preparer		y S Adams	Date	Check If self-	Preparer's identif			
Paid		signatur	e F Gregor	y 3 Audilis		empolyed •	(see instructions))		
Prepa	arer's	Firm's name (or yours L Clifton Gunderson LLP					FTA: k			
Use (Only	if self-employed), address, and ZIP + 4 1301 W 22nd St Ste 1100						EIN ►		
		, 2002 11 22114 01 01 01 01						30) 573-8600		
M = 1. 4	.b. TD	<u> </u>		Oak Brook, IL 60523	/·		1	Z Vas. E Na		

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

SAINT XAVIER UNIVERSITY (SXU), A CATHOLIC INSTITUTION INSPIRED BY THE HEILAGE OF THE SISTERS OF MERCY OF THE AMERICAS, EDUCATES MEN AND WOMEN TO SEARCH FOR THE TRUTH, TO THINK CRITICALLY, TO COMMUNICATE EFFECTIVELY, AND TO SERVE WISELY AND COMPASSIONATELY IN SUPPORT OF HUMAN DIGNITY AND THE COMMON GOOD

2	Did the organization undertake any the prior Form 990 or 990-EZ? .		ring the year which were not listed on	┌ Yes ┌ No
	If "Yes," describe these new service	s on Schedule O		
3	Did the organization cease conduct services?			┌ Yes ┌ No
	If "Yes," describe these changes or	Schedule O		
4		ganızatıons and sectıon 4947(a	ation's three largest program services)(1) trusts are required to report the ch program service reported	• •
4a	(Code) (Expenses	\$ 77,936,283 including g	rants of \$ 21,814,595) (Revenue	\$ 87,467,536)
	students SXU offers Graduate and Underg statistics, full-time equivalent Students ("I level was 1,085 Additionally, during the 2 members Saint Xavier University's full-tim last ten years With 39 undergraduate deg School of Nursing, the Graham School of N	raduate programs in Business Administi TES") enrolled in the University during 010 fiscal year, the University's faculty e undergraduate enrollment ranged fro ree programs and over 40 graduate pro- lanagement, and the School for Contini	ering bachelor's and master's degrees to a diversion, Liberal and Sciences, Nursing and Educe the 2010 fiscal year at the undergraduate leveconsisted of 196 full-time employees and 226 mm 2300 to 2590 between 2004-2009, and eigogram options in the College of Arts and Scienting and Professional Studies, Saint Xavier off the top 40 comprehensive master's universities.	ation Based on fall semester el were 2,746 and at the graduate B part-time and adjunct faculty jht new facilities were added over the ices, the School of Education, the iers a firm foundation in the liberal
4b	(Code) (Expenses	\$ including gi	rants of \$) (Revenue \$;)
4c	(Code) (Expenses	\$ including gi	rants of \$) (Revenue \$)
4d	Other program services (Describe	ın Schedule O)		
	(Expenses \$	including grants of \$) (Revenue \$)
4e	Total program service expenses⊁\$	77,936,283		

Dart TV	Checklis	t of De	auired	Schadula	
allutv	CHECKIIS	LUIKE	uuneu	Scheuule	318

			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	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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			
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		Νο
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		Νο
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? <i>If</i> "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		Νο
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		N o
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		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t 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		Νο
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		Νo
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		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
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		Νο
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		Νο
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	Yes	
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)			
а	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		Νο
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		N o
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		N o
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		N o
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		No
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		N o
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		N o
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		N o
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	
		F	orm 990	(2009)

Part V Statements Regarding Other IRS Fili	ngs and Tax Compliance

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	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			
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	2b	Yes	
Ba -	Instructions) 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	
la	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		Νo
Ь	If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
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		
a	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		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Νo
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
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		
	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		
	Sponsoring organizations maintaining donor advised funds.			
а	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		
0	Section 501(c)(7) organizations. Enter			
а	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			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	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			

Chicago, IL 60655 (773) 298-3000

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.

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
ь	Enter the number of voting members that are independent 1b 23			
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		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	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		N o
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
	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		Νο
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	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		Νο
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its	104		
	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		
Se	ction 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			
19	Own website Another's website Vupon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			
20	interest policy, and financial statements available to the public. See Additional Data Table			. h.
20	State the name, physical address, and telephone number of the person who possesses the books and records of th SAINT XAVIER UNIVERSITY 3700 West 103rd St	ne orga	ınızatıor	n P -

Part VIII 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Key employee Officer Institutional Trustee Individual trustee or director		Former Highest compensated employee		from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
See add'l data										

				_
1b Total	►	1,020,217	0	99,332

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 12

			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			
	on time 1a. 11 res, complete schedule 110 such marviada.	3	Yes	1
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			
	marviaga	4	Yes	1
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	.		N o

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Chartwells Dining Services PO Box 91337 Chicago, IL 60693	Food Service	3,637,663
DLA PIPER LLP 203 N LaSalle St Suite 203 Chicago, IL 60601	Legal Service	765,292
Kınselle Landscapıng 13821 S Harrisson Ave Blue Island, IL 60406	Landscaping Services	631,277
Aramark 2250 Network Place Chicago, IL 60673	FAcility Services	629,635
Newman Architecture Inc 1730 Park Street Naperville, IL 60563	ARchitect	602,793
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►5) who received more than	

Page 8

Νo

Form 99								Page 9
Part V	<u> </u>	Statement of	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
\$ \$	1a	Federated camp	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b					
s,g	c	Fundraising eve	ents 1c	448,341				
#	d	Related organiz	ations 1d					
Ξ̈́	e	Government grants	s (contributions) 1e	1,685,691				
tior sr s	f	All other contribution	ons, gifts, grants, and 1f	1,264,958	j		İ	
ē Ž	g		butions included in					
풀풀								
ပိုန်	h	Total. Add lines	s 1a-1f	· · · •	3,398,990			
<u>e</u>				Business Code				
er Te	2a	Tuition		611,310	86,051,331	86,051,331		
æ	Ь	Room and Board		611,310	7,574,486			7,574,486
9C.e	C	Bookstore Revenue	e	611,310	2,239,467			2,239,467
Ser.	d	Workshop Revenue	e	611,310	125,553	125,553		
Program Service Revenue	e							
200	f	All other progra	am service revenue		1,090,767	1,090,767		
Δ	g	Total. Add lines	s 2a-2f	▶	97,081,604			
	3	Investment inc	ome (including dividend	ds, interest				
			ar amounts)	-	199,885	199,885		
	4		tment of tax-exempt bond p	· · · · . +				
	5	Royalties						
	6a	Gross Rents	(ı) Real 483,002	(II) Personal				
	ь	Less rental	1987882					
	c	expenses Rental income	483,002					
		or (loss)			402.002			492.002
	d	Net rental incor	me or (loss)		483,002			483,002
	7a	Gross amount	(ı) Securities 4,645,756	(II) O ther				
	′ ′ ′ ′	from sales of assets other	, ,					
	١.	than inventory Less cost or	6,446,347					
	Ь	other basis and	0,440,347					
	l c	sales expenses Gain or (loss)	-1,800,591					
	d	Net gaın or (los	s)		-1,800,591			-1,800,591
	8a	Gross income f	_					
Other Revenue		events (not incl \$ 448						
<u>ā</u> >		of contributions	reported on line 1c)					
쫎		See Part IV, lin	e 18 a					
횰	Ь	Less direct ex	penses b	145,244				
₽	c		(loss) from fundraising (145,244 events . •	0			
_	9a		rom gaming activities					
		See Part IV , lin	e 19					
			a . i					
	b c		penses b [loss) from gaming activ	/Ities -				
		Gross sales of	1	711103 1 1 1				
		returns and allo						
	.		a					
	Ь	=	oods sold b	entory ►				
	С	Miscellaneous	(loss) from sales of inve s Revenue	Business Code				
	11a	Restaurant Foo		722,210	662,276		662,276	
	ь	Parking Fee Re		611,600	324,740		·	324,740
	c	Health Center F		621,400	166,980		166,980	·
	d	All other revenu	-	, <u> </u>	· ·		<i>,</i>	
			_					
				· · · · • [1,153,996			
	12	Total revenue.	See Instructions	▶	100,516,886	87,467,536	829,256	8,821,104

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
			(B) (C), and (B)	(D).	(D)				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21			β					
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	21,814,595	21,814,595						
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees	1,894,436	1,015,776	721,060	157,600				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$								
7	Other salaries and wages	35,859,506	29,460,381	5,867,393	531,732				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,123,850	927,733	163,046	33,071				
9	Other employee benefits	4,191,236	3,402,153	696,324	92,759				
10	Payroll taxes	2,485,483	2,028,819	414,028	42,636				
11	Fees for services (non-employees)								
а	Management								
ь	Legal	1,068,943		1,068,943					
c	Accounting	209,402		209,402					
d	Lobbying	111,953		111,953					
e	Professional fundraising See Part IV, line 17								
f	Investment management fees								
g	Other	5,853,536	1,767,159	4,001,054	85,323				
12	Advertising and promotion	683,418	105,899	577,519					
13	Office expenses	4,744,772	2,820,079	1,873,561	51,132				
14	Information technology		, ,	. ,	,				
15	Royalties								
16	Occupancy	3,217,611	2,454,611	763,000					
17	Travel	276,243		· · · · · · · · · · · · · · · · · · ·	9,357				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2,3,2.13	210,000	10,201	2,001				
19	Conferences, conventions, and meetings	450,438	415,467	34,971					
20	Interest	1,425,064		1,425,064					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	5,283,417	5,160,177	123,240					
23	Insurance	1,040,572		1,040,572					
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)								
а	Product Costs	3,807,897	3,807,897						
ь	Bad Debt	1,752,200		1,752,200					
c	Tuition Waivers	1,568,795	1,240,073	 	3,398				
d	Student Events	1,318,109	1,039,802	278,307	<u> </u>				
e	Dues and Fees	298,989	164,541	133,478	970				
f	All other expenses	204,932	62,436	· ·					
25	Total functional expenses. Add lines 1 through 24f	100,685,397	77,936,283	· ·	1,007,978				
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		,555,265	22,7.12,1230	_,,,,,,,				
	campaign and fundraising solicitation								

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			893,103	1	814,065
	2	Savings and temporary cash investments			12,026,585	2	2,876,723
	3	Pledges and grants receivable, net			1,302,133	3	1,315,302
	4	Accounts receivable, net			6,316,071	4	3,788,842
	5	Receivables from current and former officers, directors, trustee	s. kev	emplovees, and			
		highest compensated employees Complete Part II of	, ,				
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		n 4958(f)(1)) and			
		Schedule L			6		
ssets	7	Notes and loans receivable, net		2,973,260	7	3,029,802	
8	8	Inventories for sale or use		710,505	8	479,452	
⋖	9	Prepaid expenses and deferred charges			2,856,167	9	2,764,479
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	168,149,002			
	ь	Less accumulated depreciation	10b	54,026,047	111,473,247	10c	114,122,955
	11	Investments—publicly traded securities			7,949,738	11	5,614,838
	12	Investments—other securities See Part IV, line 11	219,084	12	324,509		
	13	Investments—program-related See Part IV, line 11		13	_		
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11			1,009,893	15	1,071,110
	16	Total assets. Add lines 1 through 15 (must equal line 34) $$.			147,729,786	16	136,202,077
	17	Accounts payable and accrued expenses .		12,069,091	17	7,387,100	
	18	Grants payable		18			
	19	Deferred revenue		4,060,675	19	3,010,952	
- 46	20	Tax-exempt bond liabilities		61,400,000	20	53,860,000	
<u>a</u>	21	Escrow or custodial account liability Complete Part IV of Schedu		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Ë		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties		•	4,910,258	23	180,936
	24	Unsecured notes and loans payable to unrelated third parties				24	5,000,000
	25	Other liabilities Complete Part X of Schedule D			8,128,254	25	8,117,897
	26	Total liabilities. Add lines 17 through 25			90,568,278	26	77,556,885
ر. دو		Organizations that follow SFAS 117, check here \blacktriangleright $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	olet e l	ines 27			
ž		through 29, and lines 33 and 34.			40.044.000		50.004.057
Fund Balance	27	Unrestricted net assets			46,914,899		50,864,957
ă	28	Temporarily restricted net assets	622,496	_	172,338		
ĭ	29	Permanently restricted net assets			9,624,113	29	7,607,897
Ē		Organizations that do not follow SFAS 117, check here ► allines 30 through 34.	nd con	iplet e			
ō	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31		
S S	32	Retained earnings, endowment, accumulated income, or other fu		•		32	
Net /	33	Total net assets or fund balances			57,161,508	33	58,645,192
ž	34	Total liabilities and net assets/fund balances			147,729,786		136,202,077
					177,723,700	54	100,202,077

			Yes	No					
1	Accounting method used to prepare the Form 990								
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo					
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								
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?								
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						

Form **990** (2009)

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

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

Saint Xavier University 36-2177133

Pa	rt I	Reas	on for Pul	olic Charity Stat	us (All org	anızatıons	must comp	lete this pai	rt.) See ıns	tructions	
The	organı	zatıon ıs	not a private	e foundation because	ıtıs (Forlı	nes 1 throug	h 11, check	only one box)		
1	Γ	A churc	h, conventio	on of churches, or as	sociation of	churches se	ection 170(b)	(1)(A)(i).			
2	굣	A schoo	ol described	ın section 170(b)(1)	(A)(ii). (Att	ach Schedul	le E)				
3	Γ	A hospi	tal or a coop	perative hospital serv	vice organiza	atıon describ	ed in section	170(b)(1)(A	(iii).		
4	Γ			organization operate y, and state	ed in conjunc	ction with a h	nospital desci	rıbed ın secti o	on 170(b)(1))(A)(iii). Er	nter the
5	г	An orga	inization one	rated for the benefit	of a college	or university	owned or on	erated by a d	overnmenta	l unit descr	 ibed in
_	•	-	•	A)(iv). (Complete Pa	•		,		,		
6	Г			local government or	•	al unit descr	ıbed ın sectio	n 170(b)(1)(A)(v).		
7	Γ	An orga describ	inization tha ed in	t normally receives a	a substantial					m the gene	ral public
_	_			A)(vi) (Complete Pa				`			
8 9	<u> </u>		-	described in section			•	•	*	b 6	
9	ı			t normally receives							
				ties related to its ex							
				ss investment incom						x) from bus	inesses
10	_	•		anızatıon after June 3 anızed and operated	•			•	•		
11	<u>'</u>	_	_	anized and operated	•		•			carry out th	o nurnos os of
	'	one or r	nore publicly	y supported organizations supported organizations supported to the type of supported to the	tions describ orting organiz	bed in section zation and co	on 509(a)(1)	or section 50 11e through	9(a)(2) See	section 50	
e	Γ	other th		x, I certify that the con managers and oth							
f			rganızation r	eceived a written de	termination 1	from the IRS	that it is a T	ype I, Type I	I or Type II	I supportin	g organization,
g			ugust 17, 2 g persons?	006, has the organız	ation accept	ted any gift o	or contributio	n from any of	the		
		(i) a pe	rson who dır	ectly or indirectly co	ntrols, eithe	r alone or to	gether with p	ersons descr	ıbed ın (ıı)		Yes No
		and (III)	below, the g	governing body of the	the support	ted organizat	tion?			11g(i)
		(ii) a fa	mıly membe	r of a person describ	ed in (i) abo	ve?				11g(i	i)
				ed entity of a person						11 g(i	ii)
h		Provide	the followin	g information about t	he supporte:	d organizatio	on(s)				
Name of (ii) (described on col (i) listed in				Did you no organizat col (i) of	(v) Did you notify the organization in col (i) of your support? (vi) Is the organization col (i) organ in the U S		e :ion in anized	(vii) A mount of support?			
				instructions))	Yes	No	Yes	No	Yes	No	
Tota											

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	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						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
_	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averagest	on did not about	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support			<u> </u>	1	T	ı
Cale	ndar 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						
3	purpose Gross receipts from activities that				+		
3	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	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 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,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **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

Schedule A (Form 990 or 990-EZ) 2009

Software ID: Software Version:

EIN: 36-2177133

Name: Saint Xavier University

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per		(C tion (hat a	che	')			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Joseph A Balasa Trustee	1 00	Х						0	0	0
SISTER GILMARY BAUERRSM trustee	1 00	Х						0	0	0
JOHN J Benish Jr trustee	1 00	х						0	0	0
Sister Mary Ann Bergfeld RSM trustee	1 00	Х						0	0	0
Barbara J Braden trustee	1 00	х						0	0	0
Reverend John F Canary Trustee	1 00	Х						0	0	0
Thomas E Chomicz trustee	1 00	x						0	0	0
John T Costello Chairman	1 00	Х		х				0	0	0
Daniel K Curley trustee	1 00	Х						0	0	0
John R Deleonardıs trustee	1 00	Х						0	0	0
Terrence A Duffy TRustee	1 00	Х						0	0	0
Mıchael K Forde trustee	1 00	Х						0	0	0
Judith E Hicks trustee	1 00	Х						55,147	0	0
Sister Nancy J Houlihan RSM trustee	1 00	Х						0	0	0
William Keyser trustee	1 00	х						0	0	0
Sister Margaret Mary Knittel RSM trustee	1 00	Х						0	0	0
Edmond F O pler trustee	1 00	×						0	0	0
Sister Georgine Scarpino RSM Vice-Chairman	1 00	Х		х				0	0	0
Brian O Shannon Jr trustee	1 00	Х						0	0	0
Peter M Shannon III Trustee	1 00	Х						0	0	0
Christine M Wiseman President	40 00	Х		Х				0	0	0
Raymond L Kratzer Trustee	1 00	Х						0	0	0
Mary Maclaren trustee	1 00	Х						0	0	0
Angela Durante Provost	40 00			х				182,747	0	8,593
Father Francis Tebbe Vice-President (Secretary)	40 00			Х				0	0	7,642

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation					
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	from the organization and related organizations	
Sister Susan Sanders Vice-President	40 00			х				0	0	9,409	
RAYMOND Catanıa Vıce-president	40 00			х				0	0	0	
Steve Murphy Vice-President	40 00				х			151,913	0	18,429	
Robert Tenczar Vıce-President	40 00				х			135,845	0	24,394	
John Pelrine Vice-President	40 00				х			118,503	0	732	
Kathleen Carlson Vice-President	40 00				х			115,003	0	7,945	
James Brodzınskı Dean - School of Mgmt	40 00				х			152,731	0	20,251	
Sarah Gulley Dean of Education	40 00				х			143,794	0	20,848	
Kathleen Alaimo Vice-President	40 00				х			136,856	0	363	
Dale Fast Vice-President	40 00				х			122,107	0	8,102	
Richard Venneri Vice-President	40 00				х			119,926	0	18,834	
Judith Dwyer Former President	40 00						х	352,973	0	21,625	
Susan Piros Former Vice-President (Treasurer)	40 00						х	124,706	0	13,383	

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
Product Costs	3,807,897	3,807,897		
Bad Debt	1,752,200		1,752,200	
Tuition Waivers	1,568,795	1,240,073	325,324	3,398
Student Events	1,318,109	1,039,802	278,307	
Dues and Fees	298,989	164,541	133,478	970

DLN: 93493136046861

OMB No 1545-0047

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.

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),

- ◆ 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 ILA Do not complete Part ILB

If the		t have NOT filed Form 5768 (elections," to Form 990, Part IV, Line 5 tations. Complete Part III			
Na	me of the organization nt Xavier University	- Conference - Con		Employer iden	itification number
-		 	=0.4.6	36-2177133	
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	litical campaign act	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization	under section 4955	>	\$
2	Enter the amount of any excise	e tax incurred by organization mar	agers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	720 for this year?		┌ Yes
4a	Was a correction made?				┌ Yes
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt unde	er section 501(c) except section 50:	l(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exemp	pt function activities 🕨	\$
2	Enter the amount of the filing o	rganızatıon's funds contributed to	other organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	.0-POL, line 17b ►	¢
4	Did the filing organization file I	Form 1120-POI for this year?			→ Yes
5	State the names, addresses at were made For each organizat contributions received that we fund or a political action comm	he amount of political			
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).							
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,				
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals		
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)					
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)					
c	Total lobbying expenditures (add lines 1a and 18	b)						
d	Other exempt purpose expenditures							
e	Total exempt purpose expenditures (add lines 1	c and 1d)						
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both					
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00				
	Over \$17,000,000	\$1,000,000						
		•						
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)						
h	Subtract line 1g from line 1a If zero or less, enter	er -0-						
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -						
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No		
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five		
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı		
	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							

-/-	rt III-B Complete if the or	ganization is exempt under s	ection 501(c)(3) and has N	NOT fi	led Fo	orm	Page 5768										
	(election under se	ection 501(h)).			- \		/L\										
				(a) 		(a)		(a)		(a) 		(a)		(a)			(b)
				Yes	No	P	mount										
1		anization attempt to influence foreign, t to influence public opinion on a legisl															
а	Volunteers?				Νo												
b	Paid staff or management (includ	e compensation in expenses reported	on lines 1c through 1ı)?		Νo												
c	Media advertisements?				Νo												
d	Mailings to members, legislators	, or the public?			Νo												
е	Publications, or published or broa	adcast statements?			Νo												
f	Grants to other organizations for	lobbying purposes?			Νo												
g	Direct contact with legislators, th	neır staffs, government officials, or a le	gıslatıve body?	Yes			111,95										
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, or	any sımılar means?		Νo												
i	Other activities? If "Yes," descri	be in Part IV			Νo												
j	Total lines 1c through 1i						111,95										
2a		the organization to be not described in	section 501(c)(3)?		Νo												
b	If "Yes," enter the amount of any																
С	If "Yes," enter the amount of any	tax incurred by organization managers	s under section 4912														
		a section 4912 tax, did it file Form 47	-														
Par		ganization is exempt under s	ection 501(c)(4), section 5	501(c)(5), c	or se	ection										
	501(c)(6).																
							Vec N										
1	Were substantially all (90% or m	iore) dues received nondeductible by n	nemhers?		Г	1	Yes No										
1		nore) dues received nondeductible by n			F	1 2	Yes No										
2	Did the organization make only in	n-house lobbying expenditures of \$2,0	00 or less?		F	1 2 3	Yes No										
2 3	Did the organization make only in Did the organization agree to car	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditu	00 or less? ires from the prior year?	501(c)(5), (2											
2 3	Did the organization make only in Did the organization agree to car till-B Complete if the or 501(c)(6) if BOTH	n-house lobbying expenditures of \$2,0	00 or less? ires from the prior year? ection 501(c)(4), section 5			2 3 Or Se											
2 3 Par	Did the organization make only in Did the organization agree to car till-B Complete if the or 501(c)(6) if BOTH answered "Yes".	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures. The same are a same and a same are a same and a same are a same are a same and a same a	00 or less? ires from the prior year? ection 501(c)(4), section 5	II-À,		2 3 Or Se											
2 3 Par	Did the organization make only in Did the organization agree to car till-B Complete if the organization agree to car 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar agreements.	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures ganization is exempt under sometimes part III-A, lines 1 and 2 are amounts from members	00 or less? ares from the prior year? action 501(c)(4), section 5 answered "No" OR if Part I			2 3 Or Se											
2 3 Par	Did the organization make only in Did the organization agree to car till-B Complete if the organization agree to car 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar agreements.	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures (do	00 or less? ares from the prior year? action 501(c)(4), section 5 answered "No" OR if Part I	11-A,		2 3 Or Se											
2 3 Par	Did the organization make only in Did the organization agree to care till-B Complete if the organization of the solution of the organization make only in Did the organization make only in Did the organization of the organizati	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures (do	00 or less? ares from the prior year? action 501(c)(4), section 5 answered "No" OR if Part I	II-À,		2 3 Or Se											
2 3 Par 1 2	Did the organization make only in Did the organization agree to cart III-B Complete if the organization of the organization agree to cart 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar a Section 162(e) non-deductible to expenses for which the section 5 Current year Carryover from last year	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures (do	00 or less? ares from the prior year? action 501(c)(4), section 5 answered "No" OR if Part I	11-A,		2 3 Or Se											
2 3 Par 1 2	Did the organization make only in Did the organization agree to care till-B Complete if the organization agree to care 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar a Section 162(e) non-deductible to expenses for which the section 5 Current year Carryover from last year Total	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures are a part III-A, lines 1 and 2 are a mounts from members obbying and political expenditures (do 27(f) tax was paid).	00 or less? Ires from the prior year? Ection 501(c)(4), section 5 answered "No" OR if Part I not include amounts of political	11-A, 2a 2b 2c		2 3 Or Se											
2 3 Par 1 2 a b	Did the organization make only in Did the organization agree to care till—B Complete if the organization agree to care 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar a Section 162(e) non-deductible to expenses for which the section 5 Current year Carryover from last year Total Aggregate amount reported in se	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures amounts from members obbying and political expenditures (do \$27(f) tax was paid).	on or less? Ires from the prior year? Ection 501(c)(4), section 5 In answered "No" OR if Part I In include amounts of political Illuctible section 162(e) dues	11-A, 2a 2b		2 3 Or Se											
2 3 Par 1 2 a b	Did the organization make only in Did the organization agree to care till—B Complete if the organization agree to care 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar a Section 162(e) non-deductible to expenses for which the section 5 Current year Carryover from last year Total Aggregate amount reported in self notices were sent and the amodoes the organization agree to care	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures are a part III-A, lines 1 and 2 are a mounts from members obbying and political expenditures (do 27(f) tax was paid).	on or less? Ires from the prior year? Ection 501(c)(4), section 5 In answered "No" OR if Part I In the prior year? In the	1 2a 2b 2c 3		2 3 Or Se											
2 3 Par 1 2 a b c 3 4	Did the organization make only in Did the organization agree to care till-B Complete if the organization agree to care 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar a Section 162(e) non-deductible to expenses for which the section 5 Current year Carryover from last year Total Aggregate amount reported in self notices were sent and the amodoes the organization agree to capolitical expenditure next year?	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of anization is exempt under something. Part III-A, lines 1 and 2 are aniounts from members obbying and political expenditures (do (27(f) tax was paid). Control 6033(e)(1)(A) notices of nonded unt on line 2c exceeds the amount on arryover to the reasonable estimate of	on or less? Ires from the prior year? Ection 501(c)(4), section 5 In answered "No" OR if Part I In not include amounts of political Illuctible section 162(e) dues Illuctible section of the excess In nondeductible lobbying and	1 2a 2b 2c 3 4		2 3 Or Se											
2 3 Par 1 2 a b c 3 4	Did the organization make only in Did the organization agree to cart till—B Complete if the organization agree to cart 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar a Section 162(e) non-deductible to expenses for which the section 5 Current year Carryover from last year Total Aggregate amount reported in self notices were sent and the amodoes the organization agree to capolitical expenditure next year? Taxable amount of lobbying and present and the section of t	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures amounts from members obbying and political expenditures (do 27(f) tax was paid). Control 6033(e)(1)(A) notices of nonded unit on line 2c exceeds the amount on arryover to the reasonable estimate of political expenditures (see instructions)	on or less? Ires from the prior year? Ection 501(c)(4), section 5 In answered "No" OR if Part I In not include amounts of political Illuctible section 162(e) dues Illuctible section of the excess In nondeductible lobbying and	1 2a 2b 2c 3		2 3 Or Se											
2 3 Par 1 2 a b c 3 4	Did the organization make only in Did the organization agree to cart III-B Complete if the organization agree to cart 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar a Section 162(e) non-deductible to expenses for which the section 5 Current year Carryover from last year Total Aggregate amount reported in self notices were sent and the amodoes the organization agree to capolitical expenditure next year? Taxable amount of lobbying and part IV Supplemental Information agree to capolitical expenditure next year?	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures and a result in the second seco	or less? Ires from the prior year? Irection 501(c)(4), section 5 Irection 501(c)(4), secti	1 2a 2b 2c 3 4 5	line 3	2 3 Dr se is											
2 3 Par 1 2 a b c 3 4	Did the organization make only in Did the organization agree to cart III-B Complete if the organization agree to cart 501(c)(6) if BOTH answered "Yes". Dues, assessments and similar a Section 162(e) non-deductible to expenses for which the section 5 Current year Carryover from last year Total Aggregate amount reported in self notices were sent and the amodoes the organization agree to capolitical expenditure next year? Taxable amount of lobbying and part IV Supplemental Information agree to capolitical expenditure next year?	n-house lobbying expenditures of \$2,0 ryover lobbying and political expenditures of \$2,0 ryover lobbying and political expenditures amounts from members obbying and political expenditures (do \$27(f)\$ tax was paid). Contact on \$100.0000000000000000000000000000000000	or less? Ires from the prior year? Irection 501(c)(4), section 5 Irection 501(c)(4), secti	1 2a 2b 2c 3 4 5	line 3	2 3 Dr se is											

DLN: 93493136046861

OMB No 1545-0047

Open to Public Inspection

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.

Name of the organization **Employer identification number** Saint Xavier University 36-2177133

Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99		unds	or Accounts	. Complet	te if the
	organization answered Tes to Form 33	(a) Donor advised funds	((b) Funds and o	ther accou	nts
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 advi		or adv	sed	┌ Yes	┌ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for ar	ny othe	r purpose	☐ Yes	┌ No
Pa	rt III Conservation Easements. Complete	ıf the organization answered "Yes" t	o Forn	n 990, Part IV	, line 7.	
2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality	on or pleasure) Preservation of an Preservation of a c	ertıfıe	d historic struct		a
	easement on the last day of the tax year	I		Held at the		V
а	Total number of conservation easements		2a	Heid at the	Ena of the	Year 1
b	Total acreage restricted by conservation easements		2b			21 40
c	Number of conservation easements on a certified his	•	2c			21 40
d	Number of conservation easements included in (c) as	• • • • • • • • • • • • • • • • • • • •	2d			
	• •				4	
3	Number of conservation easements modified, transfe the taxable year •	rred, released, extinguished, or terminate	аруп	ie organization i	uuring	
4	Number of states where property subject to conserva	ation easement is located 🕨1				
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	g the periodic monitoring, inspection, hand ?	dling of	violations, and	☐ Yes	√ No
6	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents d	uring the year 🕨		
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	durin	g the year 🟲 🖇 _		
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of sec	tion		☐ Yes	✓ No
9	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	the footnote to the organization's financial		•		
Par	TIII Organizations Maintaining Collection Complete if the organization answered '		or Ot	her Similar <i>i</i>	Assets.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in fu			₽,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii			•	
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA:		r finan			
а	Revenues included in Form 990, Part VIII, line 1			► \$		

Cat No 52283D

Schedule D (Form 990) 2009

b Assets included in Form 990, Part X

ar	Titl Organizations Maintaining Co	<u>llections of Art</u>	<u>, Hist</u>	toric	<u>:al Tre</u>	asu	ires, or (<u> 2the</u>	<u>r Similai</u>	r Asse	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of the	e follo	owing th	at ar	e a signific	ant ι	ise of its co	llectio	n	
а	Public exhibition		d	\sqcap	Loan or	exc	hange prog	rams	;			
b	Scholarly research		e	Γ	Other							
С	Preservation for future generations											
ŀ	Provide a description of the organization's co Part XIV	ollections and explai	ın how	they	further	the	organizatio	n's e	xempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								nılar	Г	Yes	┌ No
Pa i	t IV Escrow and Custodial Arrang						n answere	ed "Y	es" to For	m 990),	
	Part IV, line 9, or reported an ar											
.a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ons	or other as	sets	not	Γ	Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	√ and complete the f	followi	ng ta	ble				1			
_								٠.	1	A mou	ınt	
с	Beginning balance							1c	-			
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
a	Did the organization include an amount on Fe	orm 990, Part X, line	21?							Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	/										
a	rt V Endowment Funds. Complete											
		(a)Current Year	(b)	Prior \		(c) ⊤	wo Years Bac	k (d)Three Years	Back (e	e)Four Ye	ears Back
а	Beginning of year balance	9,680,208			482,378			_				
b	Contributions	119,676			200,402			\perp				
С	Investment earnings or losses	1,232,014			486,957			_				
d	Grants or scholarships	149,093			103,356			_				
e	Other expenditures for facilities and programs	3,323,743			412,259							
f	Administrative expenses	15,906										
g	End of year balance	7,543,156		9,	680,208							
	Provide the estimated percentage of the yea	r end balance held a	ıs							<u> </u>		
а	Board designated or quasi-endowment	11.000 %										
_	Permanent endowment > 89.000 %											
ь	remanent endowment F											
c a	Term endowment 4 0 % Are there endowment funds not in the posse	ssion of the organize	tion t	hat a	ro hold s	and a	dministore	d for	tho			
a	organization by	ssion of the organiza	1011 0	nat a	re neiu e	and c	aummstere	: u 101	tile		Yes	No
	(i) unrelated organizations									3a(i)		Νο
	(ii) related organizations					•				3a(ii)		Νo
Ь	If "Yes" to 3a(II), are the related organization	•								3b		
•	Describe in Part XIV the intended uses of th											
a l	t VI Investments—Land, Buildings	s, and Equipme	nt. Se	ee Fo	orm 990	0, P	art X, line	10.	1			
	Description of investment				Cost or oth (Investme		(b)Cost or o basis (othe		(c) Accumu depreciat		(d) Boo	k value
а	Land						15,01	6,273			15	5,016,273
b	Buildings		. [118,94	9,595	29,67	4,958	89	,274,637
c	Leasehold improvements		. [
d	Equipment		. [31,33	2,790	24,35	51,089	(5,981,701
e	Other		. [2,85	0,344			-	2,850,344

114,122,955

(a) Description of security or category	Form 990, Part X, line 12 		od of valuation
(including name of security)	(b)Book value		f-year market value
Financial derivatives			
Closely-held equity interests Other			
- Cities			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line :	13.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
(a) Becompared of interest in the control of the co	(D) Book Yalas	Cost or end-o	f-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, III (a) Descrip			(b) Book value
(a) Descrip	tion		(b) book value
Takel (Column (b) should agual Form 2000 Park V sal (P) line 1			
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990 Part X			
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability			
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes conditional asset retirement obligation	, line 25. (b) A mount 3,027,012		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits	, line 25. (b) A mount 3,027,012 110,199		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits Interest Rate Swap	, line 25. (b) A mount 3,027,012 110,199 1,684,322		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits Interest Rate Swap	, line 25. (b) A mount 3,027,012 110,199 1,684,322		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits Interest Rate Swap	, line 25. (b) A mount 3,027,012 110,199 1,684,322		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits Interest Rate Swap	, line 25. (b) A mount 3,027,012 110,199 1,684,322		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits Interest Rate Swap	, line 25. (b) A mount 3,027,012 110,199 1,684,322		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits Interest Rate Swap	, line 25. (b) A mount 3,027,012 110,199 1,684,322		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits Interest Rate Swap	, line 25. (b) A mount 3,027,012 110,199 1,684,322		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits Interest Rate Swap	, line 25. (b) A mount 3,027,012 110,199 1,684,322		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes conditional asset retirement obligation student deposits Interest Rate Swap	, line 25. (b) A mount 3,027,012 110,199 1,684,322		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	100,516,886
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	100,685,397
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-168,511
4	Net unrealized gains (losses) on investments	4	2,885,167
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	-1,526,747
8	Other (Describe in Part XIV)	8	293,775
9	Total adjustments (net) Add lines 4 - 8	9	1,652,195
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,483,684
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	per Retu	ırn
1	Total revenue, gains, and other support per audited financial statements	1	80,354,486
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	3,178,942
3	Subtract line 2e from line 1	3	77,175,544
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	23,341,342
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	100,516,886
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Re	
1	Total expenses and losses per audited financial statements	1 1	78,870,802
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	C
3	Subtract line 2e from line 1	3	78,870,802
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]	
b	Other (Describe in Part XIV) 4b 21,814,595		
c	Add lines 4a and 4b	4c	21,814,595
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	100,685,397
Pai	rt XIV Supplemental Information		

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

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

Ident if ier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	The purpose of the Endowment Fund is to facilitate donors' desires to make substantial long-term gifts to the community and to develop a new and significant source of revenue for the University In so doing, the Endowment Fund will provide a secure, long-term source of funds to 1) stabilize agency funding during periods of below normal annual campaigns, 2) fund special grants 3) ensure long-term growth 4) enhance our ability to meet changing community needs in both the short and long-term, and, 5) support the administrative expenses of the University as deemed appropriate
Part X	Description of Uncertain Tax Positions Under FIN 48	The University is exempt from federal income taxes under the provisions of Section 501(c)(3) of the Internal Revenue Code In July 2006, the Financial Accounting Standards Board (FASB) issued FASB Interpretation No 48 (Fin 48), Accounting for Uncertainty in Income Taxes FIN 48 clarifies the accounting for uncertainity in income taxes recognized in an entity's financial statements in accordance with the STatement on Financial Accounting Standards NO 109, Accounting for Income Taxes Saint Xavier University adopted FIN 48 during the year ended June 30, 2008 The adoption had no impact on the financial statements
Part XI, Line 8 - Other Adjustments		Increase in fair value of interest rate swap 293775
Part XII, Line 2d - Other Adjustments		Increase in Interest Rate Swap Fair Value 293775
Part XII, Line 4b - Other Adjustments		Institutional Financial Aid 21814595 PRIOR PERIOD ADJUSTMENT TO NET TUITION REVENUE 1526747
Part XIII, Line 4b - Other Adjustments		Institutional Financial Aid 21814595

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization Saint Xavier University

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Employer identification number

	36-2177133			
			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		100	
	that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain	3	Yes	
	SXU publishes their racially nondiscriminatory policy on their website at www.sxu.edu. The University seeks students of diverse talents, experiences, knowledge, interests, and cultures who are willing to learn, and to seek excellence in themselves and others. One of the core values of the University is Diversity. Diversity builds a community that fosters a climate that is open and welcoming to diverse people, ideas, and perspectives, that promotes a constructive discourse on the nature of diversity, and that engages faculty, staff and students in activities that promote the University's core values. SXU admits qualified students without regard to race, religion, age, sex, national or ethnic origin. The University does not discriminate against handicapped persons who are otherwise qualified to participate in the intellectual and social life of the University.			
4	Does the organization maintain the following?			
а	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	
5	Does the organization discriminate by race in any way with respect to			
	Students' rights or privileges?	5a		Νo
Ь	Admissions policies?	5b		Νo
С	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		Νo
	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
	Does the organization receive any financial aid or assistance from a governmental agency?	6a		Νo
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) 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	7	Yes	

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DLN: 93493136046861

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

Employer identification number

Department of the Treasury Internal Revenue Service

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.

Saint Xavier University 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. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Internet and e-mail solicitations Solicitation of government grants Special fundraising events Phone solicitations In-person solicitations 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? 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 (iii) Dıd fundraiser have (v) A mount paid to (vi) A mount paid to (i) Name of individual (iv) Gross receipts (or retained by) custody or (ii) Activity (or retained by) or entity (fundraiser) fundraiser listed in control of from activity organization contributions? col (i) No Yes

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

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form					report	ed
			(a) Event #1	(b) Event #2 Golf Outing	(c) O ther Events	(Add col	tal Eve (a) the	
			(event type)	(event type)	(total number)			
Revenue	1	Gross receipts	455,540	138,045			59	3,585
Reve	2	Less Charitable contributions	336,240	112,101			448	8,341
	3	Gross income (line 1 minus line 2)	119,300	25,944			14!	5,244
	4	Cash prizes						
စ္က	5	Non-cash prizes						
Direct Expenses	6	Rent/facility costs				<u> </u>		
鲎	7	Food and beverages						
irect	8	Entertainment						
	9	Other direct expenses .	119,300	25,944		 	14!	5,244
	10	Direct expense summary Add lin					14!	5,244
	11	Net income summary Combine li			.			0
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii	rganızatıon answered ne 6a.	"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e than	1
₽			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot		
Revenue				biligo/progressive biligo			(a) (iii	rougn
~	1	Gross revenue						
s S	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	Yes	Г Yes	Yes			
			Гио	По	Гио			
	7	Direct expense summary Add line	s 2 through 5 in column (d)				
	8	Net gaming income summary Com	nbine lines 1, column d, ai	nd line 7				
9	Ent	tor the state(s) in which the organiz		tuutioo			Yes	No
a		ter the state(s) in which the organiza the organization licensed to operate			-	. 9a		
b	If"	'No," Explain						
						_		
10a	— We	re any of the organization's gaming	licenses revoked, susper	ided or terminated during	the tax year?	 10a		
b		'Yes," Explain	, .	5	,	100		
11		es the organization operate gaming	activities with nonmembe	rs?				
12		the organization a grantor, beneficia						
	for	med to administer charitable gaming	³			. 12		
					Schedule G (Form 9	990 or 990	-EZ) 20	09

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
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?	,	
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			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
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 ▶ \$	1	

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DLN: 93493136046861 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

Open to Public **Inspection**

Saint Xavier University	36-2177133	
· · · · · · · · · · · · · · · · · · ·	30-21//133	
Part I General Information on Grants and Assistance		
 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance the selection criteria used to award the grants or assistance?		✓ Yes
Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more IV and Schedule I-1 (Form 990) if additional space is needed	nore than \$5,00	0. Use
	Description of cash assistance	(h) Purpose of gran or assistance
2 Enter total number of section 501(c)(3) and government organizations		

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Par	t 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)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Institutional Awards	3047	21,693,633			
Endowed and Named Scholarships	65	120,962			
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.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 The University's office of Financial Aid, administers a wide variety of federal, state, institutional and private financial assistance programs. It's major objective is the equitable distribution of financial aid to all students. The Organization services in order to help students finance their education. Recipients are determined by academic merit, as well as federal, state and institutional guidelines. Financial aid and scholarships are applied toward tuition charges only and recipients must maintain certain eligiblity requirements to receive them.

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DLN: 93493136046861

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Open to Public Inspection

Saır	it Xavier University		36-2177133			
Pa	rt I Questions Regarding Compensation		30-2177133			
					Yes	Νο
1a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III t					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	Г	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 organism termbursement orprovision of all the expenses described.			1b	Yes	
2	Did the organization require substantiation prior to recofficers, directors, trustees, and the CEO/Executive I			2		Νο
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all tha ✓ Compensation committee ✓ Independent compensation consultant ✓ Form 990 of other organizations		y Written employment contract			
4	During the year, did any person listed in Form 990, Pa or a related organization	art V I	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pa	aymei	nt?	4a		No
Ь	Participate in, or receive payment from, a supplement	al nor	nqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-bas	ed co	ompensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde tl	ne applicable amounts for each item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must For persons listed in form 990, Part VII, Section A, li compensation contingent on the revenues of					
а	The organization?			5a		No
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, li compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7		No
8	Were any amounts reported in Form 990, Part VII, pa subject to the initial contract exception described in F in Part III		·	8		No
9	If "Yes" to line 8, did the organization also follow the	rebutt	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Angela Durante	(I) (II)	182,747 0	0	0	0	8,593 0	191,340 0	0 0
Steve Murphy	(1) (11)	151,913 0	0	0	0	l '	170,342 0	0
James Brodzinski	(I) (II)	152,731 0	0	0	0		172,982 0	0
Judith Dwyer	(I) (II)	352,973 0	0	0	15,000 0	6,625 0	374,598 0	0
Susan Piros	(I) (II)	124,706 0	0	0	0	·	138,089	0

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
Pa	art I, Line 4a	Judith Dwyer, former President, participated in a 457 (f) retierement plan

Schedule J (Form 990) 2009

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DLN: 93493136046861

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

Name of the organization Saint Xavier University Employer identification number

36-2177133

P	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	e Price	(f) Des	crıptıon of	Purpose	(g) Defeased		Beh	On alf of suer
											Yes	No	Yes	No
A	Illinois Finance Authority Series 2008 Bonds	86-1091967	45200FLH0	06-25-	2008	25,0	000,000	Residence H	Iall Constr	uction		х		х
В	Illinois Finance Authority Series 2006 Bonds	86-1091967	45200BYZ5	06-08-	2006	10,0	000,000	residence H	all Constru	ıctıon		х		х
Pa	art III Proceeds	<u> </u>												
					A		В	(С	C)		Е	
1	Total proceeds of issue													
2	Gross proceeds in reserve funds													
3	Proceeds in refunding or defeasa	nce escrows												
4	Other unspent proceeds													
5	5 Issuance costs from proceeds													
6	Working capital expenditures from	m proceeds												
7	Capital expenditures from procee	eds												
8	Year of substantial completion									1				
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of	a current refunding is	ssue?											
10	Were the bonds issued as part of	an advance refunding	j issue?											
11	Has the final allocation of procee	ds been made?												
12		dequate books and re	ecords to support the											
Pa	rt IIII Private Business Use	<u> </u>			<u> </u>									
					A		В	(С	C)		Е	
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
1	Was the organization a partner in which owned property financed by		nember of an LLC,											
2	Are there any lease arrangement which may result in private busin		financed property											
For	Privacy Act and Panerwork Reduction A	Act Notice see the Inst	ructions for Form 990			Cat No. 5					Schedule	K (Form	990) 20	109

3 Cileudie r	(101111 990) 2009							
Part III	Private Business Use (Continued)							
			A	E	3	(С	
		Yes	No	Yes	No	Yes	No	Ye

			<i>F</i>	4	6	5	'	C		D		E
			Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
За	Are there any management or service contracts with respect to financed property which may result in private business use?	the										
3b	Are there any research agreements with respect to the financed which may result in private business use?	d property										
Зс	Does the organization routinely engage bond counsel or other o counsel to review any management or service contracts or reseason											
4	Enter the percentage of financed property used in a private bus by entities other than a section 501(c)(3) organization or a sta government											
5	Enter the percentage of financed property used in a private bus as a result of unrelated trade or business activity carried on by organization, another section 501(c)(3) organization, or a state government	your										
5	Total of lines 4 and 5											
7	Has the organization adopted management practices and proce ensure the post-issuance compliance of its tax-exempt bond li											
Par	t IV Arbitrage		•					•	•	'		•
			A		В		С		D		l	E
		Yes	No	Yes	No	Yes	s N	lo	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?											
2	Is the bond issue a variable rate issue?											
За	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?											
b	Name of provider						_		·			
С	Term of hedge											
1a	Were gross proceeds invested in a GIC?											
b	Name of provider											
С	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?											
5	Did the bond issue qualify for an exception to rebate?											

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DLN: 93493136046861

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Schedule L

Name of the organization **Employer identification number** Saint Xavier University 36-2177133

Complete if the organizat (a) Name of disqu								,		rrected
1 (a) Name of disqu	Janned	person		(b) Desc	riptio	n of transa	action		Yes	No
										+
2 Enter the amount of tax impos section 49583 Enter the amount of tax, if any							ear unde	r • \$	•	
3 Enter the amount of tax, if any	, 011 1111	e 2, abo	ve, remibursed by t	ine organization :	•	• •		Ψ		
Part II Loans to and/or I										
Complete if the organiz	ation a I	nswere	d "Yes" on Form 99	0, Part IV, line 26	, or Fo	rm 990-E			1	
(a) Name of interested person and purpose	or fro	oan to om the zation?	(c)O riginal principal amount	(d)Balance due) In ult?	(f) Approved by board or committee?		(g)Written agreement?	
	То	From			Yes	No	Yes	No	Yes	No
							1	1	1	
			.						1	
otal				Dawasas						
Part IIII Grants or Assistar Complete if the orga					/ line	27				
•			Relationship bety							
(a) Name of interested pers	on	,		rganization		(c)A m	ount of g	rant or ty	pe of assis	tance
see Schedule O							_			
		N/A				Scholars	nip A mou	nt \$ 2476	57	
Part IV Business Transact Complete if the orga					/, line	28a, 28	b, or 28	c.		
(a) Name of interested person		betv	Relationship ween interested rson and the	(c) A mount of transaction		(d) Desc	ription of	transactio	organ	naring o ization' enues?
		(organization						Yes	No
		-			\dashv					

Software ID: Software Version:

EIN: 36-2177133

Name: Saint Xavier University

DLN: 93493136046861

SCHEDULE 0

(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.

2009

OMB No 1545-0047

Open to Public Inspection

Name of the organization Saint Xavier University Employer identification number

36-2177133

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Board of Trustee's Brian Shannon, Jr and Peter M Shannon III have a family relationship

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The University's management reviews the Form 990 in detail with their paid tax preparers. The Form 990 is then presented to the audit committee, a subcommittee of the organization's governing body, for review and approval prior to filing with the IRS.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		The organization's conflict of interest policy covers all officers, directors, trustees, and key employees. These individuals are required to complete a conflict of interest questionaire to disclose any potential or actual conflicts of interest they may have with the organization. Conflict of interest questionnaires are completed on an annual basis by all interested persons. Completed conflict of interest questionairres will be reviewed by the organization's compliance officer (or chairman). If it is determined an actual conflict of interest exists, the individual with a conflict will be excused from any discussion or vote on the matter for which they have a conflict.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		The University's independent executive committee of the Board of Directors utilizes comparability data from compensation surveys and studies to determine, evaluate and adjust the compensation of the organization's top management official, the President, on an annual basis. The final compensation package is subject to the full executive committee's review and approval and is documented in a written employee contract. Deliberations and decisions regarding the compensation package are documented in the minutes of the meeting. Process used to establish compensation for other officers Form 990, Part VI, Section B, Line 15b Compensation of the University's other officer's is determined, evaluated and reviewed by University President and subsequently approved by the Board of Directors on an annual basis. The President utilizes comparability data from compensation surveys as a basis for this determination. The final compensation packages of the University's other officers is documented in a written employment contract. Deliberations and decisions regarding the compensation packages are documented in the minutes of the Board meeting. Faculty compensation is based on collective bargaining agreement which is renew ed every three years.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Financial statements, governing documents, and conflict of interest policies are not required disclosures pursuant to Internal Revenue Code Section 6104. These documents are not available to the public at this time.

ldentifier	Return Reference	Explanation
		Schedule L Part III Grants or assistance benefitting interested persons Pursuant to IRS FAQs issued in November 2009 for Schedule L, grants or assistance provided to interested persons or their family members for travel, study, or other similar purposes are reported in Part III of Schedule L. Recognizing privacy issues, the types of reporting required in Part III for colleges and universities is limited. The school is not required to identify individuals to whom it provided such assistance. Instead, these organizations must group each type of financial assistance (e.g., needbased, merit discounted tuition, etc.) Therefore, columns (a) and (b) were intentionally left blank.