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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)

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

2010

Open to Public Inspection

A Fo	r the 2	2010 ca	ılendar year, or tax year begin	ning 06-01-2010 and ending 05-31-20	11			
B Ch	eck ıf ap	plicable	C Name of organization UNIVERSITY OF SAN FRANCISCO			D Emplo	yer i	identification number
- Add	dress cha	ange				94-1:	156	628
— Nai	me chan	nge	Doing Business As			E Teleph	one	number
— _{Init}	tial retur	n	Number and street (or P O box i	f mail is not delivered to street address)	Room/suite	(415)	1423	2-6522
– Ter	mınated	I	2130 FULTON STREET	a. is not done order to street address,	integrity bance	(413)	1422	2-0322
– _{Am}	ended r	eturn	City or town, state or country, ar	nd ZIP + 4		G Gross	receip	ots \$ 412,905,311
_ 	nlication	pending	SAN FRANCÍSCO, CA 94117					
71	Silection	pending	F Name and address of p	www.mainalaffi.aan	1			
			Fr PRIVETT SJ	Tincipal officer	H(a) Is this a	group return f	or affil	ıates?
			2130 Fulton Street	7	H(b) Are all	affiliates inc	luded	?
			San Francisco, CA 94117	,	If "No	o," attach	a lis	t (see instructions)
r Ta	x-exem	pt status	▼ 501(c)(3)	¶ (insert no)	H(c) Grou	p exempti	on n	umber 🟲
				(113511116)	-			
J W	ebsite	: F www	w usfca edu		<u> </u>			
		anızatıon	Corporation Trust Associa	ition Cther ►	L Year of for	rmation 193	30	M State of legal domicile CA
Pa	rt I	Sum	mary					
				sion or most significant activities				
				the Jesuit Catholic tradition The Univer ded to succeed, and the values and sen				
సై	_	tauciits	the knowledge and skins hee	aca to sacceed, and the values and sen	sitivity ilecessi	119 10 00 11	icii (and women for others
፸								
<u> </u>	_							
Governance	2 C	Check th	nis box দ if the organization	discontinued its operations or disposed	of more than 2	5% of its	neta	assets
	3 N	lumber	of voting members of the gove	rning body (Part VI, line 1a)	•		3	44
Activities &	4 N	lumber	of independent voting member	s of the governing body (Part VI, line 1)		4	44
	5 T	otal nui	mber of individuals employed i	n calendar year 2010 (Part V, line 2a)			5	5,366
្ន			mber of volunteers (estimate i	• •		_	6	238
				Part VIII, column (C), line 12		<u> </u>	7a	1,160,263
	b N	let unre	lated business taxable income	e from Form 990-T, line 34			7b	
					Prio	r Year	_	Current Year
o o	8		butions and grants (Part VIII,	27,090,0 297,679,4	_	42,851,120		
Ravenue	9		m service revenue (Part VIII	325,330,381				
ξ	10		ment income (Part VIII, colu	10,727,535				
_	11			.), lines 5, 6d, 8c, 9c, 10c, and 11e) l 1 (must equal Part VIII, column (A), li		-101,3	86	1,866,128
	12		=	· · · · · · · · · · · · · · ·	3	34,142,6	33	380,775,164
	13			urt IX, column (A), lines 1-3)		67,669,2	38	71,389,354
	14	Benefi	ts paid to or for members (Par	t IX, column (A), line 4)				0
76	15	Salarıe	es, other compensation, emplo	yee benefits (Part IX, column (A), lines				
Expenses		10)			1	160,399,7	-+	168,527,377
₹	16a		- '	X, column (A), line 11e)		13,6	00	0
ठ	b		ndraising expenses (Part IX, column	· · · · · · · · · · · · · · · · · · ·				
	17), lines 11a-11d, 11f-24f)		80,217,6	-	85,586,921
	18			nust equal Part IX, column (A), line 25)	3	308,300,2	-	325,503,652
. 09	19	Keven	ue Iess expenses Subtract Iir	ne 18 from line 12		25,842,4	-	55,271,512
ම් ජ ම්ක						g of Curren ear	it	End of Year
10 mg	20	Totala	assets (Part X, line 16)			562,617,9	41	750,173,403
Net Assets or Fund Balances	21					251,507,1		256,599,263
25	22			ct line 21 from line 20		, , , , , 111,110,7	-	493,574,140
Pai	t II		ature Block			, ,		, ,
Unde know	r penalt	ties of po	erjury, I declare that I have exan	nined this return, including accompanying te. Declaration of preparer (other than offic				
		****	**		20	12-04-12		
Sign	,	I B	iture of officer			nte		
Her		. Charl	es E Cross VP - Bus & Finance					
			or print name and title					
	I	L r Print/Typ∈		Preparer's signature	Date 1	Check if self	_	PTIN
Paid	<u> </u>	preparer's		Sharon Zorbach		employed 🕨	<u> </u>	
Prepa	arer L		me P Deloitte Tax LLP					Firm's EIN •
Use (1 6	Fırm's add	iress 🕨 225 W SANTA CLARA ST					Phone no • (408) 704-
,			SAN JOSE, CA 95113					4000

May the IRS discuss this return with the preparer shown above? (see instructions)

┌Yes ┌No

Par		of Program Servedule O contains a res		llishments uestion in this Part II	ı	
PERS HOU	UNIVERSITY OF SA	ATE LEADERS WHO UXILIARY SERVICE	PRIVATE JESU WILL FASHION S FOR ITS FAC	A MORE HUMANE A	ND JUST WORLD THE	EDUCATION WITH A GLOBAL UNIVERSITY PROVIDES RVICES ARE DIRECTLY
2	the prior Form 990 o	or 990-EZ?		ervices during the yea	r which were not listed	on
3	Did the organization services?		make significar	nt changes in how it c	onducts, any program	
4	Describe the exemp Section 501(c)(3) a	nd 501(c)(4) organiza	nts for each of th ations and secti			ces by expenses ne amount of grants and
4a	(Code) (Expenses \$	129,631,950	,	71,389,354) (Rever	' ' ' '
					E IS TO CONTRIBUTE TO THE OLLEGIATE ATHLETIC PROGR	STUDENTS' EMOTIONAL AND PHYSICAL AMS
4b) (Expenses \$ ERSITY PROVIDES ACADEN mately 11,200 STUDENTS		SOCIATED RESEARCH, ANI) (Reven) SERVICES DEDICATED TO S	ue \$ 289,374,276) SCHOLARSHIP AND THE JESUIT CATHOLIC
4c	(Code) (Expenses \$	27,389,428	ıncludıng grants of \$) (Reven	ue \$ 32,301,352)
		INCLUDES EXPENDITURES STUDENT HEALTH Service		PORTING ACTIVITIES OF T	HE UNIVERSITY SUCH AS TH	E OPERATION OF RESIDENCE HALLS,
4d	Other program serv	vices (Describe in Sc 2,883,041 ir	hedule O)	of \$) (Revenue \$	2,205)
	Total program serv	· · ·	286.438.91	· ·		· ,

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? $^{f 2}$	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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b		No
c	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.	11c		No
d	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.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	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, Parts III and IV .	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Yes	
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 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		Νο
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
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	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect 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	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
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		Νο
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Νo
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 481			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> 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?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►OC			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
E-	Was the organization a party to a prohibited toy chalter transaction at any time divine the tay year?	5a		NI ~
5a h	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No No
		5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		No
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νο
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		No
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		Νo
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		No
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		Νo
9	Sponsoring organizations maintaining donor advised funds.	_		
_	Did the organization make any taxable distributions under section 4966?	9a		N o
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10 a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b	1		
-	facilities	1		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	against amounts due or received from them).........	†		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. See the instructions for additional information the organization must report on Schedule O	13a		Νo
		L		
b	Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans Enter the amount of recognics on hand	1		
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νο
Ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		Νo

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 at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
3	other officer, director, trustee, or key employee?	2		No
3	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
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		No
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal			11.0
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		No
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	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	
	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		No
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►CA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			

(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

Own website 🔽 Another's website 🔽 Upon request

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 Charles Cross VP for BF

2130 FULTON ST

SAN FRANCISCO, CA 94117 (415) 422-6522

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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, if any 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, and 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 neither the organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	Posi		C) (che	cka			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Officei Institutional Trustee Individual trustee or director		Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										
-										
			<u> </u>							

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per	1	(C) Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation from related	ı	(F) Estima amount o compens	ated fother	
		week (describe hours for related organizations in Schedule O)	Officer Institutional Trustee Individual trustee or clirector		Officei	Kej emplojee	Former Highest compensated employee		organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		from the organization and related organizations		
See A	dditional Data Table													
											+			
											+			
											+			
											_			
											_			
1b	Sub-Total													
_с	Total from continuation sheets						•		1,051,115				256.267	
d	Total (add lines 1b and 1c)						•	-	4,361,446			•	356,267	
2	Total number of individuals (incl \$100,000 in reportable compen						above) who	received more tha	n				
												Yes	No	
3	Did the organization list any fori on line 1a? <i>If</i> "Yes," complete Sch									ated employee	3	Yes		
4	For any individual listed on line 3 organization and related organization and related organization.										4	Yes		
5	Did any person listed on line 1a	receive or accri	ue comr	- oensa	- ation	fror	n anv	- unrel	ated organization o	r individual for	4	res		
-	services rendered to the organiz										5		No	

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Swinerton Builders Inc 260 Townsend Street San Francisco, CA 94107	Construction	3,867,476
Schikore Constr Inc 2200 Pine View Way Ste G Petaluma, CA 94954	Construction	2,224,053
NBBJ 130 Sutter Street 2nd Floor San Francisco, CA 94104	Architecture	1,234,037
Gelling & Judd Inc PO Box 410987 San Francisco, CA 94141	Construction	879,391
Able Building Maintenance Co 868 Folsom St SF, CA 94107	Building Maintenance	4,391,617
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►39	who received more than	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

A	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c	-		D)	
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	71,389,354	71,389,354		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,365,458	1,362,511	1,720,051	282,896
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	323,721	323,721		
7	Other salaries and wages	106,387,171	91,229,532	13,064,432	2,093,207
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	9,491,815	8,264,660	989,338	237,817
9	Other employee benefits	40,115,456	34,929,106	4,181,260	1,005,090
10	Payroll taxes	8,843,756	7,700,386	921,790	221,580
а	Fees for services (non-employees) Management	464,462	160,871	303,591	
b	Legal	884,133	210,343	664,771	9,019
c	Accounting	396,194	30,313	365,881	
d	Lobbying	188,838		188,838	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	590,243		590,243	
g	Other	8,771,145	6,383,785	2,155,208	232,152
12	Advertising and promotion	2,520,662	2,348,031	165,993	6,638
13	Office expenses	8,393,028	5,788,806	2,113,952	490,270
14	Information technology	2,019,968	420,036	1,590,208	9,724
15	Royalties	0			
16	Occupancy	15,193,926	15,003,544	189,586	796
17	Travel	8,280,227	7,323,839	674,135	282,253
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	726,536	560,520	143,600	22,416
20	Interest	7,450,796	7,078,998	371,798	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	14,850,195	14,591,083	259,112	
23	Insurance	3,197,572	2,848,898	348,674	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	Vehicle Expense	261,244	193,448	64,949	2,847
b	SUBCRIPTION & DUES	1,492,344	862,915	555,618	73,811
С	HONORARIA & AWARDS	295,573	252,332	31,162	12,079
d	GENERAL EXPENSES	9,609,835	7,181,878	2,248,383	179,574
e					
f	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24f	325,503,652	286,438,910	33,902,573	5,162,169
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
				F	m 990 (2010)

Part X Balance Sheet (A) (B) Beginning of year End of year 1 1 2 Savings and temporary cash investments 82,299,211 112.364.658 23,334,526 18,481,921 3 8,519,997 4 7,195,006 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 1,023,000 5 901,934 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 0 6 20,765,373 18,470,028 8 8 0 8,662,491 9 7,634,727 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete 480, 105, 049 10a Part VI of Schedule D 140,647,229 ь Less accumulated depreciation 10b 324,359,834 **10c** 339,457,820 113.982.399 11 11 138, 155, 101 12 0 12 Investments—other securities See Part IV, line 11 0 13 13 Investments—program-related See Part IV, line 11 . . 0 14 14 84.523.715 15 102,659,603 15 16 662.617.941 16 750, 173, 403 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 32,623,247 17 39.774.637 17 Accounts payable and accrued expenses . 18 18 22.485.892 19 19 28.725.708 167,470,000 20 20 162,594,677 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 28.928.026 25 25,504,241 Other liabilities Complete Part X of Schedule D 251,507,165 26 26 256,599,263 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 239,737,865 290,073,332 Temporarily restricted net assets 59,287,225 89,296,125 28 28 Fund 112,085,686 29 114,204,683 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 411,110,776 33 493,574,140 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 662,617,941 750,173,403

Pal	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		380.7	775,16
2	Total expenses (must equal Part IX, column (A), line 25)	2		•	503,65
3	Revenue less expenses Subtract line 2 from line 1	3		55,2	271,51
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		411,1	L10,77
5	Other changes in net assets or fund balances (explain in Schedule O)	5		27,1	191,85
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		493,5	574,140
Par	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	·
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			Yes	No
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 is on a separate basis, consolidated basis, or both	sued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	•	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

DLN: 93493103004152

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

UNIVERSITY OF SAN FRANCISCO 94-1156628

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

	Ji yaili.			e loulidation becaus			-				
1	_			on of churches, or as				ction 170(b)(1)(A)(i).		
2	굣			I in section 170(b)(1							
3	<u> </u>			perative hospital ser							
4	ı			n organization operat ty, and state	ed in conjun	ction with a	hospital desc	ribed in sec t	tion 170(b)(1)(A)(iii). E	Enter the
5	Γ	An orga	nızatıon op	erated for the benefit	of a college	or universit	y owned or op	perated by a	government	al unit desc	rıbed ın
		section	170(b)(1)(A)(iv). (Complete Pa	art II)						
6	\sqcap	A feder	al, state, or	local government or	government	al unit desci	rıbed ın secti o	on 170(b)(1)(A)(v).		
7	Γ	describ	ed ın	at normally receives A)(vi) (Complete Pa		l part of its :	support from	a governmei	ntal unit or fr	om the gen	eral public
8	_			described in section		Al(vi) (Com	nnlete Part II	1			
9	<u>'</u>			at normally receives			•	•	utions mam	harchin faa	e and arose
•	'	_		ities related to its ex							
		•		oss investment incor	•	-			, ,		
			_	janization after June				•		.ux/ IIOIII be	2311163363
10	Г			janized and operated							
11	<u>'</u>			janized and operated						carry out	the nurnoses of
	,	one or r	more publicl	y supported organization by Type II	atıons descri ortıng organı	bed in secti zation and c	on 509(a)(1)	or section 5 11e throug	509(a)(2) Se h 11h	e section 5	
e f g	ı	other the section If the ocheck the Since A	nan foundati 509(a)(2) rganization his box ugust 17, 2	ox, I certify that the on managers and oth received a written de	etermination	or more pub	licly supporte	d organizati	ons describe	ed in sectio	n 509(a)(1) or
			g persons? rson who du	rectly or indirectly c	ontrols, eithe	eralone orto	ogether with r	ersons desc	cribed in (ii)		Yes No
				governing body of th	•		-			110	
			•	er of a person describ		_				11g	
			•	led entity of a persor			bove?			11g	
h				ng information about							· /
(ii) Name of supported organization Organization EIN Innes 1 - 9 above or IRC section (see instructions))		Type of organization (described on ted EIN lines 1-9 above		(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is th organizat col (i) org	e ion in anized	(vii) A mount of support	
		Yes	No	Yes	No	Yes	No				
				• • • • • • • • • • • • • • • • • • • •							
ota	1										

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	dider rate III. If the	organización i	ans to quanty t	maci die tests	iisted below, pie	case complet	c raic III.
S	ection A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from						
Ü	line 4						
S	ection B. Total Support	1				I	
	endar year (or fiscal year beginning						
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
-	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activities	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,
	check this box and stop here	_	r		•	. , . , .	▶ ┌॔
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14	
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15	
							
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec	
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor	. -
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶
r/a	10%-facts-and-circumstances test-						ın.
	is 10% or more, and if the organization made			•			
	in Part IV how the organization mee	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1
ט	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat			•		<u>-</u>	clv
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	ETY ▶ ¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15							
Public support percentage from 2009 Schedule A, Part III, line 15		16							
S	Section D. Computation of Investment Income Percentage								
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17							
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18							

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

DLN: 93493103004152

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," t	to Form 990, Part IV, Line	3, or Form 990-EZ, Part V,	ine 46 (Political Campaign Activities),
then				

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

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

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part ILA. Do not complete Part ILA.

♣ Se	ection 501(c)(3) organizations tha le organization answered "Ye	t have filed form 5766 (election this t have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5	on under section 501	l(h)) Complete Part II-B Do n	ot complete Part II-A
N a	ection 501(c)(4), (5), or (6) organi ame of the organization IVERSITY OF SAN FRANCISCO	zations Complete Part III		Employer iden	tification number
				94-1156628	
Par	131-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	olitical campaign act	tivities in Part IV	
2	Political expenditures			►	\$
3	V olunteer hours				
Par	rt I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1		e tax incurred by the organization			\$
2	Enter the amount of any excis-	e tax incurred by organization ma	nagers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	section 4955 tax, did it file Form	4720 for this year?		
4a	Was a correction made?				┌ Yes
ь	If "Yes," describe in Part IV				
Par		ganization is exempt und	er section 501(c) except section 501	l(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed t	o other organization	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b	¢
4	Did the filing organization file I	Form 1120-POI for this year?			Yes No
5	organization made payments amount of political contributio	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered	om the filing organization's f I to a separate political orga	funds Also enter the nization, such as a
	(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 -

Sc	hedule C (Form 990 or 990-EZ) 2010						Page 2
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c)(3) and fi	led Form 5768	
A B	Check If the filing organization belongs to a Check If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)					(a) Filing Organization's Totals	(b) Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	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	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
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 d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		have to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total		
2a	Lobbying non-taxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
С	Total lobbying expenditures							
d	Grassroots non-taxable amount							
e	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures							

	·····	9
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768	
	(election under section 501(h)).	

		(a	a)	(b)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo		
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV	Yes		188,83	
j	Total lines 1c through 1i			188,83	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo		
b	If "Yes," enter the amount of any tax incurred under section 4912		•		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Νo		

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

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

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

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

Part IV Supplemental Information

Dues, assessments and similar amounts from members

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

Ident if ier	Return Reference	Explanation
Part II-B, Line 1:	Part II-B, Line 11 - Other Activities Description	The University of San Francisco contracts with Cassidy & Associates, Inc. to provide consulting services. In its capacity as a consultant, Cassidy assists the University in pursuing its business and government affairs objectives by planning for organizational and institutional development, establishing priorities among its federal funding objectives, developing and implementing strategic plans, and expanding its government outreach activities.

1

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DLN: 93493103004152

OMB No 1545-0047

2010

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
UNIVERSITY OF SAN FRANCISCO

Employer ider

94-1156628

Employer identification number

				94-1	.130020		
Pa	rt I	Organizations Maintaining Donor Ac organization answered "Yes" to Form 99		unds (or Accounts. Co	mplete i	if the
			(a) Donor advised funds	(b) Funds and other	accounts	
1	Totalr	number at end of year					
2	Aggre	gate contributions to (during year)					
3	Aggre	gate grants from (during year)					
4	Aggre	gate value at end of year					
5		e organization inform all donors and donor advi are the organization's property, subject to the o		nor advi:		Yes [- No
6	usedo	e organization inform all grantees, donors, and only for charitable purposes and not for the ben rring impermissible private benefit			r purpose	Yes [- No
Pa	rt II	Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form	990, Part IV, lin	ie 7.	
1 2	☐ P F Comp	se(s) of conservation easements held by the or reservation of land for public use (e g , recreati rotection of natural habitat reservation of open space lete lines 2a-2d if the organization held a quali	on or pleasure) Preservation of an Preservation of a G	certified	cally importantly la I historic structure nservation	nd area	
	easen	nent on the last day of the tax year					
	T - 4 - 1			<u> </u>	Held at the End	of the Ye	ar
а		number of conservation easements		2a			
Ь		acreage restricted by conservation easements er of conservation easements on a certified his	toris structure included in (a)	2b			
C _ı			` '	2c			
d		er of conservation easements included in (c) ac		2d			
3		er of conservation easements modified, transfe xable year !-	rred, released, extinguished, or terminate	ed by th	e organization durir	ıg	
4	Numb	er of states where property subject to conserva	ition easement is located 🗠				
5		the organization have a written policy regarding ement of the conservation easements it holds?		dling of		Yes [_ No
5	Staff a	and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	nents du	ırıng the year ►		
7	A mou	nt of expenses incurred in monitoring, inspectir	ng, and enforcing conservation easement:	s during	the year ► \$		
8		each conservation easement reported on line 2 i)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion	Г	Yes [- No
9	baland	rt XIV, describe how the organization reports co se sheet, and include, if applicable, the text of t ganization's accounting for conservation easem	he footnote to the organization's financia	•	•	s	
Par	t III	Organizations Maintaining Collectio Complete if the organization answered "		or Oth	ner Similar Ass	ets.	
1a	art, hi	organization elected, as permitted under SFAS storical treasures, or other similar assets held le, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch ın fur			
b	hıstor	organization elected, as permitted under SFAS ical treasures, or other similar assets held for p le the following amounts relating to these items	oublic exhibition, education, or research i				
	(i) Re	venues included in Form 990, Part VIII, line 1			► \$		
	(ii) As	ssets included in Form 990, Part X			► \$		
2	Ifthe	organization received or held works of art, historing amounts required to be reported under SFAS	· · · · · · · · · · · · · · · · · · ·	or financ	'	e	
а		ues included in Form 990, Part VIII, line 1			► \$		202
		,,			· —		

b Assets included in Form 990, Part X

1,274,186

Part	IIII Organizations Maintaining Co	llections of Art,	His	torica	l Treas	sures, or (Othe	r Similar As	sets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of th		_	-			ion	
а	Public exhibition		d	√ Lo	oan or ex	change prog	rams	;		
b	Scholarly research		e	Γ 0	ther					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	ollections and explain	n how	they fu	irther the	e organizatio	n's e	xempt purpose ı	n	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as p	art o	f the org	ganızatıc	on's collectio	n?	ſ	_ Yes	✓ No
Par	Part IV, line 9, or reported an an					on answere	ed "Y	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermed	diary	for cont	ribution	s or other as	sets		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the fo	ollow	ıng table	e	,		1		
								Am	ount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					ı	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV									
Pa	rt V Endowment Funds. Complete							rt IV, line 10. (d)Three Years		
		(a)Current Year	(b)) Prior Yea	ir (e	c) Two Years Ba	ck	Back	(e)Four Y	ears Back
1a	Beginning of year balance	180,183,000		155,71	1,000	202,833,	000			
b	Contributions	2,868,000		11,45		3,445,				
С	Investment earnings or losses	35,593,000		18,72	6,000	-42,138,	000			
d	Grants or scholarships	3,713,612								
е	Other expenditures for facilities and programs	2,664,388								
f	Administrative expenses	1,006,000		5,71	0,000	8,429,	000			
g	End of year balance	211,260,000		180,18	3,000	155,711,	000			
2	Provide the estimated percentage of the yea	r end balance held as	<u> </u>		I		I			
a	Board designated or quasi-endowment	22 000 %								
ь	Permanent endowment ► 51 000 %									
	remailent endowment P									
c 3a	Term endowment • 27 000 % Are there endowment funds not in the posses	ssion of the organization	tion t	hat are	held and	d administers	d for	the		
Ja	organization by	ssion of the organiza		ilat ale	neid and	a dullillilistere	: u 101	tile	Yes	No
	(i) unrelated organizations							3a(i)	No
	(ii) related organizations							3a(i	ii)	No
	If "Yes" to 3a(II), are the related organizatio	•						3b	<u> </u>	No
4	Describe in Part XIV the intended uses of th					Davit V. Juan	10			
Par	t VI Investments—Land, Buildings	s, and Equipmen	I t. 5		•				1	
	Description of investment				t or other vestment)	(b)Cost or o basis (othe		(c) Accumulated depreciation	(d) Bo	ok value
1a	_and			14	4,082,214	16,271	L,248		3	0,353,462
	Buildings					329,813	3,763	102,884,246	22	6,929,517
	_easehold improvements		.							
d I	Equipment		.							
е (Other					119,937	7,824	37,762,983	8	2,174,841

339,457,820

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value		od of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests Other			_
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line		
(a) Description of investment type	(b) Book value		od of valuation
	, ,	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, Irr			
(a) Descrip			(b) Book value
(1) Investments			102,659,603
(-)			
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		102,659,603
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
LIABILITY UNDER SPLIT INTEREST AGRMt	2,040,480		
INTEREST RATE SWAP A GREEMENTS	11,350,374		
FEDERAL STUDENT LOANS REFUNDABLE	10,006,900		
ASSET RETIREMENT OBLIGATIONS	2,106,487		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	25,504,241		

3 Excess or (deficit) for the year Subtract line 2 from line 1 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments	2 325,503,652 3 55,271,512 4 27,191,852 5 6 6 7 8 27,191,852 10 82,463,364
4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments	27,191,852 5 6 7 8 9 27,191,852
5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments	5 6 7 8 27,191,852
6 Investment expenses 7 Prior period adjustments	6 7 8 9 27,191,852
7 Prior period adjustments	7 8 9 27,191,852
The period dejastiments	8 9 27,191,852
	9 27,191,852
· · · · · · · · · · · · · · · · · · ·	<u> </u>
9 Total adjustments (net) Add lines 4 - 8	82,463,364
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return
1 Total revenue, gains, and other support per audited financial statements	408,367,000
A mounts included on line 1 but not on Form 990, Part VIII, line 12	
a 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	27,191,739
3 Subtract line 2e from line 1	381,175,261
4 A mounts included on Form 990, Part VIII, line 12, but not on line 1	
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b Other (Describe in Part XIV)	
c Add lines 4a and 4b	-400,097
5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 5	, ,
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	
Total expenses and losses per audited financial statements	325,904,000
A mounts included on line 1 but not on Form 990, Part IX, line 25	
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses	
d Other (Describe in Part XIV) 2d 251	
e Add lines 2a through 2d	e 251
3 Subtract line 2e from line 1	325,903,749
4 A mounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b Other (Describe in Part XIV)	
c Add lines 4a and 4b	c -400,097
5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) 5	325,503,652
Part 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 XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	Rounding \$251
Part V, Line 4	Part V , Line 4 Intended uses of the endowment fund	The endowment fund is used to provide a relatively predictable, stable and consistent investment return sufficient to fund a variety of operational needs, including scholarships and fellowships, faculty chairs, academic programs, libraries, other endowment programs, and general operations
Part III, Line 4	g	The University of San Francisco maintains and services a collection of rare books which are made available to the university community, its affiliates, academic scholars and the general public The rare book collection is used to enhance teaching, support research, and provide public service

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

UNIVE	RSITY OF SAN FRANCISCO				
		94-1156628			
Pa	rtI			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in in other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student address, and scholarships?		2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broads the period of solicitation for students, or during the registration period if it has no solicitation pro that makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain If you need more space use Part II	gram, ın a way	3	Yes	
4	Does the organization maintain the following?		-		
а	Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes	<u> </u>
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the puwith student admissions, programs, and scholarships?	blic dealing	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II				
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?		5a		No
ь	Admissions policies?		5b		No
c	Employment of faculty or administrative staff?		5c		No
d	Scholarships or other financial assistance?		5d		No
e	Educational policies?		5e		No
f	Use of facilities?		5f		Νo
g	Athletic programs?		5g		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		5h_		No
			1		
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?		6a 6b	Yes	Νο
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II 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 Pa	rt II	7	Yes	1

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
Schedule E, Line 3 - Racially Nondiscriminatory Policy Publicized		THE UNIVERSITY OF SAN FRANCISCO PUBLICIZES ITS RACIALLY NONDISCRIMINATORY POLICY THROUGH PRINT AND BROADCAST MEDIA TO THE GENERAL PUBLIC BOTH ON AND OFF CAMPUS THROUGHOUT THE YEAR This policy is also made available on the University's w ebsite at www usfca edu and in the University's general catalog

Schedule E (Form 990 or 990-EZ) 2010

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As Filed Data -

DLN: 93493103004152

OMB No 1545-0047

2010

Open to Public **Inspection**

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization UNIVERSITY OF SAN FRANCISCO **Employer identification number**

					94-1156628	
Pa	rt I General Informatio "Yes" to Form 990, Pa			ne United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	gibility for the	grants or assis	stance, and the select	ion criteria used to awa	
2	For grant makers. Describe in Pa United States	art V the organiz	zatıon's procedur	es for monitoring the us	e of grant funds outside tl	ne
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed))		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	Cent America & Caribbean	0	0	Investment		1,198,072
	East Asia & the Pacific	3	22	Program Services	Instruction, Recruit	1,962,640
	Sub-total Total from continuation sheets	3	22			3,160,712
	to Part I					

c Totals (add lines 3a and 3b)

3,160,712

Pa	Part IV, I	ine 15, for any				nited States. Comp x if no one recipient			
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	Enter total nur	mber of recipie	ent organizations lis	ted above that are	recognized as chari	ties by the foreign o	country, recognized	as	
3		·	_	·		1(c)(3) equivalency		. ▶	
								Schedule F	(Form 990) 2010

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
			!		assistance	assistance	(book, FMV, appraisal, other)
			<u>. </u>				
			<u> </u>				
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			1		1		

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	I	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	[~	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	্ব	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	굣	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	✓	Yes	Γ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Part V Supplemental Information

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

ldentifier	Return Reference	Explanation
Additional Supplemental Information		The accounting method used is the Accrual method of accounting

Schedule F (Form 990) 2010

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DLN: 93493103004152

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Open to Public Inspection

Name of the organization **Employer identification number** UNIVERSITY OF SAN FRANCISCO 94-1156628 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

 Indicate whether the organization in a	ns I or oral agreement wi 90, Part VII) or entity Individuals or entities	e f g th any indiv in connect (fundraisers	Solicitation of non Solicitation of gov Special fundraisin vidual (including officer tion with professional f	-government grants ernment grants g events rs, directors, trustees undraising services?	⊤ Yes
(i) Name and address of individual or entity (fundraiser)	fundrai cust cont	Did ser have ody or trol of putions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
	1.03				
Total		>			

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									
			(a) Event #1	(b) Event #2 Swanson Golf	(c) O ther Events	(d) Total Events (Add col (a) through col (c))					
			(event type)	(event type)	(total number)						
量	1	Gross receipts	174,675	150,612	175,012	500,299					
Revenue	2	Less Charitable	155,700	91,495	92,369	339,564					
	3	Gross income (line 1 minus line 2)	18,975	59,117	82,643	160,735					
	4	Cash prizes	11,500			11,500					
ω.	5	Non-cash prizes	1,235	14,990	5,024	21,249					
Expenses	6	Rent/facility costs	79,948	74,691	24,583	179,222					
ă	7	Food and beverages	48,453	3	30,473	78,926					
Dreat	8	Entertainment			6,021	6,021					
Ā	9	Other direct expenses .	34,449	2,604	26,304	63,357					
	10	10 Direct expense summary Add lines 4 through 9 in column (d)									
	11	Net income summary Combine li			•	-199,540					
Par	t III	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than					
Revenue		,	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))					
Ŀ	1	Gross revenue			56,165	56,165					
	2	Cash prizes									
Expenses	3	Non-cash prizes			19,003	19,003					
_	4	Rent/facility costs									
Direct	5	Other direct expenses			8,564	8,564					
	6	V olunteer labor	┌ Yes % ┌ No	Γ Yes % Γ No	F 90 000 % Yes 90 000 %						
	7	Direct expense summary Add line	s 2 through 5 in column (d)		27,567					
	8	Net gaming income summary Com	nhine lines 1 and 7 in coli	ımn (d)	•	28,598					
					ata Tabla CA	I.					
9 a		er the state(s) in which the organize he organization licensed to operate	· · · · · · · · · · · · · · · · · · ·	•		· Fyes FNo					
b	If "N The	No," Explain University has been advised by le									
10a		e Sec 320 5(h)(8) e any of the organization's gaming	licenses revoked, susper	nded or terminated during	the tax year?	F vaa 17 Na					
	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?										

	amount of gaming revenue retained by	the third party 🟲 \$		
	amount of gaming revenue retained by	the third party 🟲 \$		
С	If "Yes," enter name and address			
	Name 🟲			
	Address 🏲			
16	Gaming manager information			
	Name 🏲			
	Gaming manager compensation 🕨 \$			
	Description of services provided 🕨			
	Description of services provided p			
	·	Employee	Independent contractor	
17	Mandatory distributions			
а			stributions from the gaming proceeds to	
	retain the state gaming license?			· · Fyes FNo
_			ited to other exempt organizations or spe	nt
b	and the second s		SS .	
	in the organization's own exempt activ			dula C /aaa
			n for responses to question on Scheo	dule G (see

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DLN: 93493103004152 OMB No 1545-0047

Inspection

Grants and Other Assistance to Organizations, (Form 990) **Governments and Individuals in the United States** Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

UNIVERSITY OF SAN FRANCISCO

Employer identification number

94-1156628

 Part I General Information Does the organization maintain the selection criteria used to an Describe in Part IV the organization 	records to substantı ward the grants or as	ate the amount of the					F Yes Γ
Part II Grants and Other A Form 990, Part IV, lin duplicated if additional	ne 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000.	
1 (a) Name and address of organization or government	(P) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran
_							
2 Enter total number of section 53 Enter total number of other organization							0

► Attach to Form 990

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

(a)Type of grant or assistance	(b)Number of recipients	(c)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
(1) USF Financial Aid	3950	61,913,765			
(2) Smart Grants	37	100,000			
(3) Pell Grants	1778	7,001,781			
(4) FSEOG Program	195	533,800			
(5) Federal Work-Study Program	741	1,423,208			
(6) A cademic Grants	449	416,800			

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
Grantmaker's Description		THE UNIVERSITY OF SAN FRANCISCO OFFERS STUDENT FINANCIAL AID IN THE FORM OF SCHOLARSHIPS,
of How Grants are Used		GRANTS, LOANS, AND EMPLOYMENT OPPORTUNITIES FINANCIAL AID IS PROVIDED BY THE UNIVERSITY OF SAN
		FRANCISCO, FEDERAL AND STATE GOVERNMENTS, SOCIAL, FRATERNAL, PROFESSIONAL, AND COMMUNITY
		ORGANIZATIONS, EMPLOYERS, BOTH PRESENT AND PROSPECTIVE, and FRIENDS AND GRADUATES OF THE
		UNIVERSITY OF SAN FRANCISCO GRANTS AND SCHOLARSHIPS CAN BE USED TO PAY FOR TUITION AND FEES,
		ROOM AND BOARD, TRANSPORTATION AND PERSONAL EXPENSES, Grants and Scholarships are AWARDED TO
		STUDENTS WHO DEMONSTRATE ELIGIBILITY BY SUBMITTING A Federal FINANCIAL AID APPLICATION, COMPETE
		IN INTERCOLLEGIATE ATHLETICS, ARE ACADEMICALLY Eligible, or ARE READY TO COMMIT THEIR TIME AND
		SKILLS AFTER GRADUATION TO THE U.S. ARMED FORCES

DLN: 93493103004152

OMB No 1545-0047

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

Name of the organization UNIVERSITY OF SAN FRANCISCO

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

94-1156628

Par	t I Questions Regarding Compensatio	on			
			,	Yes	Νo
1a		ovided any of the following to or for a person listed in Form If to provide any relevant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the oreimbursement orprovision of all the expenses desc	organization follow a written policy regarding payment or cribed above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv	· · · · · · · · · · · · · · · · · · ·	7		
	omecia, amedicia, mastera, and the electron	- Shoots, regulating the items checked in line 14	2		
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t	·			
	Compensation committee	✓ Written employment contract			
	✓ Independent compensation consultant	✓ Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	l payment from the organization or a related organization?	4a		Νo
ь	Participate in, or receive payment from, a suppleme	ental nonqualified retirement plan?	4b		Νο
c	Participate in, or receive payment from, an equity-b	based compensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and \boldsymbol{p}	rovide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	nust complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of \ensuremath{A}	, line 1a, did the organization pay or accrue any			
а	The organization?		5a		Νo
b	Any related organization?		5b		Νο
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of $$, line 1a, did the organization pay or accrue any			
а	The organization?		6a		Νo
ь	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 payments not described in lines 5 and 6? If "Yes,"	A, line 1a, did the organization provide any non-fixed describe in Part III	7		Νο
8		paid or accured pursuant to a contract that was in Regs section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53, 4958-6(c)?	ne rebuttable presumption procedure described in Regulations			N.o.

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
	(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
See Additional Data Table							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							

Schedule J (Form 990) 2010 Page **3**

Part III Supplemental Information

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

Identifier Return Reference Explanation

Schedule J (Form 990) 2010

Software ID: 10000105 **Software Version:** 2010v3.2

EIN: 94-1156628

Name: UNIVERSITY OF SAN FRANCISCO

Form 990, Schedule J, Part	rm 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
(A) Name	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation			
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ			
Ms Nice (i	227,291		8,638	20,323	15,416	271,668				
Ms Davis (i	266,766		9,026	27,264	33,975	337,031				
Mr Walters (I	277,498		9,706	27,264	33,527	347,995				
Mr Micon (i	243,485		7,378	27,227	12,248	290,338				
Mr Macmillan (i	224,338		8,358	25,336	24,865	282,897				
Mr London (I			4,488	25,310	25,211	299,064				
Mr Gallagher (I			19,270	22,780	18,491	257,786				
Mr Duffy (I			1,707	27,264	12,955	304,483				
Mr Cross (I	281,624		3,337	27,264	26,115	338,340				
Mr Brand (I	279,967		3,574	27,264	26,140	336,945				
Dr Wiser (i	262,092		7,966	27,264	26,399	323,721				
Dr Turpin (I			320	25,179	26,014	269,889				
Dr Rosenberg (I	222,482		1,365	24,448	33,290	281,585				
Dr Nel (I	317,254		807	22,511	25,268	365,840				
Dr Johnson (I	180,458		1,064	19,908	15,491	216,921				
Dr Higgins (i	179,368		4,565	18,593	13,954	216,480				
Dr Camperı (ı))) 151,229		104	17,365	36,682	205,380				
Dr A ceves (I	209,814		23,874	19,386	18,276	271,350				

Schedule K

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

2010

DLN: 93493103004152

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

(Form 990)

UNIVERSITY OF SAN FRANCISCO

Part I Bond Issues

Employer identification number

94-1156628

	Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pri	e (f) Description	of Purpose	(g) De	feased	Beha	On alf of uer	1	Pool ncing
									Yes	No	Yes	No	Yes	No
Α	CA Educ Fac Auth	52-1705592	130178YZ3	02-16-2011	80,100,3	322 Cur	rfnd of bonds 8	ксар ехр		×		X		x
В	CA Educ Fac Auth	94-6001347	1301757W6	08-18-2005	27,500,0	00 Capi	tal Expenditur	es		х		Х		Х
c	CA Educ Fac Auth	94-6001347	130175A85	05-28-2003	40,000,0	000 Capi	tal expenditur	es		х		х		х
	W.H. Dwooodo													
Pa	rt III Proceeds				Α			в		С		T	D	
1	A mount of bonds retired					4,279,36		_						
2	A mount of bonds legally de	feased												
3	Total proceeds of issue				8	0,100,32	2	27,500,000		40,	000,000			
4	Gross proceeds in reserve	funds												
5	Capitalized interest from pr	roceeds												
6	Proceeds in refunding escr	ow												
7	Issuance costs from proce	eds				820,96	2	318,770			571,075	5		
8	Credit enhancement from p	roceeds				111,84	4	111,844			76,727	,		
9	Working capital expenditure	es from proceeds												
10	Capital expenditures from p	proceeds				5,000,00	0	26,904,386		29,	838,379			
11	Other spent proceeds													
12	Other unspent proceeds													
13	Year of substantial complet	tion			201	1	20	08		2006				
					Yes	No	Yes	No	Yes		No	Ye:	5	No
14	Were the bonds issued as p	part of a current refur	nding issue?		Х			Х	Х					
15	Were the bonds issued as p	oart of an advance re	funding issue?			Х	Х				Χ			
16	Has the final allocation of p	roceeds been made?	·			Х	Х		Х					
17	Does the organization main allocation of proceeds?	itaın adequate books	and records to sup	pport the final	х		×		Х					
Pa	rt IIII Private Business	s Use								•			•	
					A		<u> </u>	3		<u> </u>		<u> </u>	D	

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

No

Χ

Yes

Yes

No

Χ

Χ

Yes

No

Χ

Χ

Yes

No

Schedule K (Form 990) 2010

Part III Private Business Use (Continued)

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

- 6	Al Dittage								
		Α	L	E	3	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		х		X		х		
2	Is the bond issue a variable rate issue?		Х	Х		Х			
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?								
			X	X		X			
Ь	Name of provider	B of A		B of A		B of A			
С	Term of hedge		30 1000		30 1000		29 4000		
d	Was the hedge superintegrated?		x		x		x		
e	Was a hedge terminated?		х		х		х		
4a	Were gross proceeds invested in a GIC?		х	Х			Х		
ь	Name of provider	AIG		AIG					
С	Term of GIC		2 0000		2 0000				
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	x		x					
5	Were any gross proceeds invested beyond an available temporary period?		х		х		х		
6	Did the bond issue qualify for an exception to rebate?	×			Х	Х			

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Ident if ier	Return Reference	Explanation
		The issue price of the bonds issued on August 18, 2005 differs from the issue price provided on Form 8038, since the series and bonds were refunded by the February 16, 2011 bond issue SCHEDULE K, PART IV, LINE 1 - DISCLOSURE The University has determined that none of the bond issues shown in Lines A, B, C of Part I (Columns and A, B, C of this Part IV) has generated an arbitrage rebate liability, for which a Form 8038-T would otherwise be required to be filed

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DLN: 93493103004152

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

2010

Open to Public Inspection

Name of the organization UNIVERSITY OF SAN FRANCISCO							-		tion numbe	er
Part I Excess Benefit Trai	nsacti	ons (se	ection 501(c)(3) a	nd section 501	(c)(4) (4-115662 zations c			
Complete if the organizat		•	. , , ,			_			ne 40b	
1 (a) Name of disq	ualıfıed	person		(b) Desci	rintion o	ftransa	action		(c) Co	rrected?
				(b) beset		r trumst			Yes	No
2 Enter the amount of tax impos section 4958	ed on tl	he organ	iization managers or	disqualified perso		ng the y	ear under	dr		
3 Enter the amount of tax, If any	on line	 2 ahov	ve reimbursed by the			•	•	→ — \$		
	, 011 11110	2, 400	ve, remiburaca by the	organization i		•		Ψ		_
Part II Loans to and/or					_					
Complete if the organiz	zation a T	nswered	1 "Yes" on Form 990 	, Part IV , line 26,	or Form	1990-E	Z, Part V (f)	, line 38	a T	
		oan to m the	() 0		(e) I	n	Approv	/ed	(g)Writt	en
(a) Name of interested person and purpose	1	zation?	(c)O riginal principal amount	(d)Balance due	defaul	lt?	by boar		agreeme	nt?
F F	To	From	-		Yes	No	committ	No No	Yes	No
(1) Salvador A ceves	10	110111			165	140	163	110	165	140
Secured Mortgage		X	35,000	28,934		Νo	Yes		Yes	
(2) Julie Nice			60,000	60.000						
Promissory Note (3) Rex Walters		X	60,000	60,000		Νο	Yes	1	Yes	
Sec Mortgage & Prom Note		×	610,000	610,000		Νo	Yes		Yes	
(4) James Wiser										
Secured Mortgage	<u> </u>	X	153,000	153,000		Νo	Yes	1	Yes	
(5) Margaret Higgins Secured Mortgage		l x	50,000	50,000		No	Yes		Yes	
Total		· .	> \$	901,934				•		
Part IIII Grants or Assistan										
Complete if the orga	nızatıc					7				
(a) Name of interested pers	on	(Relationship betwe (c and the org		son	(c) A m	ount of gr	ant or ty	pe of assis	tance
			4.1.4 4.1.5	,						

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organı	arıng of zatıon's nues?
	organization			Yes	No
(1) Dennis Miller	See Part V	85,897	Employment		Νo
(2) Robert Elias	See Part V	140,861	Employment		Νo
(3) Anna Cross	See Part V	45,440	Employment		Νo
(4) Alexandra Amatı-Camperı	See Part V	108,738	Employment		Νο

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Ident if ier	Return Reference	Explanation
		SCHEDULE L, PART IV, Column (b) - DISCLO SURE (1) Alexandra Amatı-Camperı - Famıly member of key employee(2) Anna Cross - Famıly member of officer(3) Robert Elias - Famıly member of officer(4) Dennis Miller - Famıly member of officer

Schedule L (Form 990 or 990-EZ) 2010

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

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

NonCash Contributions

Name of the organization UNIVERSITY OF SAN FRANCISCO

Employer identification number

Dа	rt I Types of Property				94-1156628			
ru	Types of Property	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d)		ontribut	ion
		аррисавіе	Contributed	1g	amounts			
	Art—Works of art							
_	Art—Historical treasures							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
good 6	S							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded	X	20	502,705	FM\/			
	Securities—Closely held		20	302,703				
10	stock							
11	Securities—Partnership, LLC, or trust interests .	Х	2	484,828	FMV			
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Q ualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
	Archeological artifacts .							
	O ther ► ()							
	O ther ►()							
27	O ther ►()							
	O ther ► ()							
29	Number of Forms 8283 received by for which the organization complete				29		ı .	
30a	During the year, did the organization	n receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it		Yes	No
	must hold for at least three years f	rom the d	late of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the entire	holdıng p	erıod?			30a		No
ь	If "Yes," describe the arrangement	: ın Part I	I					
31	Does the organization have a gift a	cceptano	e policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use t contributions?	hırd partı • • •	es or related organizations	to solicit, process, or sell i	non-cash	32a		No
	If "Yes," describe in Part II If the organization did not report re describe in Part II	venues i	n column (c) for a type of pi	operty for which column (a) is checked,			

Page 2

Part II

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

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

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DLN: 93493103004152

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2010

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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Name of the organization UNIVERSITY OF SAN FRANCISCO **Employer identification number**

94-1156628

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	While applicable federal tax laws do not mandate that the university's governing documents, conflict of interest policy and financial statements be made available for public inspection, the university voluntarily makes each of the foregoing available on its website www usfca edu and upon request

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	The Compensation Committee of the Board of Trustees is responsible for all matters of executive compensation. The Compensation Committee is comprised solely of independent trustees, none of whom have a conflict of interest with respect to the compensation arrangement, the Compensation Committee is accountable for setting reasonable compensation packages for officers and key employees (including the University President). The Compensation Committee develops, consistent with the University's vision, mission, and values, the annual performance goals and criteria to be used in determining merit increases and variable compensation criteria for officers and key employees. The Compensation Committee (in coordination with the University's Human Resources Department) also reviews comparable compensation and benefits information to analyze and provide benchmarking data for the total compensation and benefits packages of officers and key employees. Appropriate comparability data is obtained from independent experts, including total economic benefits paid by similarly situated organizations (both taxable and taxexempt) for similar job responsibilities. Key deliberations of the Compensation Committee are documented in minutes which are approved at the next Compensation Committee meeting.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	Under the terms of its Charter The Audit Committee of the University's Board of Trustees is charged with monitoring proposed or ongoing transactions for conflicts of interest and addressing any potential or actual conflicts. Pursuant to the University's Conflict of Interest Policy, an annual conflict of Interest questionnaire, aimed at determining any family and business relationships and transactions or other transactions that may pose a potential conflict, is distributed to all necessary parties (i.e., board members, officers and executive leadership, and key employees). Covered persons are required to disclose actual or potential conflicts at the time when such conflicts arise. When someone becomes a covered person and annually thereafter, each covered person is required to sign a statement affirming that he/she. (1) has received a copy of the Conflicts of Interest Policy, (2) has read the Policy and understands said Policy, and (3) agrees to comply with all requirements of the Policy, including completing the annual conflict of interest questionnaire. The completed questionnaires for members of the University's Board of Trustees are reviewed by the Secretary of the Board of Trustees. Thereafter, the University's General Counsel and Director of Internal Audit and Tax Compliance review the completed questionnaires for any persons with actual or potential conflicts, and these individuals are notified via written communication. Moreover, the Director of Internal Audit and Tax Compliance reports any actual or potential conflicts to the University President and the Audit Committee of the Board of Trustees. The completed questionnaires for officers and executive leadership or key employees are reviewed by the Assistant Vice President for Human Resources. Thereafter, the University's General Counsel and Director of Internal Audit and Tax Compliance review the completed questionnaires for any persons with actual or potential conflicts, and these individuals are notified via written communication. Furthermore, the Di

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	The Director of Internal Audit and Tax Compliance (who reports to the University President and Audit Committee of the Board of Trustees) is responsible for overseeing all tax compliance matters for the University of San Francisco, including the preparation of the University's Form 990, accordingly, under his direction (and with the assistance of the University's external tax advisors at Deloitte and Touche) the University's Form 990 is prepared by the Tax Analyst in the University's Office of Internal Audit and Tax Compliance Thereafter, the University's Form 990 is reviewed by the Tax Analyst's supervisor, the Tax Manager Next, the University's Vice President for Business and Finance and Director of Internal Audit and Tax Compliance concurrently review the University's Form 990 with the University's external tax advisors (Deloitte and Touche) who review it one final time before the return is provided to the University's Audit Committee of its Board of Trustees, which has been delegated appropriate authority to review the return on behalf of the University's Board of Trustees Subsequent to its review, the Audit Committee reports back to the full Board of Trustees regarding its oversight of Form 990, and the final draft of the University's Form 990 (including all required schedules thereto) is provided to the entire Board of Trustees so it is able to make any appropriate inquiries regarding the data contained in the University's Form 990 before the return is filed

ldentifier	Return Reference	Explanation
Form 990, Part III, Line 4d	, ,	OTHER PROGRAM SERVICES 4 SPONSORED RESEARCH INCLUDES EXPENDITURES FOR RESEARCH AND TRAINING

ldentifier	Return Reference	Explanation
		Client Note 2 - Form 8858, Schedule HUSF Educational Consulting (China) Co , Ltd and USF Manila, Inc are wholly owned disregarded entities of the University of San Francisco, a nonprofit educational corporation defined under Section 501(c)(3) of the Internal Revenue Code All income from such entities is related to the exempt purpose of the University of San Francisco and is exempt from taxation under Section 501(a) of the Internal Revenue Code

ldentifier	Return Reference	Explanation
		Client Note 1 - SCHEDULE J-2, PAGE 2, PART VIIDISCLOSURE ON DR WISER'S TITLEDr Wiser is the former Provost and Academic Vice President, after retiring from his former position, Dr Wiser returned to faculty status where he serves as a Professor in the Department of Politics in the College of Arts and Science

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DLN: 93493103004152

Related Organizations and Unrelated Partnerships

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

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

2010

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

(Form 990)

SCHEDULE R

Internal Revenue Service Name of the organization UNIVERSITY OF SAN FRANCISCO

Employer identification number

94-1156628

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(b) Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income			(f) Direct controll entity	ling	
(1) USF Manila Inc c/o USF 2130 Fulton Street San Francisco, CA 941171080 98-1046690	Instruction						57,10	₅₃ NA			
(2) USF Educational Consulting China Co c/o USF 2130 Fulton Street San Francisco, CA 941171080 98-1046669	Recruiting, Fundraisii	ng				83	79,23	NA NA			
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	ations (Complete e tax year.)	ıf the	e organızatıoı	n ans	wered "Yes"	on	Form 990, Part	IV, lıne	34 becau	ise it hac	l one
(a) Name, address, and EIN of related organization	(b) Primary activity	Lega or fo	(c) I domicile (state oreign country)	Exem	(d) pt Code section		(e) blic charity status section 501(c)(3))		(f) Direct controlling entity	(g) Section 512(b)(controlled organization	
										Yes	No
For Privacy Act and Panerwork Reduction Act Notice, see the Instruction	s for Form 990		Cat No 5	0135	Y				Schedule R (Form 990	1 2010

(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(g) end-of-year sssets	(h Disprop allocat	ortionate	(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	(j Gener mana partr	al or ging	(k) Percentage ownership
								Yes	No			Yes	No	
				ble as a Corpora zations treated as a						nswered "Y	es" on	Form	990,	Part IV,
Name, address, an	(a) Id EIN of related organiz	zation	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling	(e) Type of e (C corp, S or trust	corp,	Share o	(f) f total income	Shai end-o	y) re of f-year sets		(h) Percentage ownership

(6)

Part V	Transactions With Related Organizations (Complete if the organization answered "Ye	es" on Form 990, Pa	rt IV, line 34, 35, 3	55A, or 36.)		
Not e.	. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 During t	he tax year, did the orgranization engage in any of the following transactions with one or more related orga	anızatıons lısted ın Part	s II-IV?			
a Rece	ipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
b Gift,	grant, or capital contribution to other organization(s)			1b		No
c Gift, 9	grant, or capital contribution from other organization(s)			1 c		No
d Loans	s or loan guarantees to or for other organization(s)			1d		No
e Loans	s or loan guarantees by other organization(s)			1e		No
f Sale	of assets to other organization(s)			1 f		No
g Purcl	hase of assets from other organization(s)			1 g		No
h Exch	ange of assets			1h		No
i Lease	e of facilities, equipment, or other assets to other organization(s)			1 i		No
j Lease	e of facilities, equipment, or other assets from other organization(s)			1 j		No
k Perfo	rmance of services or membership or fundraising solicitations for other organization(s)			1k		No
I Perfor	rmance of services or membership or fundraising solicitations by other organization(s)			11		No
m Sharı	ng of facilities, equipment, mailing lists, or other assets			1m	1	No
n Shari	ing of paid employees			1n		No
o Reim	bursement paid to other organization for expenses			10		No
p Reim	bursement paid by other organization for expenses			1р		No
q Othe	r transfer of cash or property to other organization(s)			1 q		No
r Other	r transfer of cash or property from other organization(s)			1r		No
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete this line,	ıncludıng covered relat	ionships and transact	ion thresholds		
	(a)	(b)	(c)	(d) Method of determin	aina ama	ount
	Name of other organization	Transaction type(a-r)	Amount involved	involved		Juni
(1)						
(2)						
-						
(3)						
(4)						
(4)						
(5)						
(5)		1	1	I		

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(state or foreign partners country) section 501(c)(3) organizations?		(e) Share of end-of-year assets		ortionate	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(I Gene mana part	agın tner?	
			Yes	No		Yes	No		Yes	N
										+
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

I Identifier I Keturn Keterence I	Identifier Return Reference Explanation	
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Schedule R (Form 990) 2010

Software ID: 10000105 **Software Version:** 2010v3.2

EIN: 94-1156628

Name: UNIVERSITY OF SAN FRANCISCO

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	Posi t	tion (che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	per 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	
Ms Win Board Member	5 00	х						0	0	0	
Ms Wall Hanson Board Member	5 00	х						0	0	0	
Ms Troxel	5 00	×						0	0	0	
Board Member Ms Nice	40 00					×		235,929	0	35,739	
PROFESSOR - LAW MS MCGRATH	5 00	Х						0	0	0	
Board Member Ms Malveaux								0		0	
Board Member Ms Jarrett Skaff	5 00										
Board Member Ms Guilbault	5 00	X						0	0	0	
Board Member	5 00	Х						0	0	0	
Ms Davis GENERAL COUNSEL	40 00			Х				275,792	0	61,239	
Ms Cunicelli Board Member	5 00	×						0	0	0	
Mr White Board Member	5 00	х						0	0	0	
Mr Walters Basketball Coach	40 00					х		287,204	0	60,791	
Mr Vısbal Board Member	5 00	Х						0	0	0	
Mr Smith Vice Chairman	5 00	Х						0	0	0	
Mr Salquist Board Member	5 00	Х						0	0	0	
Mr Rose Board Member	5 00	Х						0	0	0	
Mr READ	5 00	×						0	0	0	
Board Member Mr Pasha III	5 00	X						0	0	0	
Board Member Mr Noonan	5 00							0	0	0	
Board Member Mr NICOLAI								_	-		
Board Member Mr Micon	5 00	Х						0		0	
Assoc Dean Law Sch Mr MCNICHOLAS	40 00					Х		250,863	0	39,475	
Board Member	5 00	Х						0	0	0	
Mr Malloy Board Member	5 00	Х						0	0	0	
Mr Maier Board Member	5 00	Х						0	0	0	
Mr Macmillan VP ADVANCEMENT	40 00			х				232,696	0	50,201	

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 week		tion (that a	che	')			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation	
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			from the organization and related organizations	
Mr London Assistant VP Facilities	40 00				x			248,543	0	50,521	
Mr Johnson Board Member	5 00	х						0	0	0	
Mr Jerves Board Member	5 00	Х						0	0	0	
Mr Hamill Board Member	5 00	Х						0	0	0	
Mr Gallagher VP INFO TECH	40 00			х				216,515	0	41,271	
Mr Duffy Dean School of Business	40 00				х			264,264	0	40,219	
Mr Cross VP Bus & Fin	40 00			х				284,961	0	53,379	
Mr Ciocca Board Member	5 00	Х						0	0	0	
Mr Chiuchiarelli Chairman	5 00	Х						0	0	0	
Mr Brand Dean of Law School	40 00					Х		283,541	0	53,404	
Mr Bonocore Board Member	5 00	Х						0	0	0	
Mr Bechellı Board Member	5 00	Х						0	0	0	
Mr Agger Board Member	5 00	Х						0	0	0	
Hon Jenkıns Board Member	5 00	Х						0	0	0	
Fr Weiler SJ Board Member	5 00	Х						0	0	0	
Fr Sundborg SJ Board Member	5 00	Х						0	0	0	
Fr Stoeger SJ Board Member	5 00	Х						0	0	0	
Fr Scirghi SJ Board Member	5 00	Х						0	0	0	
Fr RAVIZZA SJ Board Member	5 00	Х						0	0	0	
Fr PRIVETT SJ President	40 00	Х		х				0	0	0	
Fr PRIETTO SJ Board Member	5 00	Х						0	0	0	
Fr O 'CALLAGHAN SJ Board Member	5 00	Х						0	0	0	
Fr Moynahan SJ Board Member	5 00	Х						0	0	0	
Fr Manuel SJ Board Member	5 00	Х						0	0	0	
Fr Chisholm SJ Board Member	5 00	Х						0	0	0	

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

(A) Name and Title	(B) Average hours per week		((tion (che (I		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former			
Fr Brackley SJ Board Member	5 00	Х						0	0	0
Dr Wiser Former Provost & VP	40 00						х	270,058	0	53,663
Dr Turpin Provost & V P	40 00			х				218,696	0	51,193
Dr Tempero Board Member	5 00	х						0	0	0
Dr Rosenberg PRO FESSOR - LA W	40 00					х		223,847	0	57,738
Dr Nel VP Int Relation	40 00			х				318,061	0	47,779
Dr Johnson V ice Provost, A cademic	40 00				х			181,522	0	35,399
Dr Higgins VP UNIV LIFE	40 00			х				183,933	0	32,547
Dr Gıraudo Board Member	5 00	Х						0	0	0
Dr Camperı Dean Arts and Science	40 00				х			151,333	0	54,047
Dr Butler Board Member	5 00	Х						0	0	0
Dr Aceves Vice Provost, Budget	40 00				х			233,688	0	37,662