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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047
		2010
		Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011				
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 SUFFOLK UNIVERSITY		D Employer identification number 04-2133255	
	Doing Business As		E Telephone number (617) 573-8630	
	Number and street (or P O box if mail is not delivered to street address) 8 ASHBURTON PLACE	Room/suite		
	City or town, state or country, and ZIP + 4 BOSTON, MA 021082770		G Gross receipts \$ 590,227,578	
	F Name and address of principal officer DANIELLE MANNING 8 ASHBURTON PLACE BOSTON,MA 021082770			
		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.SUFFOLK.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 1906	M State of legal domicile MA	

Part I	Summary
Activities & Governance	1 Briefly describe the organization's mission or most significant activities SUFFOLK UNIVERSITY'S MISSION IS TO PROVIDE QUALITY EDUCATION AT A REASONABLE COST FOR STUDENTS OF ALL AGES AND BACKGROUNDS WITH A STRONG EMPHASIS ON DIVERSITY
	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)
	4 Number of independent voting members of the governing body (Part VI, line 1b)
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)
Revenue	6 Total number of volunteers (estimate if necessary)
	7a Total unrelated business revenue from Part VIII, column (C), line 12
	b Net unrelated business taxable income from Form 990-T, line 34
Expenses	8 Contributions and grants (Part VIII, line 1h)
	9 Program service revenue (Part VIII, line 2g)
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)
	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)
	14 Benefits paid to or for members (Part IX, column (A), line 4)
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)
Net Assets or Fund Balances	16a Professional fundraising fees (Part IX, column (A), line 11e)
	b Total fundraising expenses (Part IX, column (D), line 25) ▶2,253,394
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)
	19 Revenue less expenses Subtract line 18 from line 12
	20 Total assets (Part X, line 16)
	21 Total liabilities (Part X, line 26)
	22 Net assets or fund balances Subtract line 21 from line 20

Part II Signature Block				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here	***** Signature of officer		2012-05-14 Date	
	DANIELLE MANNING TREASURER Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/> PTIN
	Firm's name ▶ KPMG LLP	Firm's EIN ▶		
	Firm's address ▶ 60 South Street Boston, MA 02111	Phone no ▶ (617) 988-1000		

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

SUFFOLK UNIVERSITY'S MISSION IS TO PROVIDE QUALITY EDUCATION AT A REASONABLE COST FOR STUDENTS OF ALL AGES AND BACKGROUNDS WITH A STRONG EMPHASIS ON DIVERSITY

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 \$ 123,703,273 including grants of \$ 36,884,085) (Revenue \$ 150,876,663)

THE COLLEGE OF ARTS AND SCIENCES PREPARES STUDENTS OF ALL AGES AND BACKGROUNDS TO LIVE MORE FULFILLING LIVES, TO APPRECIATE AND CONTRIBUTE TO THE COMMUNITIES OF WHICH THEY ARE MEMBERS AND TO REACH THEIR ETHICAL, PERSONAL, INTELLECTUAL AND FINANCIAL GOALS TO HELP ITS STUDENTS MAXIMIZE THEIR POTENTIAL, THE COLLEGE EMPHASIZES CRITICAL AND ANALYTICAL THINKING THROUGH A RIGOROUS "SUCCESS SKILLS" UNDERGRADUATE CORE PROGRAM IN WRITTEN AND ORAL COMMUNICATION, COMPUTING, ANALYZING AND INTEGRATING *CONTINUED ON SCHEDULE O*

4b

(Code) (Expenses \$ 59,367,851 including grants of \$ 16,991,619) (Revenue \$ 71,578,455)

THE SAWYER BUSINESS SCHOOL (SBS) CREATES A LEARNING ENVIRONMENT THAT ENABLES STUDENTS TO EMERGE AS SUCCESSFUL LEADERS IN THE PRACTICE OF GLOBAL BUSINESS AND PUBLIC SERVICES THE SBS VALUES EXCELLENCE IN EDUCATION AND RESEARCH, AND WORKS WITH ITS STUDENTS, ALUMNI, AND BUSINESS PARTNERS TO ACHIEVE THEIR GOALS THE PROGRAMS ARE BUILT ON THE CORE VALUES OF PROMOTING OPPORTUNITY, EXCELLENCE, QUALITY TEACHING, INCLUSION AND COLLABORATION, AND EXCEPTIONAL SERVICE APPROXIMATELY 4,000 STUDENTS WERE SERVED THIS YEAR

4c

(Code) (Expenses \$ 52,134,898 including grants of \$ 13,642,443) (Revenue \$ 65,506,790)

THE LAW SCHOOL IS DEDICATED TO WELCOMING STUDENTS FROM ALL BACKGROUNDS AND CIRCUMSTANCES AND EDUCATING THEM TO BECOME HIGHLY SKILLED AND ETHICAL LAWYERS WHO ARE WELL-PREPARED TO SERVE IN THEIR LOCAL COMMUNITIES, ACROSS THE NATION, AND AROUND THE WORLD THE LAW SCHOOL SEEKS TO DEVELOP IN ITS STUDENTS THE SKILLS NECESSARY TO SERVE THE PROFESSION'S CHANGING NEEDS IN AN INCREASINGLY DIVERSE, GLOBAL AND TECHNOLOGICALLY-DEPENDENT SOCIETY *CONTINUED ON SCHEDULE O*

4d

Other program services (Describe in Schedule O)

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

4e

Total program service expenses

\$ 235,206,022

Form 990 (2010)

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>	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	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>		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>	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>		
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>		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>		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>	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		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>	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>	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>		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		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>	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	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>		No
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>	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	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>	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>		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>	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions).</i>	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>		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>		No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>		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).		

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	Yes	
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	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	Yes	
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	Yes	
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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
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>			
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	

<div>Part V</div> <div>Statements Regarding Other IRS Filings and Tax Compliance</div> <div>Check if Schedule O contains a response to any question in this Part V</div>			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a384		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return.	2a4,638		
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	Yes	
b	If "Yes," enter the name of the foreign country: SP, SG 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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e	Did the organization 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	1a27		
b	Enter the number of voting members included in line 1a, above, who are independent	1b23		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its 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	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 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 filedMA
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. DANIELLE MANNING 8 ASHBURTON PLACE BOSTON, MA 021082770 (617) 573-8400

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								5,237,921	0	606,083

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▶277

3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

YesNo

3Yes

4Yes

5No

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
FOLEY HOAG LLP 155 SEAPORT BOULEVARD BOSTON, MA 02110	LEGAL SERVICES	806,870
TSOIKOBUS ASSOCIATES INC 1 BRATTLE SQUARE CAMBRIDGE, MA 02238	ARCHITECTS	584,641
CENTER FOR INTERNATIONAL STUDIES 17 NEW SOUTH STREET NORTHAMPTON, MA 01060	STUDY ABROAD SERVICE	499,147
CBT ARCHITECTS 110 CANAL STREET BOSTON, MA 02114	ARCHITECTS	469,775
REGAN COMMUNICATIONS GROUP INC 106 UNION WHARF BOSTON, MA 02109	CONSULTING	317,371

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 ▶23

Form 990 (2010)

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a						
	b	Membership dues	1b						
	c	Fundraising events	1c						
	d	Related organizations	1d						
	e	Government grants (contributions)	1e	4,450,749					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,071,428					
	g	Noncash contributions included in lines 1a-1f \$		214,085					
	h	Total. Add lines 1a-1f		7,522,177					
	Program Service Revenue	2a	Business Code						
		TUITION AND FEES	611710	266,790,811	266,790,811				
b		RESIDENCE HALLS AND DINING	721000	21,493,660	21,171,097	322,563			
c									
d									
e									
f		All other program service revenue							
g		Total. Add lines 2a-2f		288,284,471					
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)			3,158,546	59,513	3,099,033		
	4	Income from investment of tax-exempt bond proceeds . .			263,399		263,399		
	5	Royalties			0				
	6a	(i) Real		(ii) Personal					
		1,022,903		0					
		195,500							
		827,403		0					
	b	Less rental expenses							
	c	Rental income or (loss)							
	d	Net rental income or (loss)			827,403		827,403		
	7a	(i) Securities		(ii) Other					
		287,653,124		1,023,234					
		290,380,174		1,365,703					
		-2,727,050		-342,469					
	b	Less cost or other basis and sales expenses							
	c	Gain or (loss)							
	d	Net gain or (loss)			-3,069,519		-3,069,519		
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18		a 0					
		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 0					
		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 SOURCES		900099	1,299,724			1,299,724		
b									
c									
d	All other revenue								
e	Total. Add lines 11a-11d			1,299,724					
12	Total revenue. See Instructions			298,286,201	287,961,908	382,076	2,420,040		

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	70,750	70,750		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	65,242,317	65,242,317		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	2,205,080	2,205,080		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	5,085,762	169,673	4,701,647	214,442
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	100,338,699	85,824,866	13,500,566	1,013,267
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,671,138	5,903,115	662,029	105,994
9	Other employee benefits	10,169,337	7,863,923	2,218,853	86,561
10	Payroll taxes	7,133,300	5,968,910	1,074,295	90,095
a	Fees for services (non-employees) Management	0			
b	Legal	988,471		988,471	
c	Accounting	275,560		275,560	
d	Lobbying	121,063		121,063	
e	Professional fundraising services See Part IV, line 17	123,748			123,748
f	Investment management fees	348,228		348,228	
g	Other	30,000		30,000	
12	Advertising and promotion	3,200,327	2,303,005	767,668	129,654
13	Office expenses	4,276,067	1,067,552	3,157,186	51,329
14	Information technology	4,952,056	2,462,930	2,432,652	56,474
15	Royalties	0			
16	Occupancy	19,975,985	12,048,490	7,675,495	252,000
17	Travel	1,399,427	838,365	533,408	27,654
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	812,056	762,332	49,724	
20	Interest	17,327,430	10,673,697	6,653,733	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	12,142,881	7,480,015	4,662,866	
23	Insurance	1,195,220	796,813	398,407	
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	RESIDENCE HALL EXPENSES	9,755,739	9,755,739		
b	ACADEMIC SERVICES & SUPPORT	4,457,231	4,457,231		
c	OTHER PUBLIC SERVICE	2,670,261	2,670,261		
d	OTHER INSTRUCTION	2,579,367	2,579,367		
e	OTHER INSTITUTIONAL EXPENSES	1,102,081		1,032,712	69,369
f	All other expenses	8,231,388	4,061,591	4,136,990	32,807
25	Total functional expenses. Add lines 1 through 24f	292,880,969	235,206,022	55,421,553	2,253,394
26	Joint costs. Check here <input checked="" 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				1	
	2	Savings and temporary cash investments			1,271,336	2	968,180
	3	Pledges and grants receivable, net			2,417,457	3	2,052,790
	4	Accounts receivable, net			3,395,672	4	2,736,104
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			0	5	977,650
	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				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			3,930,514	9	7,092,023
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	424,963,532			
	b	Less: accumulated depreciation	10b	109,411,060	302,910,091	10c	315,552,472
	11	Investments—publicly traded securities			148,140,442	11	174,918,028
	12	Investments—other securities. See Part IV, line 11			8,600,251	12	9,417,194
	13	Investments—program-related. See Part IV, line 11			16,173,497	13	16,723,482
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			33,357,431	15	85,494,198
16	Total assets. Add lines 1 through 15 (must equal line 34)			520,196,691	16	615,932,121	
Liabilities	17	Accounts payable and accrued expenses			28,062,232	17	25,433,857
	18	Grants payable				18	
	19	Deferred revenue			8,684,327	19	9,348,054
	20	Tax-exempt bond liabilities			294,297,404	20	358,628,692
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			1,074,497	23	600,000
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			5,119,136	25	5,136,533
	26	Total liabilities. Add lines 17 through 25			337,237,596	26	399,147,136
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			153,479,137	27	185,149,971
	28	Temporarily restricted net assets			1,366,654	28	3,227,333
	29	Permanently restricted net assets			28,113,304	29	28,407,681
	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			182,959,095	33	216,784,985
34	Total liabilities and net assets/fund balances			520,196,691	34	615,932,121	

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	298,286,201
2	Total expenses (must equal Part IX, column (A), line 25)	2	292,880,969
3	Revenue less expenses Subtract line 2 from line 1	3	5,405,232
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	182,959,095
5	Other changes in net assets or fund balances (explain in Schedule O)	5	28,420,658
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	216,784,985

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 type="checkbox"/> Separate basis <input checked="" 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 SUFFOLK UNIVERSITY	Employer identification number 04-2133255
--	--

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?

11g(i)

☐

☐

(ii)

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

11g(ii)

☐

☐

(iii)

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

11g(iii)

☐

☐

h

☐

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(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									

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2010

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 IIIPart 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 SUFFOLK UNIVERSITY	Employer identification number 04-2133255
--	--

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><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><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></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?	Yes		121,063
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			121,063
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

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

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

Part IV Supplemental Information

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

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

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
SUFFOLK UNIVERSITY

Employer identification number

04-2133255

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><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> 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><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> 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)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

	Held at the End of the Year
2a	
2b	
2c	
2d	

3

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

4

Number of states where property subject to conservation easement is located ▶ _____

5

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

☐ Yes

☐ No

6

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

7

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

8

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

☐ Yes

☐ No

9

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

Part III

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

1a

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

1b

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	99,157,137	78,859,081	103,094,077	
b	Contributions	731,651	9,410,136	3,471,265	
c	Investment earnings or losses	27,476,355	10,887,920	-27,241,928	
d	Grants or scholarships				
e	Other expenditures for facilities and programs	5,425,244		464,333	
f	Administrative expenses				
g	End of year balance	121,939,899	99,157,137	78,859,081	

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 75 950 %

b

Permanent endowment ▶ 21 820 %

c

Term endowment ▶ 2 230 %

3a

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

(i)

unrelated organizations

3a(i)

Yes

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		36,609,784		36,609,784
b Buildings		291,952,022	60,667,655	231,284,367
c Leasehold improvements		27,852,544	9,175,266	18,677,278
d Equipment		51,909,843	39,568,139	12,341,704
e Other		16,639,339		16,639,339
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				315,552,472

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements				
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	298,286,201	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	292,880,969	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,405,232	
4	Net unrealized gains (losses) on investments	4	28,552,798	
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8	-132,140	
9	Total adjustments (net) Add lines 4 - 8	9	28,420,658	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	33,825,890	
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return				
1	Total revenue, gains, and other support per audited financial statements 	1	327,034,499	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments 	2a	28,552,798	
b	Donated services and use of facilities 	2b		
c	Recoveries of prior year grants 	2c		
d	Other (Describe in Part XIV) 	2d		
e	Add lines 2a through 2d	2e	28,552,798	
3	Subtract line 2e from line 1	3	298,481,701	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b 	4a		
b	Other (Describe in Part XIV) 	4b	-195,500	
c	Add lines 4a and 4b	4c	-195,500	
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12) 	5	298,286,201	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return				
1	Total expenses and losses per audited financial statements 	1	293,208,609	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities 	2a		
b	Prior year adjustments 	2b		
c	Other losses 	2c		
d	Other (Describe in Part XIV) 	2d	327,640	
e	Add lines 2a through 2d	2e	327,640	
3	Subtract line 2e from line 1	3	292,880,969	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b 	4a		
b	Other (Describe in Part XIV) 	4b		
c	Add lines 4a and 4b	4c		
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18) 	5	292,880,969	

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF ORGANIZATION'S COLLECTIONS	PART III, LINE 4	THE JOHN JOSEPH MOAKLEY ARCHIVE AND INSTITUTE AT SUFFOLK UNIVERSITY WAS ESTABLISHED BY SUFFOLK UNIVERSITY IN 2001 UPON CONGRESSMAN MOAKLEY'S GIFT OF HIS PAPERS. THE INSTITUTE IS DEDICATED TO THE PRESERVATION, STUDY, INTERPRETATION AND CELEBRATION OF CONGRESSMAN MOAKLEY'S LEGACY OF SERVICE AND POLITICAL AND PUBLIC POLICY LEADERSHIP THROUGH PROGRAMMING AND PROMOTION OF JOE MOAKLEY'S CONGRESSIONAL PAPERS. EXHIBIT PROGRAM: THE MOAKLEY INSTITUTE CURATES AND PRESENTS TWO TYPES OF EXHIBITS ON THE LIFE AND LEGACY OF CONGRESSMAN JOE MOAKLEY: GALLERY EXHIBITS AND TRAVELING EXHIBITS. GALLERY EXHIBITS ARE PRESENTED IN THE ADAMS GALLERY AT SUFFOLK UNIVERSITY LAW SCHOOL. TRAVELING EXHIBITS ARE DISPLAYED ON SUFFOLK UNIVERSITY CAMPUS AND AT TOWN HALLS, EDUCATIONAL INSTITUTIONS AND OTHER ORGANIZATIONS THROUGHOUT MASSACHUSETTS. BOTH TYPES OF EXHIBITS CONNECT PEOPLE TO CONGRESSMAN MOAKLEY'S PUBLIC SERVICE AND POLITICAL LEADERSHIP LEGACY AND TO THE RESOURCES AND PROGRAMMING OF THE ARCHIVE AND INSTITUTE. CONGRESSMAN MOAKLEY PAPERS: THE CONGRESSMAN MOAKLEY PAPERS CONSIST OF 522 BOXES OF MATERIALS THAT DOCUMENT THE CONGRESSMAN'S EARLY LIFE, HIS WORLD WAR II SERVICE, HIS TERMS IN THE MASSACHUSETTS HOUSE OF REPRESENTATIVES AND SENATE, AND HIS SERVICE IN THE U.S. CONGRESS. PRIMARILY, THE COLLECTION COVERS MOAKLEY'S CONGRESSIONAL CAREER FROM 1973 TO 2001, INCLUDING DOCUMENTS RELATED TO HIS LEGISLATIVE AND POLICY CAMPAIGNS CENTERED ON HUMAN RIGHTS, THE MOAKLEY COMMISSION IN EL SALVADOR, FIRE-SAFE CIGARETTES, AND HIS PROMOTION OF DISTRICT PROJECTS SUCH AS THE BOSTON HARBOR ISLANDS, THE BIG DIG, AND PRESERVATION OF HISTORIC SITES. JOHN JOSEPH MOAKLEY ORAL HISTORY PROJECT: THE MOAKLEY ARCHIVE ORAL HISTORY PROJECT SEEKS TO DOCUMENT AND PRESERVE VALUABLE INFORMATION AND OBSERVATIONS THAT MAY NOT BE A PART OF THE PAPER, PHOTOGRAPHIC, AND AUDIOVISUAL PORTIONS OF THE MOAKLEY PAPERS. RECORDING INTERVIEWS WITH THE CONGRESSMAN'S COLLEAGUES, STAFF, FAMILY, FRIENDS, CONSTITUENTS, AND OTHERS AFFECTED BY THE CENTRAL ISSUES OF HIS CAREER ALLOWS THE ARCHIVE TO DEVELOP A COMPLETE AND NUANCED PICTURE OF MOAKLEY'S LIFE AND SERVICE.
ENDOWMENT FUNDS	PART V, LINE 4	SUFFOLK UNIVERSITY'S ENDOWMENT CONSISTS OF APPROXIMATELY 240 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES, INCLUDING BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS. SPENDING FROM THE UNIVERSITY'S ENDOWMENTS IS DONOR-RESTRICTED TO VARIOUS PURPOSES. A MAJORITY OF THE FUNDS PROVIDE SCHOLARSHIPS AND FINANCIAL ASSISTANCE TO UNDERGRADUATE, GRADUATE, AND LAW SCHOOL STUDENTS. SOME OF THE OTHER USES OF THE FUNDS INCLUDE, BUT ARE NOT LIMITED TO, SUPPORT FOR FELLOWSHIPS, THE CREATION AND FUNDING OF DEPARTMENT CHAIRS, SUPPORT FOR VARIOUS UNIVERSITY CENTERS, AND SUPPORT FOR THE UNIVERSITY'S TEACHING AND RESEARCH ACTIVITIES. THE UNIVERSITY'S SPENDING POLICY IS DESIGNED TO PROVIDE THE UNIVERSITY A STABLE LEVEL OF FINANCIAL SUPPORT AND TO PRESERVE THE ENDOWMENT'S REAL VALUE.
OTHER LIABILITIES	PART XI, LINE 2	THE UNIVERSITY IS AN ORGANIZATION DESCRIBED UNDER INTERNAL REVENUE CODE (IRC) SECTION 501(C)(3), AND IS GENERALLY EXEMPT FROM INCOME TAXES UNDER THE PROVISIONS OF IRC SECTION 501(A). THE UNIVERSITY BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS.
OTHER CHANGES IN NET ASSETS	PART XI, LINE 8	POST - RETIREMENT OBLIGATION (132,140) ----- TOTAL (132,140)
OTHER REVENUE INCLUDED ON RETURN NOT IN FINANCIAL STATEMENTS	PART XII, LINE 4B	RENT EXPENSE (195,500) ----- TOTAL (195,500)
OTHER EXPENSES INCLUDED IN FINANCIAL STATEMENTS NOT ON RETURN	PART XIII, LINE 2D	POST - RETIREMENT OBLIGATION 132,140 RENT EXPENSE 195,500 ----- TOTAL 327,640

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
SUFFOLK UNIVERSITY

Employer identification number

04-2133255

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 II Supplemental Information

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

Identifier	Return Reference	Explanation
RACIALLY NONDISCRIMINATORY POLICY	PART I, QUESTION 3	THE UNIVERSITY ADVERTISES IN LOCAL NEWSPAPERS AND PUBLICIZES ITS POLICY ON ITS WEBSITE AND IN VARIOUS LITERATURE
FINANCIAL AID OR ASSISTANCE FROM GOVERNMENTAL AGENCY	LINE 6A	THE UNIVERSITY RECEIVES AID FOR STUDENTS FROM SUCH FEDERAL PROGRAMS AS PELL, SEOG, FEDERAL WORK STUDY, PERKINS, DIRECT LOANS, ETC. THE UNIVERSITY IS ALSO THE RECIPIENT OF SEVERAL FEDERAL AND STATE GRANTS FROM SUCH AGENCIES AS OFFICE OF JUSTICE PROGRAMS, NATIONAL SCIENCE FOUNDATION AND THE U.S. DEPARTMENT OF EDUCATION, AMONG OTHERS.

1

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

3 Enter total number of other organizations or entities ► _____

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

Part V

Supplemental Information

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

Identifier	Return Reference	Explanation
MONITOR THE USE OF GRANT FUNDS OUTSIDE THE U S	PART I, LINE 2	SUFFOLK UNIVERSITY DOES NOT AWARD GRANTS TO FOREIGN GOVERNMENTS OR FOREIGN ORGANIZATIONS GRANTS TO FOREIGN INDIVIDUALS ARE IN THE FORM OF SCHOLARSHIPS THAT ARE APPLIED AGAINST TUITION THAT HAS BEEN BILLED ALL GRANT FUNDS ARE MONITORED WITH AT LEAST TWO DIFFERENT DEPARTMENTS PROVIDING CHECKS AND BALANCES TO ENSURE THAT THE FUNDS ARE TRACKED, REPORTED AND USED AS REQUIRED IN THE GRANT LANGUAGE TITLE IV GRANT FUNDS ARE AWARDED BY THE FINANCIAL AID OFFICE BASED ON FINANCIAL NEED AS DETERMINED BY UNIVERSITY POLICIES RECORDS OF THE AMOUNT OF THE GRANTS, GRANTEE'S ELIGIBILITY AND SELECTION CRITERIA ARE MAINTAINED BY THE FINANCIAL AID OFFICE

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number

04-2133255

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

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

a	<input checked="" type="checkbox"/>	Mail solicitations	e	<input checked="" type="checkbox"/>	Solicitation of non-government grants
b	<input checked="" type="checkbox"/>	Internet and e-mail solicitations	f	<input checked="" type="checkbox"/>	Solicitation of government grants
c	<input checked="" type="checkbox"/>	Phone solicitations	g	<input type="checkbox"/>	Special fundraising events
d	<input checked="" type="checkbox"/>	In-person solicitations			

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
LANGLEY INNOVATIONS 10962 BLOOMINGDALE DRIVE ROCKVILLE, MD 20852	STRATEGY CONSULTING		No	0	123,748	0
Total				0	123,748	0

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

MA

Part II Fundraising Events.

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

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		(event type)	(event type)	(total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts			
	2	Less Charitable contributions			
	3	Gross income (line 1 minus line 2)			
Direct Expenses	4	Cash prizes			
	5	Non-cash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses			
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			

Part III Gaming.

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

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

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name  _____



Address  _____

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization  \$ _____ and the amount of gaming revenue retained by the third party  \$ _____


c


If "Yes," enter name and address

Name  _____

Address  _____

16 Gaming manager information

Name  _____

Gaming manager compensation  \$ _____

Description of services provided  _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17


Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ _____

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
FUNDRAISERS	PART I, LINE 2B, COLUMN (III) & (V)	LANGLEY INNOVATIONS DID NOT HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS MADE TO SUFFOLK UNIVERSITY OF THE TOTAL AMOUNT PAID TO LANGLEY INNOVATIONS BY SUFFOLK UNIVERSITY, AMOUNTS PAID FOR SERVICES WERE \$105,000, AND AMOUNTS PAID FOR REIMBURSEMENT OF EXPENSES WERE \$18,748
STATE REGISTRATION	PART I, LINE 3	SUFFOLK UNIVERSITY IS A PRIVATE CHARITY FOR HIGHER EDUCATION NO REGISTRATION IS REQUIRED AS A RESULT OF THE FUNDRAISING ACTIVITIES PERFORMED BY LANGLEY INNOVATIONS ONLY ALUMNI ARE SOLICITED IN OTHER STATES THE UNIVERSITY DOES NOT DO MASS MAILINGS TO THE PUBLIC

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
SUFFOLK UNIVERSITY

Employer identification number
04-2133255

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
(1) BOSTON REDEVELOPMENT AUTHORITY1 CITY HALL BOSTON, MA 02201	04-6006386	CITY OF BOSTON	25,000				CLEAN CORNERS PRGM
(2) BOSTON MUNICIPAL RESEARCH BUREAU333 WASHINGTON STREET BOSTON, MA 02108	22-2673755	501(C)(3)	7,000				RESEARCH SUPPORT
(3) NEW ENGLAND COUNCIL INC98 WASHINGTON STREET BOSTON, MA 02114	04-1661090	501(C)(6)	5,500				SUPPORT

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) FINANCIAL AID - UNIVERSITY, FEDERAL AND STATE	5135	65,242,317			

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
MONITOR THE USE OF GRANT FUNDS IN THE U S	PART I, LINE 2	ALL GRANTS AWARDED ARE BASED ON NEED AND/OR MERIT AND CONFORM TO FEDERAL, STATE AND INSTITUTIONAL REGULATIONS ELIGIBILITY IS BASED ON A THOROUGH REVIEW AND VERIFICATION OF A FAMILY'S INCOME, ASSETS, SIZE AND NUMBER OF DEPENDENTS ENROLLED IN COLLEGE ANNUAL EXPENDITURE REPORTS ARE SUBMITTED TO THE FEDERAL AND STATE GOVERNMENTS FOR REVIEW THE FUND EXPENDITURES ARE REVIEWED FOR COMPLIANCE IN AN ANNUAL AUDIT CONDUCTED BY AN INDEPENDENT ACCOUNTING FIRM

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
SUFFOLK UNIVERSITY

Employer identification number
04-2133255

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 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 type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input 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 checked="" 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	Yes
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	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use 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				
See Additional Data Table								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

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
HEALTH CLUB DUES	SCHEDULE J, PART I, LINE 1	HEALTH CLUB DUES ARE PROVIDED TO BARRY BROWN AND WERE REPORTED AS TAXABLE INCOME INCLUDED ON FORM W-2
SEVERANCE PAYMENT	PART I, LINE 4A	DAVID SARGENT RECEIVED A SEVERANCE PAYMENT OF \$96,657
SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	PART I, LINE 4B	DAVID SARGENT PARTICIPATED IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN. THE AMOUNT CONTRIBUTED TO THIS PLAN DURING CALENDAR YEAR 2010 WAS \$159,000.

Schedule K (Form 990)	Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.										OMB No 1545-0047	
											2010	
	Department of the Treasury Internal Revenue Service											Open to Public Inspection
Name of the organization SUFFOLK UNIVERSITY										Employer identification number 04-2133255		

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 MA HEALTH & EDUCATION FACILITIES - SER 200596	04-2456011	57586EMVO	11-13-2009	18,712,831	REFUND SERIES 2005	X			X		X
B MA HEALTH & EDUCATION FACILITIES - SER 200597	04-2456011	57586EMVO	11-13-2009	46,079,870	REFUND SERIES 2005	X			X		X
C MA HEALTH & EDUCATION FACILITIES - SER 200599	04-2456011	57586EMVO	11-13-2009	13,422,123	REFUND SERIES 2005	X			X		X
D MA HEALTH & EDUCATION FACILITIES - SER 2005NA	04-2456011	57586EMVO	11-13-2009	22,228,016	REFUND SERIES 2005	X			X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	217,955		536,710		156,333		258,898	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	18,712,831		46,079,870		13,422,123		22,228,016	
4	Gross proceeds in reserve funds	1,488,668		3,665,808		1,067,775		1,768,313	
5	Capitalized interest from proceeds	0		0		0		0	
6	Proceeds in refunding escrow	16,597,993		40,985,935		11,841,964		21,880,780	
7	Issuance costs from proceeds	207,262		503,395		147,826		245,569	
8	Credit enhancement from proceeds	0		0		0		0	
9	Working capital expenditures from proceeds	1,820,791		4,585,379		1,434,299		0	
10	Capital expenditures from proceeds	0		0		0		0	
11	Other spent proceeds	0		0		0		0	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2009		2009		2009		2009	
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	

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?	X		X		X		X	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	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 %		0 %		0 %	
6	Total of lines 4 and 5	0 %		0 %		0 %		0 %	
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								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
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 K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

SUFFOLK UNIVERSITY

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 on Schedule O (Form 990).**

► **Attach to Form 990.**

► **See separate instructions.**

OMB No 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

04-2133255

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) Pooled Financing	
						Yes	No	Yes	No	Yes	No
A 11% HEALTH & EDUCATION FACILITIES - REF 2005/2010	04-2450011	575500E17	11/11/2005	101.71	REFUND EFIE 2005						
B 11% HEALTH & EDUCATION FACILITIES - REF 2005/2010	04-2450011	575500E17	11/11/2005	101.71	REFUND EFIE 2005						
C 11% HEALTH & EDUCATION FACILITIES - REF 2005/2010	04-2450011	575500E17	11/11/2005	101.71	REFUND EFIE 2005						
D 11% HEALTH & EDUCATION FACILITIES - REF 2005/2010	04-2450011	575500E17	11/11/2005	101.71	REFUND EFIE 2005						

Part II Proceeds

	A		B		C		D	
1 Amount of bonds retired	217,955.		536,710.		156,333.		258,898.	
2 Amount of bonds legally defeased	0.		0.		0.		0.	
3 Total proceeds of issue	18,712,831.		46,079,870.		13,422,123.		22,228,016.	
4 Gross proceeds in reserve funds	1,488,668.		3,665,808.		1,067,775.		1,768,313.	
5 Capitalized interest from proceeds	0.		0.		0.		0.	
6 Proceeds in refunding escrows	16,597,993.		40,985,935.		11,841,964.		21,880,780.	
7 Issuance costs from proceeds	207,262.		503,395.		147,826.		245,569.	
8 Credit enhancement from proceeds	0.		0.		0.		0.	
9 Working capital expenditures from proceeds	1,820,791.		4,585,379.		1,434,299.		0.	
10 Capital expenditures from proceeds	0.		0.		0.		0.	
11 Other spent proceeds	0.		0.		0.		0.	
12 Other unspent proceeds	0.		0.		0.		0.	
13 Year of substantial completion	2009		2009		2009		2009	
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	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	
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No	Yes	No	Yes	No	Yes	No
		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 Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule K (Form 990) 2010

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

SUFFOLK UNIVERSITY

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 on Schedule O (Form 990).**

► **Attach to Form 990.**

► **See separate instructions.**

OMB No 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

04-2133255

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) Pooled Financing	
						Yes	No	Yes	No	Yes	No
A 11% HEALTH & EDUCATION FACILITIES - REFUNDING	04-2450011	575500E17	11/11/2009	100,000,000	REFUNDING						
B 11% HEALTH & EDUCATION FACILITIES - REFUNDING	04-2450011	575500E17	11/11/2009	10,000,000	REFUNDING						
C 11% HEALTH & EDUCATION FACILITIES - REFUNDING	04-2450011	575500E17	11/11/2009	10,000,000	REFUNDING						
D 11% HEALTH & EDUCATION FACILITIES - REFUNDING	04-2450011	575500E17	11/11/2009	10,000,000	REFUNDING						

Part II Proceeds

	A		B		C		D	
1 Amount of bonds retired	335,317.		230,761.		120,316.		332,032.	
2 Amount of bonds legally defeased	0.		0.		0.		0.	
3 Total proceeds of issue	28,789,061.		19,812,298.		10,329,888.		28,506,989.	
4 Gross proceeds in reserve funds	2,290,266.		1,576,135.		821,777.		2,267,827.	
5 Capitalized interest from proceeds	0.		0.		0.		0.	
6 Proceeds in refunding escrows	27,848,003.		19,163,407.		9,991,307.		27,864,648.	
7 Issuance costs from proceeds	313,374.		217,083.		113,566.		312,973.	
8 Credit enhancement from proceeds	0.		0.		0.		0.	
9 Working capital expenditures from proceeds	0.		0.		0.		0.	
10 Capital expenditures from proceeds	0.		0.		0.		0.	
11 Other spent proceeds	0.		0.		0.		0.	
12 Other unspent proceeds	0.		0.		0.		0.	
13 Year of substantial completion	2009		2009		2009		2009	
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	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	
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No	Yes	No	Yes	No	Yes	No
		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 Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule K (Form 990) 2010

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

SUFFOLK UNIVERSITY

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 on Schedule O (Form 990).**

► **Attach to Form 990.**

► **See separate instructions.**

OMB No 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

04-2133255

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) Pooled Financing	
						Yes	No	Yes	No	Yes	No
A 11% HEALTH & EDUCATION FACILITIES - REFUNDING	04-2450011	575500101	11/1/2009	100.00%	REFUNDING						
B 11% HEALTH & EDUCATION FACILITIES - REFUNDING	04-2450011	575500101	11/1/2009	100.00%	REFUNDING						
C 11% HEALTH & EDUCATION FACILITIES - REFUNDING	04-2450011	575500101	11/1/2009	100.00%	REFUNDING						
D 11% DEBT ELEMENT FINANCIAL SERVICES - REFUNDING	04-2450011	575500101	11/1/2009	100.00%	REFUNDING						

Part II Proceeds

	A		B		C		D	
1 Amount of bonds retired	228,350.		118,851.		649,477.		0.	
2 Amount of bonds legally defeased	0.		0.		0.		0.	
3 Total proceeds of issue	19,605,233.		10,204,103.		55,761,609.		65,889,765.	
4 Gross proceeds in reserve funds	1,557,662.		811,771.		4,436,023.		0.	
5 Capitalized interest from proceeds	0.		0.		0.		0.	
6 Proceeds in refunding escrows	19,163,254.		9,972,564.		56,220,006.		0.	
7 Issuance costs from proceeds	215,487.		113,594.		608,542.		1,147,663.	
8 Credit enhancement from proceeds	0.		0.		0.		0.	
9 Working capital expenditures from proceeds	0.		0.		0.		0.	
10 Capital expenditures from proceeds	0.		0.		0.		3,022,762.	
11 Other spent proceeds	0.		0.		0.		0.	
12 Other unspent proceeds	0.		0.		0.		61,767,324.	
13 Year of substantial completion	2009		2009		2009			
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?	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	
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No	Yes	No	Yes	No	Yes	No
		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 Paperwork Reduction Act Notice, see the Instructions for Form 990

Schedule K (Form 990) 2010

Part III Private 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 of bond-financed property?	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?	X		X		X		X	
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0.0000 %		0.0000 %		0.0000 %		0.0000 %	
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 ▶	0.0000 %		0.0000 %		0.0000 %		0.0000 %	
6 Total of lines 4 and 5	0.0000 %		0.0000 %		0.0000 %		0.0000 %	
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 IV Arbitrage

	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 qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
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 V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Part III Private 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 of bond-financed property?	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?	X		X		X		X	
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	.1500 %		0.0000 %		0.0000 %		.1500 %	
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 ▶	3.6300 %		0.0000 %		0.0000 %		3.6300 %	
6 Total of lines 4 and 5	3.7800 %		0.0000 %		0.0000 %		3.7800 %	
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 IV Arbitrage

	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 qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
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 V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K(see instructions)

Part III Private 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 of bond-financed property?	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?	X		X		X		X	
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0.0000 %		0.0000 %		0.0000 %		0.0000 %	
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 ▶	0.0000 %		0.0000 %		0.0000 %		0.0000 %	
6 Total of lines 4 and 5	0.0000 %		0.0000 %		0.0000 %		0.0000 %	
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 IV Arbitrage

	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 qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
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 V Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Schedule L
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
SUFFOLK UNIVERSITY

Employer identification number
04-2133255

Part I

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

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

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

2

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

\$

3

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

\$

Part II

Loans to and/or From Interested Persons.

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

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1) CAMILLE NELSON MORTGAGE-RESIDENCE		X	977,650	977,650		No	Yes		Yes	
Total				977,650						

Part III

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance
(1) NA	N/A	72,523

Part IVBusiness Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) 73 TREMONT STREET REALTY LLC	R STAHL, TRUSTEE	5,820,961	RENT - SEE PART V		No
(2) NELSON MULLINS RILEY SCARBOROUGH	W HOGAN, TRUSTEE	121,063	LOBBYING		No
(3) WILLIAM O'NEILL DEAN SBS	B O'NEILL, TRUSTEE	338,315	EMPLOYMENT COMPENSATION		No

Part VSupplemental Information

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

Identifier	Return Reference	Explanation
BUSINESS TRANSACTIONS WITH INTERESTED PERSONS	PART IV	SUFFOLK UNIVERSITY ENTERED INTO A MASTER LEASE DURING JULY 2004 WITH A TRUSTEE OF THE UNIVERSITY, MRS ROSALIE K STAHL THE AGREEMENT WAS MADE TO ASSIST THE UNIVERSITY WITH ITS PLANS FOR FACILITIES EXPANSION IN A VERY CROWDED DOWNTOWN BOSTON LOCATION THE TRUSTEE PURCHASED AN \$85,000,000 OFFICE BUILDING AT 73 TREMONT STREET, BOSTON, MA, THROUGH A SINGLE PURPOSE ENTITY, 73 TREMONT STREET REALTY LLC, IN WHICH THE TRUSTEE IS THE SOLE SHAREHOLDER, THE LLC OBTAINED A \$68,000,000 MORTGAGE ON THE PROPERTY EXISTING LEASES WERE SUBORDINATED TO THE MASTER LEASE THE MASTER LEASE OBLIGATES THE UNIVERSITY TO PAY TO THE LLC A MONTHLY RENT COMPRISED OF TWO SEPARATE COMPONENTS THE MORTGAGE PAYMENT AND ONE-TWELFTH OF A FIXED ANNUAL MINIMUM RENT THE MASTER LEASE IS A TRUE NET LEASE AND OBLIGATES THE UNIVERSITY TO OPERATE AND MAINTAIN THE BUILDING IN ALL RESPECTS IN EXCHANGE, THE UNIVERSITY IS PERMITTED TO RETAIN ALL RENTS AND OTHER PAYMENTS DUE UNDER THE EXISTING LEASES THE VALUE OF THE BUILDING WAS ARRIVED AT THROUGH AN INDEPENDENT APPRAISAL THE TERMS OF THE MORTGAGE WERE NEGOTIATED WITH CITIZENS BANK ALSO NEGOTIATED AT ARMS LENGTH, VIA LAWYERS FOR EACH PARTY, WAS THE UNIVERSITY'S AGREEMENT TO PAY THE CLOSING AND OTHER RELATED COSTS OF THE LLC THE LEASE TERM IS FROM 7/19/2004 THROUGH 1/31/2025 WITH FOUR OPTIONS TO RENEW OF FIVE YEARS EACH TERMS AFTER THE FIRST FIVE YEARS ARE SIMILAR TO THE INITIAL YEARS DURING THE YEAR, SUFFOLK UNIVERSITY OBTAINED PROFESSIONAL SERVICES FROM NELSON MULLINS RILEY & SCARBOROUGH, LLP IN WHICH WILLIAM T HOGAN, TRUSTEE OF THE UNIVERSITY, IS AN OWNER/PRINCIPAL THE AMOUNT PAID TO NELSON MULLINS RILEY & SCARBOROUGH, LLP FOR SERVICES RENDERED WAS \$121,063 FOR THE YEAR ENDED JUNE 30, 2011 THE UNIVERSITY SELECTED NELSON MULLINS RILEY & SCARBOROUGH, LLP BECAUSE OF ITS EXPERIENCE WITH EDUCATIONAL ISSUES WITHIN THE COMMONWEALTH OF MASSACHUSETTS AND WASHINGTON, DC MR HOGAN WAS NOT INVOLVED IN ANY SERVICES PROVIDED TO SUFFOLK UNIVERSITY THE UNIVERSITY BELIEVES THAT THE AMOUNTS PAID WERE AT OR BELOW FAIR MARKET VALUE FOR THE SERVICES RECEIVED DURING THE YEAR, SUFFOLK UNIVERSITY MADE EMPLOYMENT COMPENSATION PAYMENTS TO WILLIAM O'NEILL, A KEY EMPLOYEE WILLIAM O'NEILL IS THE BROTHER OF BRIAN T O'NEILL, TRUSTEE

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
SUFFOLK UNIVERSITY

Employer identification number
04-2133255

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	12	214,085	MEAN PRICE
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				
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?				Yes
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part III

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
USE OF THIRD PARTY TO SOLICIT, PROCESS, OR SELL NONCASH CONTRIBUTIONS	PART I, LINE 32B	THE UNIVERSITY USES A BROKERAGE ACCOUNT AT DEUTSCHE BANK TO RECEIVE AND SELL GIFTS OF MARKETABLE SECURITIES

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization SUFFOLK UNIVERSITY	Employer identification number 04-2133255
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Identifier	Return Reference	Explanation
MISSION STATEMENT	PART I AND PART III LINE 1	SUFFOLK UNIVERSITY IS A PRIVATE, COMPREHENSIVE, URBAN UNIVERSITY LOCATED ON HISTORIC BEACON HILL IN BOSTON, WITH THREE OTHER MASSACHUSETTS LOCATIONS AND AN INTERNATIONAL CAMPUS IN MADRID, SPAIN. SUFFOLK UNIVERSITY'S MISSION IS TO PROVIDE QUALITY EDUCATION AT A REASONABLE COST FOR STUDENTS OF ALL AGES AND BACKGROUNDS WITH STRONG EMPHASIS ON DIVERSITY. THE UNIVERSITY IS COMMITTED TO EDUCATING STUDENTS TO BECOME LIFELONG LEARNERS, AS WELL AS PROFESSIONALS WHO LEAD AND SERVE THE COMMUNITIES IN WHICH THEY LIVE AND WORK. THE UNIVERSITY SEEKS TO PREPARE STUDENTS TO LIVE IN A DIVERSE, GLOBAL SOCIETY, APPRECIATING THE RICHNESS OF VARIOUS CULTURES. THE UNIVERSITY ACCOMPLISHES ITS MISSION BY PROVIDING EDUCATIONAL OPPORTUNITIES THROUGH UNDERGRADUATE STUDY, GRADUATE STUDY, AND PROFESSIONAL TRAINING. SUFFOLK UNIVERSITY IS A TEACHING UNIVERSITY, WHERE RESEARCH AND SCHOLARSHIP ARE INTERRELATED WITH THE UNIQUE CHARACTER OF EACH ACADEMIC DISCIPLINE. IT DOES SO BY MEANS OF COURSES THAT PROVIDE THEORETICAL, EXPERIENTIAL, AND PRACTICAL DIMENSIONS. THE UNIVERSITY SUPPORTS AND ENCOURAGES DIVERSITY IN A CHALLENGING, SUPPORTIVE ENVIRONMENT FOR MOTIVATED AND CAPABLE STUDENTS FROM VARIOUS BACKGROUNDS AND CULTURES.

Identifier	Return Reference	Explanation
PROGRAM SERVICE ACCOMPLISHMENTS	PART III	LINE 4A FACULTY SCHOLARSHIP SUPPORTS DIVERSIFIED LIBERAL ARTS CONCENTRATIONS AVAILABLE IN THE HUMANITIES, THE NATURAL SCIENCES AND THE SOCIAL SCIENCES, ALONG WITH GRADUATE PROGRAMS IN SEVERAL FIELDS, MOST OFFERING CAREER-RELATED PROFESSIONAL PROGRAM TRACKS AND PRACTICAL EXPERIENCE ON OR OFF CAMPUS LINE 4C THE LAW SCHOOL'S GOAL IS TO PROVIDE ITS STUDENTS WITH ACCESS TO AN EXCELLENT LEGAL EDUCATION, INSPIRE A COMMITMENT TO JUSTICE, AND PROVIDE ITS GRADUATES THE OPPORTUNITY TO ACHIEVE THEIR CAREER ASPIRATIONS

Identifier	Return Reference	Explanation
FAMILY RELATIONSHIPS	PART VI, LINE 2	BRIAN T O'NEILL, TRUSTEE, IS THE BROTHER OF WILLIAM O'NEILL, A KEY EMPLOYEE BARRY BROWN, PROVOST, IS A TRUSTEE OF CERTAIN BUSINESS INTERESTS OF ROSALIE STAHL TRUSTEES JOHN A BRENNAN AND LEO J CORCORAN HAVE A BUSINESS RELATIONSHIP

Identifier	Return Reference	Explanation
FORM 990 REVIEW PROCESS	PART VI, LINE 11A	THE CONTROLLER OF SUFFOLK UNIVERSITY IS RESPONSIBLE FOR DRAFTING FORM 990. THE COMPLETED DRAFT FORM 990 IS SUBMITTED FOR REVIEW TO THE UNIVERSITY'S TAX ADVISOR. RECOMMENDED CHANGES ARE DISCUSSED WITH SENIOR MANAGEMENT AND INCORPORATED INTO THE RETURN. THE DRAFT FORM IS THEN PROVIDED TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES SUFFICIENTLY IN ADVANCE OF THE FILING DEADLINE TO ENABLE A DETAILED AND CONSCIENTIOUS REVIEW BY ALL MEMBERS OF THE COMMITTEE WITH SENIOR MANAGEMENT AND THE UNIVERSITY'S TAX ADVISOR. ALL QUESTIONS AND CONCERNS OF THE AUDIT COMMITTEE MEMBERS ARE ADDRESSED AND INCORPORATED INTO THE FORM AS APPROPRIATE. AFTER THE AUDIT COMMITTEE REVIEW, ALL MEMBERS OF THE GOVERNING BODY ARE PROVIDED A LINK TO A PASSWORD-PROTECTED WEB SITE ON WHICH THE ENTIRE FORM 990 CAN BE VIEWED IN ADVANCE OF THE FILING DEADLINE. ALL QUESTIONS AND CONCERNS OF THE MEMBERS OF THE BOARD OF TRUSTEES ARE ADDRESSED BY THE TREASURER AND INCORPORATED INTO THE FORM 990 AS APPROPRIATE. AFTER ALL OF THE INPUT FROM THE BOARD OF TRUSTEES AND THE AUDIT COMMITTEE HAS BEEN APPROPRIATELY ADDRESSED, THE TREASURER OF THE UNIVERSITY IS AUTHORIZED TO FILE THE FORM 990.

Identifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	PART VI, LINE 12C	THE FINANCE COMMITTEE OF THE BOARD OF TRUSTEES IS RESPONSIBLE FOR OBTAINING A CONFLICT OF INTEREST DISCLOSURE STATEMENT FROM ALL BOARD MEMBERS, OFFICERS OF THE UNIVERSITY , AND ALL EMPLOYEES OF THE UNIVERSITY HOLDING CERTAIN POSITIONS AS DETERMINED BY THE FINANCE COMMITTEE, REFERRED TO AS COVERED PERSONS THE DISCLOSURE STATEMENT IS TO BE COMPLETED UPON FIRST ACCEDING TO THE OFFICE POSITION, UPON MATERIAL CHANGE IN THE INFORMATION REQUESTED, AND IN JULY OF EACH YEAR THE FINANCE COMMITTEE PROVIDES THE BOARD WITH A SUMMARY REPORT OF ANY CONFLICT OF INTEREST AT LEAST ANNUALLY, AND MORE FREQUENTLY AS APPROPRIATE THE FINANCE COMMITTEE MAY INVITE THE COVERED PERSON TO MAKE A PRESENTATION AT A MEETING TO DISCUSS THE TRANSACTION THE FINANCE COMMITTEE WILL THEN DETERMINE BY A MAJORITY VOTE WHETHER THE TRANSACTION IS IN THE UNIVERSITY'S BEST INTEREST, AND WHETHER IT IS FAIR AND REASONABLE, AND THEREFORE WHETHER THE UNIVERSITY MAY OR MAY NOT ENTER INTO THE TRANSACTION

Identifier	Return Reference	Explanation
COMPENSATION SETTING PROCESS	PART VI, LINE 15A	<p>FORMER PRESIDENT DAVID SARGENT FOR THE COMPENSATION OF THE FORMER PRESIDENT, A SPECIAL PRESIDENTIAL COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES WAS FORMED THE COMMITTEE HAD THE RESPONSIBILITY FOR HIRING AN INDEPENDENT FIRM TO ANALYZE AND COMPARE THE COMPENSATION OF CEOS AT COMPARABLE INSTITUTIONS AFTER REVIEWING THE RESULTS OF THE STUDY, THE COMMITTEE APPROVED A CONTRACT FOR A PERIOD OF SEVERAL YEARS PREPARED BY THE RETAINED INDEPENDENT FIRM THE CONTRACT INCLUDED ANNUAL SALARY ADJUSTMENTS AND PERFORMANCE AWARDS THE BOARD OF TRUSTEES VOTED ON AND APPROVED THE CONTRACT THE CHAIR OF THE BOARD OF TRUSTEES REVIEWED THE PERFORMANCE OF THE FORMER PRESIDENT AND REPORTED THE FINDINGS TO THE BOARD ACTING PRESIDENT BARRY BROWN FOR THE COMPENSATION OF THE ACTING PRESIDENT, THE BOARD OF TRUSTEES HAD RESPONSIBILITY FOR HIRING AN INDEPENDENT FIRM TO ANALYZE AND COMPARE THE COMPENSATION OF CEOS AT COMPARABLE INSTITUTIONS AFTER REVIEWING THE RESULTS OF THE STUDY, THE COMMITTEE APPROVED AN AT-WILL CONTRACT FOR, IN ANY EVENT, NO LONGER THAN 2 YEARS, WHICH WAS PREPARED BY THE UNIVERSITY'S OUTSIDE COUNSEL THE CONTRACT INCLUDED A SET STIPEND-SALARY FOR SERVICE AS ACTING PRESIDENT THERE WERE NO PERFORMANCE AWARDS OR BONUSES THE BOARD OF TRUSTEES VOTED ON AND APPROVED THE CONTRACT THE ACTING PRESIDENT REPORTED TO THE CHAIR OF THE BOARD OF TRUSTEES AND THE BOARD THE COMPENSATION OF ALL OTHER OFFICERS, AS WELL AS KEY EMPLOYEES, IS ESTABLISHED AS PART OF THE ANNUAL BUDGET APPROVAL PROCESS THE BUDGET OFFICE OBTAINS RECOMMENDATIONS FROM THE HUMAN RESOURCES OFFICE AS TO SALARY ADJUSTMENTS BASED ON THEIR STUDIES OF OTHER SIMILAR SIZE, OR OTHERWISE COMPARABLE, UNIVERSITY PERSONNEL SALARIES TYPICALLY OFFICERS AND KEY EMPLOYEES RECEIVE A FLAT PERCENTAGE INCREASE THAT IS THE SAME FOR ALL THE BOARD OF TRUSTEES APPROVES THE FINAL BUDGET</p>

Identifier	Return Reference	Explanation
PUBLIC DISCLOSURE	PART VI, LINE 19	ALL REQUESTS FOR GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS AND TAX RETURNS ARE RECEIVED BY THE PRESIDENT AND/OR VICE PRESIDENT'S OFFICES AND ARE TURNED OVER TO THE TREASURER'S OFFICE FOR IMMEDIATE RESPONSE. TAX RETURNS AND FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE MASSACHUSETTS ATTORNEY GENERAL'S AND GUIDESTAR'S WEBSITES

Identifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSETS	PART XI, LINE 5	UNREALIZED GAIN ON INVESTMENTS 28,552,798 POST - RETIREMENT OBLIGATION (132,140) ----- TOTAL 28,420,658

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
SUFFOLK UNIVERSITY

Employer identification number
04-2133255

Part I

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

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

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) SUFFOLK UNIVERSITY MADRID CAMPUS SL CALLE VINA 3 MADRID 28003 SP 99-9999999	HIGHER EDUCATION	SP	NA	C CORP	3,971,717	802,106	100 000 %
(2) THE EDWARD & SYDELL MASTERMAN 2007 CRUT ONE INTERNATIONAL PLACE BOSTON, MA02110 04-6712711	INVESTING	MA	NA	TRUST	0	1,032,000	100 000 %

Part V

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

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

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to other organization(s)

c

Gift, grant, or capital contribution from other organization(s)

d

Loans or loan guarantees to or for other organization(s)

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

Lease of facilities, equipment, or other assets to other organization(s)

j

Lease of facilities, equipment, or other assets from other organization(s)

k

Performance of services or membership or fundraising solicitations for other organization(s)

l

Performance of services or membership or fundraising solicitations by other organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

Other transfer of cash or property to other organization(s)

r

Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

Yes

No

No

No

No

No

No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) SUFFOLK UNIVERSITY MADRID CAMPUS SL	L	3,552,508	
(2)			
(3)			
(4)			
(5)			
(6)			

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

[illegible]

Part VII **Supplemental Information**

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

Identifier	Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 04-2133255

Name: SUFFOLK 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 MARIANNE B BOWLER TRUSTEE	10	X						0	0	0	
JOHN A BRENNAN JR ESQ TRUSTEE	10	X						0	0	0	
IRWIN CHAFETZ TRUSTEE	10	X						0	0	0	
LEO J CORCORAN ESQ TRUSTEE	10	X						0	0	0	
GERARD F DOHERTY ESQ TRUSTEE	10	X						0	0	0	
DENNIS M DUGGAN JR ESQ TRUSTEE	10	X						0	0	0	
JILL S GABBE TRUSTEE	10	X						0	0	0	
HON ROBERT W GARDNER JR TRUSTEE	10	X						0	0	0	
RUSSELL A GAUDREAU JR ESQ TRUSTEE	10	X						0	0	0	
MICHAEL G GEORGE TRUSTEE	10	X						0	0	0	
MARGARET A GERAGHTY TRUSTEE	10	X						0	0	0	
WILLIAM T HOGAN III ESQ TRUSTEE	10	X						0	0	0	
J ROBERT JOHNSON TRUSTEE	10	X						0	0	0	
HAL J LEIBOWITZ ESQ TRUSTEE	10	X						0	0	0	
DEBORAH F MARSON ESQ TRUSTEE	10	X						0	0	0	
ANDREW C MEYER JR ESQ TRUSTEE	10	X						0	0	0	
RALPH MITCHELL TRUSTEE	10	X						0	0	0	
JAMES T MORRIS ESQ TRUSTEE	10	X						0	0	0	
BRIAN T O'NEILL ESQ TRUSTEE	10	X						0	0	0	
GEORGE A RAMIREZ ESQ TRUSTEE	10	X						0	0	0	
CAROL SAWYER PARKS TRUSTEE	10	X						0	0	0	
ROSALIE K STAHL TRUSTEE	10	X						0	0	0	
TARA TAYLOR TRUSTEE	10	X						0	0	0	
FRANCIS M VAZZA TRUSTEE	10	X						0	0	0	
DENNIS WALCZEWSKI TRUSTEE	10	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			
DAVID J SARGENT PRESIDENT	50 0	X		X				477,170	0	49,469
FRANCIS X FLANNERY VP/TREASURER	50 0	X		X				298,592	0	32,615
BARRY BROWN PROVOST	50 0			X				382,598	0	44,451
JANICE GRIFFITH VP-ACADEMIC AFFAIRS	50 0			X				273,827	0	29,419
JOHN NUCCI VP-EXTERNAL AFFAIRS	50 0			X				325,444	0	22,050
NANCY STOLL VP-STUDENT AFFAIRS	50 0			X				168,416	0	14,981
MARGUERITE DENNIS VP-ENROLLMENT/INTL PROGRAMS	50 0			X				253,508	0	34,820
CHRISTOPHER MOSHER VP-ADVANCEMENT	50 0			X				228,671	0	37,496
PAUL LYONS VP/GENERAL COUNSEL	50 0			X				318,519	0	19,180
DANIELLE MANNING VP/ACTING TREASURER	50 0			X				126,831	0	3,984
KENNETH GREENBERG DEAN	50 0				X			313,506	0	22,050
BERNARD V KEENAN DEAN	50 0				X			277,489	0	47,760
WILLIAM O'NEILL DEAN	50 0				X			297,585	0	40,730
CAMILLE NELSON DEAN	50 0				X			157,958	0	18,717
KAREN M BLUM ASC DEAN/PROFESSOR	50 0					X		238,214	0	33,004
KI C HAN PROFESSOR	50 0					X		218,835	0	16,693
MARC PERLIN PROFESSOR	50 0					X		252,873	0	43,405
ALASDAIR S ROBERTS PROFESSOR	50 0					X		219,663	0	43,728
ROBERT SMITH PROFESSOR	50 0					X		218,406	0	35,010
MICHAEL F DWYER FORMER ASSISTANT TREASURER	0 0						X	189,816	0	16,521

Additional Data

Software ID:
Software Version:
EIN: 04-2133255
Name: SUFFOLK UNIVERSITY

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)	1	51	Program Services	EDUCATION	5,249,990
Sub-Saharan Africa	1	72	Program Services	EDUCATION	2,061,307
Central America and the Caribbean	0	0	Send agents to seminar		3,804
Central America and the Caribbean	0	0	Program Services	EDUCATION & OTHER	48,396
Central America and the Caribbean	0	0	Program Services	RECRUITING	1,794
East Asia and the Pacific	0	0	Send agents to seminar		31,662
East Asia and the Pacific	0	0	Program Services	EDUCATION & OTHER	91,196
East Asia and the Pacific	0	0	Program Services	RECRUITING	15,401
Europe (Including Iceland and Greenland)	0	0	Send agents to seminar		61,601
Europe (Including Iceland and Greenland)	0	0	Program Services	EDUCATION & OTHER	1,554,150
Europe (Including Iceland and Greenland)	0	0	Program Services	RECRUITING	80,619
Middle East and North Africa	0	0	Send agents to seminar		4,106
Middle East and North Africa	0	0	Program Services	EDUCATION & OTHER	1,776
Middle East and North Africa	0	0	Program Services	RECRUITING	1,025
North America	0	0	Send agents to seminar		33,191
North America	0	0	Program Services	EDUCATION & OTHER	2,582
North America	0	0	Program Services	RECRUITING	5,759
South America	0	0	Send agents to seminar		3,312
South America	0	0	Program Services	EDUCATION & OTHER	2,983
South America	0	0	Program Services	RECRUITING	5,423
South Asia	0	0	Program Services	RECRUITING	5,000
Sub-Saharan Africa	0	0	Program Services	EDUCATION & OTHER	296
Sub-Saharan Africa	0	0	Program Services	RECRUITING	11,048
Europe (Including Iceland and Greenland)	0	0	Grantmaking		1,826,902
Sub-Saharan Africa	0	0	Grantmaking		75,742
Central America and the Caribbean	0	0	Grantmaking		18,697
East Asia and the Pacific	0	0	Grantmaking		283,739

Software ID:
Software Version:
EIN: 04-2133255
Name: SUFFOLK 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				
DAVID J SARGENT	(i)	370,465	0	106,705	22,050	18,680	517,900	0
	(ii)	0	0	0	0	0	0	0
FRANCIS X FLANNERY	(i)	298,592	0	0	22,050	10,565	331,207	0
	(ii)	0	0	0	0	0	0	0
BARRY BROWN	(i)	368,204	0	14,394	22,050	22,401	427,049	0
	(ii)	0	0	0	0	0	0	0
JANICE GRIFFITH	(i)	273,827	0	0	22,050	7,369	303,246	0
	(ii)	0	0	0	0	0	0	0
JOHN NUCCI	(i)	276,684	0	48,760	22,050	0	347,494	0
	(ii)	0	0	0	0	0	0	0
NANCY STOLL	(i)	166,460	0	1,956	14,981	0	183,397	0
	(ii)	0	0	0	0	0	0	0
MARGUERITE DENNIS	(i)	253,508	0	0	22,050	12,770	288,328	0
	(ii)	0	0	0	0	0	0	0
CHRISTOPHER MOSHER	(i)	228,671	0	0	20,804	16,693	266,168	0
	(ii)	0	0	0	0	0	0	0
PAUL LYONS	(i)	318,519	0	0	0	19,180	337,699	0
	(ii)	0	0	0	0	0	0	0
KENNETH GREENBERG	(i)	311,550	0	1,956	22,050	0	335,556	0
	(ii)	0	0	0	0	0	0	0
BERNARD V KEENAN	(i)	277,489	0	0	23,659	24,101	325,249	0
	(ii)	0	0	0	0	0	0	0
WILLIAM O'NEILL	(i)	297,585	0	0	22,050	18,680	338,315	0
	(ii)	0	0	0	0	0	0	0
KAREN M BLUM	(i)	194,565	0	43,649	18,133	14,871	271,218	0
	(ii)	0	0	0	0	0	0	0
KI C HAN	(i)	138,250	0	80,585	0	16,693	235,528	0
	(ii)	0	0	0	0	0	0	0
MARC PERLIN	(i)	252,873	0	0	23,525	19,880	296,278	0
	(ii)	0	0	0	0	0	0	0
ALASDAIR S ROBERTS	(i)	219,663	0	0	20,527	23,201	263,391	0
	(ii)	0	0	0	0	0	0	0
MICHAEL F DWYER	(i)	154,954	0	34,862	15,213	1,308	206,337	0
	(ii)	0	0	0	0	0	0	0
CAMILLE NELSON	(i)	125,000	0	32,958	11,250	7,467	176,675	0
	(ii)	0	0	0	0	0	0	0
ROBERT SMITH	(i)	218,406	0	0	20,049	14,961	253,416	0
	(ii)	0	0	0	0	0	0	0