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DLN: 93493135050032

Form **990**

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

Internal Reveni		► The organization may ha	ve to use a copy of this return to satisfy	state reporting	requirements	Open to Public Inspection
A For the	2010 ca	 lendar year, or tax year begi	nning 07-01-2010 and ending 06-30-201	11		
B Check if		C Name of organization University of St Thomas			D Employer	identification number
Address	change	,			41-0693	3970
☐ Name ch	nange	Doing Business As			E Telephon	e number
☐ Initial ret	turn	Number and street (or P O box	ıf mail is not delivered to street address)	Room/suite	(651)96	52-5000
Terminat	ted	2115 Summit Avenue	,		(001)30	
Mended	d return	City or town, state or country, a	and ZIP + 4		G Gross rece	ıpts \$ 526,623,548
Application	on pending	St Paul, MN 55105				
		F Name and address of	prıncıpal officer	H(a) Is this a	a group return for af	filiates? Yes No
		Father Dennis Dease 2115 Summit Avenue				
		St Paul, MN 55105		1 '	affiliates include	•
					o, attach a h ip exemption	st (see instructions) number ►
Tax-exe	empt status	501(c)(3) 501(c)()	◀ (insert no)	11(0)		
J Websit	te:► www	v stthomas edu				
K Form of c	organization	Corporation Trust Assoc	ation Cther ►	L Year of fo	rmation 1885	M State of legal domicile
Dowt T	S					MN
Part I		mary				
1	•	-	ssion or most significant activities ition, the University of St Thomas educat	es students to	be morally re	esponsible leaders who
.			killfully to advance the common good	es students to	be inorally re	saponarbie leadera wilo
홀		· · · · · · · · · · · · · · · · · · ·				
E						
\[\]	Charleth	un hau h		-f	F0/ -f.tt	
υ		•	discontinued its operations or disposed		1	1
x5 3			erning body (Part VI, line 1a)		3	49
<u>}</u> 4			ers of the governing body (Part VI, line 1b in calendar year 2010 (Part V, line 2a)		. 4	44
∄ ⁵		5,903				
-		mber of volunteers (estimate			6	2,365
			m Part VIII, column (C), line 12		7a	1,315,589
ь	Net unre	lated business taxable incon	ne from Form 990-T, line 34		7b	<u> </u>
	_			Prio	r Year	Current Year
a 8			[, line 1 h)		25,016,823	
<u> </u>		m service revenue (Part VII		248,188,915		
9 10			umn (A), lines 3, 4, and 7d)	•	-7,375,743	
_ 11		· · · · · · · · · · · · · · · · · · ·	A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 (must equal Part VIII, column (A), lir		16,365,443	16,490,474
12					282,195,438	328,512,244
13			art IX, column (A), lines 1-3)		75,614,510	85,913,635
14	Benefit	ts paid to or for members (Pa	rt IX, column (A), line 4)			0
₍₀ 15			oyee benefits (Part IX, column (A), lines		144 442 256	145 477 564
(2) 16a	5-10)		777	-	141,143,256	
⊕ 16a			IX, column (A), line 11e)		231,080	182,352
		ndraising expenses (Part IX, columi	· · · · · · · · · · · · · · · · · · ·			
17			A), lines 11a-11d, 11f-24f)		65,417,315	
18			must equal Part IX, column (A), line 25)		282,406,161	302,351,993
19	Reven	ue less expenses Subtract II	ne 18 from line 12		-210,723	26,160,251
Fund Barance of State					g of Current ear	End of Year
20 20 20	Total a	assets (Part X, line 16)			27,475,615	1,085,559,902
중요 21					375,841,562	353,443,906
± 5 22			act line 21 from line 20		551,634,053	732,115,996
Part II		ature Block			, ,	, ,
Under pen	alties of pe and belief	erjury, I declare that I have exa	mined this return, including accompanying s ete. Declaration of preparer (other than offic			
	1.					
	****)12-05-14	
Sign	Signa	ture of officer		Da	ate	
Here		Vangsgard Treasurer				
	<u> </u>	or print name and title				
	Print/Type preparer's		Preparer's signature		Check if self- employed 🕨 🦳	PTIN
Paid	Firm's nar					Firm's EIN
Preparer	Firm's add	Iress •				
Use Only						Phone no

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

Forn	n 990 (2010)					Page
Par	t IIII Statement of Check if Schedule			lishments uestion in this Part III		
1	Briefly describe the orga	nization's missio	n			
priva prog Univ	ate university in Minnesota rams including master's, e rersity of St Thomas educ common good Vision We s	a, St Thomas offe education speciali ates students to b eek to be a recogi	rs bachelor's d st, juris doctor oe morally resp nized laeder in (egrees in over 85 major and doctorates Mission onsible leaders who th Catholic higher educat	ion that excels in effective	than 45 graduate degree ellectual tradition, the d work skillfully to advance
2		, -	cant program se	ervices during the year	which were not listed on	
	the prior Form 990 or 99	0-EZ?				┌ Yes ┌ No
	If "Yes," describe these	new services on S	chedule O			
3	Did the organization cea services? If "Yes," describe these			nt changes in how it co	nducts, any program	┌ Yes ┌ No
4	Describe the exempt pur	pose achievemen 01(c)(4) organiza	ts for each of tl tions and secti	on 4947(a)(1) trusts a	largest program services lare required to report the aiservice reported	
	(Code) (Expenses \$	197,610,804	ıncludıng grants of \$	85,913,637) (Revenue \$	246,418,444)
	Instruction & Research During degrees	ng the year, 10,534 s	tudents were enrol	lled at the University of St	Thomas pursuing undergraduate,	graduate, law and doctoral
	(Code) (Expenses \$	25,547,039	ıncludıng grants of \$) (Revenue \$	3,381,101)
40	•	rovided to students in	cluding Enrollment	Services, Dean of Students	, Registrar, Athletics, Career Dev	
	(Code) (Expenses \$	25,341,501	ıncludıng grants of \$) (Revenue \$	24,020,173)
4c	,	, , , , ,		,) (Revenue \$ using, bookstores, conference se	

) (Revenue \$

4d

(Expenses \$

Other program services (Describe in Schedule O)

Total program service expenses►\$

19,343,262 including grants of \$

267,842,606

1,072,014)

			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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "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	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? 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		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? 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	Yes	
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Management	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "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		No
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 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
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? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F:	orm 990	(2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 695			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	•		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, 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	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		No
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		No
7	Organizations that may receive deductible contributions under section 170(c).	_	.,	
	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	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7b	Yes	
	file Form 8282?	7 c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes	ı.
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		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Νo
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νo
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11				
	Gross income from members or shareholders			
	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		No
	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? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
h	Enter the amount of reserves the organization is required to maintain by the states			
U	in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		No

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	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
		. 9		
b	Enter the number of voting members included in line 1a, above, who are independent	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	. 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	e 7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	. 7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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 ection B. Policies (This Section B requests information about policies not required by the Internal	9		No
	evenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		No
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form			
L	Describe in Cabadula O the present of any world by the agreement on the review this Form 200	11a		No
U	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 rist to conflicts?	e 12b	Yes	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	. 13	Yes	
14	Does the organization have a written document retention and destruction policy?	. 14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,		
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with taxable entity during the year?	a 16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		No
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶MN			
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 V Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization Fary Thyen
 AQU219 2115 Summit Ave

St Paul, MN 551051078 (651) 962-6107

<u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

Check this box if neither the organ	nization nor any r	nsated any current officer, director, or trustee											
(A) Name and Title	(B) Average hours		(C) Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation			
	per week (describe hours for related organizations in Schedule O)	Highest compensated employee Key employee Officer Institutional Trustee or director				Institutional Trustee Individual trustee or director		Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
See Additional Data Table													

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

(A) Name and Title		(B) Average hours	that apply) compensation compensation from the from related								(F) Estima amount o	ted 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	m the zation (W- 9-MISC)	organizations (W- 2/1099- MISC)		compens from t organizati relate organiza	he on and ed
See A	ddıtıonal Data Table													
							+							
					<u> </u>		+					+		
							+					+		
							-					+		
					<u> </u>		-					_		
1b	Sub-Total				٠.	٠.		-						
С	Total from continuation sheets						Þ							
d	Total (add lines 1b and 1c) .							•		2,830,406			3	94,178
2	Total number of individuals (incl \$100,000 in reportable compen						above) who	receive	d more tha	n			
											ŗ		Yes	No
3	Did the organization list any for on line 1a? If "Yes," complete Sch					ey e	mploy	ee, o	r highes	t compens	ated employee	_		
4	For any individual listed on line 3					• nans	• sation	and o	ther co	mnensation	from the	3		No_
-	organization and related organization											4	Yes	
5	5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person							r individual for •	5		No			
	ection B. Independent Con	tractors												
1	Complete this table for your five		nsated i	ndep	ende	ent o	ontra	ctors	that rec	eived more	than			
	\$100,000 of compensation from		n							Γ	(B)		10	_
	Nan	(A) ne and business ad	dress							Descr	iption of services		(C) Compensation	

(A) Name and business address	(B) Description of services	(C) Compensation
Thyssenkrupp Elevator Corp PO Box 933004 Atlanta, GA 311933004	Construction	1,053,974
Ryan Companies US Inc 50 S 10th St Ste 300 Minneapolis, MN 55403	Construction	2,855,283
Opus Northwest LLC 10350 Bren Rd W Minnetonka, MN 55343	Construction	19,804,520
Opus Holding LLC 10350 Bren Rd W Minnetonka, MN 55343	Construction	37,762,355
Floors by Beckers Inc 805 First St NW New Brighton, MN 55112	Floor Work	490,625
2 Total number of independent contractors (including but not limited to those listed above \$100,000 in compensation from the organization ►42) who received more than	

Form 9		(2010) Statement of Reven					Pag	e 9
Part	VIII.	Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	excluded from tax under sections 512,
22	1a	Federated campaigns	1 a					513, or 514
Contributions, gifts, grants and other similar amounts	ь	Membership dues	. 1b					
s, g		Fundraising events		114,730				
gifts ar s		Related organizations						
ıs, (İmi		Government grants (contributions)		4,241,253				
itior er si		All other contributions, gifts, grants		24,076,213		 		
ribu othe	_	similar amounts not included above	e					
nd	-	Noncash contributions included in l		1,349,676				
<u>ं व</u>	h	Total. Add lines 1a-1f	<u> </u>		28,432,196			
ıne	20			Business Code				
wen	2a	Tuition and Fees		611600	241,972,697	241,972,697		
e Fr	Ь			611600	4,445,747			
rwc	c d	Housing		721310	15,986,337	15,944,487	41,850	
Program Serwce Revenue	e							
Iran		All other program service re	venue					
Prog					262 404 704			
	д 3	Total. Add lines 2a-2f Investment income (including			262,404,781			
		and other similar amounts)	•	ŀ	7,137,724		782,999	6,354,725
	4	Income from investment of tax-ex		İ	938,927			938,927
	5	Royalties			160,943			160,943
			(ı) Real	(II) Personal				
		Gross Rents Less rental						
		expenses						
		Rental income or (loss)						
	d	Net rental income or (loss)			0			
	70	Gross amount	(ı) Securities 202,474,274	(II) O ther 3,985				
	/a	from sales of assets other than inventory	202,117,217	3,303				
	b	Less cost or other basis and sales expenses	189,351,203	18,914				
	c	Gain or (loss)	13,123,071	-14,929				
	d	Net gain or (loss)			13,108,142			13,108,142
<u> </u>	8a	Gross income from fundraisi	ng events					
Other Revenue		(not including \$114,730 of contributions reported on						
7. F		See Part IV, line 18	а					
ţ	ь	Less direct expenses .	-	68,653 86,317				
0		Net income or (loss) from fu		50,317	-17,664			-17,664
			ctivities See Part IV, line 19 . a					
				ь	_			
		Net income or (loss) from ga			0			
	108	Gross sales of inventory, les returns and allowances	35					
			a	16,251,151				
		Less cost of goods sold .		8,654,870	7 500 000	F 066 631	140.040	1 500 303
	С	Net income or (loss) from sa	iles of inventory •	Rucinosa Cada	7,596,281	5,866,634	143,348	1,586,299
	11a	Miscellaneous Revenue Student Health Insurance		Business Code	1,057,052	1,057,052		
		Rental Income		531110		1,076,395		
		Parking Revenue		812930	1,433,771			1,433,771
		All other revenue			5,122,639		286,335	
		• Total. Add lines 11a-11d			8,750,914		·	
	12	Total revenue. See Instructi	ons		328,512,244		1,315,589	
						274,891,732	m 990 (20	23,872,727

	990 (2010)				Page 10
Par	t IX Statement of Functional Expenses				
Δ	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to o	-		(D)	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	147,821	147,821		<u>'</u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	85,373,269	85,373,269		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	392,545	392,545		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,986,868		1,986,868	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	115,605,785	99,818,651	11,858,326	3,928,808
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	8,349,722	6,964,874	1,072,459	312,389
9	Other employee benefits	11,905,501	9,875,792	1,533,695	496,014
10	Payroll taxes	7,629,685	6,515,934	849,421	264,330
а	Fees for services (non-employees) Management	24,748	23,682	932	134
b	Legal	395,680	21,072	374,609	-1
c	Accounting	134,753	22,446	111,857	450
d	Lobbying	88,946		88,946	
e	Professional fundraising services See Part IV, line 17	182,352			182,352
f	Investment management fees	2,102,937	1,032,872	1,069,236	829
g	Other	3,013,304	2,500,112	458,909	54,283
12	Advertising and promotion	1,276,297	906,291	356,041	13,965
13	Office expenses	6,522,767	4,056,955	2,169,243	296,569
14	Information technology	3,757,781	2,967,553	772,056	18,172
15	Royalties	0			
16	Occupancy	21,470,584	20,872,592	525,950	72,042
17	Travel	4,677,005	4,201,153	311,065	164,787
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	, ,		· · · ·
19	Conferences, conventions, and meetings	1,900,157	1,574,247	224,734	101,176
20	Interest	169,939	90,050	77,328	2,561
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	16,603,633	13,830,681	2,642,267	130,685
23	Insurance	1,522,719	1,062,072	460,459	188
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	Other Equipment & Supplies	810,242	714,605	38,409	57,228
b	Memberships	935,650	452,306	476,166	7,178
c	Meals	731,290	556,613	73,728	100,949
d	Electronic Library Resources	1,755,032	1,755,032		
е	Debt Remarketing / LOC Fees	578,091	100	577,991	
f	All other expenses	2,306,890	2,113,286	-149,924	343,528
25	Total functional expenses. Add lines 1 through 24f	302,351,993	267,842,606	27,960,771	6,548,616
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the	•			•
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
					000 (2010)

Pa	rt X	Balance Sheet							
					(A) Beginning of year		(B) End of year		
	1	Cash—non-interest-bearing			2,084,939	1	11,202,994		
	2	Savings and temporary cash investments			157,718	2	0		
	3	Pledges and grants receivable, net			115,063,617	3	114,907,607		
	4	Accounts receivable, net			9,545,705	4	10,089,109		
	5	Receivables from current and former officers, directors, truster highest compensated employees Complete Part II of	es, ke	y employees, and					
		Schedule L				5	0		
	6	Receivables from other disqualified persons (as defined under persons described in section $4958(c)(3)(B)$, and contributing sponsoring organizations of section $501(c)(9)$ voluntary employeganizations (see instructions)	yers, and						
sts		Schedule L				6	0		
Assets	7	Notes and loans receivable, net			5,188,675	7	7,140,899		
⋖	8	Inventories for sale or use			1,924,261	8	1,868,298		
	9	Prepaid expenses and deferred charges			1,697,957	9	2,069,939		
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	575,183,712					
	b	Less accumulated depreciation	10b	191,550,243	331,171,652	10c	383,633,469		
	11	Investments—publicly traded securities \ldots . \ldots .			374,882,031	11	345,780,957		
	12	Investments—other securities See Part IV, line 11			118,144,858	12	151,551,728		
	13	Investments—program-related See Part IV, line 11			1,703,565	13	2,021,365		
	14	Intangible assets				14	0		
	15	Other assets See Part IV, line 11			65,910,637	15	55,293,537		
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			1,027,475,615	16	1,085,559,902		
	17	Accounts payable and accrued expenses .			33,259,339	17	31,043,922		
	18	Grants payable				18			
	19	Deferred revenue			6,398,646	19	6,670,350		
	20	Tax-exempt bond liabilities			288,405,000	20	279,655,000		
ès	21	Escrow or custodial account liability Complete Part IV of Sched	ule D		4,258,471	21	4,896,040		
abilities	22	Payables to current and former officers, directors, trustees, ke employees, highest compensated employees, and disqualified							
Lia		persons Complete Part II of Schedule L				22			
	23	Secured mortgages and notes payable to unrelated third partie	es .		260,000	23	260,000		
	24	Unsecured notes and loans payable to unrelated third parties	•		975,000	24	975,000		
	25	Other liabilities Complete Part X of Schedule D $$. $$. $$.			42,285,106	25	29,943,594		
	26	Total liabilities. Add lines 17 through 25			375,841,562	26	353,443,906		
Ņ		Organizations that follow SFAS 117, check here \blacktriangleright $\overline{\mbox{$ec V$}}$ and con	plete	lines 27					
Balances		through 29, and lines 33 and 34.							
lar	27	Unrestricted net assets		312,351,617 118,362,423	27 28	351,827,032 140,819,589			
ä	28	Temporarily restricted net assets							
Fund	29	Permanently restricted net assets			220,920,013	29	239,469,375		
<u> </u>		Organizations that do not follow SFAS 117, check here F a	nd co	mplete					
ō	20	lines 30 through 34.							
Assets	30	Capital stock or trust principal, or current funds			30 31				
Š	31	Paid-in or capital surplus, or land, building or equipment fund				31			
	32	Retained earnings, endowment, accumulated income, or other	iunus		651,634,053		732,115,996		
Net	33	Total liabilities and not accept fund balances				33	<u> </u>		
	34	Total liabilities and net assets/fund balances		1,027,475,615	34	1,085,559,902			

I-CI	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		328 5	512,24
2	Total expenses (must equal Part IX, column (A), line 25)	2			351,99
3	Revenue less expenses Subtract line 2 from line 1	3		26,1	160,25
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		651,6	534,05
5	Other changes in net assets or fund balances (explain in Schedule O)	5		54,3	321,69
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		732,1	115,99
Par	TXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII		•	୮	
1				Yes	No
	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of taudit, 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 its 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 Separate basis Consolidated basis Both consolidated and separated basis	ssued			
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	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

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As Filed Data -

DLN: 93493135050032

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

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.

Employer identification number

Unive	rsity of	St Thomas 41-0693970			
Pa	rt I	Reason for Public Charity Status (All organizations must complete this part.) See instruc	rtions		
		zation is not a private foundation because it is (For lines 1 through 11, check only one box)	20113		
1	Ī	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).			
2	~	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)			
3	Г	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A) hospital's name, city, and state	(iii). Ente	r the	
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental uni	t describe	d ın	
		section 170(b)(1)(A)(iv). (Complete Part II)			
6	Γ	A federal, state, or local government or governmental unit described in section $170(b)(1)(A)(v)$.			
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from the described in section 170(b)(1)(A)(vi) (Complete Part II)	ie general	public	:
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)			
9	Г	An organization that normally receives (1) more than 331/3% of its support from contributions, membersh	ııp fees, a	nd gro	SS
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more tha	in 331/3%	of	
		its support from gross investment income and unrelated business taxable income (less section 511 tax) fr	om busın	esses	
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)			
10	Γ	An organization organized and operated exclusively to test for public safety Seesection 509(a)(4).			
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carr one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See sective box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d T		a)(3).	Check
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more d other than foundation managers and other than one or more publicly supported organizations described in s section 509(a)(2)			
f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type III su check this box	pporting 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 (ii)		Yes	No
		and (III) below, the governing body of the the supported organization?	11g(i)		
		(ii) a family member of a person described in (i) above?	11g(ii)		<u> </u>
		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		
		Provide the following information about the supported organization(s)			

(i) Name of supported organization	Name of supported EIN lines 1- 9 above you		(iv) Is the organizati col (i) list your gove docume	on in ted in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga in the U	(vii) A mount of support	
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

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.)

S	ection A. Public Support		and to quanty t			Jaco complete	
	endar year (or fiscal year beginning						
Care	in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from						
Ū	line 4						
S	ection B. Total Support		<u> </u>	I I.			
	endar year (or fiscal year beginning						
	ın) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
Ū	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 activiti	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı	
	check this box and stop here						►
	-tiC Ct-ti	L'a Carana at B					
<u> </u>	ection C. Computation of Pub Public Support Percentage for 2010			11 column (f))			
	· ·		•	II Column (1))		14	
15	Public Support Percentage for 2009	Schedule A, Pa	rt II, line 14			15	
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, check	
_	and stop here. The organization qua						▶ □
b	33 1/3% support test—2009. If the				5a, and line 15 is 3	33 1/3% or more,	- -
	box and stop here. The organization				45.46		►
1/a	10%-facts-and-circumstances test-						
	is 10% or more, and if the organization made						rt a d
	in Part IV how the organization mee	ts the "racts and	circumstances"	test ine organiz	ration qualifies as	a publicly suppo	
L	organization	_2000 If+ba a	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	► □
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						v
	supported organization	aon meets the 10	acts and circuilis	tances test fill	z organizacion qual	mes as a publici	y ▶[¯
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	on ala not check	a box on fine 15	, 100, 100, 1700	I by check tills	SON GING SCC	▶ □

organization

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 Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 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 IV) 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 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 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

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

▶□

Part IV

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

Schedule A (Form 990 or 990-EZ) 2010

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

EIN: 41-0693970

Name: University of St Thomas

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

Compensated Employees, and		ient C			OFS			(5)	(E)	(5)
(A) Name and Title	Name and Title Average Position (c		che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	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
William Reiling Trustee	1 00	Х						0	0	0
Timothy P Flynn Trustee	1 00	Х						0	0	0
Thomas Mengler Dean Law School	40 00					х		338,098	0	79,222
Thomas Madison Trustee	1 00	Х						0	0	0
The Most Rev Lee Piche Trustee	1 00	Х						0	0	0
The Most Rev Harry Flynn DD Chairman	40 00	Х						53,087	0	0
The Honorable Diana E Murphy Trustee	1 00	Х						0	0	0
Susan Huber Chief Academic Officer	40 00				х			280,072	0	25,143
Susan Alexander Secretary	40 00			Х				144,156	0	19,215
Stephen Hemsley Trustee	1 00	Х						0	0	0
Stepehn P Nachtsheim Trustee	1 00	Х						0	0	0
Stanley S Hubbard Trustee	1 00	Х						0	0	0
Sr Carol Keehan DC Trustee	1 00	Х						0	0	0
Ronald Peltier Trustee	1 00	Х						0	0	0
Ronald Fowler Trustee	1 00	Х						0	0	0
Rodney P Burwell Trustee	1 00	Х						0	0	0
Robert J Ulrıch Trustee	1 00	Х						0	0	0
Rıchard M Schulze Trustee	1 00	Х						0	0	0
Rev John Malone Trustee	40 00	Х						70,788	0	43,059
Rev Kevin McDonough Vice Chairman	1 00	Х						0	0	0
Rev Edward Malloy CSC Trustee	1 00	Х						0	0	0
Raymond L Barton Trustee	1 00	Х						0	0	0
Ms Amy Goldman Trustee	1 00	Х						0	0	0
Mr Geoff Gage Trustee	1 00	Х						0	0	0
Michael V Ciresi Trustee	1 00	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and									, ,	
(A) Name and Title	(B) Average hours per	Posi t	tion (that a	che	′)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Michael Paulsen Law Professor	40 00					х		314,085	0	34,684
Michael E Dougherty Trustee	1 00	Х						0	0	0
Maureen A Fay OP Trustee	1 00	Х						0	0	0
Mary Marso Trustee	1 00	Х						0	0	0
Mark Zesbaugh Trustee	1 00	Х						0	0	0
Mark Vangsgard Treasurer	40 00			х				239,045	0	32,287
Mark Gregg Trustee	1 00	X						0	0	0
Mark Dienhart Chief Administrative Officer	40 00				х			292,259	0	34,712
Lee Anderson Trustee	1 00	X						0	0	0
Laurence F LeJeune Trustee	1 00	X						0	0	0
Kathleen J Higgins Victor Trustee	1 00	Х						0	0	0
John M Morrison Trustee	1 00	Х						0	0	0
John J Fauth Trustee	1 00	Х						0	0	0
John F O'Shaughnessy Jr Trustee	1 00	Х						0	0	0
James Gearen Trustee	1 00	Х						0	0	0
Harry G McNeely Jr Trustee	1 00	Х						0	0	0
Gerald A Rauenhorst Trustee	1 00	Х						0	0	0
Gail Dorn Trustee	1 00	Х						0	0	0
Frank B Wilderson Trustee	1 00	Х						0	0	0
Father Dennis Dease President	40 00	Х		x				276,691	0	47,557
Eugene U Frey Trustee	1 00	Х						0	0	0
Ernest Owens Assistant Profess	40 00					Х		235,252	0	13,536
Dr George Buckley Trustee	1 00	Х						0	0	0
David Deeds Chair of Entrepene	40 00					Х		239,209	0	32,056
Daniel J Haggerty Trustee	1 00	Х						0	0	0

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

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Christopher Puto Dean Opus Col Bus	40 00					Х		347,664	0	32,707
Burton Cohen Trustee	1 00	Х						0	0	0
Brian Jones Trustee	1 00	Х						0	0	0
Antoine M Garibaldi Trustee	1 00	Х						0	0	0
Ann Winblad Trustee	1 00	Х						0	0	0
Andrew Duff Trustee	1 00	Х						0	0	0
Alvın E McQuinn Trustee	1 00	Х						0	0	0

DLN: 93493135050032

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

◆ SeIf the◆ Se	ction 501(c)(3) organizations tha e organization answered "Ye ction 501(c)(4), (5), or (6) organi	t have filed Form 5768 (election und t have NOT filed Form 5768 (elections," to Form 990, Part IV, Line 5 zations Complete Part III	n under section 501	I(h)) Complete Part II-B Do rm 990-EZ, Part V, line 35	not complete Part II-A a (Proxy Tax), then
	me of the organization versity of St Thomas			Employeride	ntification number
				41-0693970	
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(c) or is a section 52	7 organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	lıtıcal campaıgn ac	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	Complete if the or	ganization is exempt unde	er section 501 <i>(</i>	(c)(3).	
1		e tax incurred by the organization			<u> </u>
2		e tax incurred by organization mar			\$
3	·	section 4955 tax, did it file Form 4	_		⊤ Yes
4a	Was a correction made?	,	•		⊤Yes ▼ No
b	If "Yes," describe in Part IV				. , ,
Par		ganization is exempt unde	er section 501(c) except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed to	other organization	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	20-POL, line 17b ►	¢
4	Did the filing organization file I	Form 1120-POL for this year?			↑ —
5	organization made payments amount of political contributio	nd employer identification number For each organization listed, enter ns received that were promptly an political action committee (PAC)	the amount paid fr d directly delivered	om the filing organization's I to a separate political org	funds Also enter the anization, such as a ation in Part IV
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
		i	1	I	I

Р	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked bo	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lobbyıng)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		
C	Total lobbying expenditures (add lines 1a and 1	o)		
d	O ther exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount to columns	rom the following table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lir	e 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	r-0-		
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form	4720 reporting	┌ Yes ┌ No

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

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

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

h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV Total lines 1c through 1: Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? No 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				1)	(b)	
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 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			Yes	No	Amount	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? p Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? 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	1	legislation, including any attempt to influence public opinion on a legislative matter or referendum,				
Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Pesson of the publications of the public of the pub	а	Volunteers?		No		
Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? No Pallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? No Other activities? If "Yes," describe in Part IV Total lines 1c through 1: Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912	b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Pallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total lines 1c through 1: Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912	C	Media advertisements?		No		
f Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? No Other activities? If "Yes," describe in Part IV Total lines 1c through 1: Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? No If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912	d	Mailings to members, legislators, or the public?		No		
p Direct contact with legislators, their staffs, government officials, or a legislative body? Pallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total lines 1c through 1: Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912	e	Publications, or published or broadcast statements?		No		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV Total lines 1c through 1: Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? No 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	f	Grants to other organizations for lobbying purposes?		No		
i Other activities? If "Yes," describe in Part IV j Total lines 1c through 1: Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? No lf "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	g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		88,946	
Total lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? No If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912	h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No		
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912	i	Other activities? If "Yes," describe in Part IV		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	j	Total lines 1c through 1i			88,946	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	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				
d If the filing organization incurred a section 4912 tay did it file Form 4720 for this year?	c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Ī		
a if the ming organization incurred a section 4312 tax, did it life form 4720 for this year.	d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No		

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

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

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

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

Identifier	Return Reference	Explanation
Part II-B, Line 1i	Part II-B, Line 11 - Other Activities Description	During the fiscal year 2011, the University of St Thomas retained the services of North State Advisers and Associates of Minneapolis to represent the university's interests with the city of Minneapolis. The university paid North State Advisors \$18,000 in fiscal year 2011. The university also retained the services of Lockridge Grindal Nauen to represent our interests in Washington, D.C. The university paid Lockridge Grindal Nauen \$22,888 in fiscal year 2011. The university retained the services of Goff Public Inc. to represent our interests at the state's capitol. The university paid Goff Public Inc. \$48,058 in fiscal year 2011.

2a

2b 2c 3

4

5

DLN: 93493135050032

OMB No 1545-0047

Department of the Treasury

SCHEDULE D (Form 990)

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

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

Open to Public

ntema	al Revenue Service	Form 990. ► See separate instructions.		Inspection
	me of the organization		Employer identif	fication number
Uni	iversity of St Thomas		41-0693970	
Pā	art I Organizations Maintaining Donor			nts. Complete if the
	organization answered "Yes" to Form 9		<u> </u>	
	-	(a) Donor advised funds	(b) Funds ar	nd other accounts
1	Total number at end of year			
2 3	Aggregate contributions to (during year) Aggregate grants from (during year)			
3 4	Aggregate grants from (during year) Aggregate value at end of year			
5	Did the organization inform all donors and donor ad funds are the organization's property, subject to th	e organization's exclusive legal control?		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, an used only for charitable purposes and not for the be conferring impermissible private benefit			┌ Yes ┌ No
Pa	rt III Conservation Easements. Complete	e if the organization answered "Yes" to	o Form 990, Part	t IV, line 7.
2	Purpose(s) of conservation easements held by the Preservation of land for public use (e.g., recreation protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a queeasement on the last day of the tax year	Preservation of an Preservation of a c	certified historic st	· ·
			Held at 1	the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easemen	ts	2b	
С	Number of conservation easements on a certified h	nistoric structure included in (a)	2c	
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d	
3	Number of conservation easements modified, trans	sferred, released, extinguished, or terminate	d by the organizati	on during
	the taxable year ▶			
4	Number of states where property subject to conser	rvation easement is located 🛌		
5	Does the organization have a written policy regardi enforcement of the conservation easements it hold		iling of violations,	and Yes No
6	Staff and volunteer hours devoted to monitoring, in	specting and enforcing conservation easem	ents during the ye	ar ►
7	Amount of expenses incurred in monitoring, inspec	ting, and enforcing conservation easements	during the year ►	\$
8	Does each conservation easement reported on line $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	e 2(d) above satisfy the requirements of sec	tion	┌ Yes ┌ No
9	In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text o the organization's accounting for conservation easi	of the footnote to the organization's financial ements	statements that d	escribes
Pai	rt III Organizations Maintaining Collecti Complete if the organization answered		or Other Simila	ar Assets.
1a	If the organization elected, as permitted under SFA art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its	AS 116, not to report in its revenue stateme Id for public exhibition, education or researc	ch in furtherance of	
b	If the organization elected, as permitted under SFA historical treasures, or other similar assets held fo provide the following amounts relating to these iter	r public exhibition, education, or research ir		
	(i) Revenues included in Form 990, Part VIII, line	1	► \$	1,684
	(ii) Assets included in Form 990, Part X		► \$	4,848,281
2	If the organization received or held works of art his	storical treasures, or other similar assets fo	or financial dain or	ovide the

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

Part	Organizations Maintaining Co	llections of Art	, Hist	orical Tr	easures, or	Othe	r Similar	Ass	ets (co	ntınued)
3	Using the organization's accession and other items (check all that apply)	r records, check any	y of the	following t	nat are a sıgnı	ficant ι	ise of its co	llectio	n	
а	Public exhibition		d	✓ Loan o	r exchange pr	ograms	;			
b	Scholarly research		e	✓ Other	Used in publi	cations	į			
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	ollections and expla	ın how	they furthe	the organizat	ion's e	xempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as	part of	the organiz	atıon's collect	ion?			Yes	┌ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	•				red "Y	es" to For	m 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					ssets	not	Г	Yes	✓ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	followir	ng table			_			
								Amo	unt	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1 f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					굣	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV									
Pa	rt V Endowment Funds. Complete	f the organization	n ansv	vered "Yes	s" to Form 99	90, Pa				
		(a)Current Year	(b)	Prior Year	(c)Two Years	Back	(d)Three Ye Back	ars	(e) Four \	'ears Back
1a	Beginning of year balance	346,794,132		320,495,119	393,19	3,426				
b	Contributions	12,643,555		6,818,672	25,21	.9,002				
C	Investment earnings or losses	63,115,544		32,743,127	-84,73	37,121				
d	Grants or scholarships	3,468,439		3,483,294	3,17	9,190				
e	Other expenditures for facilities and programs	10,617,246		9,779,492	ŕ	50,923				
f	Administrative expenses				ļ	0,075				
g	End of year balance	408,467,546		346,794,132	320,49	5,119				
2	Provide the estimated percentage of the yea	r end balance held a	as							
а	Board designated or quasi-endowment 🕨	20 820 %								
b	Permanent endowment 🕨 79 180 %									
c	Term endowment ▶									
3a	Are there endowment funds not in the posses	ssion of the organiza	ation th	nat are held	and administe	red for	the			
	organization by							2-(:)	Yes	No
	(i) unrelated organizations							3a(i) 3a(ii)		No No
ь	(ii) related organizations		on Sc	hedule R?				3b	<u>' </u>	l No
4	Describe in Part XIV the intended uses of th	•								
Par	t VI Investments—Land, Buildings	s, and Equipme	nt. Se	e Form 99	90, Part X, lıı	ne 10.				
	Description of investment			(a) Cost or o basıs (ınvestn			(c) Accumu depreciat		(d) Bo	ok value
1a	Land				37,	584,690			3	7,584,690
Ь	Buildings		.		412,	676,202	99,95	2,618	31	2,723,584
c	Leasehold improvements		. [6,	949,886	4,97	8,969		1,970,917
d I	Equipment		.		53,	261,132	37,73	7,619	1	5,523,513
e	Other		.		64.	711,802	48,88	1,037		5,830,765

383,633,469

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or category (including name of security)	(b)Book value		d of valuation - year market value
		Cost of elia-of	-year market value
(1) Financial derivatives			
(2)Closely-held equity interests	8,220,000		F_
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	151,551,728		
Part VIII Investments—Program Related. See			
		•	d of valuation
(a) Description of investment type	(b) Book value		year market value
			_
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, lii	ne 15.		
(a) Descrip	otion		(b) Book value
(1) Other Assets			2,105,706
(2) Deferred Debt Financing Costs			1,883,436
(3) Construction in Progress			51,304,395
(4) Collateral Securities Lending Agreement			
<u> </u>			
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			55,293,537
Part X Other Liabilities. See Form 990, Part X	(, line 25.		
1 (a) Description of Liability	(b) Amount		
Federal Income Taxes			
Student Loan Advances	4,184,191		
Pledge Payable	1,060,090		
Other Liabilities	4,371,867		
-			
Interest Rate Swap MTM	2,603,106		
EDP Lease Captialization	4,469,654		
Deposits	1,998,784		
Deferred Tax Liability	2,875,114		
Asset Retire Obligations	3,410,744		
Annuity Obligations	4,970,044		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	29,943,594		

Sche	dule D (Form 990) 2010		Page 4
Pai	t XI 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	328,512,244
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	302,351,993
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	26,160,251
4	Net unrealized gains (losses) on investments	4	54,063,814
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	257,878
9	Total adjustments (net) Add lines 4 - 8	9	54,321,692
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	80,481,943
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	306,957,863
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		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-30,295,568
3	Subtract line 2e from line 1	3	337,253,431
4	Amounts 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)		
С	Add lines 4a and 4b	4c	-8,741,187
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	328,512,244
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per l	
1	Total expenses and losses per audited financial statements	₁	226,475,920
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	9,343,881
3	Subtract line 2e from line 1	3	217,132,039
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 4a and 4b	4c	85,219,954
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	302,351,993
Pa	rt XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Identifier	Return Reference	Explanation
Part XIII, Line 4b	Part XIII, Line 4b Other revenue amounts included on 990 but not included in F/S	Student Aıd Reclass \$85219954
Part XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	Special Events Expenses \$86317 Cost of Goods Sold \$8654870 Net unrealized loss on Interest Exchange \$-406289 Deferred Tax Expense \$148411
Part XI, Line 8	Part XI, Line 8 Other Changes in Net Assets or Fund Balances	Net Unrealized Gain on Interest Exchange \$406289 Deferred Tax Expense \$ -148411
Part V, Line 4	Part V, Line 4 Intended uses of the endowment fund	The University's endowment is used for student financial aid, instruction and other related activities, and educational and general operations
Part IV, Line 2b	Part IV, Line 2b Explanation of escrow account liability	The University of St Thomas administers the investments owned by other non-profit organizations. Those organizations delegate the authority to direct the investment of their investment funds to the University. These investment funds are invested by the University along with University's investment funds, based on the advice received from the University's third party investment advisors and Investment Committee of the Board. The University does not provide any independent investment advice. The other organizations agree to accept the advice from the University's investment advisor and do not have the right to self direct the investment of their investment funds. The other organization's investment funds are commingled with and invested as a part of the University's investment funds, in the same investment vehicles and allocation percentages, as the University's investment funds.
Part III, Line 4	Part III, Line 4 Description of organization's collections and how it furthers its purpose	The University of St Thomas holds two collections of artwork The Asmat Art and Artists collection constitutes one of the most comprehensive collections of Asmat art in the United States Located on the St Paul campus it provides students, faculty, staff, and surrounding communities with opportunities to learn about traditional Asmat culture, contemporary challenges for Asmat artists, and ongoing opportunities Asmat artists have for presenting their work. The University of St. Thomas Campus Collection comprises over 1,000 objects, including paintings, sculptures, decorative arts, stained glass, and textiles. Many of these works are on display in public areas of the libraries, offices, classrooms, dormitories, seminary buildings, and the student center, and in various outdoor settings. Several areas, such as the Sculpture Garden of the O'Shaughnessy-Owens. Science complex, the Gainey Center in Owatonna, and the Bernardi Campus in Rome, have noteworthy ensembles. Many works of art are used directly for teaching purposes in the Art History classroom, as well as specialized settings such as the Luann Dummer Center for Women. Others play a direct role in worship and meditation.

Additional Data

Software ID: 10000105

Software Version: 2010v3.2

EIN: 41-0693970

Name: University of St Thomas

Form 990, Schedule D, Part X, - Other Liabilities

1 (a) Description of Liability	(b) Amount
Student Loan Advances	4,184,191
Pledge Payable	1,060,090
Other Liabilities	4,371,867
Interest Rate Swap MTM	2,603,106
EDP Lease Captialization	4,469,654
Deposits	1,998,784
Deferred Tax Liability	2,875,114
Asset Retire Obligations	3,410,744
Annuity Obligations	4,970,044

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DLN: 93493135050032

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

University of St Thomas

Name of the organization

▶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.

Schools

Employer identification number

	41-0693970			
Pa	rtI		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way 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	3	Yes	
4	Does the organization maintain the following?	-		
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	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?	4 c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	_ 5a		No
		54		110
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		Νo
e	Educational policies?	5e		No
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
		-		
	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
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	l .

Part II Supplemental Information

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

ldentifier	Return Reference	Explanation
Schedule E, Line 3 - Racially Nondiscriminatory Policy Publicized		Ads in local papers and broadcast media
Schedule E, Line 6 - Explanation of Aid or Assistance from Governmental Agency		The University of St. Thomas receives primarily Title IV Funding from the Department of Education (i.e., Pell, Perkins, Workstudy and SEOG)

Schedule E (Form 990 or 990-EZ) 2010

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DLN: 93493135050032

OMB No 1545-0047

SCHEDULE F (Form 990)

► Complete if the organization answered "Yes" to Form 990,

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Statement of Activities Outside the United States

Name of the organization

Employer identification number

بيما	araity of Ct Thomas				' '				
HIIV	ersity of St Thomas				41-0693970				
Pa	rt I General Informatio			ne United States. Co		zation answered			
1	"Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
2	For grantmakers. Describe in Pa United States					, ,			
3	Activites per Region (Use Part	V if additional 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	(f) Total expenditures for region/investments in region			
	See Add'l Data								
	-								
	Sub-total Total from continuation sheets	1	7			109,387,921 406,527			
	to Part I	1	I	I		I			

c Totals (add lines 3a and 3b)

109,794,448

Part	Part IV,	line 15, for an		nizations or Entiti ceived more than \$5,					
	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Sub-Sah Africa	Grant	75,000	Wire Transf			
			Sub-Sah Africa	Grant	1,850	Wire Transf			
			Sub-Sah Africa	Grant	150	Wire Transf			
			Sub-Sah Africa	Grant	112,000	Wire Transf			
2	Enter total nu tax-exempt b	mber of recipion	ent organizations l or which the grant	sted above that are ee or counsel has pro	recognized as chari ovided a section 50	ities by the foreign (1(c)(3) equivalency	country, recognized letter	as . ►	
3	Enter total nu	mber of other	organizations or e	ntities				. ▶	4
								Schodule I	F (Form 990) 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.

dditional space is ne T		,	1	T	,	
	recipients	cash grant	dısbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other
Sub-Saharan Africa	6	15,710	Wire Transfer		ĺ	
Sub-Saharan Africa	1	6,465	Disb std acct		I	
Europe	17	83,454	Disb std acct		·	
East Asia & the Pacific	10	53,343	Disb std acct			
Central America	2	9,018	Disb std acct		l	
Europe	18	·				
East Asia & the Paci	3	2,493	Disb std acct			
1		<u></u>	<u> </u>		l	
		· · · · · · · · · · · · · · · · · · ·	'		·	
	(b) Region Sub-Saharan Africa Sub-Saharan Africa Europe East Asia & the Pacific Central America Europe	(b) Region (c) Number of recipients Sub-Saharan Africa 6 Sub-Saharan Africa 1 Europe 17 East Asia & the Pacific 2 Central America 2 Europe 18	(b) Region(c) Number of recipients(d) A mount of cash grantSub-Saharan Africa615,710Sub-Saharan Africa16,465Europe1783,454East Asia & the Pacific1053,343Central America29,018Europe1833,062	(b) Region(c) Number of recipients(d) A mount of cash grant(e) Manner of cash disbursementSub-Saharan Africa615,710Wire TransferSub-Saharan Africa16,465Disb std acctEurope1783,454Disb std acctEast Asia & the Pacific1053,343Disb std acctCentral America29,018Disb std acctEurope1833,062Disb std acct	(b) Region(c) Number of recipients(d) A mount of cash grant(e) Manner of cash disbursement(f) A mount of non-cash assistanceSub-Saharan Africa615,710 Wire TransferSub-Saharan Africa16,465 Disb std acctEurope1783,454 Disb std acctEast Asia & the Pacific1053,343 Disb std acctCentral America29,018 Disb std acctEurope1833,062 Disb std acct	recipients cash grant disbursement non-cash assistance Sub-Saharan Africa 6 15,710 Wire Transfer Sub-Saharan Africa 1 6,465 Disb std acct Europe 17 83,454 Disb std acct East Asia & the Pacific 2 9,018 Disb std acct Europe 18 33,062 Disb std acct

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)</i>	Γ	Yes	্	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	굣	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	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	<u> </u>	Yes	Γ	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	<u> </u>	Yes	Γ	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	৮	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
Grantmaker's Description of How Grants are Used in Foreign Country		Student financial aid is processed under individual grant funds within our accounting system, and the student financial aid is also processed under each individual student account. This approach to record financial aid by fund and by student account, provides a detailed record of how the funds are spent according to donor and governmental requirements. The Financial Aid office monitors student account activity to verify the student's enrollment and use of the funds according to the grant requirements. Grants are provided to established foreign organizations that are educational and/or charitable and the University is in contact with those organizations to ensure the grant funds are expended appropriately

Schedule F (Form 990) 2010

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

EIN: 41-0693970

Name: University of St Thomas

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

(a) Region	(b) Number of	(c) Number of	(d) Activities	(e) If activity listed in	(C) = 1 1
	offices in the region	employees or agents in region	conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa	0	0	Program Services	Study Abroad Aid	6,465
Europe	0	0	Program Services	Study Abroad Aid	116,516
Central America	0	0	Program Services	Study Abroad Aid	9,018
East Asia	0	0	Program services	Study Abroad Aid	55,836
Sub-Saharan Africa	0	0	Program services	Scholarships & Aid	15,710
Sub-Saharan Africa	0	0	Program services	Grant Work	189,000
Sub-Saharan Africa	0	0	Program Services	Grant Work	13,982
Europe	0	0	Program Services	Study Abroad Aıd	12,124
South Asia	0	0	Program Services	Recruitment	14,637
Europe	0	0	Program Services	Recruitment	12,841
South Asia	0	0	Program Services	Vision Trip	28,000
South America	0	0	Program Services	Vision Trip	20,800
Central America	0	0	Program Services	Vision Trip	18,900
East Asia	0	0	Program Services	Vision Trip	27,000
Sub-Saharan Africa	0	0	Program Services	Vision Trip	31,500
East Asia	0	0	Program Services	Intl Studies-MBA	5,093
Europe	0	0	Program Services	Intl Studies-Sum	30,595
Europe	0	0	Program Services	Intl Studies-Sem	149,813
Sub-Saharan Africa	0	0	Program Services	Intl Studies-Wtr	9,132
Europe	1	7	Program Services	Bernardı Campus	532,384
East Asia	0	0	Program Services	Intl Studies-Wtr	34,616
Europe	0	0	Program services	Intl Studies-Win	72,052
Europe	0	0	Investments		6,330,609
Central America	0	0	Investments		102,057,825

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DLN: 93493135050032

OMB No 1545-0047

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, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. F See separate instructions.

Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number

Iniversity of St. I nomas				41-0693970	
Part I Fundraising Activity	ties. Complete if the	organiza	tion answered "Yes"	to Form 990, Part IV	, line 17.
Indicate whether the organizat Mail solicitations Internet and e-mail solicit Phone solicitations In-person solicitations In-person solicitations In-person solicitations In-person solicitations In organization have a wright or key employees listed in Form If "Yes," list the ten highest patto be compensated at least \$5	rations litten or oral agreement v m 990, Part VII) or enti aid individuals or entitles	e f g with any ind ity in conne s (fundraise	Solicitation of nor Solicitation of gov Special fundraising dividual (including office action with professional ars) pursuant to agreem	n-government grants vernment grants ng events ers, directors, trustees fundraising services? ents under which the fui	
(i) Name and address of individual or entity (fundraiser)	fundra cus co	ii) Did alser have stody or ntrol of ributions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
「otal		. 🕨			
3 List all states in which the orgalicensing WA, OR, OH, ND, NH, MN, MI, MA, I		,			

Pai	t II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1 Football Golf Tournament (event type)	(b) Event #2 Asmat Art Gala (event type)	(c) Other Events 5 (total number)	(d) Total Events (Add col (a) through col (c))
₽	1	Gross receipts	52,449	32,325	98,609	183,383
Revenue	2	Less Charitable	36,838	18,135	59,757	114,730
	3	Gross income (line 1 minus line 2)	15,61	14,190	38,852	68,653
	4	Cash prizes				
မှာ	5	Non-cash prizes				
Expenses	6	Rent/facility costs	1,826	5	1,000	2,826
	7	Food and beverages				
Direct	8	Entertainment				
Δ	9	Other direct expenses .	14,993	-482	68,980	83,491
	10	Direct expense summary Add lin	ies 4 through 9 in column	(d)	🛌	86,317
	11	-17,664				
Par	t III	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	irt IV, line 19, or repo	rted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
မှာ	2	Cash prizes				
cpenses	3	Non-cash prizes				
<u>ភ</u> ថ្ង	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes% ┌ No	Г Yes% Г No	☐ Yes% ☐ No	
	7	Direct expense summary Add line	s 2 through 5 ın column (d)		
	8	Net gaming income summary Com	ibine lines 1 and 7 in colu	ımn (d)		
9 a b	Is th	er the state(s) in which the organization licensed to operate	gaming activities in eac	n of these states?		· Fyes FNo
10a b	Wer	e any of the organization's gaming 'es," Explain	licenses revoked, susper	nded or terminated during	the tax year?	

11	Does the organization operate gamin	ig activities with nonmem	bers?		L Yes L No			
12	Is the organization a grantor, benefic							
	formed to administer charitable gami	ing?			Lyes LNo			
13	Indicate the percentage of gaming ac				, 100 , 110			
а	The organization's facility			13a				
b	An outside facility			13b				
14	Provide the name and address of the	person who prepares the	organization's gaming/special eve	nts books and				
	records							
	Name 🟲							
	Name P							
	Address ►							
15a	Does the organization have a contract	ct with a third party from y	whom the organization receives ga	mina				
	revenue?	• •	•	-				
ь	If "Yes," enter the amount of gaming				i fes i No			
	amount of gaming revenue retained b			and the				
c	If "Yes," enter name and address							
	11 Tes, emer hame and address							
	Name 🟲							
	Address 🟲							
16	Gaming manager information							
	Caming manager information							
	Name 🟲							
	Gaming manager compensation 🟲 \$							
	Caming manager compensation p							
	Description of services provided 🟲							
	☐ Director/officer	┌ Employee	☐ Independent contrac					
L 7	,	ı Employee	i Independent contrac	ctor				
a	Mandatory distributions Is the organization required under state law to make charitable distributions from the gaming proceeds to							
_	IS the organization required linger St	ace iam to make enameabl						
					Γ_{Vaa} Γ_{Na}			
b	retain the state gaming license? .				┌Yes ┌No			
b	retain the state gaming license? . Enter the amount of distributions req	juired under state law dist	ributed to other exempt organizati		Yes No			
	retain the state gaming license? . Enter the amount of distributions required in the organization's own exempt act	juired under state law dist rivities during the tax year	ributed to other exempt organizati	ons or spent				
	retain the state gaming license? . Enter the amount of distributions require the organization's own exempt act IV Complete this part to prove	juired under state law dist rivities during the tax year	ributed to other exempt organizati	ons or spent				

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Schedule I (Form 990)

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

OMB No 1545-0047

2010

DLN: 93493135050032

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

Internal Revenue Service							Inspection
Name of the organization						Employer identific	ation number
University of St Thomas						41-0693970	
Part I General Inforn	nation on Grants	and Assistance					
 Does the organization main the selection criteria used Describe in Part IV the organization 	d to award the grants of ganization's procedure	r assistance? es for monitoring the use	of grant funds in the l	Jnited States			ГYes ГI
Form 990, Part I	V, line 21 for any re	Governments and ecipient that received ded	l more than \$5,000.	Check this box if n	o one recipient recei	ved more than \$5,0	"Yes" to 00. Part II can be
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 grant or assistance
(1) Union Park District Council1570 Concordia Ave Suite LL100 St Paul,MN 55104	41-1434829	District 13	10,150	0			General Support
(2) Minnesota Justice Foundation229 19th Ave S Minneapolis, MN 55455	41-1447537	501(c)(3)	28,940	0			Public Service Program
(3) Macalester Groveland Community Council320 S Griggs St St Paul, MN 55105	41-1414691	501(c)(3)	10,150	0			General Support
(4) Loan Repaymt Asst Prog 600 Nicollet Mall Suite 380 Minneapolis, MN 55402	41-1513917	501(c)(3)	8,000	0			General Support
(5) Listening House of St Paul Inc215 Ninth Street West St Paul, MN 55102	36-3291367	501(c)(3)	40,104	0			General Support
(6) Center for Ethical Bus 100 LaSalle Avenue TMH331 Minneapolis, MN 55403	41-1880767	501(c)(3)	6,602	0			General support

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

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, 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) Student Stipends	461	260,202			
(2) Student Prizes & Awards	1051	49,642			
(3) Institutional Tuition and Fee Exemptions	2242	4,766,271			
(4) Institutional Student Aid	8983	75,594,867			
(5) Externally Funded Student Aıd	1729	4,670,981			
(6) ELS Tuition Assistance	9	31,306			

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

Identifier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		As gifts and grants are received, individual funds are established in our general ledger system to process the grant revenue and expense. A financial manager is assigned to review and oversee the activity of the fund. In addition, other administrative departments also provide services to process, report, and review the grant information. In the case of private grants, the University follows a formalized grant application process to verify that the University understands the grant obligation and purpose before the application is sent to the grantor organization. Many private and government grants are received for student financial aid. Our Enrollment Services department follows a detailed policy and procedures manual that describes how each scholarship is awarded, including selection criteria. These procedures follow guidelines set by the University's senior leadership Student financial aid is processed under individual grant funds within our accounting system (as described above), and the student financial aid in also processed under each individual student account. This approach to record financial aid by fund and by student account, provides a detailed record of how the funds are spent according to donor and governmental requirements. The Financial Aid office monitors student account activity to verify the student's enrollment and use of the funds according to the grant requirements Grants are provided to established organizations that are educational and/or charitable and the University is in contact with those organizations to ensure the grant funds are expended appropriately.

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DLN: 93493135050032

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Name of the organization University of St Thomas

Employer identification number

41-0693970

Pa	rt I Questions Regarding Compensation	n	•			
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	<u> </u>	Housing allowance or residence for personal use			
	▼ Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u> </u>	Health or social club dues or initiation fees			
	Discretionary spending account	굣	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc			1b	Yes	
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the		y			
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant	▼	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t from the organization or a related organization?	4a		No
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ıst comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	lıne 1a,	did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7	Yes	
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in					
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-M	ISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) Thomas Mengler	(I) (II)	318,123		19,975	25,396	53,826	417,320	
(2) Susan Huber	(I) (II)	254,099		25,973	24,936	207	305,215	
(3) Susan Alexander	(ı) (ıı)	133,756		10,400	14,677	4,538	163,371	
(4) Michael Paulsen	(ı) (ıı)	314,085			25,030	9,654	348,769	
(5) Mark Vangsgard	(I) (II)	216,690		22,355	22,633	9,654	271,332	
(6) Mark Dienhart	(I) (II)	263,911		28,348	25,058	9,654	326,971	
(7) Father Dennis Dease	(ı) (ıı)	79,331		197,360	12,975	34,582	324,248	
(8) Ernest O wens	(I) (II)	235,252			8,998	4,538	248,788	
(9) David Deeds	(I) (II)	238,946		263	22,402	9,654	271,265	
(10) Christopher Puto	(I) (II)	347,189		475	25,468	7,239	380,371	
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
1							6.1.1	la 1 (Farma 000) 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

Identifier	Return Reference	Explanation
Line 7	Part I, Line 7 Non-Fixed payments not listed above	Listed employees receive reimbursements for approved work-related expenses as outlined by university policy
Line 1a	Part I, Line 1a Relevant information in regards to selections on 1a	Travel for Companions - Susan Huber - treated as compensationHousing - Dennis Dease - condition of employment and not treated as compensationClub Dues - Dennis Dease - personal use treated as compensationClub Dues - Mark Dienhart - personal use treated as compensationClub Dues - Chris Puto - personal use treated as compensationClub Dues - Susan Huber - personal use treated as compensationPersonal Services - Dennis Dease - event and cleaning services - not treated as compensation

Schedule J (Form 990) 2010

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

DLN: 93493135050032 OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

University of St Thomas

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

> Employer identification number 41-0693970

Р	art I Bond Issues													_	
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pr	rice	(f)	Description	of Purpose	(g) De	feased	Beh	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	MN Higher Ed Facilities Authority	41-0988525	60416HQH0	12-16-2009	79,577	,457	See S	chedule O			×		X		
В	MN Higher Ed Facilities Authority	41-0988525	60416HPM0	06-17-2009	58,615	,252	See S	chedule O			Х		Х		
c	MN Higher Ed Facilities Authority	41-0988525	60416HNZ3	12-16-2008	18,158	,074	See S	chedule O			х		Х		
D _	MN Higher Ed Facilities Authority	41-0988525	60416HGJ7	02-16-2006	40,076	,482	See Schedule O X		х						
_															
_										<u> </u>					
Pa	art III Proceeds									1					
					А			ı	В		С			D	
1	A mount of bonds retired														
2	Amount of bonds legally defe	eased													
3	Total proceeds of issue				7	9,577	,457		58,615,252		18,	158,07	1	40	,076,482
4	Gross proceeds in reserve fo	unds				5,351	,500		4,016,025		1,4	400,000		1	,745,725
5	Capitalized interest from pro	ceeds													
6	Proceeds in refunding escro				2	27,841,798						27	,841,798		
7	Issuance costs from procee					871,423 754,097		258,074			488,959				
8	Credit enhancement from pr														
9	Working capital expenditure														
10		roceeds			7	3,354	,534		53,845,130	16,500,000					
11	O ther spent proceeds														
12	O ther unspent proceeds														
13	Year of substantial completi	on			201				10		2009		4		
			Yes	No		Yes	No	Yes		No	Ye	5	No		
14						Х			Х			Х			Х
15						Х			Х			Х	Х		
16	Has the final allocation of pr	oceeds been made?			X			X		Х			Х		
17	Does the organization maint allocation of proceeds?		and records to supp	port the final	x			Х		Х			Х		
Pa	rt IIII Private Business	Use					Т		<u> </u>				1		
					A	1			В		C		1	D	

property financed by tax-exempt bonds?

financed property?

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

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

No

Χ

Χ

Yes

No

Х

Χ

Yes

Yes

Yes

No

No

Х

Χ

Part IIII Private Business Use (Continued

-0	Private business use (Continued)								
			Α		В		С		D
		Yes	No	Yes	No	Yes	No	Yes	No
За	Are there any management or service contracts that may result in private business use?		х		х		х		
b	Are there any research agreements that may result in private business use of bond-financed property?		×		х		х		
С	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	x		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								
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		1 385 %		1 385 %				
6	Total of lines 4 and 5		1 385 %		1 385 %				,
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х		Х			
Pai	t IV Arbitrage								

		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?								
			X		X		X		X
2	Is the bond issue a variable rate issue?		Х		Х		Х		Х
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X		x		X		x
			^		^		^		^
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х
ь	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?		×		×		×		×

Part V Supplemental Information

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

Identifier	Return Reference	Explanation

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493135050032

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization University of St Thomas

Part I Bond Issues

Employer identification number 41-0693970

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rıce	(f)	Description	of Purpose	(g) De	Defeased Beha Iss		On alf of suer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	MN Higher Ed Facilities Authority	41-0988525	60416HGL2	02-16-2006	12,300	0,000	See So	chedule O			X		Х		
В	MN Higher Ed Facilities Authority	41-0988525	60416HDR2	08-19-2004	30,000	0,000	See So	chedule O			Х		Х		
c	MN Higher Ed Facilities Authority	41-0988525	60416HDS0	08-19-2004	20,000	0,000	See So	chedule O			X		Х		
D D	MN Higher Ed Facilities Authority	41-0988525	60416HBT0	12-04-2003	23,660	,819	See So	see Schedule O			х		Х		
Da	rt III Proceeds														
FE	Proceeds					١		E	3		С			D	
1	A mount of bonds retired														
2	A mount of bonds legally defe	eased													
3	Total proceeds of issue					12,300	,000		30,000,000		20,0	000,000		2 3	,660,819
4	Gross proceeds in reserve fu	reserve funds 1,986,094 1,986,094						2	,357,500						
5	Capitalized interest from pro	ceeds													
6	Proceeds in refunding escro	W				21,049	,700						21	,049,700	
7	Issuance costs from procee	ds				215	.5,651 415,000		276,000			253,619			
8	Credit enhancement from pro	oceeds													
9	Working capital expenditures	s from proceeds													
10	Capital expenditures from pr	oceeds				12,084	,349	;	27,598,906		19,	724,000			
11	O ther spent proceeds														
12	O ther unspent proceeds														
13	Year of substantial completion	on			20	06		20	05		2005				
					Yes	No	>	Yes	No	Yes		No	Yes	;	No
14	Were the bonds issued as pa					Х			Х			Χ	X		
15	Were the bonds issued as pa	art of an advance refu	unding issue?			Х			Х			Χ			Х
16	Has the final allocation of pr	oceeds been made?			Х			Χ		X			X		
17	Does the organization maintallocation of proceeds?		and records to supp	port the final	Х			Х		Х			×		
Pa	Private Business	Use					-						_		
					-	A I N/			No.	Vac	C	No	V	D	No
					Yes	No	<u> </u>	Yes	No	Yes		No	Yes	<u> </u>	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-

Χ

Χ

Χ

Χ

Χ

Χ

Part III Private Business Use (Continued)

			4	В			С)
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		х		х		х		
b	Are there any research agreements that may result in private business use of bond-financed property?		х		×		×		
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		Х		X			
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
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		0 492 %		0 095 %		1 220 %		
6	Total of lines 4 and 5		0 492 %		0 095 %		1 220 %		
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	х		Х		Х			

Part IV Arbitrage

		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		×	×		Х		Х	
2	Is the bond issue a variable rate issue?	Х			Х	Х			Х
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	х			X		Х		Х
	Name of provider	Royal Bank C	anada						
С	Term of hedge		26 7000						
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х
ь	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?		×		Х		Х		×

Part V Supplemental Information

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

Identifier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135050032

N. 93493135050032

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

2010

Open to Public Inspection

	of the organization lity of St Thomas							E	mployer id	dent if ica	ition numb	er
Part 1	Excess Benefit Trar	ısacti	ons (s	ection 501	(c)(3) a	and section 501	(c)(4)		1-06939 zations (
	Complete if the organizat										ıne 40b	
1	(a) Name of disqu					(b) Desc				•		(c) rected?
	(a) Hame of disq.	aannea	person			(b) Desc	- IIptioii	oi tialis	action		Yes	
	nter the amount of tax impose					disqualified pers			/ear undei	r · \$ ——		
3 E	nter the amount of tax, if any	, on line	e 2, abo	ve, reımburs	ed by th	e organization .			•	· \$		
Part	Loans to and/or F Complete if the organiz). Part IV. line 26	. or Forr	n 990-E	ΞΖ. Part V	. line 38	а	
	1 3		oan to						(f)			
(a) Na	me of interested person and purpose	or fro	om the zation?	(c)Orig		(d)Balance due	(e) I defau		Approv by boar commit	d or	(g)Writ	
		То	From				Yes	No	Yes	No	Yes	No
Total					▶ \$	•				•		•
Part I	Grants or Assistar Complete if the orga						/, line 2	27.				
	(a) Name of interested pers			b) Relationsh	nip betwe	een interested per ganization			nount of g	rant or ty	pe of assı	stance
(1)						<u> </u>						95,188
(2)												110,302
												110,302

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organi	arıng of zatıon's nues?
	organization			Yes	No
(1) Dougherty Financial Group LLC	See Sch O	26,415	Bond issuance fees		Νo
(2) Joe Vangsgard	See Sch O	44,434	Employment		No
-				-	

Part V Supplemental Information

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

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2010

DLN: 93493135050032

Employer identification number

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

NonCash Contributions

Internal Revenue Service Name of the organization University of St Thomas

(c) Clash Control Cont						41-0693970			
Art—Works of art	Pa	Types of Property							
Art—Works of art			Check If	Number of Contributions or items	Noncash contribution amounts reported on Form 990, Part VIII, line	Method of determining o		contribut	ion
3 Art—Fractional interests 4 Books and publications 5 Clothing and household goods	1	Art—Works of art	Х	10		Replacemt Cost			
South Sout	2	Art—Historical treasures							
5 Clothing and household goods	3	Art—Fractional interests							
Securities — Publicity traded X	4	Books and publications	Х		294	Replacemt Cost			
6 Cars and other vehicles . X	5	Clothing and household			45.400				
7 Boats and planes	3								
8 Intellectual property			X	4	11,034	Replacemt Cost			
9 Secunties—Publicly traded X									
10 Securities—Closely held stock .									
Securities—Partnership, LLC, or trust interests		-	X	48	440,453	Market Value			
11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other 15 Real estate—Residential 16 Real estate—Commercial 17 Real estate—Other 18 Collectibles 2 X 3 3 375 Replacemt Cost 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 21 Historical artifacts 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ► (Premiums) 26 Other ► (Gift Cards) 27 Other ► (Gift Cards) 28 Other ► (Gift Cards) 29 Number of Forms \$283 received by the organization during the tax year for contributions for which the organization completed Form \$283, Part IV, Donee Acknowledgement 29 Drung the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 20 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 30 Does the organization hier or use third parties or related organizations to solicit, process, or sell non-cash contributions? 29 Non-contributions 20 Does the organization hier or use third parties or related organizations to solicit, process, or sell non-cash contributions? 20 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Yes 32 Does the organization hier or use third parties or related organizations to solicit, process, or sell non-cash contributions? 32 N	10	•	_v	2	51 600	Δ nnraisal			
LLC, or trust interests .	11				31,000	Арріцізці			
13 Qualified conservation contribution—Historic structures									
Contribution—Historic structures	12	Securities—Miscellaneous							
contribution—Other	13	contribution—Historic							
16 Real estate—Commercial 17 Real estate—Other	14	-							
17 Real estate—Other	15	Real estate—Residential .							
18 Collectibles X 3 3 375 Replacemt Cost 19 Food inventory									
19 Food inventory									
20 Drugs and medical supplies 21 Taxidermy	18	Collectibles	X	3	375	Replacemt Cost			
Taxidermy									
Historical artifacts									
23 Scientific specimens									
24 Archeological artifacts . Ins 25 Other ► (Premiums)									
Ins 25 Other ► (Premiums) X 5 1,578 Replacemt Cost 26 Other ► (Gift Cards) X 121 25,931 Replacemt Cost 27 Other ► (
25 Other \(\begin{array}{c c c c c c c c c c c c c c c c c c c	24								
26 Other ► (Gift Cards) X 121 25,931 Replacemt Cost 27 Other ► ()	25			_	1 570	Daningamt Cost			
27 Other ► () 28 Other ► () 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement		· ·							
Other ► () Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement		,		121	23,931	Replaceme Cost			
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement		· ———·							
for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes N		`	v the ora	anization during the tay ve	I ar for contributions				
During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	23					29			2
must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		· ·		·	_			Yes	No
for exempt purposes for the entire holding period?	30a	During the year, did the organization	on receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? 32 N b If "Yes," describe in Part II		must hold for at least three years 1	from the o	date of the initial contributi	on, and which is not require	d to be used			
Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? 31 Yes 32a N B If "Yes," describe in Part II		for exempt purposes for the entire	holding p	eriod?			30a		No
Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	Ь	If "Yes," describe the arrangemen	t ın Part I	I					
contributions?	31	Does the organization have a gift a	cceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
b If "Yes," describe in Part II	32a	_	hırd partı	es or related organizations	to solicit, process, or sell	non-cash	32a		No
	ь	If "Yes," describe in Part II							
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II	33	If the organization did not report re	evenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

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

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135050032

Employer identification number

41-0693970

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Name of the organization University of St Thomas

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.

Identifier Return Reference **Explanation** Sch L, Part IV, Joe Vangsgard, Family Member of Mark Vangsgard, OfficerDougherty Financial Group, Company affiliated Column (b) with trustees Mike Dougherty and Raymond Barton

Identifier	Return Reference	Explanation
	Sch K, Part I Bond Issues, Column (f)	A - Refunding of the outstanding principal of the prior bonds, paying all accrued interest on the prior bonds through their dates of redemption together with any redemption premium due on such dates, funding a debt service reserve and paying certain issuance costs of the Bonds Series 5T was a refunding of Series 3-R2 and 3-R1 Series 3-R2 had an original issue date of June 15, 1993, original issue amount \$23,015,000 Series 3-R1 had an original issue date of June 15, 1993, original issue amount \$22,985,000 B - Construction, equipping, and furnishing of Schulze Hall, a four-story academic and support services building on the Institutions Minneapolis, Minnesota campus C - Acquisition, construction, equipping, and furnishing of an apartment-style residential hall and related parking facility D - Construction, equipping, and furnishing of an apartment-style residential hall and related parking facility D - Construction, equipping, and furnishing of an apartment-style residential hall and related parking facility D - Construction, equipping, and furnishing of an apartment-style residential hall and related parking facility D - Construction, equipping, and furnishing of an apartment-style residential hall and related parking facility D - Construction, equipping, and furnishing of an apartment-style residential hall and related parking facility be outstanding principal of the prior bonds, paying all accrued interest on the prior bonds through their date of redemption together with any redemption premium due on such date, funding a debt service reserve and paying certain issuance costs of the bonds. Series 6I was a refunding of Series 4-A1, 4-M, and 4-P. Series 4-A1 had an original issue date of March 1, 1996, original issue amount \$11,645,000. Series 4-M had original an issue date June 15, 1997, original issue amount \$21,680,000. Series 4-P had an original issue date December 1, 1997, original amount \$15,435,000F - Construction and equipping of a five-level below-and above-ground parking facility with approximately 725

Identifier	Return Reference	Explanation
	· ·	The University of St Thomas receives primarily Title IV Funding from the Department of Education (i.e., Pell, Perkins, Workstudy and SEOG)

Identifier	Return Reference	Explanation
	Form 990, Part VI, Line1 Governing Body	The Executive Committee is comprised of all the Chairs of the various Board Committees, the President of the University of St. Thomas, and others elected by the Board Affairs Committee. All of the Executive Committee members are members of the university's Board of Trustees. The Executive Committee has the right to act on behalf of the Board of Trustees in any matter that the Board itself could address.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Other Organization	The University of St. Thomas does not make its governing documents, including the Articles of Incorporation and Bylaws, available to the public. The university's conflict of interest policy is on the university's web site and is accessible to the public. The university's financial statements are available by request and are also available on the university's web site.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	The Executive Committee of the Board of Trustees discusses the President's compensation and benefits plan. Human Resources provides market data as requested. Base salary information is derived from the College & University Professional Association (CUPA) annual salary survey for President's of private and religious institutions. A portion of the President's package is determined by the Archdiocese as established in the annual memorandum on Priest pay and benefits published by the Archbishop the June of every year. The Executive Committee must approve any changes to the President's compensation package other than those dictated by the Archdiocese. The President's salary was reviewed in September 2008.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	All trustees, officers, key employees and the five highest paid employees of the university are requested to file an annual disclosure statement and report any known conflicts of interest. This disclosure statement must be completed at the time of appointment and then annually on or before October 31. The disclosure requires the individuals to note known and potential relationships or transactions which may give rise to a conflict. Trustees and officers also are requested to notify the Vice President for Business Affairs immediately if a change in his or her disclosure statement occurs during the year. The University reviews the forms and any identified conflicts are monitored to ensure compliance with the policy. All contracts, agreements, or arrangements that have the potential for a financial or other type of conflict of interest are reviewed and approved by the appropriate group, as laid out in our policy. An interested person recuses him or herself from the decision-making process, including removing him or herself from any discussions or meetings regarding the potential arrangement. Those without an interest in the matter decide whether a contract, agreement, transaction, or arrangement is fair and reasonable and is in the best interest of the University.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	A full draft copy of the Form 990 (excluding Schedule B) and Form 990-T are sent to all members of the Board of Trustees. An executive summary of the returns is also provided. The board members have approximately one week to review the return and email comments or questions. After taking into account the board questions and comments, the return is presented to the Audit / Finance Committee. The full Board of Trustees delegated approval authority of the tax return to the Audit / Finance Committee.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 2	Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	Amy Goldman and Gerry Rauenhorst - family and business relationshipRaymond Barton and Michael Dougherty - family relationshipWilliam Reiling and Mark Gregg - business relationship

Identifier	Return Reference	Explanation
Form 990, Part III, Line 4d		OTHER PROGRAM SERVICES 4 Other Program Services Academic support provided to the university community including library facilities, Academic Advising, and the Faculty Development Center. The university provides public services including the Senior Citizen Center, Loaves and Fishes, Service Learning, and Vision trips. The university also provides other programs to further their educational purposes.