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Form **990** 

Department of the Treasury

### **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)

2010

OMB No 1545-0047

Open to Public Inspection

belief trast of private roundation,

		e Service	<u> </u>	ve to use a copy of this return to satisfy		requiremen	1103	Inspection
			lendar year, or tax year beging C Name of organization	nning 07-01-2010 and ending 06-30-20	11	D Employ	yer id	entification number
	eck ıf a dress cl	applicable	GEORGIAN COURT UNIVERSITY			21-06	3/10:	Ω 1
_	me cha	_	Doing Business As					
		_				E Teleph	one n	umber
_	tıal retu		Number and street (or P O box 900 Lakewood Avenue	if mail is not delivered to street address)	Room/suite	(732)	987-	2200
	mınate					<b>G</b> Gross re	eceints	s \$ 87,469,489
_	ended		City or town, state or country, a Lakewood, NJ 087012097	nd ZIP + 4		0 01033 10	сстра	σ φ ον, του, του
J Apı	plicatioi	n pending						
			<b>F</b> Name and address of p ROSEMARY JEFFRIES	orincipal officer	H(a) Is this	a group return fo	r affilial	es? Yes V No
			900 LAKEWOOD AVENU	E	H(h) Are al	affiliates incli	rdod2	□ Yes □ No
			LAKEWOOD, NJ 08701		1 , ,			(see instructions)
	v-even	npt status	F 501/0/(2) F 501/0/(-)	◀ (Insert no )		ıp exemptio		
				(Insert no )   4947(a)(1) or   527	4			
J W	ebsit	e: 🟲 WW	/W GEORGIAN EDU					
<b>K</b> For	m of or	rganızatıon	Corporation Trust Associ	ation 🗌 Other 🕨	<b>L</b> Year of fo	rmation 1908	8 <b>M</b>	State of legal domicile NJ
Pa	rt I	Sum	mary					
Governance		To provid	de a comprehensive liberal ar	sion or most significant activities ts education in the Roman Catholic trad spect, integrity, service and compassion		ecial concer	n for	women The
<u>\$</u>	_	C b l. +b	b <b>b.</b>	dd.k		F0/ -f.t		
			•	discontinued its operations or disposed		orits n الله الله الله الله الله الله الله ال	et as	ssets 35
න් ආ	1			erning body (Part VI, line 1a) rs of the governing body (Part VI, line 1		-	4	35
Activities &	1			in calendar year 2010 (Part V, line 2a)		·	5	1,003
Ę			mber of volunteers (estimate		6	178		
۹,	7a	Total uni	related business revenue fron	n Part VIII, column (C), line 12			7a	226,768
	b	Net unre	lated business taxable incom	e from Form 990-T, line 34			7b	-224,292
					Pric	r Year		Current Year
	8		butions and grants (Part VIII	•	-	2,729,16	51	1,938,534
Revenue	9	Progra		54,968,474		54,154,90		
) } }	10	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					93	1,191,859
	11						50	642,129
	12		=	II (must equal Part VIII, column (A), I	ne	59,080,37	78	57,927,429
	13			art IX, column (A), lines 1-3)		11,485,94	42	12,002,677
	14	Benefit	ts paid to or for members (Pa	rt IX, column (A), line 4)			0	0
ø	15		es, other compensation, empl	oyee benefits (Part IX, column (A), lines	5 –	26 101 04	5.5	25,512,654
Expenses	16a	10) Profes	sional fundraising fees (Part i	[X, column (A), line 11e)		26,101,965		112,000
Φ ⊕	ь		ndraising expenses (Part IX, column			177,7.		112,000
Ð	17			(D), line 25) • 2,335,735 (A), lines 11a-11d, 11f-24f)		21,048,63	34	22,068,309
	18			must equal Part IX, column (A), line 25)		58,781,2	-	59,695,640
	19			ne 18 from line 12		299,12	-	-1,768,211
Net Assets or Fund Balances					_	g of Current 'ear	_	End of Year
355 B 25	20	Total a	assets (Part X, line 16)			118,956,3	10	122,329,025
38	21		, , ,			39,899,47		38,320,467
	22			ct line 21 from line 20		79,056,83	34	84,008,558
Unde know		Ities of pe		nined this return, including accompanying te. Declaration of preparer (other than offi				
		****	**		21	012-04-03		
Sigr	1	Signa	ature of officer			ate		
Her	e 		ALD RECK CHIEF FINANCIAL OFFICE or print name and title	R				
		Print/Type preparer's		Preparer's signature	Date	Check if self- employed •	$\vdash$	PTIN
Paid	-		me F GRANT THORNTON LLP	1		piofcu F	•	Firm's EIN
Prep		Fırm's add	iress • 2001 MARKET STREET SUIT	E 3100				
Use (	Only		PHILADELPHIA, PA 19103					Phone no ▶ (215) 561- 4200
		1					- 1	

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

Georgian Court University offers an innovative liberal arts curriculum that promotes scholarship, service, leadership, and personal development. Focused on the Sisters of Mercy's core values-respect, integrity, service, justice, and compassion-the university offers an extremely safe and nurturing environment. GCU students, who learn in classrooms where there is typically a 13-to-1 faculty-student ratio, are served by the school's historic Women's College and its coed University College, and graduate to become competent professionals, compassionate leaders, and engaged citizens. Last year, GCU students donated approximately 3,400 volunteer hours to causes throughout New Jersey and the nation. GCU students assisted in domestic abuse and women's shelters, advocated for the homeless and for affordable housing solutions, mentored high school and middle school athletes, raised money and awareness for a range of issues, including poverty, breast cancer, and autism, and donated labor and time.

2	Did the organization the prior Form 990 o		ant program se	ervices during the yea	r which were not listed or	T Yes ✓	No
	If "Yes," describe the	ese new services on S	chedule O				
3	Did the organization services?	cease conducting, or	make sıgnıfıcaı	nt changes in how it co	onducts, any program	┌ Yes ┌	No
	If "Yes," describe the	ese changes on Sched	ule O				
4	Section 501(c)(3) ai		tions and secti	on 4947(a)(1) trusts	largest program service are required to report the service reported		ts and
4a	(Code	) (Expenses \$	32,434,298	ıncludıng grants of \$	12,002,677 ) (Revenu	e \$ 54,4!	50,726 )
	GCU School of Business, enrolled in Georgian Collocated on GCU's Lakew a values-based liberal a leadership that enables learn to approach any of the graduate and under interested in GCU's accessory of them recent years, GCU has a psychiatric rehabilitation spectrum disorders, Pre industries in New Jersey experience in their discipeducation, learning disa involved. At least 19 per percent of students hav occasionally spending to the McAuley Institute for ranging from Italian art, who enroll in non-credit About 99 percent of GCU	, School of Education and Surt's University College, whood campus, is dedicated into education that enhance women to excel in their captatated by the college with confidence, his graduate levels, and provide letrated programs, and have available in the evenings of added new areas of study to and psychology, and applience to 3rd education, sustain and beyond GCU gives stoplines before graduation. Sublities consulting, and schoot cent of GCU students come participated in some form me with faculty members or Lifelong Learning (MILL). Instory and politics to come, college-level courses that	ichool of Arts and such offers co-educto the personal and so the personal and the program, and the program, laure puter technology, meet for 4-6 weents receive aid, as the personal and the person	Sciences, 1,309 of them ta ational classes and flexible d professional success of w of GCU's female graduate outing to the greater good of extraordinary preparational environment where wore job and family obligations red at off-site campuses in which is address growing needs esign, multimedia design, a ional learning environment of a longside faculty memtors ose studying social work, of the first professional professional network of the unividend in 2009, has grown fissional networking, and meeks, and are taught by faculting 96 percent of all Georg	s in 11 distinctive programs Of the classes through GCU's histo day and evening courses WO omen It is open to residential as across various disciplines. The fitheir communities, state and n UNIVERSITY COLLEGE GCU'nen and men thrive. It is espen, or limited time to attend class. Woodbridge, N. J., Wall Townshursing, homeland security, hour the marketplace. In addition that the university's 52-week. My where they conduct research with the marketplace in biochemistry, neurobiology minimal justice, dance, exercise in senior year, and studies also in clinical assignment. Among firestity also extends educational from two pilot courses to more moir writing. MILL has more that the court students receive some students is \$10,618.	nc Women's College MEN'S COLLEGE The land commuter stude women's College I nation Women's College I nation Women's College cally helpful for adus In addition, University College cally helpful for adus In addition, University College cally helpful for adus In addition, University N. J., and other light health, exercise, GCU specialty offer B. A. mirror the demitth faculty and gair, autism studies, ear science, and busines show that by their inst-year students, 6 opportunities to ser than 40 classes that an 500 seniors, age lisciplines. SCHOLAR	e About 1,246 are e Women's College dents, and provides e emphasizes college students offers courses on all learners who are ersity College r locations In se science, dance, ferings in autism nands of growth n valuable arily childhood ess are equally as senior year, 61 of percent report nior adults through t cover subjects so 50 and older, SHIPS & GRANTS
4b	NCAA Division II sports, program is distinguished GCU student-athletes co Georgian Court with an have raised money for	including basketball, cross I by its commitment to buil ultivate leadership skills in t average high school GPA o the Susan B Komen Walk t	country, lacrosse, ding well-rounded their individual spo f 3 35, and contini for the Cure, Make	Central Athletic Collegiate soccer, softball, volleyball, athletes who achieve on t orts and in their classroom a uing athletes average a 3 (e-a-Wish Foundation, and	) (Revenue Conference, Georgian Court U tennis, and both indoor and o the field and in the classroom and community involvement I OF GPA The teams are very ac Fournament of Champions whi is youth, and coordinate activiti	utdoor track & field In keeping with thei ncoming student-atl tive in the commun le supporting fundra	The GCU athletics ir peers nationally, hletes arrive at iity, as well, and aising for cystic

4e Total program service expenses►\$

(Expenses \$

4c

4d

) (Expenses \$

Other program services (Describe in Schedule O )

other expenditures to support the operation of offices dedicated to student service activities

40,538,913

including grants of \$

6,465,165 including grants of \$

) (Revenue \$

) (Revenue \$

Part IV	Che	cklist	of De	auire	d Sch	عمايياهم
4·11 <b>7</b> 3/4	CHE	LRIISL	UI RE	uune	u Stiit	cuules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16	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? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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

Form 990 (	2010)		
Part V	Statements Regarding Ot	her IRS Filings and	l Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		. [	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	Tabanaha numban af Farma W. 3C yaqiydad ya kun 1a. Entan C. af nat analyaabila			
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	_		
2-	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
- Б 4а	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b	Yes	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
<b>-</b>	Weether arganization a porty to a such third to use believe to a such that the such th	F-		KI -
5a h	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		No No
		5b		IN O
С	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		Νο
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).			
а	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	7-		N.a
d	file Form 8282?	7c		No
_				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	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			
11				
	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> 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  Enter the amount of reserves on hand			
·	13c			
	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		

**Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ction A. Governing Body and Management			
			Yes	No
	1 1			
1a	Enter the number of voting members of the governing body at the end of the tax year			
h	Enter the number of voting members included in line 1a, above, who are			
	Independent         1         1         1         35			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			N -
3	other officer, director, trustee, or key employee?	2		N o
•	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		Νο
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the			
	year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal			
ке	venue Code.)		V	NI-
10-	Describes a second seco	10-	Yes	No No
	Does the organization have local chapters, branches, or affiliates?	10a		N o
	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	
ь	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	
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	163	
·	describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
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 )			
4.0	B. I. I			
	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
Ь	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		
	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►NJ			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			

State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨

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interest policy, and financial statements available to the public. See Additional Data Table

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

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

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

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

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

Check this box if neither the organization	•	elated o	rganı	zatio	on co	ompen	sate	d any current office	r, director, or trust	ee		
(A) Name and Title	(B) Average hours per	Posi	(C) Position (check all that apply)			ition (check all				( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
See Additional Data Table												

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

		<u> </u>	I						ı					
	(A) Name and Title	(B) Average hours	1	tion ( that a	(che		II		Repo compe	<b>D)</b> rtable nsation	<b>(E)</b> Reportable compensation		(F) Estima imount o	ated fother
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organız	n the ation (W- 9-MISC)	from related organizations (W- 2/1099- MISC)	;	compens from t rganizati relat organiza	the on and ed
See A	Additional Data Table													
						_								
	Sub-Total					_		<u> </u>						
	Total from continuation sheets				<u> </u>	<u> </u>	<b>-</b>							
d	Total (add lines 1b and 1c) .							<b>þ</b>		1,282,342		0	;	290,064
2	Total number of individuals (inc \$100,000 in reportable comper					ted	above)	) who	receive	d more tha	n			
													Yes	No
3	Did the organization list any <b>foi</b> on line 1a? <i>If</i> "Yes," complete Sc					eye •	mploy •	ee,o	r highest	compens:	ated employee	3	Yes	
4	For any individual listed on line organization and related organiz											4	Yes	
5	Did any person listed on line 1a	receive or accri	ue comp	ensa	ition	fror	nanyı	unrel	ated org	anızatıon d	r individual for			
	services rendered to the organi										•	5		No
S	ection B. Independent Cor	ntractors												
1	Complete this table for your five			ndep	ende	ent c	ontra	tors	that rec	eived more	than			
	\$100,000 of compensation from	n the organizatio (A)	П						I		(B)		(C	<u> </u>

(A) Name and business address	(B) Description of services	(C)
	Description of services	Compensation
SUNGARD HIGHER EDUCATION  13377 COLLECTIONS CENTER DRIVE  CHICAGO, IL 60693	MGMT FEES	1,551,178
ebsco information services 30 Park Road Suite 2 TINTON FALLS, NJ 07724	IT SERVICES	210,338
Benjamin R Harvey Co Inc 9 Cindy Lane OCEAN, NJ 07712	Contractor	970,903
FHEG 3146 Solutions Center CHICAGO, IL 60677	operate bookstore	253,567
Grant Thornton LLP 33960 Treasury Center CHICAGO, IL 60694	Professional Service	115,027
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►6	who received more than	

Contributions, gifts, grants and other similar amounts	b	Federated campaigns Membership dues		76,930	(A) Total revenue	Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
¥, ±		Fundraising events						
% E∰		Related organizations Government grants (contributions)		870,766				
r si			1e					
aff The		All other contributions, gifts, grants, similar amounts not included above	2	990,838				
ag in	_	Noncash contributions included in lii		10,129	4 000 50			
	h	Total. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·	Buoinese Cedi	1,938,534			
nue	2a			Business Code				
e ve		TUITION AND FEES	DITCEC.	900099	49,830,288			
д Ф:3		RESIDENCE HALLS AND DINING SER BOOKSTORE INCOME	(VICES	900099	4,212,503 112,116	4,212,503		112,116
er viç	d			900099	112,110			112,110
ខ្ម	e							
Program Service Revenue	f	All other program service rev	venue					
<u>¥</u>	g	<b>Total.</b> Add lines 2a-2f			54,154,907			
		Investment income (includin			1.020.040		205	1 020 244
		and other similar amounts) Income from investment of tax-exe		-	1,029,949		-395	1,030,344
	-	Royalties			0			
			(ı) Real	(II) Personal				
		Gross Rents	227,163					
		Less rental expenses	207.150					
	_	Rental income or (loss)	227,163					
-	d	Net rental income or (loss)			227,163		227,163	
	7a		(ı) Securities 29,660,486	(II) O ther				
		from sales of assets other						
	ь	than inventory Less cost or	29,498,576					
		other basis and sales expenses						
		Gain or (loss)	161,910		161,910			161,910
-		Net gain or (loss)			101,910			101,310
Other Revenue		(not including \$ 76,930 of contributions reported on I See Part IV, line 18	line 1c)	43,815				
the	ь	Less direct expenses		40,134				
0	с	Net income or (loss) from fur	ndraising events 🕨	·	3,681			3,681
			ctivities See Part IV, line 19 .	· · · · · · · · · · · · · · · · · · ·				
		Less direct expenses Net income or (loss) from ga		<b>b</b> 3,350	3,350			3,350
		Gross sales of inventory, les			,			<u>'</u>
		returns and allowances .  Less cost of goods sold .						
-	С	Net income or (loss) from sa	les of inventory 🟲		0			
	11a b	Miscellaneous Revenue OTHER STUDENT ACTIVITIES/MISCELLANE	ous_	Business Code 900099	407,935	407,935		
	D C							
		All other revenue						
		Total. Add lines 11a-11d .			407,935			
	12	Total revenue. See Instruction	ons		57,927,429	54,450,726		1,311,401

(D) Fundraising expenses
Fundraising
Fundraising
CAPCHISCS
172,430
1,114,296
6,996
148,725
103,329
!
1
112,000
1
. 8,851
132,912
42,158
1
4,379
12,714
121,093
393,238
2,393,759
2,393,735
33 33 33 33 30 30 30 30 30 30 30 30 30 3

Part X Balance Sheet (A) (B) Beginning of year End of year 1 1 2 4.961.291 2 3.780.477 499,235 285,490 3 3 1,884,130 4 1,769,752 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 6 14,055 7 6,342 Notes and loans receivable, net . . . . . . . . . 8,753 8 12,067 8 85,767 9 276,866 Prepaid expenses and deferred charges . . . . 10a Land, buildings, and equipment cost or other basis Complete 96.351.759 10a Part VI of Schedule D 10b 30.222.447 ь Less accumulated depreciation . . . . . 67,812,160 **10c** 66.129.312 33.805.433 11 11 36.317.774 9,789,804 12 11,321,539 12 Investments—other securities See Part IV, line 11 . . . . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 1,273,182 15 1,251,906 15 16 118,956,310 16 122,329,025 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 4,758,894 17 4,607,247 17 Accounts payable and accrued expenses . 18 126,049 18 120,486 1,347,892 1.263.858 19 19 31,251,457 20 20 29,824,580 Liabilities 21 21 Escrow or custodial account liability  $Complete\ Part\ IV\ of\ Schedule\ D$  . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 1.647.206 23 1.325.887 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 25 767.978 25 1,178,409 Other liabilities Complete Part X of Schedule D . . . . . 26 39.899.476 26 38.320.467 Total liabilities. Add lines 17 through 25 . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 63,835,772 27 66,891,071 Unrestricted net assets . . . . . Temporarily restricted net assets . . . . . 28 3,433,733 28 5,077,405 Fund 11,787,329 29 12,040,082 29 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds . . . . . Assets 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 79,056,834 33 84,008,558 33 Total net assets or fund balances . . . . . 34 Total liabilities and net assets/fund balances . . . . . 122,329,025 118.956.310 34

Pa	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		57.9	927,429
2	Total expenses (must equal Part IX, column (A), line 25)	2			595,640
3	Revenue less expenses Subtract line 2 from line 1	3		-1,7	768,211
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		79,0	56,834
5	Other changes in net assets or fund balances (explain in Schedule O)	5		6,7	19,935
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		84,008,55	
Pai	TEXII Financial Statements and Reporting  Check of Schedule O contains a response to any question in this Part XII			୮	
_				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
С	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O	•	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a	Yes	
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r	equired	3b	Yes	

**Employer identification number** 

## OMB No 1545-0047

2040

Open to Public Inspection

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

**Public Charity Status and Public Support** 

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

Name of the organization GEORGIAN COURT UNIVERSITY

GEOR	GIAN C	OURT UNIVERSITY								
		21-0634								
	rt I	<b>Reason for Public Charity Status</b> (All organizations must complete this part.) See	ınstructio	ns						
The	organı	zation is not a private foundation because it is (For lines 1 through 11, check only one box )								
1	Г	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E)	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E )							
3	Γ	A hospital or a cooperative hospital service organization described in <b>section 170(b)(1)(A)(iii).</b>								
4	Γ	A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state								
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governme	ntal unit de	escribe	d ın					
_	_	section 170(b)(1)(A)(iv). (Complete Part II)								
6	<u> </u>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).	. <b>.</b>							
7	ı	An organization that normally receives a substantial part of its support from a governmental unit or described in section 170(b)(1)(A)(vi) (Complete Part II)	from the g	jenerai	public					
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II )								
9	Ė	An organization that normally receives (1) more than 331/3% of its support from contributions, me	mbership	fees. ar	nd aros	ss				
	•	receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no m			_					
		its support from gross investment income and unrelated business taxable income (less section 51)								
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III )								
10	Г	An organization organized and operated exclusively to test for public safety. See <b>section 509(a)(4).</b>								
11	, _	An organization organized and operated exclusively for the benefit of, to perform the functions of, or		uit the r	nurnos	esof				
	'	one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) the box that describes the type of supporting organization and complete lines 11e through 11h <b>a</b> Type I <b>b</b> Type II <b>c</b> Type III - Functionally integrated	See <b>sectio</b>		a)(3).	Check				
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or other than foundation managers and other than one or more publicly supported organizations descrisection 509(a)(2)			•					
f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type check this box	: III suppo	orting o	rganız	ation,				
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 (i	· .		Yes	No				
		and (III) below, the governing body of the the supported organization?	L!	11g(i)						
		(ii) a family member of a person described in (i) above?	_1	L1g(ii)						
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	1	.1g(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	(iv) Is the organizati col (i) list your gove docume	ion in ted in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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

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

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

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

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

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

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

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

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

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

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DLN: 93493095011022

### OMB No 1545-0047

### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

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

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

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

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part 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

GFC	me of the organization ORGIAN COURT UNIVERSITY			Employ	eriaei	ntıfıcatıon number
JLC	NODAN COOKT ONIVERSITT			21-063	4981	
a r	t I-A Complete if the or	ganization is exempt und	ler section 501(	c) or is a section	n 527	7 organization.
	Provide a description of the or	ganızatıon's dırect and ındırect p	olitical campaign act	ıvıtıes ın Part IV		
	Political expenditures				<b> -</b>	\$
	V olunteer hours					
211	t I-B Complete if the or	ganization is exempt und	ler section 501/	c)(3)		
<u> </u>		e tax incurred by the organizatio			<u></u>	<b>\$</b>
	·	e tax incurred by organization ma			•	\$
		section 4955 tax, did it file Form				→ Yes No
а	Was a correction made?		,			□ Yes □ No
ь	If "Yes," describe in Part IV					
a r		ganization is exempt und	ler section 501(	c) except sectio	n 50	1(c)(3).
	Enter the amount directly exp	ended by the filing organization fo	or section 527 exemp	ot function activities	►	\$
	<del>-</del>	organization's funds contributed	o other organizations	for section 527		
	exempt funtion activities				•	\$
	Total exempt function expend	tures Add lines 1 and 2 Enter h	ere and on Form 112	0-POL, line 17b	•	\$
	D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Farm 1130 DOL far the				□ Yes □ No
	Did the filing organization file	•				, ,
	Enter the names, addresses a organization made payments amount of political contributio	nd employer identification numbe For each organization listed, ento ns received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered	m the filing organiza to a separate politic	tion's al orga	s to which the filing funds Also enter the anization, such as a
	Enter the names, addresses a organization made payments amount of political contributio	nd employer identification numbe For each organization listed, ento ns received that were promptly a	er the amount paid fro nd directly delivered	m the filing organiza to a separate politic	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of politica contributions received and promptly and directly delivered to a separate political
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, entens received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered ) If additional space	(d) A mount paid	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, entens received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered ) If additional space	(d) A mount paid	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, entens received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered ) If additional space	(d) A mount paid	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, entens received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered ) If additional space	(d) A mount paid	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, entens received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered ) If additional space	(d) A mount paid	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, entens received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered ) If additional space	(d) A mount paid	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, entens received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered ) If additional space	(d) A mount paid	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, entens received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered ) If additional space	(d) A mount paid	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,
	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	nd employer identification numbe For each organization listed, entens received that were promptly a political action committee (PAC	er the amount paid fro nd directly delivered ) If additional space	(d) A mount paid	tion's al orga nforma from on's	s to which the filing funds Also enter the anization, such as a ation in Part IV  (e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none,

Sc	hedule C (Form 990 or 990-EZ) 2010						Page <b>2</b>
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c	)(3) and fi	led Form 5768	
A B	Check   If the filing organization belongs to a Check   If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying Expenditures  (The term "expenditures" means amounts paid or incurred.)						<b>(b)</b> Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

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

Part II-B	Complete if the	organization is exempt under section 501(c)(3) and has NOT filed Form 57	68
	(election under	section 501(h)).	

		(a)		(b)	
		Yes	No	A mount	
L	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		Νo		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		1,975	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV	Yes		25,000	
j	Total lines 1c through 1i			26,975	
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		Ī		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	+ TIT A. Complete if the exception is exempt under section $EO1(c)(A)$ section	- FO1/-	\/F\ -		

#### 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		

#### Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-B 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).		
а	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	

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 4 political expenditure next year? 5

Taxable amount of lobbying and political expenditures (see instructions)

#### 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

Ident if ier	Return Reference	Explanation
SCHEDULE C, PART II-B, LINE 1		The University contracted with one individual, Nan S Wells, to undertake lobbying activities on its behalf. The total fees pursuant to this contract for the year ended June 30, 2011 were \$5,000. Upon expiration of Ms. Well's contract, the University engaged Winning Strategies Washington to undertake lobbying and grant-writing assistance on its behalf. The total fees pursuant to this contract for the year ending June 30, 2011 were \$20,000. Additionally, the University is a member in the following associations. National Association of Independent. Colleges and Universities NACUBO EACUBO. The Council of Independent Colleges A percentage of the University's membership dues are deemed to be expended for lobbying activities. For the year ended June 30, 2011, the lobbying amount was \$1,975. University personnel and students, during the course of various activities throughout the year, meet with legislators to discuss education related topics. The amount of time spent is not material.

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As Filed Data -

DLN: 93493095011022

OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Name of the organization GEORGIAN COURT UNIVERSITY

**Employer identification number** 21-0634981 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the

		(a) Donor advised funds	(	<b>b)</b> Funds and	other accou	ınts
	Total number at end of year					
	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
	Aggregate value at end of year					
	Did the organization inform all donors and donor adv funds are the organization's property, subject to the			sed	☐ Yes	┌ No
•	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the beiconferring impermissible private benefit		•		☐ Yes	┌ No
Pa i	t III Conservation Easements. Complete	ıf the organızatıon answered "Yes	" to Form	990, Part I	V, line 7.	
L	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat  Preservation of open space	tion or pleasure)  Preservation of Preservation of	f a certified	historic stru	•	a a
	Complete lines 2a-2d if the organization held a qua easement on the last day of the tax year	lified conservation contribution in the fo	orm of a co			
	Total musch on of company to			Held at the	e End of the	
a	Total number of conservation easements		2a			
Ь	Total acreage restricted by conservation easements		2b			2 0
C	Number of conservation easements on a certified his	, ,	2c			
d	Number of conservation easements included in (c) a	acquired after 8/1//06	2d			
•		erred, released, extinguished, or termin	ated by th	e organization	n during	
	the taxable year - 0  Number of states where property subject to conserv  Does the organization have a written policy regardin enforcement of the conservation easements it holds	ration easement is located 🛌 1			d <b>TYes</b>	,
	the taxable year • 0  Number of states where property subject to conserv  Does the organization have a written policy regarding	ration easement is located • 1  ng the periodic monitoring, inspection, h	andling of	violations, an	d <b>  Yes</b>	,
; ;	the taxable year   0  Number of states where property subject to conserv  Does the organization have a written policy regardin  enforcement of the conservation easements it holds	ration easement is located - 1  ng the periodic monitoring, inspection, h  recting and enforcing conservation eas	andling of sements du	violations, an iring the year	d	,
1 5 7	the taxable year   0  Number of states where property subject to conserv  Does the organization have a written policy regardin enforcement of the conservation easements it holds  Staff and volunteer hours devoted to monitoring, ins	ration easement is located   ing the periodic monitoring, inspection, here  pecting and enforcing conservation easements, and enforcing conservation easements.	ements duents duents	violations, an iring the year	d	00
; ;	Number of states where property subject to conserv  Does the organization have a written policy regarding enforcement of the conservation easements it holds  Staff and volunteer hours devoted to monitoring, insome Amount of expenses incurred in monitoring, inspect Does each conservation easement reported on line.	ration easement is located   g the periodic monitoring, inspection, here pecting and enforcing conservation easement, and enforcing conservation easement (d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's financial forms.	eandling of sements duents during section	violations, an iring the year the year \$\frac{1}{2}\$ se statement,	d	00
ar	Number of states where property subject to conserve Does the organization have a written policy regarding enforcement of the conservation easements it holds. Staff and volunteer hours devoted to monitoring, instance Amount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of	ration easement is located  ing the periodic monitoring, inspection, here  pecting and enforcing conservation easements, and enforcing conservation easements (d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's financinents  ons of Art, Historical Treasure	sements during section and expensions statem	violations, an iring the year the year * \$ se statement, ients that des	d	00
i i	Number of states where property subject to conserve Does the organization have a written policy regarding enforcement of the conservation easements it holds. Staff and volunteer hours devoted to monitoring, instance Amount of expenses incurred in monitoring, inspect. Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease.	ration easement is located  ing the periodic monitoring, inspection, here  pecting and enforcing conservation easements, and enforcing conservation easements (d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's financements  organization of Art, Historical Treasure  "Yes" to Form 990, Part IV, line 8, 116, not to report in its revenue stated for public exhibition, education or research.	sements during section and expensical statem section are considered as a constant and earch in fur	violations, an iring the year the year ** se statement, ients that des	d Yes  Yes  O  VYes  and cribes  Assets.	No
ar	Number of states where property subject to conserve Does the organization have a written policy regarding enforcement of the conservation easements it holds.  Staff and volunteer hours devoted to monitoring, instance A mount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease  III Organizations Maintaining Collection Complete if the organization answered  If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held	ration easement is located  ing the periodic monitoring, inspection, here  pecting and enforcing conservation easemed  ing, and enforcing conservation easemed  2(d) above satisfy the requirements of  conservation easements in its revenue  the footnote to the organization's finance  ments  ons of Art, Historical Treasure  "Yes" to Form 990, Part IV, line 8.  5 116, not to report in its revenue stated  d for public exhibition, education or reservation easements that describes these  5 116, to report in its revenue statement  public exhibition, education, or researce  public exhibition education educatio	sements during section and expensicial statem sment and earch in fur e items nt and bala	violations, and iring the year the year \$\ins\$ se statement, sents that destructions and the series of processes were sheet words.	d Yes  Yes  O  VYes  and cribes  Assets.  t works of ublic servic  rks of art,	┌ No
ar	Number of states where property subject to conserve Does the organization have a written policy regarding enforcement of the conservation easements it holds.  Staff and volunteer hours devoted to monitoring, instance in a mount of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease.  III Organizations Maintaining Collection Complete if the organization answered. If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fill the organization elected, as permitted under SFAS historical treasures, or other similar assets held for	ration easement is located  ing the periodic monitoring, inspection, here  pecting and enforcing conservation easements in the periodic monitoring conservation easements (d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's financing ments  ons of Art, Historical Treasure "Yes" to Form 990, Part IV, line 8.  5 116, not to report in its revenue stated for public exhibition, education or resenancial statements that describes these public exhibition, education, or researchs.	sements during section and expensicial statem sment and earch in fur e items nt and bala	violations, an iring the year the year \$\self{s}\$ se statement, then that designed therance of procesheet wolf rance of publications.	d Yes  Yes  O  VYes  and cribes  Assets.  t works of ublic servic  rks of art,	P No
ar	Number of states where property subject to conserv Does the organization have a written policy regarding enforcement of the conservation easements it holds Staff and volunteer hours devoted to monitoring, insome Amount of expenses incurred in monitoring, inspect Does each conservation easement reported on line of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease  III Organizations Maintaining Collection Complete if the organization answered  If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fill the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	ration easement is located  ing the periodic monitoring, inspection, here  pecting and enforcing conservation easements in the periodic monitoring conservation easements (d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's financing ments  ons of Art, Historical Treasure "Yes" to Form 990, Part IV, line 8.  5 116, not to report in its revenue stated for public exhibition, education or resenancial statements that describes these public exhibition, education, or researchs.	sements during section and expensicial statem sment and earch in fur e items nt and bala	violations, and iring the year the year \$\ins\$ se statement, then the that destinates the therance of publications and the therance of publications are sheet wo increased the therance of publications are sheet which increased the therance of publications are sheet wo increased the therance of publications are sheet which increased the therance of th	d Yes  O O VYes  and cribes  Assets.  t works of ublic service rks of art, c service,	P No
ar .a	Number of states where property subject to conserve Does the organization have a written policy regarding enforcement of the conservation easements it holds. Staff and volunteer hours devoted to monitoring, instance in the conservation easement in the conservation of expenses incurred in monitoring, inspect Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?  In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease.  TILL Organizations Maintaining Collection Complete if the organization answered. If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fill the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item.  (i) Revenues included in Form 990, Part VIII, line 2	ration easement is located  ing the periodic monitoring, inspection, here  pecting and enforcing conservation easemed ing, and enforcing conservation easemed 2(d) above satisfy the requirements of conservation easements in its revenue the footnote to the organization's finantments  onservation easements in its revenue the footnote to the organization's finantments  onservation easements in its revenue stated for public exhibition, education or resenancial statements that describes these 116, to report in its revenue statements that describes these public exhibition, education, or research is 116 to report in its revenue statements that describes these public exhibition, education, or research is 116 to report in its revenue statements and its revenue statements and its revenue statements are public exhibition, education, or research is 116 to report in its revenue statements are public exhibition, education, or research is 116 to report in its revenue statements are public exhibition, education, or research is 116 to report in its revenue statements are public exhibition, education, or research is 116 to report in its revenue statements are public exhibition, education, or research is 116 to report in its revenue statements are public exhibition, education, or research is 116 to report in its revenue statements are public exhibition.	ements during section and expensical statem  ement and earch in fur e items int and bala in furthe	violations, an iring the year the year \$\mathbb{\text{se}}\$ se statement, itents that des therance of processions of publications are sheet wo rance of publ	d Yes  O O VYes  and cribes  Assets.  t works of ublic servic rks of art, c service,	P No

Cat No 52283D

Schedule D (Form 990) 2010

**b** Assets included in Form 990, Part X

Sche	dule D (Form 990) 2010						Page 2
Par	Organizations Maintaining Co	llections of Art, I	Historical Tre	asures, or Othe	er Similar <i>A</i>	ssets (c	ontinued
3	Using the organization's accession and othe items (check all that apply)	r records, check any o	_	-		ction	
а	Public exhibition		<b>d</b> Loan or	exchange program	s		
b	Scholarly research		e $\Gamma$ Other				
c	Preservation for future generations						
1	Provide a description of the organization's co Part XIV	ollections and explain	how they further	the organization's e	xempt purpos	e in	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t		,		mılar	Г Yes	Г No
Pa	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar	ements. Complete	e if the organiz	ation answered "	Yes" to Form	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other intermedi	ary for contributi	ons or other assets	not	☐ Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the fol	llowing table		1		
					<b>,</b>	mount	
C	Beginning balance			1c	+		
d	Additions during the year			1d			
е	Distributions during the year			1e	_		
f	Ending balance			1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line 2	21?			☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	1					
Pa	rt V Endowment Funds. Complete						
		(a)Current Year	( <b>b</b> )Prior Year	(c)Two Years Back ( 35,278,684	<b>d)</b> Three Years Ba	ck (e)Four	Years Bac
.a	Beginning of year balance	37,753,402 145,999	33,429,111				
b	Contributions	,	81,117 6,229,294	5,867,869			
с	Investment earnings or losses	7,873,124	6,229,294	-7,501,721			
d e	Grants or scholarships Other expenditures for facilities	1,409,332	1,986,120	215,721			
	and programs						
f	Administrative expenses						
g	End of year balance	44,363,193	37,753,402	33,429,111			
2	Provide the estimated percentage of the year	r end balance held as					
а	Board designated or quasi-endowment 🕨	63 900 %					
b	Permanent endowment 🕨 27 100 %						
С	Term endowment ► 9 000 %						
3a	Are there endowment funds not in the posse	ssion of the organizati	on that are held a	and administered fo	r the		
	organization by					Yes	No
	(i) unrelated organizations					a(i)	N o
	(ii) related organizations				-	a(ii)	No.
Ь	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•				3b	
	t VI Investments—Land, Buildings			N Dart Y line 10			
	t vi investments Land, bunding	s, una Equipment	(a) Cost or ot	<u> </u>		ad	
	Description of investment		basis (investme		depreciation	1 (4) 8	ook value
.a	Land			4,543,047	7		4,543,04
b	Buildings			73,610,272	16,493,	326	57,116,94
_	Leasehold improvements						
~							
	Equipment		· <u>L</u>	15,130,836	11,099,	327	4,031,50
d	0.11		•	15,130,836 3,067,604			4,031,509

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests (3)O ther		
(A) HEDGE FUNDS	3,635,955	
(B) INVESTMENTS HELD BY TRUSTEE	2,996,298	
(C) PRIVATE EQUITY FUNDS	741,552	
	,	
(D) STRUCTURED CREDIT FUNDS	2,513,042	
(E) SPECIAL SITUATIONS FUNDS	586,192	
(L) ST ECIAE STOATIONS TONDS	300,192	
(F) PRIVATE EQUITY COMMITTED	848,500	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	e Form 990, Part X, line :	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cook of the or your market raise
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, lin		
(a) Descrip		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
MISCELLANEOUS	321,469	
CONDITIONAL ASSET RETIREMENT	812,895	
ANNUITY PAYMENT LIABILITY	44,045	
	, ,	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	1,178,409	

Par	<b>t XI</b> Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	57,927,429
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	59,695,640
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,768,211
4	Net unrealized gains (losses) on investments	4	6,719,935
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	6,719,935
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	4,951,724
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	eturn
1	Total revenue, gains, and other support per audited financial statements	1	52,644,687
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d -12,002,677		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-5,282,742
3	Subtract line <b>2e</b> from line <b>1</b>	3	57,927,429
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	57,927,429
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	47,692,963
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	47,692,963
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	]	
c	Add lines <b>4a</b> and <b>4b</b>	4c	12,002,677
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	59,695,640
Par	t XIV Supplemental Information		
C 0 P	apleta this part to provide the descriptions required for Part II Junes 2. F. and C. Part III Junes 15 and 4. P	ort 11/	lines 1 h and 2 h

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

Ident if ier	Return Reference	Explanation
ENDOWMENT FUNDS	FORM 990, SCHEDULE D, PART V, LINE 4	The University has adopted an investment policy that is intended to provide a predictable stream of funding to programs from its endowment while seeking to maintain the purchasing power of the endowment assets. Endowment assets include those assets of donor-restricted funds that the University must hold in perpetuity as well as board-designated funds. 1. Donor-restricted endowment funds are established by donor-restricted gifts and recorded as permanently restricted within the University financial statements. The amount of each individual fund is comprised of the original gift, subsequent gifts if they were to be added to the permanent endowment and accumulations if directed by the donor's gift documents. These funds must be retained in accordance with the explicit donor stipulations. 2. Earnings on these endowed funds are regarded as "net appreciation" and classified as temporarily restricted net assets. These amounts are appropriated for expenditure consistent with the donor guidelines. Donor funded scholarships are awarded annually, in accordance with donor stipulated guidelines and are a component of the University's financial aid budget. 3. Board designated funds, quasi-endowment, functioning as endowments are made up of a debt fund, intended to offset future debt borrowings, a plant fund, intended to supplement operational expenses related to facilities' needs such as deferred maintenance or capital items, and a special projects fund with the ability to react to the changing needs and demands of the higher education environment.
INCOME TAXES	FORM 990, SCHEDULE D, PART X, LINE 2	The University follows appropriate guidance which prescribes a model for the recognition and measurement of a tax position taken or expected to be taken in a tax return, and provides guidance on recognition, classification, interest and penalties, disclosure and transition At June 30, 2011 and 2010, the University does not believe its financial statements include any material uncertain tax positions
RECONCILIATION OF REVENUE		FORM 990, SCHEDULE D, PART XII, LINE 2D SCHOLARSHIP EXPENSE -12,002,677 (Reclass)
RECONCILIATION OF EXPENSES		FORM 990, SCHEDULE D, PART XIII, LINE 4B SCHOLARSHIP EXPENSE 12,002,677 (Reclass)

#### **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 **Employer identification number** GEORGIAN COURT UNIVERSITY 21-0634981 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes 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? Yes 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 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes **b** Has the organization's right to such aid ever been revoked or suspended? 6b Νo 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 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)

ldentifier	Return Reference	Explanation
Nondiscrimination Policy	Schedule E, Part I, Line 3	The university's notice of nondiscrimination policy is printed on all brochures, wieb pages, and publications that advertise GCU programs and admissions standards
Financial Aid or Assistance from a Governmental Agency	Schedule E, Part I, Line 6a	U.S. Department of Education Student Financial Assistance Cluster - Federal Pell Grant Program Federal Supplemental Educational Opportunity Grant Federal Work Study Program Federal Family Education Loan Program National Science and Mathematics Access to Retain Talent (SMART) Grants Teacher Education Assistance for College and Higher Education Grants (TEACH Grants) Academic Competitiveness Grant Other U.S. Department of Education Aid - Trio Student Support Services College Access Challenge-Grant Dual Enrollment Improving Teacher Quality State Grants U.S. Department of Health and Human Services Autism Training for Educational Staff in New Jersey U.S. Department of Commerce Sea Grant Support New Jersey Department of Education Student Financial Aid Cluster- Tuition Aid Grant Gear Up Grant Distinguished Scholarship Program Urban Scholarship Program Other NJ Department of Education Assistance Education Opportunity Fund-Grant Education Opportunity Fund-Article IV Education Opportunity Fund-Summer New Jersey Department of Health and Human Services Vocational Rehabilitation Direct Services New Jersey Commission for the Blind Ocean County Department of Parks and Recreation New Jersey State Council on the Arts Ocean County Cultural and Heritage Commission Aid to Independent Colleges and Universities NJEFA-Dormitory Safety Trust Fund, Series 2001 A -Interest Subsidy NJEFA-Dormitory Safety Trust Fund, Series 2003 A -Interest Subsidy

Schedule E (Form 990 or 990-EZ) 2010

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OMB No 1545-0047

2010

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# SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

**Statement of Activities Outside the United States** 

► Attach to Form 990. ► See separate instructions.

Name of the organization GEORGIAN COURT UNIVERSIT **Employer identification number** 

GEU	RGIAN COURT UNIVERSITY				21-0634981			
Pa	"Yes" to Form 990, Pai			he United States. C	Complete if the organiz	ation answered		
1	For grantmakers. Does the organization maintain records to substantiate the amount of the grants or							
	assistance, the grantees' elig	jibility for the	grants or assi	stance, and the select	tion criteria used to awa	ard		
	the grants or assistance?					✓ Yes		
2	<b>For grant makers.</b> Describe in Pa United States	rt V the organiz	zation's procedu	res for monitoring the us	e of grant funds outside tl	ne		
3	Activites per Region (Use Part V	V ıf addıtıonal s	pace is needed	)				
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	<b>(f)</b> Total expenditures for region/investments in region		
	South America			Grantmakıng	SCHOLARSHIPS	35,500		
	Central America and the Caribbean			Grantmakıng	SCHOLARSHIPS	36,452		
	Calibbean							
	a Sub-total					71,952		
	b Total from continuation sheets to Part I							

c Totals (add lines 3a and 3b)

71,952

Part	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ ☐ Use Part V if additional space is needed.								
-	<b>a)</b> Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	( <b>d)</b> Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nun tax-exempt by	nber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are i e or counsel has pro	recognized as chari ovided a section 50:	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3	Enter total nun	nber of other	organizations or en	tities					· (Farm 000) 2010

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.

USE PART V IF AC	<u>aditional space is ne</u>	Use Part V ir additional space is needed.						
(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	( <b>g)</b> Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	
INSTITUTIONAL GRANT AID	Cent A merica/Caribbean	1	13,464					
INSTITUTIONAL GRANT AID	South America	1	5,800					
ATHLETIC GRANTS	South America	1	29,000					
RELIGIOUS GRANTS & DISCOUNTS	Cent A merica/Caribbean	1	22,988					
ENDOWED GRANTS	South America	1	700					
						Calcad	ula E (Farm 000) 2010	

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

Schedule F (Form 990) 2010

### Part V Supplemental Information

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

ldentifier	Return Reference	Explanation
MONITORING OF FUNDS		The University grants listed on Schedule F represent scholarships offered to students who matriculate at the University As such, no monitoring of the grant funds are required because the student may only use the scholarship funds to defray the cost of tuition

Schedule F (Form 990) 2010

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SCHEDULE G (Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,

OMB No 1545-0047

Department of the Treasury Internal Revenue Service					15,000 on Form 990-EZ, See separate instruct		Open to Public Inspection
Name of the organization GEORGIAN COURT UNIVER	SITY						ntification number
						21-0634981	
Part I Fundraising A	<b>ctivities.</b> Complet	e if the o	organızat	ion	answered "Yes"	to Form 990, Part IV	, line 17.
1 Indicate whether the org	anızatıon raısed funds	through a	any of the	follo	wing activities Ch	eck all that apply	
a 🔽 Mail solicitations			e	굣	Solicitation of noi	n-government grants	
<b>b</b> 🔽 Internet and e-mail	solicitations		f	~	Solicitation of gov	vernment grants	
c 🔽 Phone solicitations			g	굣	Special fundraisir	ng events	
d 🔽 In-person solicitation	ns						
or key employees listed  b If "Yes," list the ten high to be compensated at le	est paid individuals oi	r entities (	(fundraıs e	rs) p	oursuant to agreem	ents under which the fur	
(i) Name and address of individual	(ii) Activity		<b>)</b> Dıd ser have	(iv	() Gross receipts from activity	(v) A mount paid to (or retained by)	(vi) A mount paid to (or retained by)
or entity (fundraiser)		cont	ody or trol of outions?			fundraiser listed in col (i)	organization
		Yes	No				
Ronald Larossa Assoc 131 Maplewood Ave	Consultant		No			108,000	
Maplewood, NJ 07020							
Total			▶			108,000	

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

ΝJ

Pa	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  Golf Outing (event type)	(b) Event #2  (event type)	(c) O ther Events  0 (total number)	(d) Total Events (Add col (a) through col (c))	
₽	1	Gross receipts	120,74!	5		120,745	
Revenue	2	Less Charitable contributions	76,930			76,930	
<u>~</u>	3	Gross income (line 1 minus line 2)	43,81	5		43,815	
	4	Cash prizes					
မှာ	5	Non-cash prizes					
Expenses	6	Rent/facility costs					
ă	7	Food and beverages					
Direct	8	Entertainment					
ā	9	Other direct expenses .	40,134	1		40,134	
	10	Direct expense summary Add lin	ies 4 through 9 in column	(d)	🛌	40,134	
	11	Net income summary Combine li	nes 3 and 10 ın column (	d)		3,681	
Par	t III	<b>Gaming.</b> Complete if the oil \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	irt IV, line 19, or repo	orted more than	
Revenue			(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))	
	1	Gross revenue				+	
Ses	2	Cash prizes					
Expenses	3	Non-cash prizes					
	4	Rent/facility costs					
Drea	5	Other direct expenses					
	6	Volunteer labor	┌ Yes % ┌ No	┌ Yes % ┌ No	┌ Yes %		
	7	Direct expense summary Add line	s 2 through 5 in column (	(d)			
	8	Net gaming income summary Com	nbine lines 1 and 7 in colu	ımn (d)	<u> ▶</u>		
9 a b	Ist	er the state(s) in which the organiza the organization licensed to operate No," Explain	gaming activities in eac			· · Fyes Fno	
10a b		re any of the organization's gaming Yes," Explain			the tax year?	· · Fyes Fno	

	Identifier	ReturnReference	Explanation							
Par	instructions.)	provide additional information fo	or responses to question on Schedule G	(see						
		activities during the tax year 🕨 \$		/						
b		·	to other exempt organizations or spent							
	retain the state gaming license?			$\Gamma_{ m Yes}$ $\Gamma_{ m No}$						
а	•	er state law to make charitable distri	butions from the gaming proceeds to							
17	Mandatory distributions	• Lilipioyee	, independent contractor							
	Director/officer	Employee	Independent contractor							
	Description of services provided	<b>&gt;</b>								
	Gaming manager compensation	<b>*</b> \$								
	Name 🟲									
16	Gaming manager information									
	Address 🟲									
	Name P									
	Name	•								
c	If "Yes," enter name and address									
b		ning revenue received by the organized by the third party 🟲 \$	ration 🟲 \$ and the							
				· Fyes FNo						
15a		ntract with a third party from whom t								
	LAKEWOOD, NJ (	08704								
	Address • 900 LAKEWOOD									
	Name 🟲									
14	records	the person who prepares the organi	zation's gaming/special events books and							
ь			<u>13b</u>							
а			13a							
13	Indicate the percentage of gamir	ng activity operated in								
	formed to administer charitable o	jaming?		· Fyes Fno						
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity									
11	Does the organization operate ga	aming activities with nonmembers?		. Г <sub>Yes</sub> Г <sub>No</sub>						

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OMB No 1545-0047

Department of the Treasury

Schedule I

(Form 990)

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

Internal Revenue Service			Attach to Form 990				Inspection
Name of the organization GEORGIAN COURT UNIVERS	ITY					Employer identification	on number
Part I General Inform	nation on Grants and	Assistance				21-0634981	
<ol> <li>Does the organization mathe selection criteria use</li> <li>Describe in Part IV the organization</li> </ol>	intain records to substantia d to award the grants or ass rganization's procedures fo	ate the amount of the sistance?	f grant funds in the Unite	d States			∀ Yes ┌
Form 990, Part 1	her Assistance to Gov IV, line 21 for any recipi litional space is needed.	ent that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
2 Enter total number of sec	tion 501(c)(3) and governn	nent organizations .					
3 Enter total number of other						_	

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

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) INSTITUTIONAL GRANT AID	1887	7,827,483			
(2) TRANSFER SCHOLARSHIPS	507	1,903,400			
(3) ATHLETIC GRANTS	109	912,534			
(4) NURSING SCHOLARSHIPS	86	530,800			
(5) RELIGIOUS GRANTS & DISCOUNTS	154	507,933			
(6) ENDOWED GRANTS	114	248,575			

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

Ident if ier	Return Reference	Explanation
MONITORING OF FUNDS	1 '	The University grants listed on Schedule I represent scholarships offered to students who matriculate at the University As such, no monitoring of the grant funds are required because the student may only use the scholarship funds to defray the cost
		of tuition

Schedule I (Form 990) 2010

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DLN: 93493095011022

OMB No 1545-0047

**Compensation Information** 

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of	t he	orgai	nizat ion	
GEORGIAN	COU	RT UN	IVERSITY	

**Employer identification number** 

21-0634981 **Questions Regarding Compensation** Yes Νo 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 First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain **1**b Νo 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 Νo Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee ✓ Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee 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 Receive a severance payment or change-of-control payment from the organization or a related organization? **4**a Νo 4Ь Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo 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. 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 The organization? 5a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III 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 The organization? Νo Any related organization? 6Ь Νo If "Yes," to line 6a or 6b, describe in Part III 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 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

#### 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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(i) Base (ii) Bonus & Incentive compensation (iii) Bonus & Incentive compensation		SC compensation  (iii) Other reportable compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(1)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
(1) Joseph F Gower phd	(I) (II)	129,841 0	0	12,795 0	8,818 0	12,781	164,235 0	
(2) Margaret A Huber phd	(ı) (ıı)	149,200 0	0	7,491 0	7,584 0	8,155 0	172,430 0	
(3) Ruth Ann Burns	(I) (II)	132,243 0	0	7,021 0	7,108 0	14,225 0	160,597 0	
(4) Evelyn Saul-Quinn	(I) (II)	144,321 0	0	7,414 0	7,068 0	20,032	178,835 0	
(5)								
(6)								
(7)								
(8)								
(9)								
( 10 )								
( 11 )								
( 12 )								
( 13 )								
( 14 )								
( 15 )								
( 16 )								
								-1-1/5000\ 2010

### Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
Compensation	Schedule J, Line 1	The President is provided use of a University residence building. The costs are included in other compensation and considered part of the costs customary with said position in order to carry out various job functions. Related services such as maintenance and housekeeping on this facility are performed by the University. The University provides the use of a University residence building to the Vice President of Enrollment. This benefit is not provided pursuant to a written policy, rather it represents a benefit provided to this particular officer or to facilitate his/her job functions at the University. Residency was also provided to an interim CFO, Dean and Director of Financial Aid. All temporary personnel were hired through an agency and provided the benefit due to out-of-state residency.

Schedule J (Form 990) 2010

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 0 (Form 990).
 Attach to Form 990.

OMB No 1545-0047

DLN: 93493095011022

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
GEORGIAN COURT UNIVERSITY

Employer identification number 21-0634981

D	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f)	Description	of Purpose	(g) Defeased		Issu		alf of financir	
									Yes	No	Yes	No	Yes	No
A	New Jersey Educational Facilities Authority 2007	22-1829511	646065KQ4	07-19-2007	27,196,07	ADVAN REFUND	CE DING/CONS	TRUCTION		x		X		X
В	New Jersey Educational Facilities Authority 2003	22-1829511	64605LFQ6	08-21-2003	15,933,89	CONST	RUCTION/C MTS	APITAL		Х		Х		Х
c	New Jersey Educational Facilities Auth 20042006A	22-1829511	646065LMN	04-14-2004	2,702,688	FINANC	ING CAPIT	ALIMPRVMT	5	Х		Х	х	
D	New Jersey Educational Facilities Authority 2007	22-1829511	nonenonen	09-28-2007	1,050,000	PURCH	ASE PROPEI	RTY		Х		Х		х
De	art II Proceeds													
Po	Proceeds				Α			в		С			D	
1	A mount of bonds retired					0 0		0		_		0		
2	A mount of bonds legally defe	eased				0		0			0			0
3	Total proceeds of issue				29	29,252,014 16,307,409			2,702,698			1,050,000		
4	Gross proceeds in reserve fu	ınds				1,738,347 54			0					
5	Capitalized interest from pro	ceeds				0 0			0			0		
6	Proceeds in refunding escro	N			1:	13,468,490 0					0			0
7	Issuance costs from procee	ds				443,446 318,678 39,9			39,988	988 0				
8	Credit enhancement from pro	oceeds				0 0			0	0 0				
9	Working capital expenditures	s from proceeds				0 0			0	0 1,050,000				
10	Capital expenditures from pr	oceeds			1:	11,457,843 14,694,742		2,666,270						
11	Other spent proceeds					0		0			0			0
12	Other unspent proceeds					0		0			0			0
13	Year of substantial completi	on					•	'				•		
					Yes	No	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as pa	irt of a current refu	ndıng ıssue?			X		X			Χ			Χ
15	15 Were the bonds issued as part of an advance refunding issue?		X			х			Χ			Х		
16	Has the final allocation of pr	oceeds been made	?		Х		Х		Х			Х		
17	Does the organization maint allocation of proceeds?	aın adequate books	and records to su	apport the final	х		х		Х			х		
Pa	rt IIII Private Business	Use						<u>'</u>		•			•	
					A			В		C			D	
	We allow and the second and the seco				Yes	No	Yes	No	Yes		No	Yes	_	No

property financed by tax-exempt bonds?

financed property?

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

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

Х

Χ

Χ

Χ

Part III Private Business Use (Continued)

		P	1		В		С	I	D
		Yes	No	Yes	No	Yes	No	Yes	No
	re there any management or service contracts that may result in private business se?	×		×			×		×
_	re there any research agreements that may result in private business use of bond- nanced property?		Х		×		×		×
aı	oes the organization routinely engage bond counsel or other outside counsel to review ny management or service contracts or research agreements relating to the financed roperty?	х		х		х		Х	
-	nter the percentage of financed property used in a private business use by entities ther than a section 501(c)(3) organization or a state or local government		0 %		0 %		0 %		0 %
ur	nter the percentage of financed property used in a private business use as a result of nrelated trade or business activity carried on by your organization, another section 01(c)(3) organization, or a state or local government		0 %		0 %		0 %		0 %
5 T	otal of lines 4 and 5		0 %		0 %		0 %		0 %
•	as the organization adopted management practices and procedures to ensure the ost-issuance compliance of its tax-exempt bond liabilities?	Х		Х		Х		Х	

Part IV Arbitrage

Peli	Arbitrage								
		Α		В		С		D	
1		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		х		х		х
	Is the bond issue a variable rate issue?	-	V		V		V		
2		-	X	-	X	1	Х		Х
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		x		x				x
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
е	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?	х		х			х		х
6	Did the bond issue qualify for an exception to rebate?		×		×		x	х	

## Part V Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
Form 990, Schedule K		See Schedule O

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As Filed Data -

DLN: 93493095011022

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.

2010

Open to Public Inspection

Name of the organization GEORGIAN COURT UNIVERSITY

Employer identification number

21-0634981

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7		In April 2006, the Sisters of Mercy of the Regional Community of New Jersey transferred the sponsorship of Georgian Court to the Conference for Mercy Higher Education ("CMHE") CMHE coordinates collaboration among the 16 Mercy colleges and universities throughout the country on behalf of the Institute of the Sisters of Mercy of the Americas Georgian Court University has a two-tiered governance structure, the first tier consisting of CMHE (as the University's sole member) and the second being the duly elected Board of Trustees, which includes the President of the University as an ex-officio member. Control of the University and its affairs and property is vested in the Board of Trustees pursuant to the University's By-Laws, subject to the powers reserved to CMHE, including among others, the power to establish the philosophy and mission of the University, elect or remove with or without cause the University president and members of the Board of Trustees, approve expenditures that are in excess of a level requiring approval of the Holy See and merge, consolidate, dissolve, or change the corporate structure of the University Except to the extent reserved to CMHE, the Board of Trustees is empowered to manage the property and business of the University, including within such authority, the power to delegate such responsibilities and duties to the officers of Georgian Court University as the Board of Trustees deems appropriate

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 10		The University's Form 990 was prepared by an international public accounting firm in conjunction with the University's financial department. A draft is prepared and distributed to the full audit committee for review. The audit committee recommends and approves for release the 990. The 990 is distributed to the full board.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12		Each officer, director, trustee and key employee of the University is required to annually disclose any conflicts of interest that arise by virtue of their employment, board service, or position with the University. The University monitors compliance with its conflict of interest policy through a conflict of interest statement that is completed by each board member at the annual June meeting. These are reviewed by the Executive Committee of the Board. In addition to the board members, the executive level, all Finance staff, the Purchasing Director, as well as anyone with significant purchasing responsibilities within the University, complete the questionnaire annually and are reviewed by the Chief Financial Officer and Director of Human Resources. Any disclosed relationships are communicated to the Controller for the purpose of completing the 990. Potential conflicts are investigated immediately.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15		The University undertakes a thorough process to ensure that the executive compensation it pays to its top management official and all of its officers and key employees of organization is reasonable given the market in which the University operates CEO Compensation. The Executive Committee of the Board, reviews the compensation package of the President annually at its June meeting. Compensation level is decided upon utilizing comparative data received from the Human Resource Department. Officer positions are assigned a salary range established by a compensation study done by an outside firm and the Executive Committee of the Board also reviews the compensation for these employees who are considered highest-paid employees. The officers reside on the President's Administrative Team, categorized as the executive level of the University

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19		Governing documents and financial statements are available upon request. Financial statements are listed with bond reporting agencies. Form 990 is provided to the public upon request.

ldentifier	Return Reference	Explanation
FORM 990, Attachment 4		Joseph Gow er is a former officer of the University In the year ended June 30, 2011, Mr. Gow er received compensation for services rendered as a full professor. Mr. Gow er also received sabbatical pay prior to assuming his teaching role. President, Sister Rosemary Jeffries and V.P. for Mission and Business Affairs, Sister Suzanne Elliot, are represented on Attachment 4 as having received no compensation from the University because the Order they represent receives all compensation they would both otherwise be paid. The Sisters of Mercy fulfill various roles within the University. Some positions, which would otherwise be filled with lay persons, are assigned a value for compensation and payments for these services are made to the Sisters of Mercy. The payments made for the calendar year 2010 totaled \$1,118,500 and the compensation for these two positions is included in this figure. This compensation is not treated as taxable income to the Sisters since they are members of a religious Order and, therefore, Sister Rosemary Jeffries, is still deemed to be an independent board member for purposes of Part VI, Section A, Question 1b of the Form 990

ldentifier	Return Reference	Explanation
FORM 990, SCHEDULE K		Schedule k, date issued 8/21/2003 this bond refunded a portion of the New Jersey educational facilities authority bonds, Georgian Court college issue, 2003 project b schedule k, date issued 9/28/2007 these bonds were issued by the New Jersey educational facilities authority pursuant to a New Jersey state program to finance capital improvements at institutions of higher education in New Jersey. The bonds were sold based on the credit of the state of New Jersey in the aggregate principal amount of \$76,725,000. This amount was allocated to both public and private institutions. A form 8038 was filed for the portion of the issue allocated to the private institutions and a separate form 8038-g was filed for the portion allocated to public institutions. Georgian Court received an amount of \$2,635,641 which represents 23 189% of the total amount allocated to private institutions. The 23 189% was applied to the amounts shown on the form 8038 for the private institutions as issue price, costs of issuance and non-refunding proceeds to obtain the portion of these amounts allocable to Georgian Court. The other information provided on schedule k about these bonds relates to the portion of the issue allocated to Georgian Court and not to the amount of the issue in the aggregate. On October 26, 2006, the New Jersey educational facilities authority issued its capital improvement fund bonds, 2006A to refund part of the capital improvement fund 2004 a bonds and part of several other issues of capital improvement bonds. Debt service on the 2004 a bonds was adjusted to take account of the debt service savings that resulted from the refunding. The cusip number and date of issue shown on part i of schedule k and other information provided about these bonds on schedule k relate to the 2004 a bonds. Schedule k, date issued 10/9/2003 this bond issue was issued by the New Jersey educational facilities authority pursuant to a state program to finance dormitory safety improvements. The proceeds were loaned to 12 educational institutions. G

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DLN: 93493095011022

SCHEDULE R (Form 990)

Department of the Treasury

## **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

Internal Revenue Service						In	spectio	n
Name of the organization GEORGIAN COURT UNIVERSITY					Employer iden	tification number		
					21-0634981			
Part I Identification of Disregarded Entities (	Complete	ıf the organizatio	n answered "Yes'	on Form 990, Par	t IV, line 33.)			
(a)  Name, address, and EIN of disregarded entity		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	( <b>d)</b> e Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Cormore related tax-exempt organizations d	Organizat uring the	tions (Complete ı tax year.)	f the organizatior	n answered "Yes" o	n Form 990, Part	: IV, line 34 becau	se it had	one
(a) Name, address, and EIN of related organization		<b>(b)</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	Section 5: conti	<b>g)</b> 12(b)(13 rolled nization
							Yes	No
(1) CONFERENCE FOR MERCY HIGHER EDUCATION								
8630 FENTON STREET 934  SILVER SPRING, MD 20190 43-1973007	Spoi	nsorship	MD	501(c)(3)	1	NA		

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

(6)

Part V Transactions With Related Organizations (Complete if the organization	on answered "Yes"	on Form 990, Par	t IV, line 34, 35, 3	55A, or 36.)				
Note. Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No		
1 During the tax year, did the orgranization engage in any of the following transactions with one or	r more related organiz	ations listed in Parts	s II-IV?					
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity				1a		No		
<b>b</b> Gift, grant, or capital contribution to other organization(s)				1b		No		
<b>c</b> Gift, grant, or capital contribution from other organization(s)				1c		No		
d Loans or loan guarantees to or for other organization(s)								
e Loans or loan guarantees by other organization(s)				1e		No		
f Calcafanata to ather arganization/a)				1f		No		
f Sale of assets to other organization(s)				1g	+	No		
g Purchase of assets from other organization(s)				1h		No		
h Exchange of assets				1i		No		
i Lease of facilities, equipment, or other assets to other organization(s)				1		140		
j Lease of facilities, equipment, or other assets from other organization(s)				1 <u>j</u>		No		
k Performance of services or membership or fundraising solicitations for other organization(s)								
I 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								
• Reimbursement paid to other organization for expenses				10	-	No		
p Reimbursement paid by other organization for expenses				<b>1</b> p		No		
<b>q</b> Other transfer of cash or property to other organization(s)				1q		No		
r Other transfer of cash or property from other organization(s)				1r		No		
2 If the answer to any of the above is "Yes," see the instructions for information on who must c	complete this line, incl	luding covered relati	onships and transact	ion thresholds				
(a) Name of other organization		<b>(b)</b> Transaction type(a-r)	(c) Amount involved	(d) Method of determi involve		ount		
(1)								
(2)								
(3)								
(4)								
(5)								

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	<b>(e)</b> Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	N	
										+	
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## Part VII Supplemental Information

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

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

#### SCHEDULE K (Form 990)

## **Supplemental Information on Tax-Exempt Bonds**

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

▶ 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.

Inspection Employer identification number 21-0634981 (ı) Pooled behalf of Financing ıssuer Νo Yes Yes Nο х Х

GEORGIAN COURT UNIVERSITY Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP# (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased Yes A NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY TR BDS 22-1829511 64605NBUT 10/09/2003 180.934. DORMITORY SAFETY IMPRVMTS В С Part II **Proceeds** Α В C D 180,934. 5 Capitalized interest from proceeds............. 6 Proceeds in refunding escrows................... 2,735. 178,198. Yes Nο Yes No Yes No Yes Nο Х Х 15 Were the bonds issued as part of an advance refunding issue?.......... Х 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? . . . . **Private Business Use** Part III Α В С D 1 Was the organization a partner in a partnership, or a member of an LLC, which owned Yes Nο Yes No Yes Nο Yes Nο Х

Х 2 Are there any lease arrangements that may result in private business use of bond-financed property.

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

Schedule K (Form 990) 2010

21-0634981 Page 2 Schedule K (Form 990) 2010

Part III Private Business Use (Continued)		Α		В		С		D
2. Are there are represent as convene contracts that required the provide hydron	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		110		1.10		
b Are there any research agreements that may result in private business use of bond-financed property?		х						
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	Х							
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 %		%		%		%
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 %		%		%		%
6 Total of lines 4 and 5		0.0000 %		%		%		. %
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х							
Part IV Arbitrage								
		Α	В		С		J	D
Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of     Arbitrage Rebate, been filed with respect to the bond issue?	Yes	No X	Yes	No	Yes	No	Yes	No
2 Is the bond issue a variable rate issue?		Х						
3a Has the organization or the governmental issuer entered into a qualified hedge								
with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								1
d Was the hedge superintegrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a GIC?		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?	Х							
6 Did the bond issue qualify for an exception to rebate?		x						

Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see Instructions) Part V

# Software ID: Software Version:

**EIN:** 21-0634981

Name: GEORGIAN COURT UNIVERSITY

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

Compensated Employees, and Independent Contractors												
<b>(A)</b> Name and Title	(B) (C) A verage Position (check all that apply) per							( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
Patricia E Koch Esq Immediate Past Chair	1 0	х						0	0	0		
Raymond F Shea Jr Esq Board Chair	1 0	Х						0	0	0		
Johanna Diaz CPA Board Member	1 0	x						0	0	0		
Joseph DıCorcıa Esq Board Member	1 0	Х						0	0	0		
John Paul Doyle Esq Board Member	1 0	×						0	0	0		
Elisabeth Fontenelli Board Member	1 0	Х						0	0	0		
Fiah Gussin Board Member	1 0	х						0	0	0		
Patricia Smith Heanue Board Member	1 0	Х						0	0	0		
James J Knipper Board Member	1 0	Х						0	0	0		
Robert W Koar Board Member	1 0	х						0	0	0		
Monsignor Casimir H Ladzinski Board Member	1 0	Х						0	0	0		
Lesa Lardieri-Wright Board Vice Chair	1 0	Х						0	0	0		
Eugenia E Lawson Board Member	1 0	Х						0	0	0		
John K Lloyd Board Member	1 0	×						0	0	0		
Mary Meehan phd Board Member	1 0	х						0	0	0		
Deırdre Mullan RSM phd Board Member	1 0	Х						0	0	0		
Elizabeth Mulvihill Board Member	1 0	Х						0	0	0		
Lında M Orlando Board Member	1 0	х						0	0	0		
Carol Rittner RSM edd Board Member	1 0	х						0	0	0		
John W Seazholtz Board Member	1 0	Х						0	0	0		
Eugene D Serpentellı Esq Board Member	1 0	Х						0	0	0		
Senator Robert W Singer Board Member	1 0	Х						0	0	0		
Peter R Strohm Esq Board Member	1 0	Х						0	0	0		
Thomas J Sykes AIA PP Board Member	1 0	Х						0	0	0		
Deborah Hanley Williams Board Member	1 0	Х						0	0	0		

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours		tion (	(che	')			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
Mary Doris Wiswell RSM CAC Board Member	1 0	Х						0	0	0		
Tessa M Breslin Board Member	1 0	Х						0	0	0		
Francis G Coleman Board Member	1 0	Х						0	0	0		
Reverend Paul A Holmes Board Member	1 0	Х						0	0	0		
Amelia A McTamaney Board Member	10	Х						0	0	0		
Edward Nadworny Board Member	1 0	Х						0	0	0		
Mark N Ricca Board Member	10	Х						0	0	0		
Patricia Talone RSM Board Member	1 0	Х						0	0	0		
Regina Ward RSM Board Member	1 0	Х						0	0	0		
Rosemary Jeffries RSM PhD President	35 0			x				0	0	98,996		
Margaret A Huber phd VP for Institutional Advanceme	35 0			х				156,691	0	15,739		
Ruth Ann Burns VP for Marketing & External Af	35 0			х				139,264	0	21,333		
Dennis Kelly VP for Enrollment	35 0			х				81,183	0	17,136		
Evelyn Saul-Quinn Assoc Prov&Dean Stud/AssProf	35 0			х				151,735	0	27,100		
Suzanne Elliott RSM VP Mission & Business Affairs	35 0			х				0	0	7,227		
Mary Lee Batesko phd Professor of Education	35 0					х		119,134	0	13,997		
Jacqueline Kress phd Dean,School of Educ/Prof	35 0					х		129,906	0	14,195		
Linda James phd Dean,Sch of Sc& Math/Prof	35 0					х		125,450	0	13,963		
Maureen Ryan Hoffman Controller	35 0					х		110,293	0	25,362		
Carol Kontos Cohen Dırector of Human Resources	35 0					х		126,050	0	13,417		
Joseph F Gower phd Provost							х	142,636	0	21,599		