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Form 990

Return of Organization Exempt From Income Tax

2011

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

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012

B Check if applicable

Address change

Name change

Initial return

Terminated

Amended return

Application pending

C Name of organization
LESLEY UNIVERSITY

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
29 EVERETT STREETCity or town, state or country, and ZIP + 4
CAMBRIDGE, MA 021382790F Name and address of principal officer
JOSEPH B MOORE
29 EVERETT STREET
CAMBRIDGE, MA 021382790D Employer identification number
04-2103589E Telephone number
(617) 349-8685

G Gross receipts \$ 123,745,749

H(a) Is this a group return for affiliates?
 Yes NoH(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 LESLEY EDU

K Form of organization Corporation Trust Association Other █

L Year of formation 1909

M State of legal domicile MA

Part I Summary

1 Briefly describe the organization's mission or most significant activities

LESLEY UNIVERSITY IS COMMITTED TO ACTIVE LEARNING, SCHOLARLY RESEARCH, CRITICAL INQUIRY, AND DIVERSE FORMS OF ARTISTIC PRACTICE THROUGH CLOSE MENTORING RELATIONSHIPS AMONG STUDENTS, FACULTY, AND PRACTITIONERS IN THE FIELD. LESLEY PREPARES GRADUATES WITH THE KNOWLEDGE, SKILL, UNDERSTANDING, AND ETHICAL JUDGMENT TO BE CATALYSTS WHO SHAPE A MORE JUST, HUMANE, AND SUSTAINABLE WORLD

2 Check this box █ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

3 30

4 Number of independent voting members of the governing body (Part VI, line 1b)

4 29

5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)

5 2,426

6 Total number of volunteers (estimate if necessary)

6 295

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a 19,483

b Net unrelated business taxable income from Form 990-T, line 34

7b -64,064

Activities & Governance

Revenue

Expenses

Net Assets or Fund Balances

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	6,093,264	7,005,256
9 Program service revenue (Part VIII, line 2g)	106,054,862	109,461,117
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,132,590	2,097,629
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,505,377	2,686,853
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	117,786,093	121,250,855
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	15,783,142	16,897,778
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	59,295,935	62,193,496
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) █ 1,408,143		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	41,631,629	41,747,231
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	116,710,706	120,838,505
19 Revenue less expenses Subtract line 18 from line 12	1,075,387	412,350

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

2013-05-15

Date

BERNICE BRADIN CFO, VP FINANCE

Type or print name and title

Paid Preparer's Use Only

Preparer's signature	JOSEPH M GISO CPA MST	Date 2013-05-15	Check if self-employed <input type="checkbox"/>	Preparer's taxpayer identification number (see instructions) P00030126
Firm's name (or yours if self-employed), address, and ZIP + 4	CBIZ TOFIAS 500 BOYLSTON STREET BOSTON, MA 02116			EIN █ 26-3753134 Phone no █ (617) 761-0600

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III **1 Briefly describe the organization's mission**

LESLEY UNIVERSITY IS COMMITTED TO ACTIVE LEARNING, SCHOLARLY RESEARCH, CRITICAL INQUIRY, AND DIVERSE FORMS OF ARTISTIC PRACTICE THROUGH CLOSE MENTORING RELATIONSHIPS AMONG STUDENTS, FACULTY, AND PRACTITIONERS IN THE FIELD. LESLEY PREPARES GRADUATES WITH THE KNOWLEDGE, SKILL, UNDERSTANDING, AND ETHICAL JUDGMENT TO BE CATALYSTS WHO SHAPE A MORE JUST, HUMANE, AND SUSTAINABLE WORLD

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 organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 43,867,238 including grants of \$) (Revenue \$ 97,498,481)

EXPENSES RELATED TO INSTRUCTING FULL TIME AND PART TIME STUDENTS. THE UNIVERSITY IS HOME TO A NUMBER OF IMPORTANT CENTERS AND INSTITUTES THAT CONDUCT RESEARCH, HELP SHAPE PUBLIC POLICY, AND PROVIDE CONTINUING EDUCATION AND PROFESSIONAL DEVELOPMENT OPPORTUNITIES ACROSS A WIDE RANGE OF DISCIPLINES INCLUDING *MATH *SPECIAL EDUCATION *LITERACY*CENTER FOR ADULT LEARNERS AT A GLANCE *FOUNDED 1909 *TOTAL ENROLLMENT 8,438*UNDERGRADUATES 2,011*MASTER'S, C A G S , PH D STUDENTS 5,243*NON-MATRICULATING STUDENTS 1,184*TOTAL ALUMNI 79,863*CAMPUS LOCATIONS *BOSTON, MA *CAMBRIDGE, MA LESLEY UNIVERSITY ACADEMICS *UNDERGRADUATE STUDY -THE ART INSTITUTE OF BOSTON -COLLEGE OF LIBERAL ARTS + PROFESSIONAL STUDIES -ADULT LEARNING DEGREE PROGRAMS*GRADUATE STUDY -COURSES + PROGRAMS IN CAMBRIDGE/BOSTON -PROGRAMS OFFERED THROUGHOUT THE US -ONLINE COURSES + PROGRAMS*UNIQUE PROGRAM FORMATS *CENTERS + INSTITUTES *CONTINUING EDUCATION + PROFESSIONAL DEVELOPMENT *THRESHOLD NON-DEGREE PROGRAM*ACCREDITATION -NEW ENGLAND ASSOCIATION OF SCHOOLS AND COLLEGES -NATIONAL ASSOCIATION OF SCHOOLS OF ART AND DESIGN

4b (Code) (Expenses \$ 14,764,767 including grants of \$) (Revenue \$)

EXPENSES RELATED TO SERVICES PROVIDED TO THE STUDENT BODY, INCLUDING COUNSELING, CAREER GUIDANCE, ADMISSIONS, REGISTRAR, STUDENT ACTIVITIES, FINANCIAL AID AND HEALTH SERVICES AS WELL AS EXPENSES RELATED TO ATHLETIC PROGRAMS

4c (Code) (Expenses \$ 18,297,962 including grants of \$) (Revenue \$)

EXPENSES RELATED TO ACADEMIC SUPPORT WHICH INCLUDES THE EXPENSES FOR THE LIBRARY, DEAN OF STUDENTS, VARIOUS ACADEMIC DEANS AND OTHER ACADEMIC SUPPORT ALSO, EXPENSES RELATED TO RESEARCH AND GENERAL INSTITUTIONAL OPERATIONS

(Code) (Expenses \$ 16,897,778 including grants of \$ 16,897,778) (Revenue \$)

EXPENSES RELATED TO FINANCIAL AID FOR STUDENTS THE PURPOSE OF FINANCIAL AID IS TO HELP YOU ATTAIN YOUR GOAL OF A LESLEY UNIVERSITY EDUCATION, BY OFFERING FINANCIAL ASSISTANCE IN THE FORM OF GRANTS, LOANS, AND STUDENT WORK OPPORTUNITIES. PLEASE BE ASSURED THAT DESPITE THE CURRENT ECONOMIC SITUATION, THE OFFICE OF FINANCIAL AID REMAINS VERY VIGILANT AND HAS BEEN PROACTIVE IN ASSURING THAT BOTH FEDERAL AND PRIVATE EDUCATIONAL LOAN OPTIONS ARE AVAILABLE TO STUDENTS

(Code) (Expenses \$ 10,110,410 including grants of \$) (Revenue \$ 12,951,119)

AUXILIARY ENTERPRISES

4d Other program services (Describe in Schedule O)

(Expenses \$ 27,008,188 including grants of \$ 16,897,778) (Revenue \$ 12,951,119)

4e Total program service expenses \$ 103,938,155

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.

2 Is the organization required to complete Schedule B, *Schedule of Contributors* (see instructions)?

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.

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.

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.

6 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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.

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.

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.

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.

10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.

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.

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.

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.

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.

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.

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.

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.

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.

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.

14a Did the organization maintain an office, employees, or agents outside of the United States?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.

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, Part II and IV.

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, Part III and IV.

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.

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.

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.

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H.

b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements.

	Yes	No
1	Yes	
2	Yes	
3		No
4	Yes	
5		No
6		No
7		No
8		No
9		No
10	Yes	
11a	Yes	
11b	Yes	
11c		No
11d		No
11e		No
11f	Yes	
12a	Yes	
12b		No
13	Yes	
14a	Yes	
14b	Yes	
15		No
16		No
17		No
18		No
19		No
20a		No
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? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)	28a		No
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c		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 owner? If "Yes," complete Schedule L, Part IV	29	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	34		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	35a		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35b		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	37		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	38	Yes	
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			

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 9,056	
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 2,426	
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 or securities 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).	7a No	
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?	7b	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c No	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e No	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f No	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8	
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?	9a	
9	Sponsoring organizations maintaining donor advised funds.	9b	
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter	10a	
a	Initiation fees and capital contributions included on Part VIII, line 12	10b	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter	11a	
a	Gross income from members or shareholders	11b	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13b	
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13c	
c	Enter the aggregate amount of reserves on hand		
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	30	
b Enter the number of voting members included in line 1a, above, who are independent	1b	29	
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 Did the organization have members or stockholders?	6	No	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	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 Did the organization have local chapters, branches, or affiliates?	10a	No	
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a Has the organization provided a complete 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 the Form 990			
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13 Did the organization have a written whistleblower policy?	13	Yes	
14 Did 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	No	
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," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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 MA

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 made 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 made 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
BERNICE BRADIN VPCFO
29 EVERETT STREET
CAMBRIDGE, MA 021382790
(617) 349-8685

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

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

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

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

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

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

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

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

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **65**

	Yes	No
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>	3	No
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>	4	Yes
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>	5	No

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. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
UGL UNICCO 275 GROVE ST AUBURNDALE, MA 02446	FACILITIES MANAGEMENT	4,739,843
BON APPETIT MANAGEMENT CO 29 EVERETT ST CAMBRIDGE, MA 02138	FOOD SERVICE	3,653,515
BOWDOIN CONSTRUCTION 220-1 RESERVOIR ST NEEDHAM HEIGHTS, MA 02494	CONSTRUCTION	2,930,457
SECURITAS PO BOX 403412 ATLANTA, GA 30384	SECURITY	1,466,455
BRUNER COTT 130 PROSPECT ST CAMBRIDGE, MA 02139	ARCHITECT	1,305,115

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►43

Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	2,924,771				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	4,080,485				
	g Noncash contributions included in lines 1a-1f \$ 78,610						
	h Total. Add lines 1a-1f		7,005,256				
Program Service Revenue	Business Code						
			2a TUITION AND FEES	900099	96,509,998	96,509,998	
			b AUXILIARY	900099	12,951,119	12,951,119	
			c				
			d				
			e				
			f All other program service revenue				
			g Total. Add lines 2a-2f		109,461,117		
Other Revenue	3 Investment income (including dividends, interest and other similar amounts)						
			2,097,629		-33,925 2,131,554		
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		4,139,856					
	b Less rental expenses	2,494,894					
	c Rental income or (loss)	1,644,962					
d Net rental income or (loss)		1,644,962			1,644,962		
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
b Less cost or other basis and sales expenses							
c Gain or (loss)							
d Net gain or (loss)							
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18							
b Less direct expenses	b						
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities See Part IV, line 19							
b Less direct expenses	b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances							
b Less cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue		Business Code					
11a OTHER INCOME		900099	988,483	988,483			
b PARKING LOT		812930	52,813		52,813		
c ART GALLERY		453220	595		595		
d All other revenue							
e Total. Add lines 11a-11d		1,041,891					
12 Total revenue. See Instructions		121,250,855	110,449,600	19,483	3,776,516		

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)

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

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 United States See Part IV, line 21				
2 Grants and other assistance to individuals in the United States See Part IV, line 22	16,897,778	16,897,778		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	3,000,637	972,626	1,828,424	199,587
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	47,661,812	41,816,879	5,118,135	726,798
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,164,968	1,952,980	182,396	29,592
9 Other employee benefits	5,775,872	4,949,147	721,034	105,691
10 Payroll taxes	3,590,207	3,044,253	480,913	65,041
11 Fees for services (non-employees)				
a Management				
b Legal	209,559	210	209,349	
c Accounting	191,078		191,078	
d Lobbying	16,000	16,000		
e Professional fundraising See Part IV, line 17				
f Investment management fees	520,577		520,577	
g Other	2,381,295	906,943	1,447,827	26,525
12 Advertising and promotion	1,710,134	1,644,325	61,230	4,579
13 Office expenses	3,187,735	2,865,063	256,553	66,119
14 Information technology	2,199,692	848,003	1,349,650	2,039
15 Royalties				
16 Occupancy	6,180,979	5,775,489	404,779	711
17 Travel	2,502,510	2,201,901	233,700	66,909
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	277,567	227,278	42,534	7,755
20 Interest	4,056,844	4,049,443	7,401	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	5,648,591	5,413,257	235,334	
23 Insurance	282,358		282,358	
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 CUSTODIAL CONTRACTS	3,595,329	3,595,329		
b FOOD SERVICE	3,263,337	3,263,337		
c CONSULTING	1,782,429	1,515,104	166,714	100,611
d SECURITY CONTRACTS	1,110,156	1,045,023	65,133	
e				
f All other expenses	2,631,061	937,787	1,687,088	6,186
25 Total functional expenses. Add lines 1 through 24f	120,838,505	103,938,155	15,492,207	1,408,143
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year	(B) End of year
Assets	1 Cash—non-interest-bearing	3,107	1 3,017
	2 Savings and temporary cash investments	6,650,085	2 6,936,455
	3 Pledges and grants receivable, net	2,311,894	3 3,596,933
	4 Accounts receivable, net	6,724,554	4 9,270,420
	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)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6
	7 Notes and loans receivable, net	1,599,249	7 1,478,346
	8 Inventories for sale or use		8
	9 Prepaid expenses and deferred charges	2,015,760	9 2,626,231
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	194,655,687	
	10b Less accumulated depreciation	10a 10b 46,083,926	144,224,815 10c 148,571,761
	11 Investments—publicly traded securities		11
	12 Investments—other securities See Part IV, line 11	163,936,033	12 156,353,511
	13 Investments—program-related See Part IV, line 11		13
	14 Intangible assets		14
	15 Other assets See Part IV, line 11	16,458,648	15 9,738,002
	16 Total assets. Add lines 1 through 15 (must equal line 34)	343,924,145	16 338,574,676
Liabilities	17 Accounts payable and accrued expenses	13,106,151	17 11,014,980
	18 Grants payable	1,336,897	18 1,356,749
	19 Deferred revenue	13,958,279	19 14,758,599
	20 Tax-exempt bond liabilities	88,019,786	20 87,253,629
	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	5,494,000	23 5,790,592
	24 Unsecured notes and loans payable to unrelated third parties		24
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25
	26 Total liabilities. Add lines 17 through 25	121,915,113	26 120,174,549
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.		
	27 Unrestricted net assets	197,583,174	27 192,508,114
	28 Temporarily restricted net assets	13,218,094	28 14,600,664
	29 Permanently restricted net assets	11,207,764	29 11,291,349
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.		
	30 Capital stock or trust principal, or current funds		30
	31 Paid-in or capital surplus, or land, building or equipment fund		31
	32 Retained earnings, endowment, accumulated income, or other funds		32
	33 Total net assets or fund balances	222,009,032	33 218,400,127
	34 Total liabilities and net assets/fund balances	343,924,145	34 338,574,676

Part XI Reconciliation of Net AssetsCheck 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	121,250,855
2	Total expenses (must equal Part IX, column (A), line 25)	2	120,838,505
3	Revenue less expenses Subtract line 2 from line 1	3	412,350
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	222,009,032
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-4,021,255
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	218,400,127

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? <input type="checkbox"/>	2a	No
2b	Were the organization's financial statements audited by an independent accountant? <input type="checkbox"/>	2b	Yes
2c	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 <input type="checkbox"/>	2c	Yes
2d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? <input type="checkbox"/>	3a	Yes
3b	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 <input type="checkbox"/>	3b	Yes

2011

Open to Public
Inspection**SCHEDULE A**
(Form 990 or 990EZ)**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.

Department of the Treasury
Internal Revenue Service

Name of the organization
LESLEY UNIVERSITY

Employer identification number

04-2103589

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 **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

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)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(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 IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
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 2011 (line 6 column (f) divided by line 11 column (f))	14
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15
16a 33 1/3% support test—2011. 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—2010. 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—2011. 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—2010. 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 IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15
16 Public support percentage from 2010 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18
19a 33 1/3% support tests—2011. 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—2010. 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 explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C
(Form 990 or 990-EZ)**Political Campaign and Lobbying Activities****2011****For Organizations Exempt From Income Tax Under section 501(c) and section 527**

► Complete if the organization is described below.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

**Open to Public
Inspection**

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

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- 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, line 35c (Proxy Tax), then

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

Name of the organization LESLEY UNIVERSITY	Employer identification number 04-2103589
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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 on behalf of or in opposition to candidates for public office 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
- 4b 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 function 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 (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

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

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

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

	(a)		(b)
	Yes	No	
			Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?		No	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c Media advertisements?		No	
d Mailings to members, legislators, or the public?		No	
e Publications, or published or broadcast statements?		No	
f Grants to other organizations for lobbying purposes?		No	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i Other activities? If "Yes," describe in Part IV	Yes		16,000
j Total lines 1c through 1i			16,000
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).

1 Were substantially all (90% or more) dues received nondeductible by members?	1	Yes	No
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).	2a	
a Current year	2b	
b Carryover from last year	2c	
c Total	3	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
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?	5	
5 Taxable amount of lobbying and political expenditures (see instructions)		

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1.

Also, complete this part for any additional information

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	PART II-B, LINE 1	THE UNIVERSITY PAID POLITICAL ADVANTAGE, LLC \$16,000 FOR STATE SUPPORT OF READING RECOVERY PROJECTS

2011

Open to Public
Inspection**SCHEDULE D**
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
 ► Attach to Form 990. ► See separate instructions.

Name of the organization
LESLEY UNIVERSITY**Employer identification number**

04-2103589

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 ► \$ _____

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

	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	163,936,032	147,161,485	142,576,277	190,326,605	
b Contributions	2,899,799	1,332,582	3,265,367	5,347,004	
c Investment earnings or losses	-2,452,105	22,145,214	6,325,160	-48,500,943	
d Grants or scholarships	286,418	274,773	209,367	344,703	
e Other expenditures for facilities and programs	7,743,796	6,428,476	4,795,952	4,251,686	
f Administrative expenses					
g End of year balance	156,353,512	163,936,032	147,161,485	142,576,277	

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► 90 520 %

b Permanent endowment ► 6 560 %

c Term endowment ► 2 920 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
3a(i) unrelated organizations		
3a(ii) related organizations		
3b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		

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

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

	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	16,510,549			16,510,549
b Buildings	92,173,650	23,160,005		69,013,645
c Leasehold improvements	66,556,466	15,406,675		51,149,791
d Equipment	13,742,096	7,517,246		6,224,850
e Other	5,672,926			5,672,926
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				148,571,761

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CASH AND EQUIVALENTS	145,698	F
(B) FIXED INCOME	23,060,725	F
(C) DOMESTIC EQUITIES	29,635,408	F
(D) INTERNATIONAL EQUITIES	24,296,018	F
(E) PUBLIC & PRIVATE REAL ASSETS	28,587,260	F
(F) PRIVATE EQUITIES	2,825,463	F
(G) FLEX CAPITAL	47,802,939	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12.) ►	156,353,511	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col (B) line 15.) ►	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of Liability	(b) Amount	
Federal Income Taxes		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25.) ►		

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

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

1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	121,250,855
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	120,838,505
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	412,350
4 Net unrealized gains (losses) on investments	4	-4,021,255
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV)	8	
9 Total adjustments (net) Add lines 4 - 8	9	-4,021,255
10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-3,608,905

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1 Total revenue, gains, and other support per audited financial statements	1	102,306,139
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments	2a	-4,021,255
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	2d	2,494,894
e Add lines 2a through 2d	2e	-1,526,361
3 Subtract line 2e from line 1	3	103,832,500
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	520,577
b Other (Describe in Part XIV)	4b	16,897,778
c Add lines 4a and 4b	4c	17,418,355
5 Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	121,250,855

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1 Total expenses and losses per audited financial statements	1	105,915,044
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIV)	2d	2,494,894
e Add lines 2a through 2d	2e	2,494,894
3 Subtract line 2e from line 1	3	103,420,150
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	520,577
b Other (Describe in Part XIV)	4b	16,897,778
c Add lines 4a and 4b	4c	17,418,355
5 Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	120,838,505

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE UNIVERSITY'S ENDOWMENT CONSISTS OF APPROXIMATELY 90 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES. ITS ENDOWMENT INCLUDES BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS AS REQUIRED BY GAAP. NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE UNIVERSITY ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY. IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS THE UNIVERSITY HAS IDENTIFIED. ITS TAX STATUS AS A TAX-EXEMPT ENTITY AS ITS ONLY SIGNIFICANT TAX POSITION, HOWEVER, THE UNIVERSITY HAS DETERMINED THAT SUCH TAX POSITION DOES NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION. IN ADDITION, THE UNIVERSITY HAS IDENTIFIED CERTAIN MINOR TAX POSITIONS WITH RESPECT TO CERTAIN OF ITS ACTIVITIES THAT MANAGEMENT DID NOT CONSIDER MATERIAL AND, ACCORDINGLY, SUCH AMOUNTS WERE NOT RECOGNIZED. THE UNIVERSITY'S FEDERAL AND STATE TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED.
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES 2,494,894
PART XII, LINE 4B - OTHER ADJUSTMENTS		INSTITUTIONAL FINANCIAL AID 16,897,778
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES 2,494,894
PART XIII, LINE 4B - OTHER ADJUSTMENTS		INSTITUTIONAL FINANCIAL AID 16,897,778

2011

Open to Public
Inspection**SCHEDULE E**
(Form 990 or 990-EZ)**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.

Department of the Treasury
Internal Revenue ServiceName of the organization
LESLEY UNIVERSITY

Employer identification number

04-2103589

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

	YES	NO
1	Yes	
2	Yes	
3	Yes	

- 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

4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	

- 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

5a	No	
5b	No	
5c	No	
5d	No	
5e	No	
5f	No	
5g	No	
5h	No	

- 6a Does the organization receive any financial aid or assistance from a governmental agency?
- 6b 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 401 through 405 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

6a	Yes	
6b	No	
7	Yes	

Part II Supplemental Information

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

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	NEWSPAPERS, ON-LINE, ADVERTISEMENTS APPLICATIONS FOR EMPLOYMENT, ADMISSIONS AND FINANCIAL AID
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE UNIVERSITY RECEIVES FINANCIAL AID AND ASSISTANCE FROM THE FEDERAL GOVERNMENT IN THE FORM OF FEDERAL PROGRAMS AND GRANTS ADMINISTERED BY THE DEPARTMENT OF EDUCATION, THE DEPARTMENT OF COMMERCE, THE NATIONAL ENDOWMENT FOR HUMANITIES, THE NATIONAL SCIENCE FOUNDATION AND THE NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

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.

Employer identification number

04-2103589

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

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Use Part V if additional space is needed.

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.

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

Additional Data

Software ID:

Software Version:

EIN: 04-2103589

Name: LESLEY UNIVERSITY

Part V

Supplemental Information

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

**Schedule I
(Form 990)**

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

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

► Attach to Form 990

2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization
LESLEY UNIVERSITY

Employer identification number

04-2103589

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

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) SCHOLARSHIPS	1530		16,897,778	FMV	SCHOLARSHIPS ARE GIVEN OUT AS BURSAR CREDITS TO THE STUDENT'S ACCOUNT

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 ALL GRANTS PROVIDED BY THE UNIVERSITY ARE FOR FINANCIAL AID TO STUDENTS. GRANTS AND OTHER ASSISTANCE ARE RELATED TO INSTITUTIONAL FINANCIAL AID FOR WHICH STUDENTS APPLY THROUGH THE FINANCIAL AID OFFICE. ALL AID IS AWARDED BASED ON CERTAIN GUIDELINES AND IS CREDITED DIRECTLY TO STUDENTS' TUITION ACCOUNTS. ALL AWARDS ARE DIRECTLY RELATED TO THE STUDENTS' EDUCATION AT THE INSTITUTION'S PHYSICAL LOCATION IN THE UNITED STATES. STUDENTS ARE REQUIRED TO COMPLETE A REVIEW WITH INSTRUCTORS AT THE END OF EACH SEMESTER TO RECEIVE CREDIT

Schedule J
(Form 990)**Compensation Information**

OMB No 1545-0047

2011Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
► Attach to Form 990. ► See separate instructions.

Open to Public Inspection**Name of the organization**
LESLEY UNIVERSITY**Employer identification number**

04-2103589

Part I Questions Regarding Compensation

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

<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input checked="" type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

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?

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

<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> 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?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?
 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?

b Any related organization?

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?

b Any related organization?

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

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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	Yes	
2	Yes	
4a	Yes	
4b	Yes	
4c		No
5a		No
5b		No
6a		No
6b		No
7	Yes	
8		No
9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual.

(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) JOSEPH B MOORE	(i) 352,212 (ii) 0	(i) 35,000 (ii) 0	(i) 4,790 (ii) 0	(i) 49,735 (ii) 0	(i) 33,496 (ii) 0	(i) 475,233 (ii) 0	(i) 0 (ii) 0
(2) BERNICE BRADIN	(i) 197,595 (ii) 0	(i) 0 (ii) 0	(i) 270 (ii) 0	(i) 13,934 (ii) 0	(i) 5,844 (ii) 0	(i) 217,643 (ii) 0	(i) 0 (ii) 0
(3) MARY LOU BATT	(i) 195,562 (ii) 0	(i) 0 (ii) 0	(i) 325 (ii) 0	(i) 15,277 (ii) 0	(i) 403 (ii) 0	(i) 211,567 (ii) 0	(i) 0 (ii) 0
(4) MARTHA B MCKENNA	(i) 177,857 (ii) 0	(i) 0 (ii) 0	(i) 9,746 (ii) 0	(i) 14,229 (ii) 0	(i) 10,560 (ii) 0	(i) 212,392 (ii) 0	(i) 0 (ii) 0
(5) RANDY STABILE	(i) 170,903 (ii) 0	(i) 0 (ii) 0	(i) 287 (ii) 0	(i) 11,983 (ii) 0	(i) 380 (ii) 0	(i) 183,553 (ii) 0	(i) 0 (ii) 0
(6) JEFFREY HANDLER	(i) 182,650 (ii) 0	(i) 0 (ii) 0	(i) 304 (ii) 0	(i) 12,807 (ii) 0	(i) 5,797 (ii) 0	(i) 201,558 (ii) 0	(i) 0 (ii) 0
(7) MARY LOU DYMSKI	(i) 181,991 (ii) 0	(i) 0 (ii) 0	(i) 302 (ii) 0	(i) 13,672 (ii) 0	(i) 10,113 (ii) 0	(i) 206,078 (ii) 0	(i) 0 (ii) 0
(8) KAREN BOUDREAU SHEA	(i) 193,572 (ii) 0	(i) 0 (ii) 0	(i) 297 (ii) 0	(i) 14,540 (ii) 0	(i) 513 (ii) 0	(i) 208,922 (ii) 0	(i) 0 (ii) 0
(9) MARY D COLEMAN	(i) 157,063 (ii) 0	(i) 0 (ii) 0	(i) 262 (ii) 0	(i) 11,013 (ii) 0	(i) 6,169 (ii) 0	(i) 174,507 (ii) 0	(i) 0 (ii) 0
(10) STANLEY TRECKER	(i) 161,347 (ii) 0	(i) 0 (ii) 0	(i) 3,955 (ii) 0	(i) 11,307 (ii) 0	(i) 476 (ii) 0	(i) 177,085 (ii) 0	(i) 0 (ii) 0
(11) LEO F RICE JR	(i) 172,004 (ii) 0	(i) 0 (ii) 0	(i) 4,029 (ii) 0	(i) 0 (ii) 0	(i) 15,874 (ii) 0	(i) 191,907 (ii) 0	(i) 0 (ii) 0
(12) IRENE FOUNTAS	(i) 153,369 (ii) 0	(i) 0 (ii) 0	(i) 255 (ii) 0	(i) 12,290 (ii) 0	(i) 5,785 (ii) 0	(i) 171,699 (ii) 0	(i) 0 (ii) 0
(13) MARY PATRICIA LOHSE	(i) 146,661 (ii) 0	(i) 0 (ii) 0	(i) 233 (ii) 0	(i) 9,793 (ii) 0	(i) 10,375 (ii) 0	(i) 167,062 (ii) 0	(i) 0 (ii) 0
(14) JOSEPH CAMBONE	(i) 140,978 (ii) 0	(i) 0 (ii) 0	(i) 5,013 (ii) 0	(i) 10,591 (ii) 0	(i) 10,373 (ii) 0	(i) 166,955 (ii) 0	(i) 0 (ii) 0
(15) CHRISTOPHER JAMES	(i) 144,848 (ii) 0	(i) 0 (ii) 0	(i) 185 (ii) 0	(i) 10,125 (ii) 0	(i) 10,424 (ii) 0	(i) 165,582 (ii) 0	(i) 0 (ii) 0

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	WHEN THE PRESIDENT'S SPOUSE TRAVELS AND IT IS PAID FOR BY THE UNIVERSITY, SHE IS PERFORMING DUTIES ON BEHALF OF THE UNIVERSITY THE PRESIDENT RESIDES IN UNIVERSITY PROVIDED HOUSING, WHICH IS LESS THAN 1/2 MILE FROM MAIN CAMPUS THE PROVOST (UNTIL 6/30/12) RESIDED IN AN ON CAMPUS APARTMENT ON A PART TIME BASIS AND THE VALUE OF THE HOUSING IS ADDED TO HER INCOME THE UNIVERSITY PROVIDES A HOUSE CLEANER FOR THE PRESIDENT AND ALSO PERFORMS ALL NECESSARY MAINTAINENCE ON THE HOME THE PRESIDENT IS ALSO REIMBURSED FOR EXPENSES RELATING TO FINANCIAL SERVICES ADVICE
	PART I, LINES 4A-B	PART I, LINES 4A-B 4A KAREN BOUDREAU SHEA, \$90,680 4B JOSEPH MOORE, \$29,127
	PART I, LINE 7	FOR THE PRESIDENT OF THE UNIVERSITY, A BONUS OF UP TO \$35,000 MAY BE AWARDED THE BOARD OF TRUSTEES DETERMINES THE AMOUNT BASED ON THE BOARD'S ASSESSMENT OF THE PRESIDENT ACHIEVING CERTAIN AGREED UPON GOALS AND APPROVES THE DETERMINED AMOUNT FOR PAYMENT

**Schedule K
(Form 990)****2011****Open to Public
Inspection**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.

Name of the organization
LESLEY UNIVERSITYEmployer identification number
04-2103589**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 MASS DEVELOPMENT FINANCE AGENCY	04-3431814	57583F3B5	12-19-2003	26,000,000	REFINANCE EXISITING DEBT AND FUND NEW CAPITAL PROJECTS	X			X		X
B MASS DEVELOPMENT FINANCE AGENCY	04-3431814		05-19-2006	7,000,000	FUND NEW CAPITAL PROJECTS		X		X	X	
C MASS HEALTH AND EDUCATIONAL FACILITIES AUTHORITY	04-2456011	57586EGP0	03-10-2009	56,221,393	FUND NEW CAPITAL PROJECTS		X		X		X
D MASS DEVELOPMENT FINANCE AGENCY	04-3431814	57583R7Z2	03-30-2011	32,013,314	REFINANCE EXISITING DEBT AND FUND NEW CAPITAL PROJECTS		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired				
2	Amount of bonds defeased	26,000,000			
3	Total proceeds of issue	26,000,000	7,000,000	56,221,393	32,013,314
4	Gross proceeds in reserve funds		99,726	4,875,066	1,578,778
5	Capitalized interest from proceeds	294,767	112,114	30,568	428
6	Proceeds in refunding escrow	18,960,185			
7	Issuance costs from proceeds	520,000	35,000	611,025	497,603
8	Credit enhancement from proceeds			827,429	500,819
9	Working capital expenditures from proceeds				
10	Capital expenditures from proceeds	6,225,048	6,753,160	49,848,618	3,872,932
11	Other spent proceeds			28,687	1,672,796
12	Other unspent proceeds				
13	Year of substantial completion	2006	2007	2010	2013
		Yes	No	Yes	No
		X		X	
14	Were the bonds issued as part of a current refunding issue?	X		X	
15	Were the bonds issued as part of an advance refunding issue?	X		X	X
16	Has the final allocation of proceeds been made?	X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X	X

Part III Private Business Use

		A	B	C	D		
		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
2	Are there any lease arrangements that may result in private business use of bond-financed property?	X		X		X	X

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use?		X		X		X		X
b If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
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 %		0 500 %		1 510 %		3 460 %	
6 Total of lines 4 and 5	0 %		0 500 %		1 510 %		3 460 %	
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X		X	

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X
2 Is the bond issue a variable rate issue?	X		X		X			X
3a Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	X			X		X		X
b Name of provider	BANK OF AMERICA							
c Term of hedge	30 00000000000000							
d Was the hedge superintegrated?	X							
e Was a hedge terminated?	X							
4a Were gross proceeds invested in a GIC?		X		X		X		X
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
6 Did the bond issue qualify for an exception to rebate?		X		X		X		X

Part V Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations Yes No

Part VI Supplemental Information

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

Identifier	Return Reference	Explanation

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

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

Name of the organization
LESLEY UNIVERSITY

Employer identification number

04-2103589

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	12	78,610	FMV ON DATE OF SALE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (_____)				
26 Other ► (_____)				
27 Other ► (_____)				
28 Other ► (_____)				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement		29		0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a	No
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	No
b If "Yes," describe in Part II		
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part II

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

Identifier	Return Reference	Explanation
METHOD FOR DETERMINING NUMBER OF CONTRIBUTORS	PART I, COLUMN (B)	THE NUMBER REPORTED IN COLUMN (B) OF SCHEDULE M REPRESENTS THE NUMBER OF CONTRIBUTIONS OF EACH ITEM

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.

2011**Open to Public
Inspection**Name of the organization
LESLEY UNIVERSITY**Employer identification number**

04-2103589

Identifier	Return Reference	Explanation
PROGRAM SERVICE STATEMENT	LINE 4A CONTINUATION	CORE VALUES DEMOCRACY THE FUNDAMENTAL PURPOSE OF EDUCATION IN A DEMOCRATIC SOCIETY IS TO PROVIDE OPPORTUNITIES FOR ALL TO PARTICIPATE IN THE CULTURAL, POLITICAL, AND ECONOMIC LIFE OF THE NATION AND THE WORLD AT LESLEY, THESE DEMOCRATIC IDEALS ARE REFLECTED IN AN ACADEMIC ENVIRONMENT THAT ENCOURAGES SCHOLARSHIP, FREEDOM OF EXPRESSION, AND AN OPEN EXCHANGE OF IDEAS INQUIRY LESLEY UNIVERSITY IS DEVOTED TO ACADEMIC EXCELLENCE THROUGH ACTIVE, TRANSFORMATIVE TEACHING AND LEARNING, ARTISTIC CREATIVITY, CRITICAL INQUIRY, AND INDIVIDUAL DEVELOPMENT ACROSS THE LIFESPAN WE CREATE AND DELIVER INNOVATIVE INTERDISCIPLINARY PROGRAMS, WHILE VALUING HIGH-QUALITY INSTRUCTION, RESEARCH AND SCHOLARSHIP, ADVOCACY, AND OUTREACH TO LOCAL AND GLOBAL COMMUNITIES EQUITY WE VALUE AND RESPECT ALL INDIVIDUALS AND THEIR COMMUNITIES FOR THEIR UNIQUE BACKGROUNDS AND CAPACITIES LESLEY LEARNING COMMUNITIES EDUCATE STUDENTS TO PURSUE EDUCATIONAL, SOCIAL, SCIENTIFIC, AND ARTISTIC ENDEAVORS TO MEET THE NEEDS OF DIVERSE POPULATIONS AND UNDERSCORE THE IMPORTANCE OF SOCIAL JUSTICE COMMUNITY LEARNING IS A COLLECTIVE ENDEAVOR THAT INVOLVES STUDENTS, EDUCATORS, FAMILIES, AND COMMUNITIES WE BELIEVE IN THE POWER OF INDIVIDUALS, WORKING COLLABORATIVELY AND WITH INTEGRITY, TO BRING ABOUT CONSTRUCTIVE CHANGE IN LOCAL, NATIONAL, GLOBAL, AND ECOLOGICAL COMMUNITIES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	ONCE MANAGEMENT REVIEWS THE 990, IT IS FORWARDED TO THE AUDIT COMMITTEE FOR REVIEW. ONCE THE REVIEW BY THE AUDIT COMMITTEE IS COMPLETE, IT IS APPROVED BY THE AUDIT CHAIRPERSON. IT IS ALSO PLACED ON A SECURE WEBSITE FOR ALL THE TRUSTEES TO REVIEW PRIOR TO FILING.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR, EACH MEMBER OF THE BOARD OF TRUSTEES, ALL OFFICERS AND EACH KEY EMPLOYEE IS ASKED TO REVIEW THE UNIVERSITY'S CONFLICT OF INTEREST POLICY AND SUBMIT A DISCLOSURE STATEMENT REGARDING ANY CONFLICTS OF INTEREST THEY MAY HAVE. NEW TRUSTEES AND KEY EMPLOYEES ARE ASKED TO REVIEW THE POLICY AND SUBMIT A DISCLOSURE STATEMENT REGARDING ANY CONFLICTS OF INTEREST THEY MAY HAVE UPON COMMENCEMENT OF THEIR TERM OR THEIR EMPLOYMENT. THE ASSISTANT SECRETARY COLLECTS THE DISCLOSURE STATEMENTS. THE POLICY DESCRIBES A PROCESS FOR THE REVIEW OF POTENTIAL AND ACTUAL CONFLICTS OF INTEREST BY THE BOARD OF TRUSTEES OR A COMMITTEE OF THE BOARD.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	PRESIDENT MOORE'S EMPLOYMENT AGREEMENT AND COMPENSATION WERE REVIEWED AND APPROVED IN ADVANCE BY THE INDEPENDENT MEMBERS OF THE UNIVERSITY'S BOARD OF TRUSTEES IN MAKING ITS DECISION, THE BOARD OF TRUSTEES REVIEWED COMPARABILITY DATA PROVIDED BY A THIRD-PARTY COMPENSATION CONSULTANT. THE BOARD'S DECISION WAS CONTEMPORANEOUSLY DOCUMENTED IN THE MINUTES OF THE BOARD MEETING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	ALL GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST OUR FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE NACUBO WEBSITE OUR FORMS 990 (CURRENT AND PRIOR THREE YEARS) ARE ALSO AVAILABLE ON THE OFFICIAL WEBSITE OF THE ATTORNEY GENERAL OF MASSACHUSETTS AT WWW CHARITIES AGO STATE MA US AND GUIDESTAR AT WWW2 GUIDESTAR ORG WE ALSO MAKE OUR FORM 990, IRS DETERMINATION LETTER, FORM 990-T, ARTICLES OF ORGANIZATION, AND BYLAWS AVAILABLE TO THE PUBLIC UPON REQUEST OUR AUDITED FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE OFFICIAL WEBSITE OF THE ATTORNEY GENERAL OF MASSACHUSETTS AT WWW CHARITIES AGO STATE MA US

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -4,021,255

Additional Data

Software ID:
Software Version:
EIN: 04-2103589
Name: LESLEY UNIVERSITY

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

4d. Other program services

(Code) (Expenses \$	16,897,778	including grants of \$	16,897,778) (Revenue \$)
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EXPENSES RELATED TO FINANCIAL AID FOR STUDENTS THE PURPOSE OF FINANCIAL AID IS TO HELP YOU ATTAIN YOUR GOAL OF A LESLEY UNIVERSITY EDUCATION, BY OFFERING FINANCIAL ASSISTANCE IN THE FORM OF GRANTS, LOANS, AND STUDENT WORK OPPORTUNITIES PLEASE BE ASSURED THAT DESPITE THE CURRENT ECONOMIC SITUATION, THE OFFICE OF FINANCIAL AID REMAINS VERY VIGILANT AND HAS BEEN PROACTIVE IN ASSURING THAT BOTH FEDERAL AND PRIVATE EDUCATIONAL LOAN OPTIONS ARE AVAILABLE TO STUDENTS

(Code) (Expenses \$	10,110,410	including grants of \$) (Revenue \$	12,951,119)
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AUXILIARY ENTERPRISES

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	Office	Key employee	Highest compensated employee			
HON JOYCE LONDON ALEXANDER TRUSTEE	1 00	X					0	0	0
MRS GERALDINE M BLOOMBERG TRUSTEE	1 00	X					0	0	0
MS JEAN AXLINE TRUSTEE	1 00	X					0	0	0
MR HAL BELODOFF TRUSTEE	1 00	X					0	0	0
MRS KAREN COTTON CHAPLIN TRUSTEE	1 00	X					0	0	0
MR RICHARD A JALKUT TRUSTEE	1 00	X					0	0	0
MS JUANITA JAMES TRUSTEE	1 00	X					0	0	0
MS JANA KARP TRUSTEE	1 00	X					0	0	0
MR MATTHEW KOZOL TRUSTEE	1 00	X					0	0	0
MS EILEEN LADIEU TRUSTEE	1 00	X					0	0	0
MS JACQUELINE LEACH TRUSTEE	1 00	X					0	0	0
MR MICHAEL E MOONEY TRUSTEE	1 00	X					0	0	0
MRS CAROL C MORIARTY TRUSTEE	1 00	X					0	0	0
MS MICHELLE O'BRIEN TRUSTEE, CLERK	1 00	X		X			0	0	0
MR JOHN O PARKER TRUSTEE	1 00	X					0	0	0
MR DONALD M PERRIN TRUSTEE	1 00	X					0	0	0
MRS DEBORAH SCHWARTZ RAIZES TRUSTEE, CHAIR	1 00	X		X			0	0	0
DR JOTHY ROSENBERG TRUSTEE	1 00	X					0	0	0
MS BARBARA RUSSELL TRUSTEE, TREASURER	1 00	X		X			0	0	0
MR ROBERT SAGE TRUSTEE	1 00	X					0	0	0
MRS NAOMI NASON SKOLER TRUSTEE	1 00	X					0	0	0
MR KENNETH Z SLATER TRUSTEE	1 00	X					0	0	0
MR GARY SMITH TRUSTEE	1 00	X					0	0	0
MS ENID M STARR TRUSTEE	1 00	X					0	0	0
MS JANET STEINMAYER TRUSTEE	1 00	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			
MS LORING LOW STEVENS TRUSTEE	1 00	X					0	0	0
MR HANS D STRAUCH TRUSTEE, VICE CHAIR	1 00	X		X			0	0	0
MR DAVID A SWOPE TRUSTEE	1 00	X					0	0	0
MR CARL M YOUNGMAN TRUSTEE	1 00	X					0	0	0
JOSEPH B MOORE PRESIDENT	40 00	X		X			392,002	0	83,231
BERNICE BRADIN VP OF FINANCE/CFO	40 00			X			197,865	0	19,778
MARY LOU BATT VP OF ADMINISTRATION	40 00			X			195,887	0	15,680
MARTHA B MCKENNA PROVOST (UNTIL 8/11/11)	40 00			X			187,603	0	24,789
SHIRIN PHILIPP GENERAL COUNSEL	40 00			X			70,917	0	4,485
KATHERINE MCWEY ASST SECRETARY	40 00			X			68,378	0	15,800
WAYNE SELASE WILLIAMS PROVOST	40 00			X			112,000	0	276
RANDY STABILE VP OF ADVANCEMENT	40 00				X		171,190	0	12,363
JEFFREY HANDLER VP OF ENROLLMENT PLANNING	40 00				X		182,954	0	18,604
MARY LOU DYMSKI VP OF BUDGETING & FIN PLAN	40 00				X		182,293	0	23,785
KAREN BOUDREAU SHEA CHIEF INFO OFFICER & DIR	40 00				X		193,869	0	15,053
MARY D COLEMAN DEAN OF LESLEY COLLEGE	40 00				X		157,325	0	17,182
STANLEY TRECKER DEAN OF THE ART INST OF BOSTON	40 00				X		165,302	0	11,783
LEO F RICE JR DIRECTOR OF MARKETING	40 00					X	176,033	0	15,874
IRENE FOUNTAS DIRECTOR, READING RECOVERY	40 00					X	153,624	0	18,075
MARY PATRICIA LOHSE CHIEF OF STAFF	40 00					X	146,894	0	20,168
JOSEPH CAMBONE SENIOR ASSOCIATE DEAN	40 00					X	145,991	0	20,964
CHRISTOPHER JAMES PROFESSOR	40 00					X	145,033	0	20,549