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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)	OMB No 1545-0047 <div>  2010 </div>
	▶ The organization may have to use a copy of this return to satisfy state reporting requirements	Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011		D Employer identification number 04-2103589	
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization LESLEY UNIVERSITY		E Telephone number (617) 349-8685
	Doing Business As		
	Number and street (or P O box if mail is not delivered to street address) 29 EVERETT STREET		G Gross receipts \$ 119,929,722
	Room/suite		
	City or town, state or country, and ZIP + 4 CAMBRIDGE, MA 021382790		
F Name and address of principal officer JOSEPH B MOORE 29 EVERETT STREET CAMBRIDGE, MA 021382790		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.LESLEY.EDU			
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1909	M State of legal domicile MA

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities LESLEY UNIVERSITY IS COMMITTED TO ACTIVE LEARNING, SCHOLARLY RESEARCH, CRITICAL INQUIRY, AND DIVERSE FORMS OF ARTISTIC PRACTICE THROUGH CLOSE MENTORING RELATIONSHIPS AMONG STUDENTS, FACULTY, AND PRACTITIONERS IN THE FIELD LESLEY PREPARES GRADUATES WITH THE KNOWLEDGE, SKILL, UNDERSTANDING, AND ETHICAL JUDGMENT TO BE CATALYSTS WHO SHAPE A MORE JUST, HUMANE, AND SUSTAINABLE WORLD		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	34
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	2,508
6 Total number of volunteers (estimate if necessary)	6	300	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	218,002	
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	7,854,977	6,093,264
	9 Program service revenue (Part VIII, line 2g)	103,125,600	106,054,862
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,841,419	3,132,590
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,518,371	2,505,377
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	115,340,367	117,786,093
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	13,702,967	15,783,142
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	58,546,556	59,295,935
	16a Professional fundraising fees (Part IX, column (A), line 11e)	10,066	0
	b Total fundraising expenses (Part IX, column (D), line 25) <input checked="" type="checkbox"/> 1,416,872		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	37,957,424	41,631,629
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	110,217,013	116,710,706
	19 Revenue less expenses Subtract line 18 from line 12	5,123,354	1,075,387
	Net Assets or Fund Balances		Beginning of Current Year
20 Total assets (Part X, line 16)		317,124,368	343,924,145
21 Total liabilities (Part X, line 26)		116,485,351	121,915,113
22 Net assets or fund balances Subtract line 21 from line 20		200,639,017	222,009,032

Part II	Signature Block
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer			2012-05-15 Date	
	BERNICE BRADIN CFO, VP FINANCE Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name JOSEPH GISO		Preparer's signature JOSEPH GISO		Date
	Check if self-employed <input type="checkbox"/>				PTIN
	Firm's name ▶ CBIZ TOFIAS				Firm's EIN ▶
	Firm's address ▶ 500 BOYLSTON STREET BOSTON, MA 02116				Phone no ▶ (617) 761-0600

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

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

☒

1

Briefly describe the organization's mission

LESLEY UNIVERSITY IS COMMITTED TO ACTIVE LEARNING, SCHOLARLY RESEARCH, CRITICAL INQUIRY, AND DIVERSE FORMS OF ARTISTIC PRACTICE THROUGH CLOSE MENTORING RELATIONSHIPS AMONG STUDENTS, FACULTY, AND PRACTITIONERS IN THE FIELD LESLEY PREPARES GRADUATES WITH THE KNOWLEDGE, SKILL, UNDERSTANDING, AND ETHICAL JUDGMENT TO BE CATALYSTS WHO SHAPE A MORE JUST, HUMANE, AND SUSTAINABLE WORLD

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 42,924,801 including grants of \$) (Revenue \$ 94,478,311)

EXPENSES RELATED TO INSTRUCTING FULL TIME AND PART TIME STUDENTS THE UNIVERSITY IS HOME TO A NUMBER OF IMPORTANT CENTERS AND INSTITUTES THAT CONDUCT RESEARCH, HELP SHAPE PUBLIC POLICY, AND PROVIDE CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT OPPORTUNITIES ACROSS A WIDE RANGE OF DISCIPLINES INCLUDING *MATH *SPECIAL EDUCATION *LITERACY*CENTER FOR ADULT LEARNERS*EVALUATION AND RESEARCH *NATIONAL CENTER FOR TEACHERS, COUNSELORS & SCHOOL LEADERSAT A GLANCE *FOUNDED 1909 *TOTAL ENROLLMENT 8,566*UNDERGRADUATES 1,912*MASTER'S, C A G S , PH D STUDENTS 5,648*NON-MATRICULATING STUDENTS 1,006*TOTAL ALUMNI 76,344*CAMPUS LOCATIONS *BOSTON, MA *CAMBRIDGE, MA LESLEY UNIVERSITY ACADEMICS *UNDERGRADUATE STUDY -THE ART INSTITUTE OF BOSTON -LESLEY COLLEGE -ADULT LEARNING DEGREE PROGRAMS*GRADUATE STUDY -COURSES + PROGRAMS IN CAMBRIDGE/BOSTON -PROGRAMS OFFERED THROUGHOUT THE US -ONLINE COURSES + PROGRAMS*UNIQUE PROGRAM FORMATS *CENTERS + INSTITUTES *CONTINUING EDUCATION + PROFESSIONAL DEVELOPMENT *THRESHOLD NON-DEGREE PROGRAM*ACCREDITATION -NEW ENGLAND ASSOCIATION OF SCHOOLS AND COLLEGES -NATIONAL ASSOCIATION OF SCHOOLS OF ART AND DESIGN

4b

(Code) (Expenses \$ 15,202,174 including grants of \$) (Revenue \$)

EXPENSES RELATED TO SERVICES PROVIDED TO THE STUDENT BODY, INCLUDING COUNSELING, CAREER GUIDANCE, ADMISSIONS, REGISTRAR, STUDENT ACTIVITIES, FINANCIAL AID AND HEALTH SERVICES AS WELL AS EXPENSES RELATED TO ATHLETIC PROGRAMS

4c

(Code) (Expenses \$ 16,847,189 including grants of \$) (Revenue \$)

EXPENSES RELATED TO ACADEMIC SUPPORT WHICH INCLUDES THE EXPENSES FOR THE LIBRARY, DEAN OF STUDENTS, VARIOUS ACADEMIC DEANS AND OTHER ACADEMIC SUPPORT ALSO, EXPENSES RELATED TO RESEARCH AND GENERAL INSTITUTIONAL OPERATIONS

4d

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























(Expenses \$ 25,189,776 including grants of \$ 15,783,142) (Revenue \$ 12,184,604)

4e

Total program service expenses \$ 100,163,940








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)? <i>If "Yes," complete Schedule A.</i> 	1	Yes
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	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? <i>If "Yes," complete Schedule C, Part I.</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? <i>If "Yes," complete Schedule C, Part II.</i> 	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? <i>If "Yes," complete Schedule C, Part III.</i>	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</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? <i>If "Yes," complete Schedule D, Part II.</i> 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	10	Yes
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	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? <i>If "Yes," complete Schedule D, Part VII.</i> 	11b	Yes
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? <i>If "Yes," complete Schedule D, Part VIII.</i> 	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? <i>If "Yes," complete Schedule D, Part IX.</i> 	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	11e	No
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)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i> 	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 "Yes," complete Schedule F, Parts I and IV.</i> 	14b	Yes
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Parts II and IV.</i> 	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 ? <i>If "Yes," complete Schedule F, Parts III and IV.</i> 	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? <i>If "Yes," complete Schedule G, Part I (see instructions).</i> 	17	No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	18	No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	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	

Part IV

Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	541
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 Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	2,508
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
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	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	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	
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.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

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.
Check if Schedule O contains a response to any question in this Part VI ☒

Section 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	1a 35		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 34		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its 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		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
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	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		No
14	Does the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 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		

Section C. Disclosure	
17	List the States with which a copy of this Form 990 is required to be filed MA
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. <input type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization BERNICE BRADIN VPCFO 29 EVERETT STREET CAMBRIDGE, MA 021382790 (617) 349-8685

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

Check if Schedule O contains a response to any question in this Part VII ☐

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 organization nor any related organization compensated any current officer, director, or trustee

[illegible]

Part VII

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization: 55

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
(A) Name and business address	(B) Description of services	(C) Compensation
UGL UNICCO 275 GROVE ST AUBURNDALE, MA 02446	FACILITIES MANAGEMENT	4,579,383
BON APPETIT MANAGEMENT CO 29 EVERETT ST CAMBRIDGE, MA 02138	FOOD SERVICE	3,105,095
SECURITAS SECURITY SERVICES PO BOX 403412 ATLANTA, GA 30384	SECURITY	1,429,074
BRUNER COTT 130 PROSPECT ST CAMBRIDGE, MA 02139	ARCHITECT	1,143,036
WHITE BUILDERS 73 PLEASANT ST WOBURN, MA 01801	CONSTRUCTION	938,224
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶77		

Part VIII

Statement of Revenue

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	2,390,885			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,702,379			
	g	Noncash contributions included in lines 1a-1f \$		114,700			
	h	Total. Add lines 1a-1f		6,093,264			
	Program Service Revenue			Business Code			
2a		TUITION AND FEES	900099	93,870,258	93,870,258		
b		AUXILIARY	900099	12,184,604	12,184,604		
c							
d							
e							
f		All other program service revenue					
g		Total. Add lines 2a-2f		106,054,862			
Other Revenue		3	Investment income (including dividends, interest and other similar amounts)		3,132,590	85,528	3,047,062
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6a	Gross Rents	(i) Real	(ii) Personal			
			3,908,479				
		b	Less rental expenses				
			2,143,629				
	c	Rental income or (loss)					
		1,764,850					
	d	Net rental income or (loss)		1,764,850		1,764,850	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
		b	Less cost or other basis and sales expenses				
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
		b	Less direct expenses	b			
	c	Net income or (loss) from fundraising events					
9a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b				
	c	Net income or (loss) from gaming activities					
10a	Gross sales of inventory, less returns and allowances	a					
	b	Less cost of goods sold	b				
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11a	OTHER INCOME	900099	608,053	608,053			
	b	PARKING LOT	812930	121,824		121,824	
	c	ART GALLERY	453220	10,650		10,650	
	d	All other revenue					
	e	Total. Add lines 11a-11d		740,527			
12	Total revenue. See Instructions		117,786,093	106,662,915	218,002	4,811,912	

Part IX

Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U S See Part IV, line 22	15,783,142	15,783,142		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,604,370	844,134	1,760,236	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	46,062,443	40,351,134	4,813,034	898,275
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,004,185	1,816,140	147,172	40,873
9	Other employee benefits	5,156,545	4,446,613	611,549	98,383
10	Payroll taxes	3,468,392	2,948,419	455,514	64,459
a	Fees for services (non-employees)				
	Management				
b	Legal	336,901		336,901	
c	Accounting	145,163		145,163	
d	Lobbying	82,028	16,000	66,028	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	513,677		513,677	
g	Other	3,037,483	1,425,631	1,547,936	63,916
12	Advertising and promotion	2,221,618	2,169,751	49,308	2,559
13	Office expenses	3,003,488	2,848,393	103,525	51,570
14	Information technology	1,732,056	618,758	1,105,588	7,710
15	Royalties				
16	Occupancy	7,156,114	6,569,984	582,316	3,814
17	Travel	2,996,880	2,587,715	270,864	138,301
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	242,509	207,578	30,300	4,631
20	Interest	3,658,937	3,229,489	429,448	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,151,121	4,915,787	235,334	
23	Insurance	273,445		273,445	
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)				
a	CUSTODIAL CONTRACTS	3,315,983	3,315,983		
b	FOOD SERVICE	2,750,610	2,750,610		
c	CONSULTING	1,403,251	1,126,570	248,825	27,856
d	SECURITY CONTRACTS	1,171,258	1,021,904	149,354	
e	LICENSES & FEES	754,895	107,760	647,135	
f	All other expenses	1,684,212	1,062,445	607,242	14,525
25	Total functional expenses. Add lines 1 through 24f	116,710,706	100,163,940	15,129,894	1,416,872
26	Joint costs. Check here <input type="checkbox"/> 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				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			2,807	1	3,107
	2	Savings and temporary cash investments			4,854,309	2	6,650,085
	3	Pledges and grants receivable, net			3,548,135	3	2,311,894
	4	Accounts receivable, net			5,812,893	4	6,724,554
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	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) Schedule L				6	
	7	Notes and loans receivable, net			1,588,513	7	1,599,249
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			2,015,538	9	2,015,760
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	187,971,607			
	b	Less: accumulated depreciation	10b	43,746,792	143,079,579	10c	144,224,815
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11			147,161,483	12	163,936,033
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			9,061,111	15	16,458,648
	16	Total assets. Add lines 1 through 15 (must equal line 34)			317,124,368	16	343,924,145
Liabilities	17	Accounts payable and accrued expenses			13,375,057	17	13,106,151
	18	Grants payable			1,321,594	18	1,336,897
	19	Deferred revenue			13,972,367	19	13,958,279
	20	Tax-exempt bond liabilities			79,247,921	20	88,019,786
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			5,863,000	23	5,494,000
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			2,705,412	25	0
	26	Total liabilities. Add lines 17 through 25			116,485,351	26	121,915,113
Net Assets or Fund Balances		Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets			178,734,193	27	197,583,174
	28	Temporarily restricted net assets			11,229,778	28	13,218,094
	29	Permanently restricted net assets			10,675,046	29	11,207,764
		Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			200,639,017	33	222,009,032
	34	Total liabilities and net assets/fund balances			317,124,368	34	343,924,145

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	117,786,093
2	Total expenses (must equal Part IX, column (A), line 25)	2	116,710,706
3	Revenue less expenses Subtract line 2 from line 1	3	1,075,387
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	200,639,017
5	Other changes in net assets or fund balances (explain in Schedule O)	5	20,294,628
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	222,009,032

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

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

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization LESLEY UNIVERSITY	Employer identification number 04-2103589
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Part I

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

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

- 1

☐

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

☒

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- e

☐

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

☐

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

☐

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

(i)

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

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in 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.)

Section A. Public Support						
Calendar 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 include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income 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, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage						
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))					14	
15 Public Support Percentage for 2009 Schedule A, Part II, line 14					15	
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶						
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶						
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶						
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶						
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶						

Part III

Support Schedule for Organizations Described in 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 in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 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	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

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

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047

2010

Open to Public Inspection

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

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

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

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

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of the organization LESLEY UNIVERSITY	Employer identification number 04-2103589
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$ _____
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If “Yes,” describe in Part IV	

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$ _____
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$ _____
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$ _____
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization’s funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

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

Part II-A

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

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

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))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
	a Volunteers?		No	
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
	c Media advertisements?		No	
	d Mailings to members, legislators, or the public?		No	
	e Publications, or published or broadcast statements?		No	
	f Grants to other organizations for lobbying purposes?		No	
	g Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
	i Other activities? If "Yes," describe in Part IV	Yes		80,028
	j Total lines 1c through 1i			80,028
	2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
	b If "Yes," enter the amount of any tax incurred under section 4912			
	c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Identifier	Return Reference	Explanation
EXPLANATION OF OTHER LOBBYING ACTIVITIES	PART II-B, LINE 1I	THE UNIVERSITY PAID PODESTA MATTON, INC \$64,028 FOR FEDERAL FUNDING OF PRIORITY PROJECTS OF LESLEY UNIVERSITY THE UNIVERSITY PAID POLITICAL ADVANTAGE, LLC \$16,000 FOR STATE SUPPORT OF READING RECOVERY PROJECTS

SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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
LESLEY UNIVERSITY

Employer identification number
04-2103589

Part I

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

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

Part II

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Protection of natural habitat

☐ Preservation of open space

☐ Preservation of an historically importantly land area

☐ Preservation of a certified historic structure

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year

4 Number of states where property subject to conservation easement is located

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes

No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

Yes

No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

\$

(ii) Assets included in Form 990, Part X

\$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1

\$

b Assets included in Form 990, Part X

\$

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☐ No

b

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

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	147,161,485	142,576,277	190,326,605	
b	Contributions	1,332,582	3,265,367	5,347,004	
c	Investment earnings or losses	22,145,214	6,325,160	-48,500,943	
d	Grants or scholarships	274,773	209,367	344,703	
e	Other expenditures for facilities and programs	6,428,476	4,795,952	4,251,686	
f	Administrative expenses				
g	End of year balance	163,936,032	147,161,485	142,576,277	

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 90 890 %

b

Permanent endowment ▶ 6 560 %

c

Term endowment ▶ 2 550 %

3a

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

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No

b

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

3b

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		16,510,549		16,510,549
b Buildings		92,169,650	21,243,701	70,925,949
c Leasehold improvements		60,386,470	13,316,302	47,070,168
d Equipment		15,439,662	9,186,789	6,252,873
e Other		3,465,276		3,465,276
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				144,224,815

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	117,786,093
2	Total expenses (Form 990, Part IX, column (A), line 25)	116,710,706
3	Excess or (deficit) for the year Subtract line 2 from line 1	1,075,387
4	Net unrealized gains (losses) on investments	19,634,216
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	660,412
9	Total adjustments (net) Add lines 4 - 8	20,294,628
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	21,370,015

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	123,927,531
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a	19,634,216
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d	2,804,041
e	Add lines 2a through 2d	22,438,257
3	Subtract line 2e from line 1	101,489,274
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	513,677
b	Other (Describe in Part XIV)4b	15,783,142
c	Add lines 4a and 4b	16,296,819
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	117,786,093

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	102,557,516
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d	2,143,629
e	Add lines 2a through 2d	2,143,629
3	Subtract line 2e from line 1	100,413,887
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a	513,677
b	Other (Describe in Part XIV)4b	15,783,142
c	Add lines 4a and 4b	16,296,819
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	116,710,706

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE UNIVERSITY'S ENDOWMENT CONSISTS OF APPROXIMATELY 90 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES SUCH AS SCHOLARSHIPS, FACULTY CHAIRS, FACULTY DEVELOPMENT, SPECIAL EDUCATION AND OTHER NEEDS ITS ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS AS REQUIRED BY GAAP, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE UNIVERSITY ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS THE UNIVERSITY HAS IDENTIFIED ITS TAX STATUS AS A TAX-EXEMPT ENTITY AS ITS ONLY SIGNIFICANT TAX POSITION, HOWEVER, THE UNIVERSITY HAS DETERMINED THAT SUCH TAX POSITION DOES NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION IN ADDITION, THE UNIVERSITY HAS IDENTIFIED CERTAIN MINOR TAX POSITIONS WITH RESPECT TO CERTAIN OF ITS ACTIVITIES THAT MANAGEMENT DID NOT CONSIDER MATERIAL AND, ACCORDINGLY, SUCH AMOUNTS WERE NOT RECOGNIZED THE UNIVERSITY'S FEDERAL AND STATE TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED
PART XI, LINE 8 - OTHER ADJUSTMENTS		REALIZED GAIN ON INTEREST RATE SWAP 660,412
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES 2,143,629 REALIZED GAIN ON INTEREST RATE SWAP 660,412
PART XII, LINE 4B - OTHER ADJUSTMENTS		INSTITUTIONAL FINANCIAL AID 15,783,142
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES 2,143,629
PART XIII, LINE 4B - OTHER ADJUSTMENTS		INSTITUTIONAL FINANCIAL AID 15,783,142

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
LESLEY UNIVERSITY

Employer identification number

04-2103589

Part I

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II

- 4 Does the organization maintain the following?

a Records indicating the racial composition of the student body, faculty, and administrative staff?

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

d Copies of all material used by the organization or on its behalf to solicit contributions?

If you answered "No" to any of the above, please explain If you need more space, use Part II

- 5 Does the organization discriminate by race in any way with respect to

a Students' rights or privileges?

b Admissions policies?

c Employment of faculty or administrative staff?

d Scholarships or other financial assistance?

e Educational policies?

f Use of facilities?

g Athletic programs?

h Other extracurricular activities?

If you answered "Yes" to any of the above, please explain If you need more space, use Part II

- 6a Does the organization receive any financial aid or assistance from a governmental agency?
- b Has the organization's right to such aid ever been revoked or suspended?
- If you answered "Yes" to either line 6a or line 6b, explain on Part II
- 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

	YES	NO
1	Yes	
2	Yes	
3	Yes	
4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	
5a		No
5b		No
5c		No
5d		No
5e		No
5f		No
5g		No
5h		No
6a	Yes	
6b		No
7	Yes	

Part III 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).

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	NEWSPAPERS, ON-LINE, ADVERTISEMENTS APPLICATIONS FOR EMPLOYMENT, ADMISSIONS AND FINANCIAL AID
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE UNIVERSITY RECEIVES FINANCIAL AID AND ASSISTANCE FROM THE FEDERAL GOVERNMENT IN THE FORM OF FEDERAL PROGRAMS AND GRANTS ADMINISTERED BY THE DEPARTMENT OF EDUCATION, THE DEPARTMENT OF COMMERCE, THE NATIONAL ENDOWMENT FOR HUMANITIES, THE NATIONAL SCIENCE FOUNDATION AND THE NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
LESLEY UNIVERSITY

Employer identification number

04-2103589

Part I

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

1

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

Yes

No

2

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

3

Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
MIDDLE EAST AND NORTH AFRICA	1	2	PROGRAM SERVICE	PROVIDE GRADUATE DEGREES IN EXPRESSIVE THERAPIES AND CREATIVE ARTS LEARNING	725,047
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTING		34,125,043
3a Sub-total	1	2			34,850,090
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	1	2			34,850,090

1

(i) Method of valuation
(book, FMV, appraisal, other)

3 Enter total number of other organizations or entities

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Use Part V if additional space is needed.

[illegible]

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)*

☒ Yes ☐ No
- 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)*

☐ Yes ☒ No
- 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)*

☒ Yes ☐ No
- 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)*

☒ Yes ☐ No
- 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 ☒ No
- 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).*

☐ Yes ☒ No

Additional Data

Software ID:
Software Version:
EIN: 04-2103589
Name: LESLEY UNIVERSITY

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

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
LESLEY UNIVERSITY

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Employer identification number
04-2103589

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

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

Part II

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

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

2

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

3

Enter total number of other organizations ▶

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS	1559		15,783,142	FMV	SCHOLARSHIPS ARE GIVEN OUT AS BURSAR CREDITS TO THE STUDENT'S ACCOUNT

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 ALL GRANTS PROVIDED BY THE UNIVERSITY ARE FOR FINANCIAL AID TO STUDENTS GRANTS AND OTHER ASSISTANCE ARE RELATED TO INSTITUTIONAL FINANCIAL AID FOR WHICH STUDENTS APPLY THROUGH THE FINANCIAL AID OFFICE ALL AID IS AWARDED BASED ON CERTAIN GUIDELINES AND IS CREDITED DIRECTLY TO STUDENTS' TUITION ACCOUNTS ALL AWARDS ARE DIRECTLY RELATED TO THE STUDENTS' EDUCATION AT THE INSTITUTION'S PHYSICAL LOCATION IN THE UNITED STATES STUDENTS ARE REQUIRED TO COMPLETE A REVIEW WITH INSTRUCTORS AT THE END OF EACH SEMESTER TO RECEIVE CREDIT

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
LESLEY UNIVERSITY

Employer identification number

04-2103589

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div> <div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input checked="" type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div> <div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use 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 W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOSEPH B MOORE	(i)	334,000	30,000	5,221	46,760	37,667	453,648	0
	(ii)	0	0	0	0	0	0	0
(2) MARY LOU BATT	(i)	183,933	0	1,081	13,988	3,285	202,287	0
	(ii)	0	0	0	0	0	0	0
(3) MARTHA B MCKENNA	(i)	181,920	0	16,713	15,231	21,394	235,258	0
	(ii)	0	0	0	0	0	0	0
(4) SANDRA DORAN	(i)	192,510	0	417	25,122	21,412	239,461	0
	(ii)	0	0	0	0	0	0	0
(5) BERNICE BRADIN	(i)	188,081	0	1,125	13,447	10,056	212,709	0
	(ii)	0	0	0	0	0	0	0
(6) COLM J RENEHAN	(i)	178,251	0	239	12,807	10,723	202,020	0
	(ii)	0	0	0	0	0	0	0
(7) JEFFREY HANDLER	(i)	174,963	0	658	12,434	8,204	196,259	0
	(ii)	0	0	0	0	0	0	0
(8) MARY LOU DYMSKI	(i)	171,800	0	655	13,274	17,965	203,694	0
	(ii)	0	0	0	0	0	0	0
(9) KAREN BOUDREAU SHEA	(i)	170,527	0	148	13,013	3,775	187,463	0
	(ii)	0	0	0	0	0	0	0
(10) SHAUN MCNIFF	(i)	147,310	0	7,975	12,229	18,356	185,870	0
	(ii)	0	0	0	0	0	0	0
(11) STANLEY TRECKER	(i)	155,192	0	1,492	10,977	2,260	169,921	0
	(ii)	0	0	0	0	0	0	0
(12) WILLIAM STOKES	(i)	135,937	0	10,581	11,336	18,335	176,189	0
	(ii)	0	0	0	0	0	0	0
(13) LEO F RICE JR	(i)	160,303	0	371	7,241	19,826	187,741	0
	(ii)	0	0	0	0	0	0	0
(14) MARIO R BURUNDA	(i)	141,077	0	18,104	13,521	1,883	174,585	0
	(ii)	0	0	0	0	0	0	0
(15) IRENE FOUNTAS	(i)	145,946	0	784	11,932	9,097	167,759	0
	(ii)	0	0	0	0	0	0	0
(16) KAREN L MUNCASTER	(i)	139,056	0	248	9,802	1,633	150,739	0
	(ii)	0	0	0	0	0	0	0

Part III

Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	WHEN THE PRESIDENT'S SPOUSE TRAVELS AND IT IS PAID FOR BY THE UNIVERSITY, SHE IS PERFORMING DUTIES ON BEHALF OF THE UNIVERSITY. THE PRESIDENT RESIDES IN UNIVERSITY PROVIDED HOUSING, WHICH IS LESS THAN 1/2 MILE FROM MAIN CAMPUS. THE PROVOST RESIDES IN AN ON-CAMPUS APARTMENT ON A PART-TIME BASIS. THE VALUE OF THE HOUSING IS ADDED TO HER INCOME. THE UNIVERSITY PROVIDES A HOUSE CLEANER FOR THE PRESIDENT AND PERFORMS ALL NECESSARY MAINTENANCE ON THE HOME.
	PART I, LINE 4B	JOSEPH MOORE, THE PRESIDENT OF THE UNIVERSITY, PARTICIPATED IN A 457F PLAN AS PART OF HIS OVERALL COMPENSATION PACKAGE. THE TOTAL CONTRIBUTED ON HIS BEHALF TOTALLED \$29,610.
	PART I, LINE 7	FOR THE PRESIDENT OF THE UNIVERSITY, A BONUS OF UP TO \$35,000 MAY BE AWARDED. THE BOARD OF TRUSTEES DETERMINES THE AMOUNT BASED ON THE BOARD'S ASSESSMENT OF THE PRESIDENT ACHIEVING CERTAIN AGREED-UPON GOALS AND APPROVES THE DETERMINED AMOUNT FOR PAYMENT.

Software ID:
Software Version:
EIN: 04-2103589
Name: LESLEY UNIVERSITY

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JOSEPH B MOORE	(i) (ii)	334,000 0	30,000 0	5,221 0	46,760 0	37,667 0	453,648 0	0 0
MARY LOU BATT	(i) (ii)	183,933 0	0 0	1,081 0	13,988 0	3,285 0	202,287 0	0 0
MARTHA B MCKENNA	(i) (ii)	181,920 0	0 0	16,713 0	15,231 0	21,394 0	235,258 0	0 0
SANDRA DORAN	(i) (ii)	192,510 0	0 0	417 0	25,122 0	21,412 0	239,461 0	0 0
BERNICE BRADIN	(i) (ii)	188,081 0	0 0	1,125 0	13,447 0	10,056 0	212,709 0	0 0
COLM J RENEHAN	(i) (ii)	178,251 0	0 0	239 0	12,807 0	10,723 0	202,020 0	0 0
JEFFREY HANDLER	(i) (ii)	174,963 0	0 0	658 0	12,434 0	8,204 0	196,259 0	0 0
MARY LOU DYMSKI	(i) (ii)	171,800 0	0 0	655 0	13,274 0	17,965 0	203,694 0	0 0
KAREN BOUDREAU SHEA	(i) (ii)	170,527 0	0 0	148 0	13,013 0	3,775 0	187,463 0	0 0
SHAUN MCNIFF	(i) (ii)	147,310 0	0 0	7,975 0	12,229 0	18,356 0	185,870 0	0 0
STANLEY TRECKER	(i) (ii)	155,192 0	0 0	1,492 0	10,977 0	2,260 0	169,921 0	0 0
WILLIAM STOKES	(i) (ii)	135,937 0	0 0	10,581 0	11,336 0	18,335 0	176,189 0	0 0
LEO F RICE JR	(i) (ii)	160,303 0	0 0	371 0	7,241 0	19,826 0	187,741 0	0 0
MARIO R BURUNDA	(i) (ii)	141,077 0	0 0	18,104 0	13,521 0	1,883 0	174,585 0	0 0
IRENE FOUNTAS	(i) (ii)	145,946 0	0 0	784 0	11,932 0	9,097 0	167,759 0	0 0
KAREN L MUNCASTER	(i) (ii)	139,056 0	0 0	248 0	9,802 0	1,633 0	150,739 0	0 0

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Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

DLN: 93493136021772

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
LESLEY UNIVERSITY

Employer identification number
04-2103589

Part I Bond Issues											
(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A MASS DEVELOPMENT FINANCE AGENCY	04-3431814	57583F3B5	12-19-2003	26,000,000	REFINANCE EXISITING DEBT AND FUND NEW CAPITAL PROJECTS	X			X		X
B MASS DEVELOPMENT FINANCE AGENCY	04-3431814		05-19-2006	7,000,000	FUND NEW CAPITAL PROJECTS		X		X	X	
C MASS HEALTH AND EDUCATIONAL FACILITIES AUTHORITY	04-2456011	57586EGP0	03-10-2009	56,221,393	FUND NEW CAPITAL PROJECTS		X		X		X
D MASS DEVELOPMENT FINANCE AGENCY	04-3431814	57583R7Z2	03-30-2011	32,013,314	REFINANCE EXISITING DEBT AND FUND NEW CAPITAL PROJECTS		X		X		X

Part II Proceeds											
				A		B		C		D	
1	Amount of bonds retired										
2	Amount of bonds legally defeased			26,000,000							
3	Total proceeds of issue			26,000,000		7,000,000		56,221,393		32,013,314	
4	Gross proceeds in reserve funds			99,726		99,726		4,875,066		1,578,778	
5	Capitalized interest from proceeds			294,767		112,114		30,568		428	
6	Proceeds in refunding escrow			18,960,185						22,757,001	
7	Issuance costs from proceeds			520,000		35,000		611,025		497,603	
8	Credit enhancement from proceeds			827,429				827,429		500,819	
9	Working capital expenditures from proceeds										
10	Capital expenditures from proceeds			6,225,048		6,753,160		49,848,618		3,872,932	
11	Other spent proceeds			28,687				28,687		1,672,796	
12	Other unspent proceeds			1,132,957						1,132,957	
13	Year of substantial completion			2006		2007		2010		2013	
14	Were the bonds issued as part of a current refunding issue?			Yes	No	Yes	No	Yes	No	Yes	No
				X			X		X		X
15	Were the bonds issued as part of an advance refunding issue?			X			X		X	X	
16	Has the final allocation of proceeds been made?			X		X		X			X
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?			X		X		X		X	

Part III Private Business Use											
				A		B		C		D	
				Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?				X		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?			X		X		X		X	

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Cat No 50193E

Schedule K (Form 990) 2010

Part IIIPrivate Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X		X		X		X
b	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
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	0 %		0 %		0 %		0 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 500 %		1 640 %		4 240 %	
6	Total of lines 4 and 5	0 %		0 500 %		1 640 %		4 240 %	
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X		X	

Part IVArbitrage

		A		B		C		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?		X		X		X		X
2	Is the bond issue a variable rate issue?	X		X		X			X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	X			X		X		X
b	Name of provider	BANK OF AMERICA							
c	Term of hedge	30 0000000000000							
d	Was the hedge superintegrated?	X							
e	Was a hedge terminated?	X							
4a	Were gross proceeds invested in a GIC?		X		X		X		X
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
6	Did the bond issue qualify for an exception to rebate?		X		X		X		X

Part VSupplemental Information

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

Identifier	Return Reference	Explanation

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2010

Open to Public Inspection

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

Name of the organization
LESLEY UNIVERSITY

Employer identification number
04-2103589

Part I

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 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles .				
7 Boats and planes				
8 Intellectual property . .				
9 Securities—Publicly traded	X	6	114,700	FMV ON DATE OF SALE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 Real estate—Other . .				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts . .				
23 Scientific specimens . .				
24 Archeological artifacts .				
25 Other ► (_____)				
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	0

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	Yes	No
b	If "Yes," describe the arrangement in Part II		No
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?		No
b	If "Yes," describe in Part II		
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

<div>SCHEDULE O</div> <div>(Form 990 or 990-EZ)</div> <div>Department of the Treasury</div> <div>Internal Revenue Service</div>	<div>Supplemental Information to Form 990 or 990-EZ</div> <div>Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.</div> <div>▶ Attach to Form 990 or 990-EZ.</div>	OMB No 1545-0047
		2010
	<div>Name of the organization</div> <div>LESLEY UNIVERSITY</div>	<div>Employer identification number</div> <div>04-2103589</div>

Identifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	LINE 4A CONTINUATION	CORE VALUES DEMOCRACY THE FUNDAMENTAL PURPOSE OF EDUCATION IN A DEMOCRATIC SOCIETY IS TO PROVIDE OPPORTUNITIES FOR ALL TO PARTICIPATE IN THE CULTURAL, POLITICAL, AND ECONOMIC LIFE OF THE NATION AND THE WORLD AT LESLEY , THESE DEMOCRATIC IDEALS ARE REFLECTED IN AN ACADEMIC ENVIRONMENT THAT ENCOURAGES SCHOLARSHIP, FREEDOM OF EXPRESSION, AND AN OPEN EXCHANGE OF IDEAS INQUIRY LESLEY UNIVERSITY IS DEVOTED TO ACADEMIC EXCELLENCE THROUGH ACTIVE, TRANSFORMATIVE TEACHING AND LEARNING, ARTISTIC CREATIVITY, CRITICAL INQUIRY, AND INDIVIDUAL DEVELOPMENT ACROSS THE LIFESPAN WE CREATE AND DELIVER INNOVATIVE INTERDISCIPLINARY PROGRAMS, WHILE VALUING HIGH-QUALITY INSTRUCTION, RESEARCH AND SCHOLARSHIP, ADVOCACY , AND OUTREACH TO LOCAL AND GLOBAL COMMUNITIES EQUITY WE VALUE AND RESPECT ALL INDIVIDUALS AND THEIR COMMUNITIES FOR THEIR UNIQUE BACKGROUNDS AND CAPACITIES LESLEY LEARNING COMMUNITIES EDUCATE STUDENTS TO PURSUE EDUCATIONAL, SOCIAL, SCIENTIFIC, AND ARTISTIC ENDEAVORS TO MEET THE NEEDS OF DIVERSE POPULATIONS AND UNDERScore THE IMPORTANCE OF SOCIAL JUSTICE COMMUNITY LEARNING IS A COLLECTIVE ENDEAVOR THAT INVOLVES STUDENTS, EDUCATORS, FAMILIES, AND COMMUNITIES WE BELIEVE IN THE POWER OF INDIVIDUALS, WORKING COLLABORATIVELY AND WITH INTEGRITY, TO BRING ABOUT CONSTRUCTIVE CHANGE IN LOCAL, NATIONAL, GLOBAL, AND ECOLOGICAL COMMUNITIES

Additional Data

Software ID:
Software Version:
EIN: 04-2103589
Name: LESLEY UNIVERSITY

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
HON JOYCE LONDON ALEXANDER TRUSTEE	1 00	X						0	0	0
MRS GERALDINE M BLOOMBERG TRUSTEE	1 00	X						0	0	0
MRS JEAN AXLINE TRUSTEE	1 00	X						0	0	0
MR HAL BELODOFF TRUSTEE	1 00	X						0	0	0
MR JAMES L BILDNER TRUSTEE	1 00	X						0	0	0
MS KAREN COTTON CHAPLIN TRUSTEE	1 00	X						0	0	0
MR RICHARD J DOUCETTE TRUSTEE	1 00	X						0	0	0
DR BERNARD HARLESTON TRUSTEE	1 00	X						0	0	0
MR CHARLES H HOOD TRUSTEE	1 00	X						0	0	0
MR RICHARD A JALKUT TRUSTEE	1 00	X						0	0	0
MS JUANITA JAMES TRUSTEE	1 00	X						0	0	0
MS JANA KARP TRUSTEE	1 00	X						0	0	0
MR MATTHEW KOZOL TRUSTEE, SECRETARY	1 00	X		X				0	0	0
MS EILEEN LADIEU TRUSTEE	1 00	X						0	0	0
MR MICHAEL E MOONEY TRUSTEE	1 00	X						0	0	0
MRS CAROL C MORIARTY TRUSTEE	1 00	X						0	0	0
MS MICHELLE O'BRIEN TRUSTEE	1 00	X						0	0	0
MR JOHN O PARKER TRUSTEE	1 00	X						0	0	0
MR DONALD M PERRIN TRUSTEE	1 00	X						0	0	0
MS DEBORAH SCHWARTZ RAIZES TRUSTEE, CHAIR	1 00	X		X				0	0	0
MS BARBARA RUSSELL TRUSTEE	1 00	X						0	0	0
MR ROBERT SAGE TRUSTEE, TREASURER	1 00	X		X				0	0	0
MR MAURICE SKOLER TRUSTEE	1 00	X						0	0	0
MR KENNETH Z SLATER TRUSTEE	1 00	X						0	0	0
MR GARY SMITH TRUSTEE	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
MRS DAVID SQUIRE TRUSTEE	1 00	X						0	0	0	
MS ENID M STARR TRUSTEE	1 00	X						0	0	0	
MS JANET STEINMAYER TRUSTEE	1 00	X						0	0	0	
MS LORING LOW STEVENS TRUSTEE	1 00	X						0	0	0	
MR HANS D STRAUCH TRUSTEE	1 00	X						0	0	0	
MR DAVID A SWOPE TRUSTEE	1 00	X						0	0	0	
MS PAULA VANDERNOOT TRUSTEE	1 00	X						0	0	0	
MR CHRISTOPHER WILSON TRUSTEE	1 00	X						0	0	0	
MR CARL M YOUNGMAN TRUSTEE	1 00	X						0	0	0	
JOSEPH B MOORE PRESIDENT	40 00	X		X				369,221	0	84,427	
MARY LOU BATT VP OF ADMINISTRATION	40 00			X				185,014	0	17,273	
MARTHA B MCKENNA PROVOST	40 00			X				198,633	0	36,625	
SANDRA DORAN VP & GENERAL COUNSEL	40 00			X				192,927	0	46,534	
BERNICE BRADIN VP OF FINANCE/CFO	40 00			X				189,206	0	23,503	
KATHERINE MCWEY ASST SECRETARY	40 00			X				60,885	0	23,361	
COLM J RENEHAN VP OF ADVANCEMENT	40 00				X			178,490	0	23,530	
JEFFREY HANDLER VP OF ENROLLMENT PLANNING	40 00				X			175,621	0	20,638	
MARY LOU DYMSKI VP OF BUDGETING & FIN PLANNING	40 00				X			172,455	0	31,239	
KAREN BOUDREAU SHEA CHIEF INFO OFFICER & DIRECTOR	40 00				X			170,675	0	16,788	
SHAUN MCNIFF DEAN OF LESLEY COLLEGE	40 00				X			155,285	0	30,585	
STANLEY TRECKER DEAN OF THE ART INST OF BOSTON	40 00				X			156,684	0	13,237	
WILLIAM STOKES INTERIM DEAN, SCH OF EDUCATION	40 00					X		146,518	0	29,671	
LEO F RICE JR DIRECTOR OF MARKETING	40 00					X		160,674	0	27,067	
MARIO R BURUNDA ASSOCIATE PROFESSOR	40 00					X		159,181	0	15,404	
IRENE FOUNTAS DIRECTOR, READING RECOVERY	40 00					X		146,730	0	21,029	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KAREN L MUNCASTER ASSOC VP ACADEMIC TECH	40.00					X		139,304	0	11,435

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

4d. Other program services				
(Code) (Expenses \$	15,783,142	including grants of \$	15,783,142) (Revenue \$
EXPENSES RELATED TO FINANCIAL AID FOR STUDENTS THE PURPOSE OF FINANCIAL AID IS TO HELP YOU ATTAIN YOUR GOAL OF A LESLEY UNIVERSITY EDUCATION, BY OFFERING FINANCIAL ASSISTANCE IN THE FORM OF GRANTS, LOANS, AND STUDENT WORK OPPORTUNITIES PLEASE BE ASSURED THAT DESPITE THE CURRENT ECONOMIC SITUATION, THE OFFICE OF FINANCIAL AID REMAINS VERY VIGILANT AND HAS BEEN PROACTIVE IN ASSURING THAT BOTH FEDERAL AND PRIVATE EDUCATIONAL LOAN OPTIONS ARE AVAILABLE TO STUDENTS				
(Code) (Expenses \$	9,406,634	including grants of \$) (Revenue \$
AUXILIARY ENTERPRISES 12,184,604)				

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		ONCE MANAGEMENT REVIEWS THE 990, IT IS FORWARDED TO THE AUDIT COMMITTEE FOR REVIEW ONCE THE REVIEW BY THE AUDIT COMMITTEE IS COMPLETE, IT IS APPROVED BY THE AUDIT CHAIRPERSON IT IS ALSO PLACED ON A SECURE WEBSITE FOR ALL THE TRUSTEES TO REVIEW PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR, EACH MEMBER OF THE BOARD OF TRUSTEES, ALL OFFICERS AND EACH KEY EMPLOYEE IS ASKED TO REVIEW THE UNIVERSITY'S CONFLICT OF INTEREST POLICY AND SUBMIT A DISCLOSURE STATEMENT REGARDING ANY CONFLICTS OF INTEREST THEY MAY HAVE. NEW TRUSTEES AND KEY EMPLOYEES ARE ASKED TO REVIEW THE POLICY AND SUBMIT A DISCLOSURE STATEMENT REGARDING ANY CONFLICTS OF INTEREST THEY MAY HAVE UPON COMMENCEMENT OF THEIR TERM OR THEIR EMPLOYMENT. THE ASSISTANT SECRETARY COLLECTS THE DISCLOSURE STATEMENTS. THE POLICY DESCRIBES A PROCESS FOR THE REVIEW OF POTENTIAL AND ACTUAL CONFLICTS OF INTEREST BY THE BOARD OF TRUSTEES OR A COMMITTEE OF THE BOARD.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	FUNCTIONAL COMPARABLES WERE USED ON ALL THE SENIOR OFFICERS AND THE PRESIDENT THROUGH A SURVEY GROUP IN DETERMINING COMPENSATION BASED ON FUNCTION, BUDGET SIZE AND STUDENT POPULATIONS, THE CUPA-HR COMPARABLES WERE USED, WITH THE EXCEPTION OF THE VP FOR NATIONAL PLANNING AND ADMINISTRATION THE VP FOR NATIONAL PLANNING AND ADMINISTRATION WAS A NEWLY DEVELOPED POSITION TO THE UNIVERSITY LOOKING AT THE COMPENSATION INFORMATION WITH REGARD TO THE VP OF MARKETING AND A REVIEW OF THE INTERNAL COMPENSATION WITHIN, THE UNIVERSITY DETERMINED THE BASE SALARY CUPA PROVIDES A COMPREHENSIVE AND UP TO DATE SALARY DATA FOR COLLEGE AND UNIVERSITIES THEY COLLECT INSTITUTION-SPECIFIC AND POSITION SALARY AND DEMOGRAPHIC DATA FOR ADMINISTRATIVE POSITIONS IN RELATION TO PUBLIC AND PRIVATE INSTITUTIONS AS WELL AS THE BUDGET SIZE AND TYPES OF DEGREES GRANTED WITHIN THE INSTITUTIONS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	ALL GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. OUR FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE NACUBO WEBSITE. OUR FORMS 990 (CURRENT AND PRIOR THREE YEARS) ARE ALSO AVAILABLE ON THE OFFICIAL WEBSITE OF THE ATTORNEY GENERAL OF MASSACHUSETTS AT WWW.CHARITIES.AGO.STATE.MA.US AND GUIDESTAR AT WWW2.GUIDESTAR.ORG . WE ALSO MAKE OUR FORM 990, FORM 1023, FORM 990-T, ARTICLES OF ORGANIZATION, AND BYLAWS AVAILABLE TO THE PUBLIC UPON REQUEST. OUR AUDITED FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE OFFICIAL WEBSITE OF THE ATTORNEY GENERAL OF MASSACHUSETTS AT WWW.CHARITIES.AGO.STATE.MA.US .

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 13 & 14	THE ORGANIZATION DOES NOT HAVE A CENTRALIZED WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY , THOUGH DEPARTMENTS WITHIN THE UNIVERSITY DO HAVE DEPARTMENT SPECIFIC RETENTION AND DESTRUCTION POLICIES THE ORGANIZATION DOES HAVE A WRITTEN WHISTLEBLOWER POLICY THAT WAS DISCUSSED WITH THE AUDIT COMMITTEE SUBSEQUENT TO ITS ADOPTION

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 19,634,216 REALIZED GAIN ON INTEREST RATE SWAP 660,412 TOTAL TO FORM 990, PART XI, LINE 5 20,294,628