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Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection A For the 2010 calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011 D Employer identification number B Check if applicable ST EDWARDS UNIVERSITY 74-1109641 Address change Doing Business As Name change E Telephone number ☐ Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite (512) 448-8400 3001 S Congress Avenue Terminated **G** Gross receipts \$ 141,956,265 City or town, state or country, and ZIP + 4 Austin, TX 787046489 Amended return Application pending Name and address of principal officer **H(a)** Is this a group return for affiliates? Yes No Dr George Martin 3001 South Congress Ave ┌ Yes ┌ No H(b) Are all affiliates included? Austin, TX 78704 If "No," attach a list (see instructions) H(c) Group exemption number ▶ **▽** 501(c)(3) **┌** Tax-exempt status 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 Website: ► http://www.stedwards.edu L Year of formation 1969 M State of legal domicile TX Part I Summary Briefly describe the organization's mission or most significant activities To provide a culturally diverse student body with an education that achieves a balance among the humanities, the sciences and the professions. We prepare graduates through training in critical and creative thinking as well as moral reasoning, to analyze Activities & Governance problems, propose solutions and make responsible decisions 2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . 32 32 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) . 2,318 6 0 Total number of volunteers (estimate if necessary) 0 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 . 7a **b** Net unrelated business taxable income from Form 990-T, line 34 0 **Prior Year Current Year** 7,867,364 Contributions and grants (Part VIII, line 1h) . 4,337,193 Program service revenue (Part VIII, line 2g) . 118,510,931 129,736,842 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 2,071,977 4,165,316 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 1,126,828 186,743 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 126,046,929 141.956.265 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 31,481,764 33,257,035 14 0 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-Expenses 54,038,191 58,601,886 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 0 b Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 2,201,399 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 35,603,011 38,873,993 18 121,122,966 130,732,914 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 . 4,923,963 11,223,351 (Assets or | nd Balances | **Beginning of Current End of Year** Year 20 244,436,347 259,166,008 Total assets (Part X, line 16) . . . Total liabilities (Part X, line 26) 21 113,800,061 116,181,760 22 Net assets or fund balances Subtract line 21 from line 20 $\,$ 128,254,587 145,365,947 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2012-05-02 Signature of officer Sign Here Rhonda Cartwright V P of Financial Affairs Type or print name and title Check if self Print/Type preparer's name Preparer's signature employed 🕨 🛭

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

Paid

Preparer

Use Only

Fırm's name 🕨

Fırm's address

٠

Firm's EIN

Phone no 🕨

Par		ment of Program Se of Schedule O contains a i				୮
1	Briefly descri	be the organization's miss	sion			
profe disci progi	ssions To mak plines To prom rams and the br	e graduates competent ir ote excellence in teachin	na chosen discipli g and learning in a pare graduates thi	ne and to help them un an environment that end rough training in critica	e among the humanities, the derstand and appreciate th compasses the campus cla l and creative thinking as w	e contributions of other ssroom, student life
2		zation undertake any sigr 990 or 990-EZ?	nificant program se	ervices during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," descr	ribe these new services o	n Schedule O			
3	services? .	zation cease conducting, ribe these changes on Scl		nt changes in how it coi	nducts, any program	┌ Yes ┌ No
4	Describe the e Section 501(c	exempt purpose achievem	nents for each of th Izations and secti	on 4947(a)(1) trusts a	largest program services b re required to report the am service reported	
4a	(Code) (Expenses \$	119,640,249	including grants of \$	33,257,035) (Revenue \$	129,736,842)
	services as cour	n The purpose of the organiza	s, campus activities fo	or students, etc. and by prov	providing instruction, support to a riding students with residence hall	,
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	-					
	Other progra	m services (Describe in :	Schedule O)			
	(Expenses \$	0	including grants o		0) (Revenue \$	0)
4e	Total prograr	n service expenses►\$	119,640,24	19		

Part IV	Checklist of	Required	Schedules

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

rorm	990 (2010)			Page 4
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		Νo
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		Νo
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
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		Νo
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 2	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		Νο
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		Νο
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		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes V No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
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	

Form 990 (2010)

Part: V Statements Regarding Other IRS Filings and Tax Compliance

			.F	
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
a	1a 260			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
Ī	gaming (gambling) winnings to prize winners?	1c	Yes	
3	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?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
3	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 FR			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
)	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N c
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N c
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
3	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		N c
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N c
d	If "Yes," indicate the number of Forms 8282 filed during the year			
				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
_	Sponsoring organizations maintaining donor advised funds.	0-		
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		
ם ס	Section 501(c)(7) organizations. Enter	90		
	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			
L	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	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		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	III which the organization is incensed to issue qualified health plans			
C	Enter the amount of reserves on hand 13c			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νc
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14b		

3001 S Congress Ave Austin, TX 787046489 (512) 448-8400

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

Se	ction A. Governing Body and Management		—		
			+	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	32			
b	Enter the number of voting members included in line 1a, above, who are independent	32			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with an other officer, director, trustee, or key employee?	у 2			Νο
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			Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			Νο
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5			No
6	Does the organization have members or stockholders?	. 6	\top		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of t	he 7	a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? .	. 71	5		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
а	The governing body?	. 8	a	Yes	
b	Each committee with authority to act on behalf of the governing body?	. 81	,	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at organization's mailing address? If "Yes," provide the names and addresses in Schedule O	the 9		Yes	
	ection B. Policies (This Section B requests information about policies not required by the International Code)	al			
ке	evenue Code.)		\neg	Yes	No
102	Does the organization have local chapters, branches, or affiliates?	10	_	165	No
	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?		Ť		140
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the fo		+		
	The the eigenbase promise a copy of the remiser of the governing bear, belone ining the re	11	a		Νo
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	•			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12	а	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give r		.	V	
c	to conflicts?	12		Yes	
13	describe in Schedule O how this is done	. 12		Yes	
14	Does the organization have a written whistieblower 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		+	res	
а	The organization's CEO, Executive Director, or top management official	. 15	a	Yes	
	Other officers or key employees of the organization	15	-	Yes	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)		+		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with				
b	taxable entity during the year?	16	a		Νο
	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?	16	ь		
Se	ction C. Disclosure				
17	List the States with which a copy of this Form 990 is required to be filed.				
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.	:)			
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 o	rgar	nizatior	n =
	St Edwards University Att Rhonda Cartwright Vice President for Financial Affairs		-		

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

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

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

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

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

Check this box if neither the organiz	sate	ted any current officer, director, or trustee								
(A) Name and Title	(B) Average hours per	Posi	(C) Position (check all that apply)				(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other	
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										

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

		.											
	(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estima amount o	ited fother
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	organization (W- 2/1099-MISC) organizations (W- 2/1099- MISC)			compens from t organizati relati organiza	:he on and ed
See A	dditional Data Table												
								\vdash			-		
											_		
								\vdash			_		
								-			_		
											_		
1b	Sub-Total		<u> </u>		٠.	٠.	٠	>			\neg		
С	Total from continuation sheets						 -						
d	Total (add lines 1b and 1c) .							Þ	3,183,450		0	4	172,605
2	Total number of individuals (incl \$100,000 in reportable compen	-					above) who	received more tha	n			
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch					eye •	mploy •	ee, c	or highest compensa	ated employee	3	Yes	
4	For any individual listed on line organization and related organiz	ations greater t									4	Yes	
5	Did any person listed on line 1a services rendered to the organiz										5		N a
			, - . 					,			5		N o

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Bon Appetit 91337 Collections Drive PO Box 91337 Chicago, IL 60693	Food Services	4,025,302
Flintco Inc 5316 W Highway 290 Ste 480 Austin, TX 78735	Construction	1,246,036
Elliance Inc 600 River Ave Pittsburgh, PA 15212	Marketing Consultant	511,024
Echelon Holding Ltd 1005 Congress Ave Austin, TX 78701	Property Management	505,541
Wortham Insurance and Risk Management 221 West Sixth Street Suite 1400 Austin, TX 78701	Insurance Broker	488,093
2 Total number of independent contractors (including but not limited to those listed above) who received more than	

Form 9 Part \			u A				Pag	e 9
		- Statement of Revent			(A) Total revenue	(B) Related or exempt function revenue	business	(D) Revenue excluded from tax under sections 512, 513, or
10 10	10	Federated campaigns	1a	0				514
ants		Federated campaigns Membership dues						
£.g		Fundraising events						
a¥ig ar		Related organizations		0				
ır,		Government grants (contributions)	1e	1,827,296				
utío er s	f	All other contributions, gifts, grants	, and 1f	6,040,068		 	 	
真色	a	similar amounts not included above Noncash contributions included in li		1,054,465				
Contributions, gifts, grants and other similar amounts	_	Total. Add lines 1a-1f			7,867,364			
				Business Code				
Program Service Revenue	2a	Tuition, Fees, Auxiliary Serv Reven	uuos.	611210	120 726 042	120 726 042	О	0
Reve	ь	Tutton, rees, Auxiliary Serv Reven	ues	611310	129,736,842	129,736,842		
e2	С							
Ser.	d							
an E	е							
¥ogr	f	All other program service re	venue		o	0	0	0
<u></u>	_	Total. Add lines 2a-2f			129,736,842			
	3	Investment income (including			1,723,042	0	0	1,723,042
	4	and other similar amounts) Income from investment of tax-ex		ŀ	0	0		
	5	Royalties			0	0	0	0
	_		(ı) Real	(II) Personal				
		Gross Rents Less rental	47,312 0	0				
	٠	expenses Rental income	47,312	0				
		or (loss) Net rental income or (loss)			47,312	o	o	47,312
			(i) Securities	(II) O ther	· · · · · · · · · · · · · · · · · · ·			
	7a	Gross amount from sales of	2,442,274	0				
		assets other than inventory						
	ь	Less cost or other basis and	0	0				
	_ c	sales expenses Gain or (loss)	2,442,274	0				
	d	Net gain or (loss)			2,442,274	О	О	2,442,274
e e	8a	Gross income from fundraisi (not including	ng events					
듄		\$0						
Вè		of contributions reported on See Part IV, line 18						
Other Revenue			а					
ᅙ	l	Less direct expenses . Net income or (loss) from fui						
			ctivities See Part IV, line 19 . a					
				ь				
		Net income or (loss) from ga						
	TOS	Gross sales of inventory, les returns and allowances	S					
	_		a					
	l	Less cost of goods sold . Net income or (loss) from sa						
		Miscellaneous Revenue		Business Code				
	11a	Insurance Claim Recoveries		900099	89,970	89,970	0	0
	ь	.						
	C	·			40.464	40.461		0
		All other revenue			49,461	49,461	0	
		. Jam	•		139,431			
	12	Total revenue. See Instructi	ons		141,956,265		0	4,212,628
					. ,	129,876,273	m 990 (20	

	990 (2010)				Page 10
Par	Statement of Functional Expenses				
A	Section $501(c)(3)$ and $501(c)(4)$ organizations must omplete column (A) but are not required to c	•		'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		·		•
2	Grants and other assistance to individuals in the U S See Part IV, line 22	33,257,035	33,257,035		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and	2 562 704	1 (04 121	1 201 122	F17.4F1
6	key employees	3,562,704	1,684,131	1,361,122	517,451
7	Other salaries and wages	44,019,536	39,251,324	4,018,167	750,045
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,165,519	2,078,765	53,242	33,512
9	Other employee benefits	5,735,124	4,754,335	860,186	120,603
10	Payroll taxes	3,119,003	2,750,356	253,463	115,184
а	Fees for services (non-employees) Management				
b	Legal	93,134	4,025	86,109	3,000
c	Accounting	127,698		127,698	
d	Lobbying	122,088	122,088		
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	170,709	170,709		
g	Other				
12	Advertising and promotion	1,005,151	979,975	17,801	7,375
13	Office expenses	4,872,669	3,685,450	953,947	233,272
14	Information technology	1,053,740	862,376	190,537	827
15	Royalties				
16	Occupancy	7,028,701	6,417,520	597,294	13,887
17	Travel	1,712,366	1,491,155	139,435	81,776
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	905,620	803,208	82,786	19,626
20	Interest	5,289,433	5,096,741	192,692	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,488,390	6,726,662	761,728	
23	Insurance	917,859	56,542	861,317	
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	Contract, Technical,Other Labor Expense	2,608,023	2,247,088	323,650	37,285
b	Allocate Computer Center Expenses	0	1,495,134	-1,533,156	38,022
c	Contingency Expenses	1,365,657	1,365,657	0	0
d	Allocate Telephone Expenses	0	524,352	-537,686	13,334
е	Special Events	1,152,105	933,096	27,827	191,182
f	A II other expenses	2,960,650	2,882,525	53,107	25,018
25	Total functional expenses. Add lines 1 through 24f	130,732,914	119,640,249	8,891,266	2,201,399
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			15,965,500	1	18,623,946
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net			2,224,561	3	2,445,898
	4	Accounts receivable, net			2,574,492	4	7,405,166
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
ssets	6	Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B), and contributing esponsoring organizations of section 501(c)(9) voluntary emploorganizations (see instructions)	ers, and				
		Schedule L				6	
Š	7	Notes and loans receivable, net			2,089,350	7	1,823,131
⋖	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			1,445,652	9	1,455,812
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	227,383,539			
	ь	Less accumulated depreciation	10b	65,229,112	167,559,847	10c	162,154,427
	11	Investments—publicly traded securities		48,592,836	11	61,043,211	
	12	Investments—other securities See Part IV, line 11	3,485,012	12	3,701,579		
	13	Investments—program-related See Part IV, line 11	499,097	13	512,838		
	14	Intangible assets		0	14		
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			244,436,347	16	259,166,008
	17	Accounts payable and accrued expenses .			8,878,795	17	8,904,070
	18	Grants payable				18	
	19	Deferred revenue			5,820,799	19	5,718,352
	20	Tax-exempt bond liabilities			93,918,500	20	92,167,500
eS.	21	Escrow or custodial account liability Complete Part IV of Schedu	le D			21	
bilities	22	Payables to current and former officers, directors, trustees, ke employees, highest compensated employees, and disqualified					
Ę		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			7,563,666	25	7,010,139
	26	Total liabilities. Add lines 17 through 25			116,181,760	26	113,800,061
<u></u>		Organizations that follow SFAS 117, check here ► 🔽 and com	plet e l	ines 27			
<u>9</u>		through 29, and lines 33 and 34.					
튭	27	Unrestricted net assets			84,494,208	27	94,143,647
Fund Balances	28	Temporarily restricted net assets		13,427,640	28	18,994,469	
Ξ	29	Permanently restricted net assets		30,332,739	29	32,227,831	
or Fu		Organizations that do not follow SFAS 117, check here ► □ a lines 30 through 34.	nd con	ıplet e			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other f			32		
Net	33	Total net assets or fund balances			128,254,587	33	145,365,947
2	34	Total liabilities and net assets/fund balances			244,436,347	34	259,166,008
					I .		

Pal	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		141,9	956,265
2	Total expenses (must equal Part IX, column (A), line 25)	2		130,7	32,914
3	Revenue less expenses Subtract line 2 from line 1	3		11,2	223,351
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		128,2	254,587
5	Other changes in net assets or fund balances (explain in Schedule O)	5		5,8	388,009
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		145,3	365,947
Pai	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	ァ	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
ь	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 in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
_	Separate basis Consolidated basis Both consolidated and separated basis				
3a	Single Audit Act and OMB Circular A-133?		3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the readult or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Inspection

۷a	me	of th	ne c	rga	nıza	tıo
šΤ	EDW	'ARDS	NU 8	IIVEI	RSITY	

Employer identification number 74-1109641

Par	rt I	Reas	<u>on for Pu</u>	blic Charity Stat	tus (All or	ganızatıor	<u>ns must com</u>	plete this	part.) See	nstructions	5		
ie o	rganı	zatıon ıs	not a privat	e foundation becaus	eıtıs (For	lines 1 thro	ough 11, chec	k only one l	box)				
1	\sqcap	A churc	:h, conventi	on of churches, or as	sociation o	fchurches	described in s	ection 170	(b)(1)(A)(i).				
2	굣	A scho	ol described	In section 170(b)(1)(A)(ii).(A	ttach Sche	dule E)						
3	\sqcap	A hosp	tal or a coo	perative hospital sei	vice organi	zatıon desc	rıbed ın sect i c	on 170(b)(1	L)(A)(iii).				
4	Γ			n organization operat ty, and state	ed in conjur	nction with	a hospital des	cribed in s e	ection 170(b)	(1)(A)(iii).	Enter the		
5	Γ	An orga	nızatıon op	erated for the benefit	of a college	e or univers	sity owned or o	perated by	a governmer	ntal unit des	cribed in		
		section	170(b)(1)(A)(iv). (Complete P	art 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 general public described in section 170(b)(1)(A)(vi) (Complete Part II)											
8	Г			described in section	•	A)(vi) (Co	omplete Part I	I)					
9	Ė		•	at normally receives			•	•	ributions, mei	mbership fee	s, and gross		
		_		ities related to its ex							-		
				oss investment incoi									
		acquire	d by the org	janization after June	30,1975	See section	509(a)(2).(C	omplete Pa	art III)	•			
0	\sqcap	Anorga	ınızatıon org	janized and operated	lexclusively	y to test for	r public safety	See sectio	n 509(a)(4).				
1	Γ	one or r the box	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Other										
e f g	I	other th section If the o check t Since A	nan foundatı 509(a)(2) rganızatıon hıs box	ox, I certify that the on managers and oth received a written de	etermination	or more pu	ublicly support	Type I, Ty	ations descri	bed in sectio	n 509(a)(1) or		
		(i) a pe	rson who dı	rectly or indirectly c	ontrols, eith	ier alone or	together with	persons de	escribed in (ii)	Yes No		
			•	governing body of th		-	zation?			119	g(i)		
		(ii) a fa	mily membe	er of a person descril	oed in (i) ab	ove?				110	ı(ii)		
		(iii) a 3	5% control	led entity of a persoi	n described	ın (ı) or (ıı)	above?			11 g	(iii)		
h		Provide	the following	ng information about	the support	ed organiza	ation(s)						
9	(i) Name suppo ganiz	of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		Did you no organiza col (i) o	(v) Did you notify the organization in col (i) of your support?		i) he ation in ganized US?	(vii) A mount of support		
				instructions))	Yes	No	Yes	No	Yes	No			
				,				† ·-	1				
						1		1					
						1							
						1		1					
						1		1					
				1		+		1	_	+			

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

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

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

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

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

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

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

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

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

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

Software ID: 10000077
Software Version: v1.00

EIN: 74-1109641

Name: ST EDWARDS UNIVERSITY

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per	Posi t	(C tion (hat 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	
John Mooney Board Member	1	×						0	0	0	
Sıster A mata Mıller Board Member	1	×						О	0	0	
Marılyn L O Neıll Board Member	1	х						0	0	0	
Duncan Knapp Underwood Board Member	1	х						0	0	0	
Kevin O Connor Chair Board Member	1	Х						0	0	0	
Kevın J Koch Board Member	1	×						0	0	0	
Theodore R Popp Board Member	1	х						0	0	0	
J William Sharman Jr Board Member	1	Х						0	0	0	
F Gary Valdez Secretery Board Member	1	Х						0	0	0	
Brother Richard Daly Board Member	1	×						0	0	0	
Timothy F Gavin Board Member	1	Х						0	0	0	
John H Bauer Vice Chair Board Member	1	х						0	0	0	
Vıctor Mıramontes Board Member	1	х						0	0	0	
Jım A Smith Board Member	1	Х						0	0	0	
Margie Diaz Kintz Treasurer Board Member	1	Х						0	0	0	
Peter Winstead Board Member	1	Х						0	0	0	
Carolyn Lewis Gallagher Board Member	1	Х						0	0	0	
Patricia Berrier Munday Board Member	1	×						0	0	0	
Brother Richard Gilman Board Member	1	х						0	0	0	
Monsignor Elmer Holtman Board Member	1	Х						0	0	0	
Edward E Leyden Board Member	1	Х						0	0	0	
Brother Donald Blauvelt CSC Board Member	1	Х						0	0	0	
Donna Van Fleet Board Member	1	Х						0	0	0	
Ian J Turpin Board Member	1	Х						0	0	0	
Melba Whatley Board Member	1	х						0	0	0	

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours		tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
Margaret Crahan Board Member	1	×						0	0	0	
Brother James Branıgan Board Member	1	Х						0	0	0	
Thomas Carter Board Member	1	х						0	0	0	
Judge Wilford Flowers Board Member	1	Х						0	0	0	
Joseph Luccı III Board Member	1	Х						0	0	0	
The Most Reverend John McCarthy Board Member	1	Х						0	0	0	
Rev Thomas O'Hara Board Member	1	Х						0	0	0	
Bhuban R Pandey Assoc VP Institutional Effectiveness & Research	40			х				106,310	0	21,004	
Michael Larkin Vice President University Advancement	40			х				243,111	0	23,342	
Donna M Jurick SND Exec Vice President & Provost	40			х				0	0	5,762	
George E Martın President	40			х				520,976	0	87,644	
Katherine Paige Booth VP Marketing & Enrollment Management	40			х				221,794	0	33,106	
Sandra L Pacheco Vice President Student Affairs	40			х				136,794	0	17,204	
Doris Constantine Assoc VP Student Financial Services	40			х				105,065	0	26,909	
Tracy L Manier Assoc VP, Dean Undergraduate Admissions	40			х				104,677	0	27,362	
Rhonda D Cartwright Vice President Financial Affairs	40			х				256,533	0	23,825	
Thomas Matthew Evans Assoc VP Professional Ed & Global Initiatives	40			х				124,186	0	30,790	
David Waldron Vice President Information Technology	40			х				173,224	0	12,280	
Lisa Kirkpatrick Assoc VP & Dean of Students	40			х				91,400	0	14,874	
Molly Minus Assoc VP for Academic Affairs	40			х				121,216	0	23,128	
Kıppı Grıffith Assoc VP Alumnı & Parent Programs	40			х				89,666	0	23,894	
Joseph DeMedeiros Assoc Vice President Advancement	40			х				103,556	0	13,134	
Barton Glaser Assoc VP Financial Affairs	40			х				27,705	0	622	
Marianne F Hopper Professor, Dean University Programs	40					х		125,538	0	10,164	
Marsha C Kelliher Professor Management and Business	40					x		131,243	0	27,051	

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

(A) Name and Title	(B) (C) Average hours that apply) per							(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	
Aundrea Kay Guess Professor	40					x		129,734	0	15,216	
Carolyn Conn Professor	40					х		126,617	0	15,381	
Deborah Zımmerman Actıng Dırector Human Resources	40					х		122,332	0	2,862	
Robert A Manzer Vice President Academic Affairs	40						х	121,773	0	17,051	

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DLN: 93493129005342

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

Se Se fth Se Se fth	ection 501(c) (other than section 5 ection 527 organizations. Complete e organization answered "Yestion 501(c)(3) organizations that ection 501(c)(3) organizations that	s," to Form 990, Part IV, Line 4, or thave filed Form 5768 (election under thave NOT filed Form 5768 (election of s," to Form 990, Part IV, Line 5 (P	rts FA and C below r Form 990-EZ, P r section 501(h)) C under section 501(art VI, line 47 (Lobbying A Complete Part II-A Do not co (h)) Complete Part II-B Do r	mplete Part II-B not complete Part II-A
	me of the organization			Employer ider	itification number
51	EDWARDS UNIVERSITY			74-1109641	
Par	t I-A Complete if the or	ganization is exempt under	section 501(organization.
1 2 3		ganızatıon's dırect and ındırect politi			\$
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization un	der section 4955	▶	\$
2	Enter the amount of any excise	e tax incurred by organization manag	jers under sectior	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 47.	20 for this year?		☐ Yes ☐ No
4a	Was a correction made?				┌ Yes ┌ No
ь	If "Yes," describe in Part IV				
	<u> </u>	ganization is exempt under	section 501(c) except section 50:	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing o exempt funtion activities	rganization's funds contributed to o	ther organizations	for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b ►	¢
4	Did the filing organization file F	Form 1120-POI for this year?			→
5	Enter the names, addresses ar organization made payments f amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and o political action committee (PAC) If	ie amount paid fro Iirectly delivered	m the filing organization's to a separate political orga	s to which the filing funds Also enter the inization, such as a tion 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

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

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

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

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

	· · · · · · · · · · · · · · · · · · ·	(a	a)	(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		122,088
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV		Νo	
j	Total lines 1c through 1i			122,088
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
ь	If "Yes," enter the amount of any tax incurred under section 4912		'	
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		l	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Dar	+ III-A. Complete if the organization is exempt under section $501(c)(4)$ section	n 501(c	1/51 0	r section

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

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

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

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

Part IV Supplemental Information

Dues, assessments and similar amounts from members

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

Ident if ier	Ret urn Reference	Explanation
SchC_P2B_S00_L01		The university engages an outside lobbying firm to provide strategic advice and counsel to the university pertaining to important issues before Congress and the Administration that may affect the organization. The firm contacts elected officials, their staff and key Congressional Committees on behalf of the university.

1

DLN: 93493129005342

OMB No 1545-0047

Open to Public

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Inspection Employer identification number Name of the organization

EDWARDS UNIVERSITY		74 -	1100641
art I Organizations Maintaining Donor A	dvised Funds or Other Similar		l 109641 or Accounts. Complete If th
organization answered "Yes" to Form 99			
	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor adv funds are the organization's property, subject to the	-	onor advı	sed TYes TN o
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit	5 5	•	
art II Conservation Easements. Complete	ıf the organization answered "Yes"	to Form	n 990, Part IV, line 7.
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual	ion or pleasure) Preservation of a	a certified	cally importantly land area d historic structure inservation
easement on the last day of the tax year			Held at the End of the Year
Total number of conservation easements		2a	neid at the End of the Year
Total acreage restricted by conservation easements	-	2a 2b	
Number of conservation easements on a certified his			
	, ,	2c	
Number of conservation easements included in (c) a		2d	
Number of conservation easements modified, transfe the taxable year -	erreu, rereaseu, extiliguistieu, or teriffila	ited by th	e organization during
Number of states where property subject to conserv	ation easement is located ►		
Does the organization have a written policy regardin enforcement of the conservation easements it holds		ındlıng of	violations, and Yes No
Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation ease	ements d	uring the year 🛌
A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easemer	nts during	g the year ► \$
Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of s	ection	ΓYes ΓNα
In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation eases	the footnote to the organization's financi	•	•
rt III Organizations Maintaining Collection Complete if the organization answered		, or Otl	ner Similar Assets.
If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its file.	l for public exhibition, education or resea	arch in fu	
If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research		
(i) Revenues included in Form 990, Part VIII, line 1	L		► \$
(ii) Assets included in Form 990, Part X			► \$
If the organization received or held works of art, hist following amounts required to be reported under SFA		for finan	
Revenues included in Form 990, Part VIII, line 1			▶ -\$

Assets included in Form 990, Part X

'a r	Organizations Maintaining Co	<u>llections of Art</u>	, Hist	toric	<u>:al Tre</u>	asure	s, or Otl	her Simi	ilar Ass	sets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of the	e follo	owing th	at are a	sıgnıfıcan	t use of its	s collecti	on	
а	Public exhibition		d	Γ	Loan or	exchan	ge prograi	ms			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
1	Provide a description of the organization's co	ollections and explai	ın how	they	further	the orga	nızatıon's	exempt p	urpose ır	า	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								Г	_ Yes	┌ No
Pai	t IV Escrow and Custodial Arrang						nswered	"Yes" to	Form 9	90,	
	Part IV, line 9, or reported an an										
la	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	diary	for co	ntributi	ons or o	ther asset	ts not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the f	followi	ng ta	ble		_				
							<u> </u>		Am	ount	
С	Beginning balance						1	С			
d	Additions during the year						1	d			
e	Distributions during the year						1	e			
f	Ending balance						1	f			
a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV	1									
a'	rt V Endowment Funds. Complete										
а	Beginning of year balance	(a)Current Year 45,178,458	(b)	Prior Y	rear .720,070	(c)Iwo	Years Back 57,218,963	(d)Three Y	ears Back	(e)Four Y	ears Back
a b	Contributions	2,487,913		,	513,849		975,638				
c	Investment earnings or losses	9,221,882		4,	,603,824		-13,469,625				
d	Grants or scholarships	588,170			432,739		1,206,665	_			
e	Other expenditures for facilities	1,280,394			,087,510		1,502,963	-			
	and programs										
f	Administrative expenses	170,708			139,036		295,278				
g	End of year balance	54,848,981		45,	178,458		41,720,070				
2	Provide the estimated percentage of the yea	r end balance held a	is								
а	Board designated or quasi-endowment 🕨	30 47 %									
b	Permanent endowment 🕨 58 76 %										
c	Term endowment ► 10 77 %										
a	Are there endowment funds not in the posses	ssion of the organiza	ation t	hat a	re held a	and adm	ınıstered f	for the		-	
	organization by (i) unrelated organizations								. 3a(i	Yes	No No
	(ii) related organizations		• •						. 3a(i		
ь	If "Yes" to 3a(II), are the related organization								. 3b	-	
Ļ	Describe in Part XIV the intended uses of th	e organization's end	lowme	nt fur	nds				L		
a ı	t VI Investments—Land, Buildings	s, and Equipmer	nt. Se	ee Fo	orm 990	0, Part	X, line 1	0.			
	Description of investment				Cost or oth (investme		Cost or othe asıs (other)		umulated eciation	(d) Boo	ok value
a	Land					0	3,479,8	83		:	3,479,883
ь	Buildings		.			0	180,545,4	40 3	9,924,206	140	0,621,234
c	Leasehold improvements		.			0		0	0		(
d	Equipment		.			0	28,212,8	81 1	8,712,423		9,500,458
e	Other		.			0	15,145,3	35	6,592,483		8,552,852

162,154,427

Part VII Investments—Other Securities. See F	Form 990, Part X, line 1. I		d .6		
(a) Description of security or category (including name of security)	(b) Book value		nod of valuation of-year market value		
(1)Fınancıal derivatives					
(2)Closely-held equity interests					
Other					
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	Form 000 Dart V line	1 2			
Part VIII Investments—Program Related. See			d of valuation		
(a) Description of investment type	(b) Book value		f-year market value		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)					
Part IX Other Assets. See Form 990, Part X, lin	e 15.				
(a) Descript	cion		(b) Book value		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15	5.)				
Part X Other Liabilities. See Form 990, Part X					
1 (a) Description of Liability	(b) A mount				
Federal Income Taxes	0				
Unamortized Bond Premium	712,712				
US Government Grants Refundable	1,784,888				
O ther Liabilities	4,512,539				
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	7,010,139				

-	Total revenue (Form 990, Part VIII, column (A.), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Part	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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	<u>teturn</u>
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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)		
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
	t XIV Supplemental Information		
Com	pplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	rt IV , II	nes 1b and 2b,

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

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

Ident if ier	Return Reference	Explanation
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The university's endowment funds are used to provide scholarships and support university programs in the furtherance of the educational mission
SchD_P10_S00_L02	Schedule D, Part X, Line 2	The university follows accounting guidance related to accounting for uncertain income tax positions. As required by the guidance, the university recognizes in its financial statements the financial effects of a tax position, if that position is more likely than not of being sustained upon examination, including resolution of any appeals or litigation processes, based upon the technical merits of the position. The university recognizes the potential accrued interest and penalties related to unrecognized tax benefits within general institutional expenses. Tax positions taken related to the university's tax exempt status, unrelated business activities taxable income and the deductibility of expenses and other miscellaneous tax positions have been reviewed and management is of the opinion that material positions taken by the university would more likely than not be sustained by examination. Accordingly, the university has not recorded an income tax liability for uncertain tax positions.

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As Filed Data -

DLN: 93493129005342

OMB No 1545-0047

Schools

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

Name of the organization ST EDWARDS UNIVERSITY

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

	74-1109641			
Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaw other governing instrument, or in a resolution of its governing body?	vs, 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 durin 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,"		Yes	
	please explain If you need more space use Part II	3	Yes	
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminator basis?	ry 4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		Νο
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
	Educational policies?	5e		Νο
	Use of facilities? Athletic programs?	5f		No
_		5g		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		N o
6-	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b	Yes	
_	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	

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
SchE_P01_S00_L03	Schedule E, Part I, Line 3	All responses to public inquiry concerning admissions and financial aid requirements are met with literature, such as catalogues, brochures and applications that have the organization's non-discriminatory policy clearly stated. Advertisements for the organization typically are for course offerings of the current semester. A statement of non-discriminatory policy is stated in each advertisement.
SchE_P01_S00_L06	Schedule E, Part I, Line 6	The university administers various student financial aid programs including SEOG, College Work Study and National Direct Student Loans. The university is also involved in various educational programs for which funds are received from both State and Federal agencies. In the past, the university had received financial aid funding from the Law Enforcement Assisting Agency (LEAA) for students enrolled in the Criminal Justice program. Certain years of the program have been reviewed by the LEAA and the agency claims the university did not comply with the guidelines' and demanded a refund of certain amounts. A settlement was reached with the Department of Justice. The university was suspended from receiving further funds from the LEAA. This suspension was rescinded in 1975.

Schedule E (Form 990 or 990-EZ) 2010

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DLN: 93493129005342

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions.

Statement of Activities Outside the United States

	ne of the organization EDWARDS UNIVERSITY				Em	ployer identif	ication nur	nber
						-1109641		
Pa	"Yes" to Form 990, Pa			he United States. (Complete if t	he organiza	tion answ	ered
1	For grantmakers. Does the	organization r	maintain record	ds to substantiate the	amount of	the grants o	r	
	assistance, the grantees' el		_				rd .	
	the grants or assistance? .						☐ Yes	☐ No
2	For grant makers. Describe in P United States	art V the organi:	zation's procedu	res for monitoring the us	e of grant fun	ds outside the	e	
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	region (by type) (e g ,	(e) If activity lis program serv specific t service(s)	ice, describe type of	(f) To expendito region/invo in reg	ures for estments
	Europe (including Iceland and Greenland)	1	5	Program Services	Educational a activities for organization' and local res students	s students		1,354,000
	East Asia and the Pacific	0	0	Program Services	Educational a activities for organization			74,000
	Central America and the Caribbean	0	0	Program Services	Educational a activities for organization'	and cultural		47,000
						+		
3a	Sub-total							
Ŀ	Total from continuation sheets							

to Part I

c Totals (add lines 3a and 3b)

1,475,000

Part	Part IV, l	ine 15, for any					plete if the organiza received more than		
-	a) Name of rganization	(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)
2	Enter total nun tax-exempt by	nber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are i e or counsel has pro	recognized as chari ovided a section 50:	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3	Enter total nun	nber of other	organizations or en	tities					· (Farm 000) 2010

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete i	f the organization a	nswered "Yes" to Form !	990, Part IV, line 16.
	Use Part V if add	ditional space is ne	eded.		·			

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

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	~	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	r	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)	굣	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	দ	Νο
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্ব	Νο
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	ত	No

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
SchF_P01_S00_L03	Schedule F, Part I, Line 3	Column (f) The University uses the accrual method of accounting. For the European region, cash disbursements are made by cash payment, check, wire transfer and direct charges against funds on deposit at a financial institution. For the Central America and East Asia and the Pacific regions, cash disbursements are made by cash payment, check and wire transfer.

Schedule F (Form 990) 2010

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DLN: 93493129005342

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

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

Inspection

Name of the organization	Employer identificati	Employer identification number					
ST EDWARDS UNIVERSITY	74-1109641						
Part I General Informatio	n on Grants and	l Assistance				-	
 Does the organization maintain in the selection criteria used to aw Describe in Part IV the organization 	ard the grants or as	sıstance [?]					√ Yes
Part II Grants and Other As Form 990, Part IV, line duplicated if additional	e 21 for any recip	ient that received r		eck this box if no one	recipient receive	d more than \$5,000	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
2 Enter total number of section 50	1(c)(3) and govern	ment organizations .				.	

Enter total number of other organizations

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

(a)Type of grant or assistance	(b)Number of recipients	(c) 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) Scholarships to students	3649	33,257,035			

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

Ident if ier	Return Reference	Explanation
SchI_P01_S00_L02	Schedule I, Part I, Line 2	St Edward's University's Office of Student Financial Services monitors the use of grant funds through the following procedures. Enrollment Committee - The Enrollment Committee reviews awarding and renewal policies for the university grants and scholarships and establishes freshmen and transfer enrollment goals along with the financial aid packaging strategy necessary to achieve these goals. The committee engages a nationally recognized leader in the enrollment management consulting field to assist in the establishment and monitoring of freshmen and transfer enrollment goals and financial aid packaging. Each committee member and other key university personnel receive weekly reports throughout the financial aid awarding cycle. The Enrollment Committee is comprised of the Vice President for Academic Affairs, Vice President for Marketing and Enrollment Management, Vice President for Financial Affairs (ex-officio), Associate Vice President for Student Financial Services and Associate Vice President for Undergraduate Admission. Compliance and Funds Management - The enterprise software database used to administer financial aid, (This includes all funding sources for grants and scholarships, university, federal, state, local and private sources.) has a comprehensive compliance function. The Compliance and Funds Management Modules allow for staff to add additional functionality as necessary. The compliance function identifies grant and scholarship offers that fail to meet awarding criteria and prevents financial aid from being applied to a student if the student does not meet the disbursing criteria. The funds management function ensures the financial aid records and university general ledger records reconcile with each other. Further monitoring is accomplished through numerous reports specific to financial aid identifying codes, the individual types of grants the various forms of grants and
		individual funding sources Annual Independent Audits - Annual audits are performed by an independent public accounting firm who render an opinion as to whether federal and certain state funded financial aid programs are exercised in compliance
		with applicable laws and regulations governing said programs

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DLN: 93493129005342

OMB No 1545-0047

Open to Public Inspection

Schedule J

Department of the Treasury

Internal Revenue Service

(Form 990)

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

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

► Attach to Form 990. ► See separate instructions.

Name of the organization ST EDWARDS UNIVERSITY

Employer identification number

74-1109641

Pa	rt I Questions Regarding Compensation	n				
					Yes	Νo
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	굣	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	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 r officers, directors, trustees, and the CEO/Executive				V	
	officers, unectors, trustees, and the GLO/Lxecutive	Directo	or, regarding the items thetked in line 14.	2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the					
	Compensation committee	굣	• •			
	✓ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	it from the organization or a related organization?	4a		Νo
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-be	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	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		Νο
8	Were any amounts reported in Form 990, Part VII, p					
	subject to the initial contract exception described in in Part III	n Regs s	section 53 4958-4(a)(3)? If "Yes," describe			l <u>.</u> .
				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		

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-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) George E Martin	(1) (11)	374,449 0	37,500 0	109,027 0	65,883 0	25,745 0	612,604 0	
(2) Rhonda D Cartwright	(1) (11)	246,701 0	0	9,832 0	9,008 0	15,024 0	280,565 0	
(3) David Waldron	(I) (II)	160,669 0	0 0	12,555 0	0	13,691 0	186,915 0	
(4) Katherine Paige Booth	(1) (11)	220,794 0	0 0	1,000 0	16,020 0	17,359 0	255,173 0	
(5) Sandra L Pacheco	(I) (II)	136,117 0	0 0	677 0	9,774 0	7,598 0	154,166 0	
(6) Michael Larkin	(1) (11)	242,111 0	0	1,000	17,112 0	6,437 0	266,660 0	
(7) Thomas Matthew Evans	(1) (11)	123,528 0	0	658 0	9,504	21,534 0	155,224 0	
(8) Marsha C Kelliher	(1) (11)	130,558 0	0	685 0	9,880	17,446 0	158,569 0	
(9) Robert A Manzer	(I) (II)	114,902 0	0	6,871 0	0	17,223 0	138,996 0	
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

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

	$\overline{}$	
Ident if ier	Return Reference	Explanation
	Schedule J, Part I, Line 1a	Dr George Martin, President, received a housing allowance per employment contract
	Part I, Line 4	George E Martin The University established a non-qualified deferred compensation plan under IRS section 457F for the purpose of providing a retirement benefit for the university president, George E Martin Under the terms of the plan, the university agreed to establish a non-vested retirement account in a financial institution of the university's selection in the name of the university on behalf of the president, make an annual contribution to the retirement account during the term of the plan, invest the account balance and distribute the account balance to the president in accordance with the occurrence of specific events. The president has no rights to or interest in the retirement account prior to the date the account becomes payable to the president under the terms and conditions set for in the plan. The president's right to the retirement benefits is non-vested and forfeitable prior to the payment date. The retirement account is the property of the university at all times prior to the payment date. The president will become 100 percent vested in and entitled to payment of the retirement account at his normal retirement date, upon termination for disability or death, other than cause and voluntary cause for good reason as defined. The president forfeits all interest in the retirement account in the event of termination for cause or voluntary termination for other than good reason as defined.
	· ·	George E Martin Included in Column B (III) is a housing allowance of \$45,000 and taxable reimbursements of \$59,589. The payments of the taxable reimbursements and housing allowance were made pursuant to the terms of the contract with President Martin and the university.

Schedule J (Form 990) 2010

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule 0 (Form 990).
 Attach to Form 990.

OMB No 1545-0047

DLN: 93493129005342

2010

Open to Public Inspection

Name of the organization
ST EDWARDS UNIVERSITY

Department of the Treasury

Internal Revenue Service

Employer identification number

74-1109641

										7	4-110	9641				
Pa	art I Bond Issues	Τ	Π		T		Т			<u> </u>		(h)	Ωn	T		
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rice	(f)	Description	of Purpose	(g) De	feased	Beha Iss	alfof		Pool ncing	
							<u> </u>			Yes	No	Yes	No	Yes	No	
A	San Leanna Education Facilities Corp	20-1275212	00000000	06-04-2004	10,000	0,000	new do	ormitory faci n utility effic			×		х		X	
В	San Leanna Education Facilities Corp	20-1275212	00000000	01-11-2005	2,91	7,000	Construction and equipment for new dormitory facility			x		X		Х		
С	San Leanna Education Facilities Corp	20-1275212	00000000	08-01-2006	6,96	3,000	Construction and equipment for new dormitory facility			х		Х		Х		
D	San Leanna Education Facilities Corp	20-1275212	79846PAX4	06-21-2007	75,608	3,063	See So	See Schedule K, Part V			х		Х		х	
i							lacksquare									
-D-	Duccoode		<u> </u>				<u></u>							Ш		
FG	rt III Proceeds					•	$\overline{}$	E	<u> </u>		С		T			
1	A mount of bonds retired				-	693,000 45,000						545,500	1,535,000			
2							, 0		, 0				0			
3	Total proceeds of issue		,		+	10,103	3,289		2,952,856	7,133,824				79,425,672		
4	Gross proceeds in reserve fui	nds					0		0			0	+		0	
5	Capitalized interest from proc	ceeds				472	2,051		62,143	261,961				4,	,478,234	
6	Proceeds in refunding escrow	v				0 0		0	0			0				
7	Issuance costs from proceed	st				98,500 35,985		35,985	92,214			288,648				
8	Credit enhancement from pro-	ceeds					0		0	0						
9	Working capital expenditures	from proceeds		-			0		0			0			0	
10	Capital expenditures from pro	oceeds				9,532	2,738		2,854,728		6,7	779,649		43,	,964,359	
11	Other spent proceeds						0		0			0		-	0	
12	Other unspent proceeds						0		0			0			0	
13	Year of substantial completio	n			20	05		200	05		2007			2009		
					Yes	No	lo	Yes	No	Yes		No	Yes		No	
14	Were the bonds issued as par	rt of a current refund	ding issue?			X	<u> </u>		Х			Χ			X	
15	Were the bonds issued as par	rt of an advance refu	unding issue?		T	х	<u>√</u>		Х			Χ	Х			
16	Has the final allocation of pro	ceeds been made?			Х			Х		Х			Х			
17	Does the organization mainta allocation of proceeds?		and records to sup	port the final	×			Х		Х			Х			
Pai	rt IIII Private Business l	Use														
ł						<u> </u>		В	3		C			D		

			Α		В		C)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		Х		Х		Х
2	Are there any lease arrangements that may result in private business use of bond- financed property?		X		X		X		X

	t III Private Business Use (Continued)		<u> </u>		В		c		 D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	A re there any management or service contracts that may result in private business use?		×		х		х	Х	
ь	Are there any research agreements that may result in private business use of bond-financed property?		×		Х		x		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?	Х		Х		Х		Х	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %		0 %		3 2 %
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %		0 %		0 %		0 %
6	Total of lines 4 and 5		0 %		0 %		0 %		3 2 %
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х		Х		х	

Pai	rt IV Arbitrage								
		Α		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		x		×		x
	Is the bond issue a variable rate issue?	X		X		×			X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	x		x		X			X
ь	Name of provider	Frost Nationa	l Bank	Frost Nationa	l Bank	Frost Nationa	ıl Bank		
С	Term of hedge		28 5		30 4		28 4		
d	Was the hedge superintegrated?	х		х		х			
e	Was a hedge terminated?		х		х		х		
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		х		х	

Supplemental Information

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

Ident if ier	Return Reference	Explanation
SchK_P01_S00_L00f		San Leanna Education Facilities Corp, CUSIP # 79846PAX4, Description of Purpose Construction and equipment for new dormitory, parking & dining facilities Partial advance refunding of bonds issued 9/30/1998 and 1/25/2001
SchK_P02_S00_L03		San Leanna Education Facilities Corp, Date Issued 06/04/2004, Row A, Issue Price \$10,000,000 The issue price of \$10,000,000 shown in Part I, Row A, Column (e) does not agree with Part II, Line 3, Column A because of the inclusion of interest income earned on the construction fund and capitalized interest fund in the amount of \$103,289 This amount is included in Part II, Line 3, Column A but not included in the issue price shown in Part I, Row A, Column (e) San Leanna Education Facilities Corp, Date Issued 01/11/2005, Row B, Issue Price \$2,917,000 The issue price of \$2,917,000 shown in Part I, Row B, Column (e) does not agree with Part II, Line 3, Column B because of the inclusion of interest income earned on the construction fund and capitalized interest fund in the amount of \$35,856 This amount is included in Part II, Line 3, Column B but not included in the issue price shown in Part I, Row B, Column (e) San Leanna Education Facilities Corp, Date Issued 08/01/2006, Row C, Issue Price \$6,963,000 The issue price of \$6,963,000 shown in Part I, Row C, Column (e) does not agree with Part II, Line 3, Column C because of the inclusion of interest income earned on the construction fund and capitalized interest fund in the amount of \$170,824 This amount is included in Part II, Line 3, Column C but not included in the issue price shown in Part II, Row C, Column (e) San Leanna Education Facilities Corp, Date Issued 06/21/2007, CUSIP# 79846PAX4, Row D, Issue Price \$75,608,063 Reconciliation of issue price of \$75,608,063 shown in Part II, Row D, Column (e) to \$79,425,672 shown in Part II, Line 3, Column D \$79,425,672
SchK_P03_S00_L04	Schedule K, Part III, Line 4	Column A - The private business use percentage excludes bond issuance costs of \$98,500. If the issuance costs are included the percentage calculation, the private business use percentage would be 1%. Column B - The private business use percentage excludes bond issuance costs of \$35,985. If the issuance costs are included from the percentage calculation, the private business use percentage would be 1.2%. Column C - The private business use percentage excludes bond issuance costs of \$92,214. If the issuance costs are included from the percentage calculation, the private business use percentage would be 1.3%. Column D - The private business use percentage excludes bond issuance costs of \$288,648. If the issuance costs are included from the percentage calculation, the private business use percentage would be 3.6%.

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

NonCash Contributions

Name of the organization ST EDWARDS UNIVERSITY

Employer identification number

					74-1109641			
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of determining of amounts		ontribut	:ion
1	Art-Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications	Х		21,435	Appraisal			
5	Clothing and household							
good	s							
	Cars and other vehicles .							
7	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded	Х	8	175,604	Avg mkt val @ gıft o	late		
	Securities—Closely held stock							
11	Securities—Partnership,							
42	LLC, or trust interests . Securities—Miscellaneous							
	Qualified conservation							
13	contribution—Historic							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .	Х	1	850,000	Sale of comparable	proper	ties	
16	Real estate—Commercial			·				
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
25	Other ► (Podiums - 2_)	Х	1	5,201	Invoice			
26	Other ► (Jewelry)	Х	1	2,225	A ppraisal			
27	O ther ▶()							
28	Other ► ()							
29	Number of Forms 8283 received by	y the org	anızatıon durıng the tax yea	ar for contributions				
	for which the organization complete	ed Form 8	3283, Part IV, Donee Ackn	owledgement	29			0
							Yes	No
30a	During the year, did the organization	on receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three years f	rom the o	date of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the entire	holdıng p	erıod [?]			30a		No
	If "Yes," describe the arrangement							
31	Does the organization have a gift a	cceptano	ce policy that requires the r	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use t contributions?	·	es or related organizations	to solicit, process, or sell	non-cash	32a		Νo
b	If "Yes," describe in Part II							
33	If the organization did not report re	venuesı	n column (c) for a type of p	roperty for which column (a) is checked,			
	describe in Part II							

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

SCHEDULE 0

(Form 990 or 990-EZ)

Name of the organization ST EDWARDS UNIVERSITY

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection
Employer identification number

		74-1109641
ldentifier	Return Reference	Explanation
F990_P06_S0A_L01a	Form 990, Part VI, Section A, Line 1a	The Executive Committee of the university is composed of at least five voting members of the Board of Trustees, including the officers of the Board and, ex officio, the President of St. Edward's University Members of this Committee, other than the officers of the Board and the President, are appointed by the Chairperson of the Board, these appointments being ratified by vote of the full Board. The Executive Committee shall exercise all powers of the Board at such times as the Board is not in session, except that it shall not have the power to alter or revoke any previous order, resolution, or vote of a meeting of the Board unless specifically granted such power by the Board. It shall not have the power to elect or remove officers of the Board of Trustees, elect or remove the President of St. Edward's University, or to amend the charter or Bylaws of the Corporation. The Committee shall not act on matters properly the first responsibility of standing committees for review, study, and recommendation to it and/or to the Board, except in emergencies of consequence to St. Edward's University generally. The functions of this Committee shall also include evaluation of the stated mission and goals of the University, evaluation of the various programs of the University and ensuring that these are consistent with the mission and goals of the University. The Executive Committee shall have a standing subcommittee, appointed by the Chairperson of the Board, responsible for reviewing the compensation package of the President and recommending the same to the full committee. The subcommittee will also oversee the compensation

of any two voting Trustee members of the Committee

packages of senior staff to assure compliance with applicable law, regulation and good practice Regular and special meetings shall be at the call of the Chairperson or President or upon written request

ldentifier	Return Reference	Explanation					
F990_P06_S0A_L09	Form 990, Part VI, Section A, Line 9	Robert Manzer, 7902 El Dorado Dr , Austin, TX 78737					

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	The completed Form 990 is made available to the Fiduciary Committee of the Board of Trustees of the university via hardcopy or email prior to filing with the Internal Revenue Service. The Fiduciary Committee is responsible for the review and oversight of the University's financial statements and tax reporting. Financial statements and IRS Form 990, which are released to the public, are reviewed prior to filing and release of information. Financial statements and IRS Form 990 are available to all Board members after review by the Fiduciary Committee.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	St Edward's University's Conflict of Interest Policy is applicable to all members of the university's Board of Trustees and Officers A conflict is deemed to exist in the event that a Trustee, Officer or family member of either is affiliated with an organization that may transact business with the university. The policy defines "Trustee", "Officer", "family members" and "affiliation". Disclosure of any/all of these types of relationships or the appearance of such relationships is required to be made annually by September or as soon as a potential conflict arises. These disclosures are made in writing on the St. Edward's Conflict of Interest form and submitted to the Assistant to the President for Institutional Relations for trustees and to the Assistant to the President for Strategic Planning for university officers. After collecting the Conflict of Interest forms, the assistants provide the President and Chair of the Board with a report stating whether or not there are any conflicts. If any potential conflicts are disclosed, the appropriate assistant is to notify university's legal counsel. Counsel will in turn determine if an actual conflict exists. If a conflict is determined to exist with a trustee the matter is reported to the university President and Board Chair. If a conflict is determined to exist with a university officer, the matter is reported to the university President. In either case, the individual(s) receiving the report must take all appropriate action.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	For the university President and key employees, the university engages national search firms to solicit candidates who meet the established criteria for the open position. As part of the work performed by these firms, a salary range acceptable to the university is determined and compared to industry data. All work performed by the national firm is reviewed by an internally appointed search committee. Once individuals are hired, any increase in compensation for key employees is approved by the President Compensation increases for the President is approved by the Board of Trustees.

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19	· ·	The university makes the following items available to the general public. Governing Document - maintained on file in the university Library. Conflict of Interest Policy - maintained with the governing documents in the university Library. Financial Statements - included with the Form 990 on the Guidestar wiebsite - www2 guidestar org.

ldentifier	Return Reference	Explanation
F990_P07_S0A_L01d	Form 990, Part VII, Section A, Line 1d	Donna M Jurick SND is a member of the religious order of the Sisters of Notre Dame Sister Jurick does not receive compensation from St. Edward's University, therefore, no Form W-2 is prepared or reported. Sister Jurick participates in St. Edward's University's medical and dental plan. The amounts reported on Part VII, Section A, Column F reflect the value of these benefits. George E. Martin. Included in Column [D] is a housing allow ance of \$45,000 and taxable reimbursements of \$59,589. The payments of the taxable reimbursements and housing allow ance where made pursuant to the terms of the contract with President Martin and the university.

ldentifier	Return Reference	Explanation
F990_P11_S00_L05	Form 990, Part XI, Line 5	Other changes to net assets as follows Net unrealized gains on investments-\$5,250,028 Gain related to change in fair market value of interest rate swaps-\$637,981 Total other changes to net assets [increase] -\$5,888,009

ldentifier	Return Reference	Explanation
F990_P12_S00_L02b	Form 990, Part XII, Line 2b	St Edward's University, Inc issued consolidated financial statements that are audited and opined by an independent certified public accountant prepared in accordance with GAAP and GAAS for the fiscal year ended June 30, 2011. The university's financial statements consolidate the financial activity of St Edward's University, Inc. with the financial activity of The Catholic Cemetery Association of Austin, Inc. in which the university has a controlling and economic interest. The independent certified public accountant issued an unqualified opinion for the consolidated financial statements for the fiscal year ended June 30, 2011. In the accountant's opinion, based upon their audit and reports of other auditors, the consolidated financial statements presented fairly, in all material respects, the financial position of St. Edward's University, Inc. and its subsidiaries as of June 30, 2011 and changes in the net assets and cash flow's for said year ended in conformity with accounting principles generally accepted in the United States of America.

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

DLN: 93493129005342

2010

OMB No 1545-0047

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Schedule R (Form 990) 2010

74-1109641

SCHEDULE R (Form 990)

Name of the organization ST EDWARDS UNIVERSITY

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury
Internal Revenue Service

Employer identification number

Cat No 50135Y

Part I Identification of Disregarded Entities (Com	plete	ıf the organizatı	on	answered "Yes	s" o	n Form 990, Par	t IV, line 33.)			
(a) Name, address, and EIN of disregarded entity		(b) Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during			ıft	he organizatio	n a	nswered "Yes" o	n Form 990, Part	IV, line 34 because		
(a) Name, address, and EIN of related organization		(b) Primary activity		(c) al domicile (state foreign country)	Ex	(d) empt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section 5: conti organ	j) l2(b)(13 olled zation
									Yes	No
(1) Catholic Cemetery Association of Austin										
3650 South IH-35	Priva	ite Cemetery		TX		501C3	1	N/A		No
Austin, TX 78704 74-1185658										
(2) Saint Edwards University Association										
3 Place Andre Leroy BP 10808 49008 Angers, France CEDEX 01 FR	Educ	ation	FR		0		0	Saint Edwards University Inc		No

art III	Identif	ication of Relate	ed Org	anizations Taxa	able as a Partnei	r ship (Complete	if the organization	n answere	d "Yes" on Form 9	90, Part I	√, line 34
	t III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line because it had one or more related organizations treated as a partnership during the tax year.)										
								/h.)	/:\	(=)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
							Yes	No		Yes	No		
(1) Initiative for Global Education C/O St Edward's University 3001 South Congress Ave Austin, TX78704 26-3683989	Education	тх	N/A	Related	0	0		No	0		No	1 00 %	
Part IV Identif	ication of Relat	ed Org	janizations Tax	able as a Corpoi	ration or Trust (Complete if the	organ	ızatıor	n answered "Yes"	on Fo	orm 9	90, Part IV,	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

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

hedu	ıle R (Form 990) 2010		Рa	ige 3
Part	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
N	lote. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	N
1 Dur	ing the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a F	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		Ne
b (Gift, grant, or capital contribution to other organization(s)	1b		N
c G	Gift, grant, or capital contribution from other organization(s)	1c		No
d L	oans or loan guarantees to or for other organization(s)	1d		No
e L	oans or loan guarantees by other organization(s)	1e		N
f S	Sale of assets to other organization(s)	1f		N
g F	Purchase of assets from other organization(s)	1 g		N
h E	Exchange of assets	1h		N
i L	ease of facilities, equipment, or other assets to other organization(s)	1i		N
j L	ease of facilities, equipment, or other assets from other organization(s)	1j		N
k F	Performance of services or membership or fundraising solicitations for other organization(s)	1k		N
I P	erformance of services or membership or fundraising solicitations by other organization(s)	11		N
m S	Sharing of facilities, equipment, mailing lists, or other assets	1m		N
n S	Sharing of paid employees	1n		N
o F	Reimbursement paid to other organization for expenses	10	Yes	
рΕ	Reimbursement paid by other organization for expenses	1p	Yes	
q	Other transfer of cash or property to other organization(s)	1 q	Yes	

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

		•	
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Catholic Cemetery Association of Austin	r	100,000	Fair Market Value
(2) Saint Edwards University Association	o	53,906	Fair Market Value
(3) Saint Edwards University Association	q	435,025	Fair Market Value
(4)			
(5)			
(6)			

1r Yes

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	h) eral or naging tner?
			Yes	No		Yes	Yes No		Yes	N
										+
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Part VII Supplemental Information

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

Identifier Return Reference Explanation

Schedule R (Form 990) 2010