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

A For the 2010 calendar year, or tax year beginning 09-01-2010 and ending 08-31-2011		
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization POINT PARK UNIVERSITY	D Employer identification number 25-1094922
	Doing Business As	E Telephone number (412) 392-3992
	Number and street (or P O box if mail is not delivered to street address) 201 WOOD STREET	Room/suite
	G Gross receipts \$ 117,318,140	
	City or town, state or country, and ZIP + 4 PITTSBURGH, PA 15222	
	F Name and address of principal officer DR PAUL HENNIGAN 201 WOOD STREET PITTSBURGH, PA 15222	H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (Insert no) ☐ 4947(a)(1) or ☐ 527		
J Website: ▶ WWW.POINTPARK.EDU		
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 1960
M State of legal domicile PA		

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities HIGHER EDUCATION																								
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td>3 Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>33</td></tr><tr><td>4 Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>30</td></tr><tr><td>5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)</td><td>5</td><td>1,849</td></tr><tr><td>6 Total number of volunteers (estimate if necessary)</td><td>6</td><td>31</td></tr><tr><td>7a Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>127,769</td></tr><tr><td>b Net unrelated business taxable income from Form 990-T, line 34</td><td>7b</td><td>-2,339</td></tr></table>	3 Number of voting members of the governing body (Part VI, line 1a)	3	33	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	30	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	1,849	6 Total number of volunteers (estimate if necessary)	6	31	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	127,769	b Net unrelated business taxable income from Form 990-T, line 34	7b	-2,339						
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Net Assets or Fund Balances	<table><tr><td></td><td>Beginning of Current Year</td><td>End of Year</td></tr><tr><td>20 Total assets (Part X, line 16)</td><td>134,318,513</td><td>146,782,388</td></tr><tr><td>21 Total liabilities (Part X, line 26)</td><td>76,341,329</td><td>80,690,756</td></tr><tr><td>22 Net assets or fund balances Subtract line 21 from line 20</td><td>57,977,184</td><td>66,091,632</td></tr></table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	134,318,513	146,782,388	21 Total liabilities (Part X, line 26)	76,341,329	80,690,756	22 Net assets or fund balances Subtract line 21 from line 20	57,977,184	66,091,632												
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Part II	Signature Block
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer		2012-07-19 Date		
	BRIDGET MANCOSH SR VP OF FINANCE & OPERATIONS Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name SUSAN M KIRSCH	Preparer's signature SUSAN M KIRSCH	Date	Check if self-employed ☐	PTIN
	Firm's name ▶ SCHNEIDER DOWNS & CO INC				Firm's EIN ▶
	Firm's address ▶ 1133 PENN AVENUE PITTSBURGH, PA 15222				Phone no ▶ (412) 261-3644

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

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

POINT PARK UNIVERSITY EDUCATES STUDENTS IN A DIVERSE ENVIRONMENT AND PREPARES GRADUATES TO APPLY KNOWLEDGE TO ACHIEVE THEIR GOALS, ADVANCE THEIR PROFESSIONS AND SERVE THEIR COMMUNITIES

2

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

Yes

No

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

3

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

Yes

No

If "Yes," describe these changes on Schedule O

4

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

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

4a

(Code) (Expenses \$ 53,366,543 including grants of \$ 20,681,606) (Revenue \$ 79,213,228)

INSTRUCTION- INCLUDES 4 ACADEMIC SCHOOLS SERVING APPROXIMATELY 3,493 UNDERGRADUATE AND 578 GRADUATE STUDENTS, AS WELL AS CHILDREN'S SCHOOL AND PERFORMING ARTS WHICH PROVIDE APPLIED TRAINING FOR STUDENTS INCLUDES PHYSICAL PLANT ALLOCATION

4b

(Code) (Expenses \$ 7,762,889 including grants of \$ 126,761) (Revenue \$ 9,326,094)

AUXILIARY ENTERPRISES- EXPENSES THAT SUPPORT DORMITORIES, DINING HALL, CAFE, BOOKSTORE AND RECREATION CENTER FOR STUDENTS, FACULTY AND STAFF OF THE UNIVERSITY

4c

(Code) (Expenses \$ 8,379,936 including grants of \$) (Revenue \$ 470,000)

STUDENT SERVICES- INCLUDES ADMISSIONS, CAREER DEVELOPMENT, FINANCIAL AID ADMINISTRATION, REGISTRAR, STUDENT ACTIVIES, STUDENT AFFAIRS OFFICE, AS WELL AS 11 MEN'S AND WOMEN'S INTERCOLLEGIATE ATHLETIC TEAMS

4d

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

(Expenses \$ 9,579,528 including grants of \$) (Revenue \$ 31,282)

4e

Total program service expenses

\$ 79,088,896

Form 990 (2010)

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 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	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 	12b	No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV 	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV 	16 Yes	
17 Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V ☐			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	5,533
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	1,849
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11 Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	33	
b	Enter the number of voting members included in line 1a, above, who are independent	1b	30	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	PA , NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	JAMES HARDT 201 WOOD STREET PITTSBURGH, PA 15222 (412) 392-3969

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

[illegible]

Part VII

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 31

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
(A) Name and business address	(B) Description of services	(C) Compensation
MASSARO CORPORATION 120 DELTA DRIVE PITTSBURGH, PA 15238	CONSTRUCTION	4,675,364
ARAMARK SERVICES PO BOX 198532 ATLANTA, GA 303848532	FOOD SERVICE	2,923,360
ISS FACILITY SERVICES INC PENN PLACE PITTSBURGH, PA 15219	HOUSEKEEPING	1,719,229
ALLIED BARTON SECURITY SERVICES 500 FIRST AVENUE PITTSBURGH, PA 15219	SECURITY	1,343,324
SMITH BROTHERS AGENCY LP 116 FEDERAL STREET PITTSBURGH, PA 15212	MARKETING	779,769
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization 120		

Part VIII

Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a	827				
	b	Membership dues	1b					
	c	Fundraising events	1c	220,626				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	4,513,212				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,891,675				
	g	Noncash contributions included in lines 1a-1f \$		21,503				
	h	Total. Add lines 1a-1f		7,626,340				
	Program Service Revenue	2a	Business Code					
		TUITION & EDUC FEES	611710	78,533,712	78,533,712			
b		ROOM & BOARD FEES	721310	9,145,542	9,017,773	127,769		
c		PERFORMANCES	711300	711,049	711,049			
d		BOOKSTORE, CAFE & MISC	451211	313,273	313,273			
e		PROGRAM RENTAL	531390	274,084	274,084			
f		All other program service revenue		190,713	190,713			
g		Total. Add lines 2a-2f		89,168,373				
Other Revenue		3	Investment income (including dividends, interest and other similar amounts)					
				652,840			652,840	
	4	Income from investment of tax-exempt bond proceeds . .		74			74	
	5	Royalties		176,047			176,047	
	6a	(i) Real		(ii) Personal				
		1,008,908						
		b Less rental expenses						
		564,914						
	c	Rental income or (loss)						
	443,994							
	d	Net rental income or (loss)		443,994			443,994	
	7a	(i) Securities		(ii) Other				
		18,597,744						
		b Less cost or other basis and sales expenses						
		16,551,744						
	c	Gain or (loss)						
	2,046,000							
	d	Net gain or (loss)		2,046,000			2,046,000	
	8a	Gross income from fundraising events (not including \$ 220,626 of contributions reported on line 1c) See Part IV, line 18		a	87,814			
		b Less direct expenses		b	226,118			
c Net income or (loss) from fundraising events . .			-138,304			-138,304		
9a	Gross income from gaming activities See Part IV, line 19 . .		a					
	b Less direct expenses		b					
	c Net income or (loss) from gaming activities . .							
10a	Gross sales of inventory, less returns and allowances . .		a					
	b Less cost of goods sold		b					
	c Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue			Business Code					
11a								
	b							
	c							
	d All other revenue							
	e Total. Add lines 11a-11d							
12	Total revenue. See Instructions			99,975,364	89,040,604	127,769	3,180,651	

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	54,000	54,000		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	20,754,367	20,754,367		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	43,125	43,125		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,772,715	627,586	849,172	295,957
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	27,826,021	24,846,597	2,330,333	649,091
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,348,162	1,074,295	238,415	35,452
9	Other employee benefits	4,905,975	3,888,917	952,305	64,753
10	Payroll taxes	2,063,725	1,595,761	401,321	66,643
a	Fees for services (non-employees) Management				
b	Legal	436,987		436,987	
c	Accounting	251,866		251,866	
d	Lobbying	48,938		24,469	24,469
e	Professional fundraising services See Part IV, line 17	38,491			38,491
f	Investment management fees	101,181		101,181	
g	Other	1,516,353	1,095,285	402,662	18,406
12	Advertising and promotion	1,412,335	958,300	410,095	43,940
13	Office expenses	3,063,705	2,886,532	97,617	79,556
14	Information technology	313,074	158,778	143,784	10,512
15	Royalties	43,707	43,707		
16	Occupancy	10,316,890	8,692,507	1,389,783	234,600
17	Travel	1,051,026	914,056	93,095	43,875
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	435,176	318,124	87,883	29,169
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,399,017	4,486,965	779,921	132,131
23	Insurance	96,935	67,569	29,366	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	FOOD SERVICES	2,557,863	2,436,340	92,022	29,501
b	NON CAPITAL EQUIP	1,722,793	1,698,881	15,893	8,019
c	DANCE & THEATER PRODUCT	1,482,802	1,453,198	19,730	9,874
d	SETTLEMENT	1,400,000		1,400,000	
e	BAD DEBT	616,491	616,491		
f	All other expenses	476,519	377,515	65,381	33,623
25	Total functional expenses. Add lines 1 through 24f	91,550,239	79,088,896	10,613,281	1,848,062
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				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			18,457,361	1	18,773,540
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			2,442,637	3	6,290,255
	4	Accounts receivable, net			847,379	4	936,311
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L				6	
	7	Notes and loans receivable, net			838,701	7	800,968
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			1,103,520	9	1,094,955
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	148,747,402	91,350,910	10c	95,798,286
	b	Less: accumulated depreciation	10b	52,949,116			
	11	Investments—publicly traded securities			16,545,803	11	21,153,273
	12	Investments—other securities. See Part IV, line 11			2,189,861	12	1,789,226
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			542,341	15	145,574
16	Total assets. Add lines 1 through 15 (must equal line 34)			134,318,513	16	146,782,388	
Liabilities	17	Accounts payable and accrued expenses			2,839,400	17	6,338,431
	18	Grants payable				18	
	19	Deferred revenue			8,308,768	19	10,508,258
	20	Tax-exempt bond liabilities			50,130,851	20	49,242,958
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			11,851,883	23	11,751,665
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			3,210,427	25	2,849,444
	26	Total liabilities. Add lines 17 through 25			76,341,329	26	80,690,756
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			44,203,495	27	50,813,114
	28	Temporarily restricted net assets			5,755,010	28	7,007,982
	29	Permanently restricted net assets			8,018,679	29	8,270,536
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			57,977,184	33	66,091,632
	34	Total liabilities and net assets/fund balances			134,318,513	34	146,782,388

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	99,975,364
2	Total expenses (must equal Part IX, column (A), line 25)	2	91,550,239
3	Revenue less expenses Subtract line 2 from line 1	3	8,425,125
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	57,977,184
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-310,677
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	66,091,632

Part XII Financial Statements and Reporting

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

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

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization POINT PARK UNIVERSITY	Employer identification number 25-1094922
---	--

Part I

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

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

- 1

☐

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

☒

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- e

☐

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

☐

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

☐

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

(i)

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

(ii)

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

(iii)

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

☐

Provide the following information about the supported organization(s)

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

Part II

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

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

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

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

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

Section B. Total Support						
Calendar year (or fiscal year beginning in) 	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support (Add lines 9, 10c, 11 and 12)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization 		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions 		

Part IV

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

Additional Data

Software ID:

Software Version:

EIN: 25-1094922

Name: POINT PARK UNIVERSITY

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)							(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
DENNIS L ASTORINO BOARD MEMBER	1 50	X						0	0	0	
RICHARD W BOYD BOARD MEMBER	1 50	X						0	0	0	
E MICHAEL BOYLE BOARD MEMBER	1 50	X						0	0	0	
MARK BROADHURST BOARD MEMBER	1 50	X						0	0	0	
JAMIE CAMPOLONGO BOARD MEMBER	1 50	X						0	0	0	
PAUL COSTA BOARD MEMBER/PART TIME PRO	1 50	X						4,182	0	0	
GARY M DEJIDAS BOARD MEMBER	1 50	X						0	0	0	
WAYNE FONTANA BOARD MEMBER	1 50	X						0	0	0	
KISHORE GOPAUL BOARD MEMBER	1 50	X						0	0	0	
JOSEPH B HAVRILLA BOARD MEMBER	1 50	X						0	0	0	
MARILYN HORNER BOARD MEMBER	1 50	X						0	0	0	
ERIC MANN EXIT 83111 BOARD MEMBER	1 50	X						0	0	0	
GARLAND H MCADOO JR EXIT 83111 BOARD MEMBER	1 50	X						0	0	0	
TIMOTHY W MCGUIRE SR PHD BOARD MEMBER	1 50	X						0	0	0	
J KEVIN MCMAHON BOARD MEMBER	1 50	X						0	0	0	
JAMES MEREDITH BOARD MEMBER	1 50	X						0	0	0	
JAMES MILLER BOARD MEMBER	1 50	X						0	0	0	
TODD C MOULES BOARD MEMBER	1 50	X						0	0	0	
JOSEPH MURIN BOARD MEMBER	1 50	X						0	0	0	
LUCAS PIATT BOARD MEMBER	1 50	X						0	0	0	
RICHARD E RAUH BOARD MEMBER & PRT, PROFES	1 50	X						12,500	0	0	
DR LOREN H ROTH MD BOARD MEMBER	1 50	X						0	0	0	
CAROL SAVAGE BOARD MEMBER	1 50	X						0	0	0	
CHARLES J STOUT BOARD MEMBER	1 50	X						0	0	0	
MARY BETH TAYLOR BOARD MEMBER	1 50	X						0	0	0	

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN R TOMAYKO PHD BOARD MEMBER	1 50	X						0	0	0
JAKE WHEATLEY BOARD MEMBER	1 50	X						0	0	0
GEORGE R WHITE PHDDEC11412 BOARD MEMBER	1 50	X						0	0	0
KAREN FARMER WHITE BOARD MEMBER	1 50	X						0	0	0
NANCY D WASHINGTON PHD CHAIR	3 00	X		X				0	0	0
DAVID S DUNCAN SECRETARY/ TREASURER	3 00	X		X				0	0	0
DONALD J JENKINS BOARD MEMBER/V CHAIR	3 00	X		X				0	0	0
ANNE LEWIS BOARD MEMBER/V CHAIR	3 00	X		X				0	0	0
PAUL HENNIGAN EDD PRESIDENT	40 00			X				431,930	0	33,819
BRIDGET MANCOSH SR VP OF FINANCE & OPERATIONS	40 00			X				210,337	0	29,494
MARIANN GEYER VP UNIV ADVANCEMENT	40 00			X				188,920	0	26,894
KAREN MCINTYRE PHD DEAN-ARTS & SCIENCES	40 00			X				182,260	0	7,865
RICHARD HASKINS BEG 8110 VP FOR DEVELOPMENT & ALUMNI AFFAIRS	40 00			X				59,767	0	12,238
TRUDY WILLIAMS ASST VP FOR ADMISSIONS	40 00			X				90,211	0	9,471
RONALD LINDBLOM DEAN COPA & ASSOC PROF	40 00				X			174,914	0	26,304
ANGELA H ISAAC PHD DEAN BUSINESS SCHOOL	40 00				X			158,239	0	32,070
WILLIAM CAMERON VP FOR OPERATIONS	40 00					X		136,681	0	23,445
FRED JOHNSON DEAN OF PERFORMING ARTS	40 00					X		147,560	0	17,838
TIM HUDSON PHD DEAN SCHOOL OF COMMUNICATIONS	40 00					X		137,745	0	15,000
TIMOTHY WILSON DIRECTOR - IT	40 00					X		124,637	0	23,707
KEITH PAYLO DEAN- STUDENT AFFAIRS	40 00					X		118,179	0	20,583
CHARLES PERKINS PHD FORMER OFFICER	40 00						X	153,726	0	12,618

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

4d. Other program services			
(Code	) (Expenses \$	9,579,528	including grants of \$
			) (Revenue \$
			31,282)
ACADEMIC SUPPORT- ACADEMIC SUPPORT ARE EXPENSES THAT PROVIDE SUPPORT FOR THE SCHOOL'S PRIMARY ACADEMIC MISSION INCLUDES LIBRARY SERVICES, PROGRAM FOR ACADEMIC SUCCESS, INFORMATION & MEDIA CENTERS & PROVOST OFFICE			

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047

2010

Open to Public Inspection

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

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

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

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

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

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

Name of the organization POINT PARK UNIVERSITY	Employer identification number 25-1094922
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

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

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

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

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

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

Part II-A

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

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		0													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		48,938													
c Total lobbying expenditures (add lines 1a and 1b)		48,938													
d Other exempt purpose expenditures		91,501,301													
e Total exempt purpose expenditures (add lines 1c and 1d)		91,550,239													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

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

Lobbying 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	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	21,139	19,462	47,172	48,938	136,711
d Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	0	0	0	0	

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

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

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

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

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

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

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

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

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

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

1

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

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

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

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

3

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

4

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

5

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

☐ Yes ☐ No

6

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

7

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

8

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

☐ Yes ☐ No

9

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

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

1a

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

b

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

(i)

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii)

Assets included in Form 990, Part X

▶ \$ _____

2

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

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2010

Part III

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

3

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

a

☒ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

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

5

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

☐ Yes☒ No

Part IV

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

1a

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

☐ Yes☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	22,236,249	20,598,888	20,807,467		
b Contributions	1,074,016	1,064,859	1,067,869		
c Investment earnings or losses	1,762,019	946,350	-905,198		
d Grants or scholarships	291,452	305,257	302,413		
e Other expenditures for facilities and programs	65,119	68,591	68,837		
f Administrative expenses					
g End of year balance	24,715,713	22,236,249	20,598,888		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 64 990 %

b

Permanent endowment ▶ 33 460 %

c

Term endowment ▶ 1 550 %

3a

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

(i)

unrelated organizations

(ii)

related organizations

3a(i)

Yes

No

3a(ii)

Yes

No

b

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

3b

4

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

Part VI

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

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	5,486,497	10,837,116		16,323,613
b Buildings	4,536,370	100,750,738	38,262,806	67,024,302
c Leasehold improvements		1,522,745	1,314,283	208,462
d Equipment		17,590,760	13,372,027	4,218,733
e Other		8,023,176		8,023,176
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				95,798,286

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	199,975,364
2	Total expenses (Form 990, Part IX, column (A), line 25)	291,550,239
3	Excess or (deficit) for the year Subtract line 2 from line 1	38,425,125
4	Net unrealized gains (losses) on investments	4-756,832
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8446,155
9	Total adjustments (net) Add lines 4 - 8	9-310,677
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	108,114,448

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	179,975,179
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a-756,832	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d1,237,187	
e	Add lines 2a through 2d	2e480,355
3	Subtract line 2e from line 1	379,494,824
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a101,181	
b	Other (Describe in Part XIV)4b20,379,359	
c	Add lines 4a and 4b	4c20,480,540
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	599,975,364

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	171,860,731
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d791,032	
e	Add lines 2a through 2d	2e791,032
3	Subtract line 2e from line 1	371,069,699
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a101,181	
b	Other (Describe in Part XIV)4b20,379,359	
c	Add lines 4a and 4b	4c20,480,540
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	591,550,239

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
	PART III, LINE 4	THE PRIMARY PIECE OF THE POINT PARK COLLECTION IS "FREEDOM BOUND," A SCULPTURE BY ARTIST PAIGE BRADLEY, COMMISSIONED AND DONATED BY A BOARD MEMBER. IN 2008 IT WAS INSTALLED AS PART OF THE LAWRENCE HALL LOBBY RENOVATION, WHICH INCLUDES A GRAND ENTRANCE TO THE NEWLY BUILT DANCE COMPLEX. THE UNIVERSITY HOLDS A FEW PAINTINGS AND PHOTOGRAPHS ON DISPLAY THROUGHOUT THE CAMPUS THAT WERE ALSO DONATED.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE TOTAL ENDOWMENT CONSISTS OF TWO COLLECTIVE FUND GROUPS, THE ENDOWMENT FUND AND THE BOARD DESIGNATED RESERVE FUND. THE ENDOWMENT FUND, MADE UP OF BOTH PERMANENT & TEMPORARILY RESTRICTED ASSETS, CONSISTS OF APPROXIMATELY 40 INDIVIDUAL FUNDS ESTABLISHED TO SUPPORT NUMEROUS PURPOSES. IT CONSISTS OF 85% RESTRICTED FOR FINANCIAL AID AND 15% FOR OPERATIONS. THE PURPOSE OF THE BOARD DESIGNATED RESERVE FUND, AN UNRESTRICTED ASSET, IS TO MAINTAIN THE LIQUIDITY NECESSARY TO SUPPORT LONG-TERM FISCAL HEALTH OF THE UNIVERSITY.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE UNIVERSITY FOLLOWS STANDARDS ON INCOME TAXES RELATED TO THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE NEW STANDARD REQUIRES THAT AN UNCERTAIN TAX POSITION SHOULD BE RECOGNIZED ONLY IF IT IS "MORE LIKELY THAN NOT" THAT THE POSITION IS SUSTAINABLE BASED ON ITS TECHNICAL MERITS. RECOGNIZABLE TAX POSITIONS SHOULD THEN BE MEASURED TO DETERMINE THE AMOUNT OF BENEFIT RECOGNIZED IN THE FINANCIAL STATEMENTS. THE UNIVERSITY FILES U.S. FEDERAL, STATE, AND LOCAL INFORMATIONAL RETURNS, AND NO RETURNS ARE CURRENTLY UNDER EXAMINATION. THE STATUTE OF LIMITATION ON THE UNIVERSITY'S U.S. FEDERAL TAX RETURNS REMAINS OPEN FOR THE YEAR ENDED AUGUST 31, 2008. THOUGH THE PRESENT, OTHER RETURNS MAY BE OPEN FOR AN ADDITIONAL YEAR DEPENDING ON JURISDICTION. THE UNIVERSITY CONTINUES TO EVALUATE ITS TAX POSITIONS PURSUANT TO THE NEW STANDARD AND HAS DETERMINED THAT THERE IS NO MATERIAL IMPACT ON THE UNIVERSITY'S FINANCIAL STATEMENTS.
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN LIABILITY OF INTEREST RATE SWAP \$446,155
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE \$564,914 SPECIAL EVENT EXPENSE \$226,118 CHANGE IN LIABILITY OF INTEREST RATE SWAP \$446,155 TOTAL PART XII LINE 2D \$1,237,187
PART XII, LINE 4B - OTHER ADJUSTMENTS		FINANCIAL AID \$20,379,359 TOTAL PART XII LINE 4B \$20,379,359
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE \$564,914 SPECIAL EVENT EXPENSE \$226,118 TOTAL PART XIII LINE 2D \$791,032
PART XIII, LINE 4B - OTHER ADJUSTMENTS		FINANCIAL AID \$20,379,359 TOTAL PART XIII LINE 4B \$20,379,359

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number

25-1094922

Part I

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

- 4 Does the organization maintain the following?
- a Records indicating the racial composition of the student body, faculty, and administrative staff?
- b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
- c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
- d Copies of all material used by the organization or on its behalf to solicit contributions?
- If you answered "No" to any of the above, please explain If you need more space, use Part II

- 5 Does the organization discriminate by race in any way with respect to
- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?
- If you answered "Yes" to any of the above, please explain If you need more space, use Part II

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

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

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE UNIVERSITY INCLUDES IN ITS BYLAWS AND CATALOGS A STATEMENT CONFIRMING ITS OPPOSITION TO ANY PRACTICE WHICH DEPRIVES ANY INDIVIDUAL OF RIGHTS AND PRIVILEGES BASED ON RACE, RELIGION, SEX, NATIONAL ORIGIN OR HANDICAP. THE UNIVERSITY WILL NOT AFFILIATE NOR EXTEND RECOGNITION TO ANY GROUP WHOSE POLICIES ARE DISCRIMINATORY.
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	LOCAL COMMUNITY INFRASTRUCTURE & TOURISM FUND \$218,632 GRANT FROM DA \$10,523 COMMONWEALTH OF PA RACP- PARK PROJECT \$3,027,000 HIGHER EDUCATION ASSISTANCE GRANT \$795,865 PITTSBURGH BOARD OF EDUCATION PRE-K COUNTS \$50,025 PA DEPARTMENT OF EDUCATION \$29,000 PA DEPARTMENT OF WELFARE \$119,742 PA OCDEL- KEYSTONE STAR'S \$14,452 FEDERAL DEPARTMENT OF WELFARE \$114,448 U.S. DEPARTMENT OF EDUCATION SEOG/FWS/PELL \$35,444 ASSET 13 PROJECT 97,342 OTHER MISCELLANEOUS \$739 TOTAL GOVERNMENT GRANTS \$4,513,212

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

Part I

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

1

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

☐ Yes ☒ No

2

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

3

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAM	262,395
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	MEDIA STUDIES TOUR TO PRAGUE	34,791
NORTH AMERICA	0	0	PROGRAM SERVICES	ADMIN OF ENGLISH AS SECOND LANGUAGE PROGRAM	3,223
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	1,360
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	548
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	1,370
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	1,248
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	1,445
NORTH AMERICA	0	0	PROGRAM SERVICES	INTERNATIONAL ENROLLMENT	3,223
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	PROFESSIONAL DEVELOPMENT	2,960
EUROPE (INCLUDING ICELAND & GREENLAND) -	0	0	PROGRAM SERVICES	STUDY ABROAD PROGRAM FINANCIAL AID	43,125
3a Sub-total	0	0			306,380
b Total from continuation sheets to Part I	0	0			49,308
c Totals (add lines 3a and 3b)	0	0			355,688

1

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

3 Enter total number of other organizations or entities ► _____

Part III

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDENT FINANCIAL AID	EUROPE	18	43,125	POSTING TO STUDENT'S ACCOUNT			

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☒ Yes ☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐ Yes ☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐ Yes ☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐ Yes ☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐ Yes ☒ No

Part V

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 FINANCIAL AID AWARDS AT POINT PARK UNIVERSITY ARE DETERMINED ON THE BASIS OF ACADEMIC ACHIEVEMENT, COMMUNITY SERVICE, ARTISTIC OR ATHLETIC TALENT AND FINANCIAL NEED ELIGIBILITY GRANTS AND LOANS ARE DISTRIBUTED USING POWERFAIDS APPLICATION AND POSTED TO STUDENT'S ACCOUNTS IN JENZABAR (HIGHER EDUCATION INFORMATION SYSTEM) ANNUALLY THE FINANCIAL AID AREA IS AUDITED BY AN INDEPENDENT ACCOUNTING FIRM

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

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

1

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

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and e-mail solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes

☐ No

b

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
DIANA BALCOM 1403 SHARPS HILL RD PGH, PA 15215	GRANT WRITER		No	40,000	12,250	27,750
MSLDIRECT 4312 OLD WLM PENN HWY MURRYSVILLE, PA 15668	DIRECT MAIL		No	21,456	12,500	8,956
PLANNED GIVING COMPANY 28 W STATE ST MEDIA, PA 19063	DIRECT MAIL		No	0	6,308	-6,308
Total				61,456	31,058	30,398

3

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

PA, NY

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

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events	
			STARMAKERS	GOLF OUTING	1	(Add col (a) through	
			(event type)	(event type)	(total number)	col (c))	
	1	Gross receipts	223,950	60,650	23,840	308,440	
	2	Less Charitable contributions	179,536	22,250	18,840	220,626	
3	Gross income (line 1 minus line 2)	44,414	38,400	5,000	87,814		
Direct Expenses	4	Cash prizes					
	5	Non-cash prizes					
	6	Rent/facility costs	35,195	33,502	767	69,464	
	7	Food and beverages	67,808	10,229	6,574	84,611	
	8	Entertainment	20,015	0		20,015	
	9	Other direct expenses	42,096	5,664	4,268	52,028	
	10	Direct expense summary Add lines 4 through 9 in column (d). ▶					226,118
	11	Net income summary Combine lines 3 and 10 in column (d). ▶					-138,304

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

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

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

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

b If "No," Explain _____

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

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

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

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

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

14

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

Name ▶ _____

Address ▶ _____

15a

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

☐ Yes ☐ No

b

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

c

If "Yes," enter name and address

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17

Mandatory distributions

a

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

☐ Yes ☐ No

b

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

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

Identifier	ReturnReference	Explanation
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**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

2010

Open to Public Inspection

Name of the organization
POINT PARK UNIVERSITY

25-1094922

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

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

[illegible]**Schedule I (Form 990) 2010**

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIP AID FOR HIGHER ED FOR UNDERGRADUATE AND GRADUATE STUDENTS	3646	20,336,234		N/A	N/A
(2) SCHOLARSHIP FOR SCHOOL AGE CHILDREN TO ATTEND SUMMER DANCE PROGRAM	132	107,427		N/A	N/A
(3) FAMILY PLAN AID FOR CHILDREN'S SCHOOL ONSITE DAYCARE	10	20,678		N/A	N/A
(4) HOUSING ASSISTANCE TO STUDENT RESIDENT ADVISORS	30	290,028		N/A	N/A

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 FINANCIAL AID AWARDS STUDENTS AT POINT PARK UNIVERSITY ARE DETERMINED ON THE BASIS OF ACADEMIC ACHIEVEMENT, COMMUNITY SERVICE, ARTISTIC OR ATHLETIC TALENT AND FINANCIAL NEED ELIGIBILITY GRANTS AND LOANS ARE DISTRIBUTED USING POWERFAIDS APPLICATION AND POSTED TO STUDENT'S ACCOUNTS IN JENZABAR (HIGHER EDUCATION INFORMATION SYSTEM) ANNUALLY THE FINANCIAL AID AREA IS AUDITED BY AN INDEPENDENT ACCOUNTING FIRM

Schedule J (Form 990) Department of the Treasury Internal Revenue Service	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees ▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23. ▶ Attach to Form 990. ▶ See separate instructions.	OMB No 1545-0047
		2010
		Open to Public Inspection

Name of the organization POINT PARK UNIVERSITY	Employer identification number 25-1094922
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Part I	Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	☐ First-class or charter travel ☒ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☒ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☒ Health or social club dues or initiation fees ☒ Personal services (e g , maid, chauffeur, chef)			
1b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	☒ Compensation committee ☐ Independent compensation consultant ☒ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) PAUL HENNIGAN EDD	(i) (ii)	280,222 0	100,000 0	51,708 0	14,442 0	19,377 0	465,749 0	0 0
(2) BRIDGET MANCOSH	(i) (ii)	175,147 0	35,000 0	190 0	13,535 0	15,959 0	239,831 0	0 0
(3) MARIANN GEYER	(i) (ii)	168,682 0	20,000 0	238 0	12,936 0	13,958 0	215,814 0	0 0
(4) KAREN MCINTYRE PHD	(i) (ii)	164,304 0	15,000 0	2,956 0	4,929 0	2,936 0	190,125 0	0 0
(5) RONALD LINDBLOM	(i) (ii)	163,916 0	10,000 0	998 0	12,561 0	13,743 0	201,218 0	0 0
(6) ANGELA H ISAAC PHD	(i) (ii)	157,641 0	0 0	598 0	11,658 0	20,412 0	190,309 0	0 0
(7) WILLIAM CAMERON	(i) (ii)	125,795 0	10,000 0	886 0	9,702 0	13,743 0	160,126 0	0 0
(8) FRED JOHNSON	(i) (ii)	135,120 0	6,200 0	6,240 0	9,932 0	7,906 0	165,398 0	0 0
(9) TIM HUDSON PHD	(i) (ii)	130,867 0	6,400 0	478 0	9,856 0	5,144 0	152,745 0	0 0
(10) CHARLES PERKINS PHD	(i) (ii)	151,310 0	0 0	2,416 0	11,402 0	1,216 0	166,344 0	0 0
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III

Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	DR. PAUL HENNIGAN, PRESIDENT OF THE UNIVERSITY, IS PAID A MONTHLY HOUSING ALLOWANCE IN PLACE OF STAYING IN A HOUSE ON CAMPUS, THE STANDARD FOR COLLEGES AND UNIVERSITIES. THIS IS REPORTED AS TAXABLE INCOME. THE ONLY PERSONAL SERVICES FOR PAUL HENNIGAN PROVIDED BY THE UNIVERSITY IS BABYSITTING SERVICES FOR HIS CHILDREN IN ORDER TO HELP ACCOMMODATE FOR MR. HENNIGAN'S UNPREDICTABLE WORK SCHEDULE AND FREQUENT OVERNIGHT TRAVEL. SPOUSAL TRAVEL IS NOT REIMBURSABLE PER THE UNIVERSITY'S EXPENSE REIMBURSEMENT POLICY, HOWEVER, THE PRESIDENT'S SPOUSES EXPENDITURES ARE REIMBURSED FOR OFFICIAL BUSINESS, ACCORDING TO THE PRESIDENT'S EMPLOYMENT CONTRACT. GENERALLY TRAVEL FOR COMPANIONS IS INFREQUENT.
	PART I, LINE 7	NON-FIXED PAYMENTS ARE LISTED IN COLUMN (B) (II) BONUS & INCENTIVES COMPENSATION. THEY ARE DETERMINED ANNUALLY BASED ON PERFORMANCE EVALUATIONS.

Schedule K (Form 990)	Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.										OMB No 1545-0047	
											2010	
	Department of the Treasury Internal Revenue Service											Open to Public Inspection
Name of the organization POINT PARK UNIVERSITY										Employer identification number 25-1094922		

Part I

Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A ALLEGHENY CO HIGHER EDU BUILDING AUTHORITY	25-1650137		04-29-2008	25,455,000	SEE PART V		X		X		X
B ALLEGHENY CO HIGHER EDU BUILDING AUTHORITY	25-1650137	01728RGB9	04-29-2008	6,870,000	SEE PART V		X		X		X
C MT LEBANON INDUSTRIAL DEV AUTHORITY	20-5476955		01-19-2007	5,000,000	SEE PART V		X		X		X
D MT LEBANON INDUSTRIAL DEV AUTHORITY	20-5476955		12-27-2006	3,830,000	SEE PART V		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	25,455,000		6,870,000		5,000,000		3,830,000	
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds	258,987		69,047		7,250		58,500	
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	25,196,013		6,800,953		4,992,750		3,771,500	
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2010		2009		2008		2008	
14	Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes	No
		X		X			X		X
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III

Private Business Use

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

Part IIIPrivate Business Use (Continued)

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

Part IVArbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X
2	Is the bond issue a variable rate issue?	X		X			X		X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X		X		X		X
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X		X		X		X
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
6	Did the bond issue qualify for an exception to rebate?		X		X		X		X

Part VSupplemental Information

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

Identifier	Return Reference	Explanation
SCHEDULE K SUPPLEMENTAL INFORMATION		PART I, LINE A, COLUMN C SERIES A 10,000,000 CUSIP 01728RET2 SERIES B 15,455,000 CUSIP 01728REU9 TOTAL 25,455,000 PART I, LINE A, COLUMN F FOR ACQUISITION AND RENOVATION OF STUDENT APARTMENT HOUSING, RENOVATION OF LOBBY, AND ACQUISITION OF YMCA BUILDING AND RENOVATION INTO STUDENT UNION AND ADDITIONAL CAPITAL PROJECTS PART II, LINE 5, COLUMN A PROCEEDS USED FOR BOND ISSUANCE COSTS WERE \$209,512 PROCEEDS USED FOR CREDIT ENHANCEMENT WERE \$49,475 PART I, LINE B, COLUMN F FOR ACQUISITION AND RENOVATION OF STUDENT APARTMENT HOUSING, RENOVATION OF LOBBY, AND ACQUISITION OF YMCA BUILDING AND RENOVATION INTO STUDENT UNION AND ADDITIONAL CAPITAL PROJECTS PART I, LINE B, COLUMN E ORIGINAL TAXABLE ISSUE PRICE WAS \$6,870,000 A TAX EXEMPT CONVERSION ON JUNE 1, 2010 WAS ISSUED AT OUTSTANDING PRINCIPAL OF \$6,770,000 PART I, LINE C, COLUMN F RENOVATION OF A CLASSROOM/OFFICE BUILDING AND PURCHASE OF AN OFFICE BUILDING, LOBBY RENOVATION AND LIBRARY FURNITURE PART I, LINE D, COLUMN F FOR PURCHASE AND RENOVATION OF A CLASSROOM/OFFICE BUILDING AND PURCHASE OF AN OFFICE BUILDING, LOBBY RENOVATION AND LIBRARY FURNITURE ORIGINALLY ISSUED WITH A \$3,830,000 TAX EXEMPT PORTION OUT OF A TOTAL \$10,000,000 THE TAXABLE PORTION WILL BE FULLY CONVERTED TO TAX EXEMPT IN THE FUTURE ORIGINAL \$ 3,830,000 12/31/07 \$ 1,084,435 10/31/08 \$ 946,350 CURRENT TAX EXEMPT AMOUNT \$5,860,785 PART I, LINE D, COLUMN F FOR SUPPORT OF DANCE STUDIO, A LIBRARY, A TELEVISION AND FILM STUDIO, MISCELLANEOUS CAPITAL PROJECTS

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A AUTH FOR IMPROV IN MUNICIPALITIES	25-1196358		08-16-2004	7,000,000	SEE PART V		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	7,000,000							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds	74,518							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	6,925,482							
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2006							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

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

Part IIIPrivate Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X						
b	Are there any research agreements that may result in private business use of bond-financed property?		X						
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X							
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 %							
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 %							
6	Total of lines 4 and 5	0 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IVArbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2	Is the bond issue a variable rate issue?		X						
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X						
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X						
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X						
6	Did the bond issue qualify for an exception to rebate?		X						

Part VSupplemental Information

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

Identifier	Return Reference	Explanation

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number

25-1094922

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

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

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

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$										

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance
(1) BOARD MEMBERS	FAMILY MEMBERS OF VARIOUS BOARD MEMBERS	2,856

Part IV

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) EXECUTIVE MANAGEMENT SERVICES	FORMER OFFICER - MICHAELITA QUINN - PRESIDENT OF EXECUTIVE MANAGEMENT SVCS	113,597	SEE SCH O EXECUTIVE MANAGEMENT SERVICES (EMS) PROVIDES ENROLLMENT MANAGEMENT SERVICES TO THE UNIVERSITY		No

Part V

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

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization POINT PARK UNIVERSITY	Employer identification number 25-1094922
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Identifier	Return Reference	Explanation
NEW PROGRAM SERVICES	FORM 990, PART III, LINE 2	ON JUNE 30, 2011, THE UNIVERSITY OFFICIALLY CLOSED ITS CHILDREN'S SCHOOL, AN ACCREDITED PROGRAM, WHICH SUPPLEMENTED THE EDUCATION OF STUDENTS PURSUING AN EDUCATION MAJOR

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE RETURN IS PREPARED BY THE UNIVERSITY'S BUSINESS OFFICE. IT IS REVIEWED BY AN INDEPENDENT ACCOUNTING FIRM. THEN THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS CONDUCTS A REVIEW ON BEHALF OF THE BOARD. THE FINAL COPY IS SENT TO ALL VOTING MEMBERS OF THE BOARD BEFORE IT IS FILED.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	CONTAINED WITHIN THE UNIVERSITY'S WRITTEN CODE OF CONDUCT IS THE CONFLICT OF INTEREST POLICY, WHICH IS DISTRIBUTED ANNUALLY TO THE BOARD OF TRUSTEES, AS WELL AS TO ALL FULL-TIME AND PART-TIME EMPLOYEES AND IS AVAILABLE ON THE UNIVERSITY'S WEBSITE. THE CONFLICT OF INTEREST STATEMENT THAT IS SIGNED BY DIRECTORS AND OFFICERS STATES, "I ACKNOWLEDGE AN ONGOING RESPONSIBILITY TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST AS THEY MAY ARISE." BOARD MEMBERS COMPLETE A 'CONFLICT OF INTEREST STATEMENT' ANNUALLY. THE POLICY MAKES CLEAR THAT NOT ALL CONFLICTING INTERESTS ARE PROHIBITED. EACH REPORTED CONFLICT IS EVALUATED TO MAKE CERTAIN THAT DIRECTORS AND OFFICERS PRIMARY OBLIGATION TO THE UNIVERSITY IS NOT COMPROMISED.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD IS RESPONSIBLE FOR HIRING THE CEO, AND THE EXECUTIVE COMMITTEE OF THE BOARD ACTS AS THE COMPENSATION COMMITTEE FOR DETERMINING THE PRESIDENT'S ANNUAL GOALS, OBJECTIVES, PERFORMANCE AND COMPENSATION THE RULES ARE SET FORTH IN THE UNIVERSITY'S BY LAWS, ARTICLE VI, SECTION 2, PARAGRAPH 4 "THE EXECUTIVE COMMITTEE SHALL ALSO ACT AS THE COMPENSATION COMMITTEE FOR PURPOSES OF APPROVING THE PRESIDENT'S ANNUAL GOALS AND OBJECTIVES, EVALUATING THE PRESIDENT'S ANNUAL PERFORMANCE, AND DETERMINING THE PRESIDENT'S ANNUAL COMPENSATION THE EXECUTIVE COMMITTEE IN THIS ROLE SHALL ADHERE TO ALL APPLICABLE STANDARDS PROMULGATED BY THE IRS WITH RESPECT TO COMPENSATION PAYABLE BY EXEMPT ORGANIZATIONS THE PRESIDENT SHALL NOT BE PRESENT WHILE THE EXECUTIVE COMMITTEE DELIBERATES ON THE COMPENSATION, GOALS, AND OBJECTIVE, OR PERFORMANCE OF THE PRESIDENT THE EXECUTIVE COMMITTEE SHALL ALSO PROVIDE ADVICE TO THE PRESIDENT REGARDING THE ANNUAL GOALS AND OBJECTIVES, PERFORMANCE, AND COMPENSATION OF THE PRESIDENT'S EXECUTIVE OFFICERS THE CHAIR OF THE BOARD WILL REPORT TO THE BOARD, AS APPROPRIATE, CONCERNING THE EXECUTIVE COMMITTEE'S DELIBERATIONS AS THE COMPENSATION COMMITTEE FROM TIME TO TIME, THE UNIVERSITY EMPLOYS THE SERVICES OF AN INDEPENDENT FIRM TO DO AN EXECUTIVE BENCHMARKING STUDY AND IMPLEMENT A PEER REVIEW PROCESS FOR THE COMPENSATION OF THE PRESIDENT AND OTHER OFFICERS AND KEY EMPLOYEES IN ORDER TO HELP ADVISE THE COMPENSATION COMMITTEE IN GENERAL THE HUMAN RESOURCES DEPARTMENT USES SURVEYS FROM CUPA-HR [COLLEGE & UNIVERSITY PROFESSIONAL ASSOC] FOR STAFF AND AAUP [AMERICAN ASSOC OF UNIVERSITY PROFESSORS] FOR FACULTY

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE CONFLICT OF INTEREST POLICY IS AVAILABLE ONLINE AS A COMPONENT OF THE UNIVERSITY'S CODE OF CONDUCT THE GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST THE FINANCIAL STATEMENTS ARE NOT AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -756,832 CHANGE IN LIABILITY OF INTEREST RATE SWAP \$446,155 446,155 TOTAL TO FORM 990, PART XI, LINE 5 - 310,677

Identifier	Return Reference	Explanation
OVERSIGHT OF FINANCIAL STATEMENT AUDIT	FORM 990, PART XI, QUESTION 2C	THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNTING FIRM. IN ADDITION, THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES THE RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND ITS SELECTION OF THE INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Identifier	Return Reference	Explanation
THE NUMBER OF EMPLOYEES IS COMPRISED OF THE FOLLOWING	FORM 990 PART I, LINE 5	FULL TIME STAFF 338 FULL TIME FACULTY 131 PART TIME FACULTY 355 PART TIME STAFF 166 PART TIME STUDENTS 859

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

Part I

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

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

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) PITTSBURGH COUNCIL ON HIGHER EDUCATION 201 WOOD STREET BOX 647 PITTSBURGH, PA 152221912 23-7303727	COLLABORATION OF HIGHER EDUCATION INSTITUTIONS	PA	501(C)(3)	509(A)(3)	N/A		No

Part III

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

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

Part IV

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

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

Part V

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

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

1

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

a

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

b

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

c

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

d

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

e

Loans or loan guarantees by other organization(s)

f

Sale of assets to other organization(s)

g

Purchase of assets from other organization(s)

h

Exchange of assets

i

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

j

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

k

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

l

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

m

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

n

Sharing of paid employees

o

Reimbursement paid to other organization for expenses

p

Reimbursement paid by other organization for expenses

q

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

r

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

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

No

No

No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2010

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

[illegible]

Part VII **Supplemental Information**

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

Identifier	Return Reference	Explanation
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