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Form 990

Return of Organization Exempt From Income Tax

2011

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

► The organization may have to use a copy of this return to satisfy state reporting requirements

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
WALSH UNIVERSITY INC

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
2020 EAST MAPLE STCity or town, state or country, and ZIP + 4
NORTH CANTON, OH 447203396F Name and address of principal officer
RICHARD JUSSEAUME
2020 EAST MAPLE ST
NORTH CANTON, OH 447203396D Employer identification number
34-0868798E Telephone number
(330) 499-7090

G Gross receipts \$ 72,351,078

I Tax-exempt status 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527H(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 ►

J Website: ► WWW WALSH EDU

K Form of organization Corporation Trust Association Other ►

L Year of formation 1958

M State of legal domicile OH

Part I Summary

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

WALSH UNIVERSITY IS AN INDEPENDENT, COEDUCATIONAL CATHOLIC, LIBERAL ARTS AND SCIENCES INSTITUTION FOUNDED BY THE BROTHERS OF CHRISTIAN INSTRUCTION, WALSH UNIVERSITY IS DEDICATED TO EDUCATING ITS STUDENTS TO BECOME LEADERS IN SERVICE TO OTHERS THROUGH A VALUES-BASED EDUCATION WITH AN INTERNATIONAL PERSPECTIVE IN THE JUDEO-CHRISTIAN TRADITION WALSH UNIVERSITY BELIEVES IN THE DESIRABILITY OF A SMALL UNIVERSITY THAT PROMOTES ACADEMIC EXCELLENCE, A DIVERSE COMMUNITY AND CLOSE STUDENT-TEACHER INTERACTIONS THE UNIVERSITY PROVIDES ITS STUDENTS A HIGHER EDUCATION THAT FOSTERS CRITICAL THINKING, EFFECTIVE COMMUNICATION, SPIRITUAL GROWTH, AND PERSONAL, PROFESSIONAL AND CULTURAL DEVELOPMENT WALSH UNIVERSITY ENCOURAGES INDIVIDUALS TO ACT IN ACCORDANCE WITH REASON GUIDED BY THE EXAMPLE AND TEACHINGS OF JESUS CHRIST

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 35

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

4 33

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

5 1,616

6 Total number of volunteers (estimate if necessary)

6 310

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

7a -200,993

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

7b -200,993

8 Contributions and grants (Part VIII, line 1h)

Prior Year Current Year

3,579,892 2,011,186

9 Program service revenue (Part VIII, line 2g)

61,684,254 65,609,114

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

275,773 363,935

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

421,044 418,942

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

65,960,963 68,403,177

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

20,115,119 21,529,082

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)

22,970,107 24,781,938

16a Professional fundraising fees (Part IX, column (A), line 11e)

5,000 0

b Total fundraising expenses (Part IX, column (D), line 25) ► 850,109

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18,619,616 17,904,372

18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)

61,709,842 64,215,392

19 Revenue less expenses Subtract line 18 from line 12

4,251,121 4,187,785

20 Total assets (Part X, line 16)

Beginning of Current Year End of Year

93,229,994 95,845,724

21 Total liabilities (Part X, line 26)

33,679,434 32,668,688

22 Net assets or fund balances Subtract line 21 from line 20

59,550,560 63,177,036

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

2013-01-29

Date

MICHELLE BROWN VP FINANCE & BUSINESS AFFAIRS

Type or print name and title

Paid
Preparer's
Use Only

Preparer's signature ► DANIEL R RIEMENSCHNEIDER Date Check if self-employed ► Preparer's taxpayer identification number (see instructions) P00074065

Firm's name (or yours if self-employed), address, and ZIP + 4 ► BRUNER-COX LLP EIN ► 34-0641962

PO BOX 35429 Phone no ► (330) 497-2000

CANTON, OH 447355429

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

Statement of Program Service Accomplishments

Statement of Program Service Accomplishments
Check if Schedule O contains a response to any question in this Part II

1

1 Briefly describe the organization's mission

WALSH UNIVERSITY IS AN INDEPENDENT, COEDUCATIONAL CATHOLIC, LIBERAL ARTS AND SCIENCES INSTITUTION FOUNDED BY THE BROTHERS OF CHRISTIAN INSTRUCTION, WALSH UNIVERSITY IS DEDICATED TO EDUCATING ITS STUDENTS TO BECOME LEADERS IN SERVICE TO OTHERS THROUGH A VALUES-BASED EDUCATION WITH AN INTERNATIONAL PERSPECTIVE IN THE JUDEO-CHRISTIAN TRADITION WALSH UNIVERSITY BELIEVES IN THE DESIRABILITY OF A SMALL UNIVERSITY THAT PROMOTES ACADEMIC EXCELLENCE, A DIVERSE COMMUNITY AND CLOSE STUDENT-TEACHER INTERACTIONS THE UNIVERSITY PROVIDES ITS STUDENTS A HIGHER EDUCATION THAT FOSTERS CRITICAL THINKING, EFFECTIVE COMMUNICATION, SPIRITUAL GROWTH, AND PERSONAL, PROFESSIONAL AND CULTURAL DEVELOPMENT WALSH UNIVERSITY ENCOURAGES INDIVIDUALS TO ACT IN ACCORDANCE WITH REASON GUIDED BY THE EXAMPLE AND TEACHINGS OF JESUS CHRIST

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 programs or 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 \$ 57,522,378 including grants of \$ 21,529,082) (Revenue \$ 65,609,114

THE UNIVERSITY PROVIDES APPROXIMATELY 3,000 STUDENTS ON SIX CAMPUS LOCATIONS A HIGHER EDUCATION THAT FOSTERS CRITICAL THINKING, EFFECTIVE COMMUNICATION, SPIRITUAL GROWTH, AND PERSONAL, PROFESSIONAL AND CULTURAL DEVELOPMENT. THE UNIVERSITY OFFERS THE FOLLOWING DEGREES: ASSOCIATE OF ARTS, ASSOCIATE OF SCIENCE IN COMPUTER SCIENCE, BACHELOR OF ARTS, BACHELOR OF SCIENCE, BACHELOR OF SCIENCE IN EDUCATION, BACHELOR OF SCIENCE IN NURSING, MASTER OF ARTS IN EDUCATION, MASTER OF BUSINESS ADMINISTRATION (MBA), MASTER OF ARTS IN COUNSELING AND HUMAN DEVELOPMENT, MASTER OF ARTS IN THEOLOGY, MASTER OF SCIENCE IN NURSING, DOCTOR OF NURSING PRACTICE, DOCTOR OF PHYSICAL THERAPY. WALSH UNIVERSITY IS ACCREDITED BY THE FOLLOWING: NORTH CENTRAL ASSOCIATION/HIGHER LEARNING COMMISSION, NATIONAL LEAGUE FOR NURSING ACCREDITING COMMISSION, THE COMMISSION ON ACCREDITATION IN PHYSICAL THERAPY EDUCATION, COUNCIL FOR ACCREDITATION OF COUNSELING AND RELATED EDUCATIONAL PROGRAMS, OHIO DEPARTMENT OF EDUCATION, OHIO BOARD OF COUNSELING & SOCIAL WORK, AMERICAN PHYSICAL THERAPY ASSOCIATION. WALSH UNIVERSITY'S LIBRARY HOUSES 132,890 VOLUMES, 226 PAPER SUBSCRIPTIONS, 105,520 ELECTRONIC PERIODICALS, 142,705 ELECTRONIC BOOKS, 208 ELECTRONIC DATABASES, 4,066 AUDIO VISUAL TITLES ON PHYSICAL MEDIA AND 9,471 STREAMING EDUCATIONAL VIDEOS. THE WALSH LIBRARY IS A MEMBER OF OCLC, OHIOLINK, OHIONET AND OPAL (OHIO PRIVATE ACADEMIC LIBRARIES) AND ALL LIBRARY RESOURCES ARE SEARCHABLE THROUGH THE INTERNET. THE STUDENT AFFAIRS TEAM IS A DIVERSE COLLECTION OF EDUCATORS COMMITTED TO THE HOLISTIC DEVELOPMENT OF STUDENTS, FIRMLY BELIEVING THAT ALL STUDENTS HAVE THE POTENTIAL TO BECOME VALUABLE ASSETS TO OUR WORLD COMMUNITY. MEMBERS OF THE STUDENT AFFAIRS TEAM EMBODY THE CHRISTIAN VALUES ESPoused IN THE UNIVERSITY MISSION STATEMENT, ENFLESHED BY OUR CARE AND CONCERN FOR STUDENTS, RELATIONSHIPS, AND THE COMMUNITY. WALSH UNIVERSITY PROVIDES OVER 1000 STUDENTS WITH HOUSING AND DINING SERVICES. SEVERAL OF THE NINE RESIDENCE HALLS ARE NEWLY CONSTRUCTED AND OFFER APARTMENT-STYLE AND SUITE-STYLE LIVING. DINING SERVICE FACILITIES INCLUDE THE SCHERVISH DINING HALL, THE BETZLER GRILLE, THE CAVALIER CAFE AND THE C-STORE OFFERING VARIOUS MEAL PLAN SELECTIONS AND DINING INNOVATIONS. WALSH UNIVERSITY'S ATHLETIC PROGRAM OFFERS 20 DIFFERENT MEN'S AND WOMEN'S ATHLETIC TEAMS AND CONTINUES TO ENJOY A WINNING TRADITION. WALSH HAS WON THE AMERICAN MIDEAST CONFERENCE (AMC) ALL-SPORTS AWARD AND NUMEROUS SPORTS CONFERENCE CHAMPIONSHIPS. IN 1998 WALSH WON ITS FIRST NAIA NATIONAL CHAMPIONSHIP BY WINNING THE WOMEN'S BASKETBALL TITLE, AND IN 2005 THE MEN'S BASKETBALL TEAM FOLLOWED WITH A NATIONAL CHAMPIONSHIP. IN 2011, THE MEN'S BASKETBALL TEAM CAPTURED ITS SEVENTH CONSECUTIVE AMC CHAMPIONSHIP TITLE AND ADVANCED AS FAR AS THE SWEET 16 OF THE NAIA CHAMPIONSHIP TOURNAMENT. IN ADDITION, THE WOMEN'S BASKETBALL TEAM WON ITS FIRST REGULAR AMC CHAMPIONSHIP SINCE 1989 AND REACHED THE FINAL FOUR IN THE NAIA CHAMPIONSHIP TOURNAMENT. WALSH'S 30 WINS ARE THE MOST IN SCHOOL HISTORY. THE WOMEN'S BASKETBALL TEAM WAS ONE OF FOUR NUMBER ONE SEEDS AT THE NATIONAL TOURNAMENT. DURING THE 2011-12 ACADEMIC YEAR, WALSH WAS IN CANDIDACY YEAR TWO FOR NCAA DIVISION II MEMBERSHIP, WHICH PROHIBITED THEM FROM COMPETING FOR A NATIONAL CHAMPIONSHIP WHILE STILL A MEMBER OF THE AMERICAN MIDEAST CONFERENCE. THE CAVS PRODUCED CHAMPIONS IN MEN'S SOCCER, MEN'S BASKETBALL, MEN AND WOMEN'S TRACK, VOLLEYBALL AND SOFTBALL. WALSH UNIVERSITY ATHLETICS HAS MOVED FROM CANDIDACY YEAR TWO TO PROBATIONARY STATUS FOR THE 2012-1013 ACADEMIC YEAR. RECENTLY, WALSH WAS ADMITTED INTO MEMBERSHIP OF THE GREAT LAKES INTERCOLLEGIATE ATHLETIC CONFERENCE OF THE NCAA II AND WILL COMPETE FOR SOME SELECTED CONFERENCE CHAMPIONSHIPS IN 2012-2013 AND FOR ALL CONFERENCE CHAMPIONSHIPS ONCE THE ATHLETICS PROGRAM IS GRANTED FULL MEMBERSHIP INTO THE NCAA II (ANTICIPATED DATE OF JULY 2013). WALSH'S NEW BIRK CENTER FOR THE ARTS OPENED IN JANUARY 2012. THE 13,002 SQUARE FOOT STRUCTURE PROVIDES A NURTURING HOME FOR THE CREATIVE ARTS ON OUR CAMPUS, SUPPORTING ACADEMIC AND CO-CURRICULAR PROGRAMS IN MUSIC, VISUAL ART, DRAMA AND DANCE. IT WILL ALSO HOUSE NEW COMMUNITY BASED PROJECTS TO PROVIDE OUTREACH IN THE ARTS TO YOUTH AS WELL AS ADULTS. CONSTRUCTION BEGAN IN MARCH 2012 ON THE 29,000 SQUARE FOOT, 69-BED RESIDENCE HALL ADDITION TO LEMMON HALL AND CONNECTS TO THAT BUILDING ON THE FIRST FLOOR THROUGH SUITE-STYLE ACCOMMODATIONS, THE NEW ADDITION REFERRED TO AS "THE COMMONS". FOR NOW, WILL HOUSE HONORS AND INTERNATIONAL STUDENTS AS WELL AS THE INAUGURAL CLASS OF THE BROTHER BLOUN GLOBAL SCHOLARS PROGRAM.

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule Q)

**Other programs
(Expenses \$)**

including grants of s

) (Revenue

4e Total program service expenses

57.522.378

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 XI.

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		No
5		No
6		No
7		No
8	Yes	
9		No
10	Yes	
11a	Yes	
11b		No
11c		No
11d		No
11e	Yes	
11f	Yes	
12a	Yes	
12b		No
13	Yes	
14a	Yes	
14b	Yes	
15		No
16		No
17		No
18	Yes	
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	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer 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	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	29	No	
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	125
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	1,616
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	Yes
b	If "Yes," enter the name of the foreign country IT 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?		
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?		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. 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	13a	
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	13b	
c	Enter the aggregate amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year

1a	35
1b	33

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?

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?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

6 Did the organization have members or stockholders?

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?

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

a The governing body?

b Each committee with authority to act on behalf of the governing body?

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

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

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

10a Did the organization have local chapters, branches, or affiliates?

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?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

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

b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

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

b Other officers or key employees of the organization

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?

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?

	Yes	No
10a		No
10b		
11a	Yes	
12a	Yes	
12b	Yes	
12c	Yes	
13	Yes	
14		No
15a	Yes	
15b		No
16a		No
16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ►

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you 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 ►
 MICHELLE BROWN VP FOR FINANCE & BUSINESS AFFAIRS
 WALSH UNIVERSITY INC
 NORTH CANTON, OH 447203396
 (330) 490-7134

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 VII

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 **►7**

	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
SODEXO INC & AFFILIATES 4880 PAYSHERE CIRCLE CHICAGO, IL 60674	DINING SERVICES	2,710,824
FRED OLIVIER CONSTRUCTION CO 6315 PROMWAY AVE NW NORTH CANTON, OH 44720	CONSTRUCTION CONTRACTOR	1,486,592
MOTTER & MEADOWS 600 MARKET AVE N CANTON, OH 44702	ARCHITECT	153,077
PARAGRAPHICS INC 2011 29TH ST NW CANTON, OH 44709	PRINTING & MAILING SERVICES	103,814

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. **4**

Part VII Statement of Revenue

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	20,619	20,619		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	21,508,463	21,508,463		
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	609,264	165,796	443,468	
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	19,700,416	17,625,933	1,575,798	498,685
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	795,184	687,918	77,786	29,480
9 Other employee benefits	2,079,551	1,807,113	224,127	48,311
10 Payroll taxes	1,597,523	1,409,945	146,127	41,451
11 Fees for services (non-employees)				
a Management				
b Legal	46,157		46,157	
c Accounting	145,399	200	145,199	
d Lobbying				
e Professional fundraising See Part IV, line 17				
f Investment management fees				
g Other	1,521,446	1,180,371	329,674	11,401
12 Advertising and promotion	652,455	361,742	288,248	2,465
13 Office expenses	3,151,588	1,614,433	1,451,876	85,279
14 Information technology				
15 Royalties				
16 Occupancy	1,931,189	1,890,197	40,047	945
17 Travel	1,284,256	1,168,815	71,652	43,789
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	386,013	386,007	6	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,333,560	3,325,252	7,791	517
23 Insurance	243,814	82,643	161,171	
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 OTHER AUXILIARY	2,710,741	2,610,097	46,139	54,505
b OTHER INSTRUCTIONAL EXP	1,096,343	1,081,759	12,914	1,670
c OTHER ACADEMIC SUPPORT	560,329	181,400	374,666	4,263
d DUES/MEMBERSHIPS/SUBSCR	390,215	293,257	90,177	6,781
e				
f All other expenses	450,867	120,418	309,882	20,567
25 Total functional expenses. Add lines 1 through 24f	64,215,392	57,522,378	5,842,905	850,109
26 Joint costs. Check here <input type="checkbox"/> <input checked="" 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	89,858	1 29,266
	2 Savings and temporary cash investments	12,672,501	2 11,763,096
	3 Pledges and grants receivable, net	2,629,034	3 2,346,956
	4 Accounts receivable, net	2,369,968	4 2,716,768
	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	2,456,651	7 2,495,235
	8 Inventories for sale or use	23,145	8 24,813
	9 Prepaid expenses and deferred charges	62,686	9 267,271
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	100,567,881
	b Less accumulated depreciation	10b	37,432,509
		61,248,416	10c 63,135,372
	11 Investments—publicly traded securities	7,550,937	11 8,201,500
	12 Investments—other securities See Part IV, line 11	3,794,567	12 4,530,282
	13 Investments—program-related See Part IV, line 11	13	
	14 Intangible assets	14	
	15 Other assets See Part IV, line 11	332,231	15 335,165
	16 Total assets. Add lines 1 through 15 (must equal line 34)	93,229,994	16 95,845,724
Liabilities	17 Accounts payable and accrued expenses	2,533,158	17 2,864,476
	18 Grants payable	18	
	19 Deferred revenue	278,696	19 353,723
	20 Tax-exempt bond liabilities	28,125,000	20 26,625,000
	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	23	
	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	2,742,580	25 2,825,489
	26 Total liabilities. Add lines 17 through 25	33,679,434	26 32,668,688
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	45,373,234	27 49,089,932
	28 Temporarily restricted net assets	5,394,747	28 4,946,159
	29 Permanently restricted net assets	8,782,579	29 9,140,945
	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	59,550,560	33 63,177,036
	34 Total liabilities and net assets/fund balances	93,229,994	34 95,845,724

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	68,403,177
2	Total expenses (must equal Part IX, column (A), line 25)	2	64,215,392
3	Revenue less expenses Subtract line 2 from line 1	3	4,187,785
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	59,550,560
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-561,309
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	63,177,036

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"/>	<input checked="" type="checkbox"/>
2b Were the organization's financial statements audited by an independent accountant?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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"/>	<input type="checkbox"/>
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"/>	<input checked="" type="checkbox"/>
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 checked="" type="checkbox"/>	<input type="checkbox"/>

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
WALSH UNIVERSITY INC

Employer identification number

34-0868798

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

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
WALSH UNIVERSITY INC**Employer identification number**

34-0868798

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 ► \$ 283,902

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 <input checked="" type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other
c <input type="checkbox"/> 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	12,528,287	8,917,193	7,189,514	8,003,022	
b Contributions	1,147,061	2,173,087	1,280,315	818,304	
c Investment earnings or losses	104,398	1,848,465	825,164	-1,582,915	
d Grants or scholarships	322,511	290,332	328,229		
e Other expenditures for facilities and programs	126,443	120,126	49,571	48,897	
f Administrative expenses					
g End of year balance	13,330,792	12,528,287	8,917,193	7,189,514	

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

a Board designated or quasi-endowment ► 31 700 %

b Permanent endowment ► 68 300 %

c Term endowment ►

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

3a(i)	Yes	No
3a(ii)	Yes	No

b 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.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		1,116,776			1,116,776
b Buildings		70,077,052	18,714,594	51,362,458	
c Leasehold improvements		1,085,650	568,373	517,277	
d Equipment		16,037,315	13,712,156	2,325,159	
e Other		12,251,088	4,437,386	7,813,702	
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)					63,135,372

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		
Other		

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	68,403,177
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	64,215,392
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,187,785
4	Net unrealized gains (losses) on investments	4	-450,297
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-111,012
9	Total adjustments (net) Add lines 4 - 8	9	-561,309
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,626,476

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	47,352,665
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-450,297
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	-21,612,872
e	Add lines 2a through 2d	2e	-22,063,169
3	Subtract line 2e from line 1	3	69,415,834
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	
b	Other (Describe in Part XIV)	4b	-1,012,657
c	Add lines 4a and 4b	4c	-1,012,657
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	68,403,177

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

1	Total expenses and losses per audited financial statements	1	43,726,189
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	1,019,260
e	Add lines 2a through 2d	2e	1,019,260
3	Subtract line 2e from line 1	3	42,706,929
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	
b	Other (Describe in Part XIV)	4b	21,508,463
c	Add lines 4a and 4b	4c	21,508,463
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	64,215,392

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
	PART III, LINE 4	WALSH UNIVERSITY OWNS THE HOOVER HISTORICAL CENTER OF WALSH UNIVERSITY, WHICH IS A SMALL MUSEUM THAT HOUSES A COLLECTION OF VACUUM CLEANERS AND OTHER ITEMS FROM THE HOOVER COMPANY. THE HOOVER HISTORICAL CENTER WAS DONATED TO WALSH UNIVERSITY IN 2004 AND NOW SUPPORTS THE MUSEUM STUDIES PROGRAM AT THE UNIVERSITY
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE MAJORITY OF THE ENDOWMENT FUNDS ARE USED FOR SCHOLARSHIPS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE UNIVERSITY IS A NONPROFIT ORGANIZATION AS DESCRIBED IN INTERNAL REVENUE CODE SECTION 501(C) (3) AND IS EXEMPT FROM INCOME TAXES PURSUANT TO SECTION 501(A) OF THE CODE. THE UNIVERSITY FOLLOWS ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES TOPIC OF THE FASB ACCOUNTING STANDARDS CODIFICATION, WHICH ADDRESSES THE INFORMATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE UNIVERSITY MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. IN ADDITION, THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS. MANAGEMENT HAS DETERMINED THAT THE EFFECTS OF THIS PRONOUNCEMENT TO BE INSIGNIFICANT, THEREFORE NO ADJUSTMENTS HAVE BEEN RECORDED AND NO FURTHER DISCLOSURES REQUIRED
PART XI, LINE 8 - OTHER ADJUSTMENTS		GAIN/LOSS ON DERIVATIVES -104,409 NET INCOME FROM KENTUCKY DERBY & FASHION SHOW FUNDRAISING EVENTS -6,603 TOTAL TO SCHEDULE D, PART XI, LINE 8 - 111,012
PART XII, LINE 2D - OTHER ADJUSTMENTS		TUITION DISCOUNTS -21,508,463 INTEREST RATE SWAP -104,409
PART XII, LINE 4B - OTHER ADJUSTMENTS		RENTAL EXPENSES SHOWN ON 990 PART VIII LN 6B - 794,360 FUNDRAISING EXPENSES SHOWN ON 990 PART VIII LN 8B -44,533 LOSS ON SALE OF FIXED ASSETS SHOWN ON 990 PART VIII LN 7C -198,127 REVENUE FROM KENTUCKY DERBY & FASHION SHOW FUNDRAISING EVENTS 24,363
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES SHOWN ON 990 PART VIII LN 6B 794,360 FUNDRAISING EXPENSES SHOWN ON 990 PART VIII LN 8B 44,533 LOSS ON SALE OF FIXED ASSETS SHOWN ON 990 PART VIII LN 7C 198,127 EXPENSES FROM KENTUCKY DERBY & FASHION SHOW FUNDRAISING EVENTS -17,760
PART XIII, LINE 4B - OTHER ADJUSTMENTS		TUITION DISCOUNTS 21,508,463

2011

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(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
WALSH UNIVERSITY INC

Employer identification number

34-0868798

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	LOCAL NEWSPAPERS AND OTHER PRINT MEDIA OF GENERAL CIRCULATION
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	FUNDS ARE PROVIDED BY GOVERNMENT AGENCIES UNDER VARIOUS FINANCIAL ASSISTANCE PROGRAMS AND ARE LOANED TO QUALIFIED STUDENTS. THE RECEIPT OF SUCH FUNDS GENERALLY REQUIRES COMPLIANCE AUDITS SO THAT THE TERMS AND CONDITIONS OF THE GRANTOR ARE MET

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

34-0868798

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

Part V Supplemental Information

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

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2011

**Open to Public
Inspection**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

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

F Attach to Form 990 or Form 990 EZ. **F** See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization

WALSH UNIVERSITY INC

Employer identification number

34-0868793

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

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

- a** Mail solicitations
- b** Internet and e-mail solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes No

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

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

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

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events (Add col (a) through col (c))
		<u>LAS VEGAS NIGHT</u> (event type)	<u>FAREY RAFFLE</u> (event type)	<u>2</u> (total number)	
1	Gross receipts . . .	32,530	24,447	29,943	86,920
2	Less Charitable contributions . . .			5,580	5,580
3	Gross income (line 1 minus line 2) . . .	32,530	24,447	24,363	81,340
4	Cash prizes . . .				
5	Non-cash prizes . . .				
6	Rent/facility costs . . .	504			504
7	Food and beverages . . .				
8	Entertainment . . .				
9	Other direct expenses . . .	7,149	19,120	17,760	44,029
10	Direct expense summary Add lines 4 through 9 in column (d)				(44,533)
11	Net income summary Combine lines 3 and 10 in column (d)				36,807

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

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

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

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

b If "No," Explain _____

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

b If "Yes," Explain _____

11 Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in

13a	
13b	

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

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

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

c If "Yes," enter name and address

Name ►

Address ►

16 Gaming manager information

Name ►

Gaming manager compensation ► \$ _____

Description of services provided ►

Director/officer

Employee

Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

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

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

Identifier

ReturnReference

Explanation

**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
WALSH UNIVERSITY INC

Employer identification number

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 FOR STUDENTS	1888	19,686,705			
(2) DISCOUNTS ON TUITION FOR STUDENTS	298	1,821,758			

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
		Schedule I (Form 990) 2011

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

OMB No 1545-0047

2011**Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

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

Name of the organization
WALSH UNIVERSITY INC**Employer identification number**

34-0868798

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 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 checked="" type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input 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		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
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.

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	THE PRESIDENT'S CONTRACT INCLUDES A HOUSING ALLOWANCE THAT THE UNIVERSITY PAYS AS PART OF HIS WAGES ALSO, COUNTRY CLUB DUES ARE PAID BY THE UNIVERSITY, AND THE PRESIDENT IS TAXED ON HIS W-2 FOR THE PERSONAL PORTION OF THOSE DUES

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

Department of the Treasury
Internal Revenue ServiceName of the organization
WALSH UNIVERSITY INCEmployer identification number
34-0868798**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 OHIO HIGHER EDUCATION EDUCATION FACILITY COMMISSION	34-6849674		11-19-2009	30,000,000	REFUNDING ISSUE		X		X		X

Part II Proceeds

1	Amount of bonds retired	A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
2	Amount of bonds defeased								
3	Total proceeds of issue		30,000,000						
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds								
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds								
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2007		Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?								
15	Were the bonds issued as part of an advance refunding issue?				X				
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X						

Part III Private Business Use

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

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
	X							
3a Are there any management or service contracts that may result in private business use?								
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?	X							
c Are there any research agreements that may result in private business use of bond-financed property?		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 ►	0 240 %							
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 ►	0 800 %							
6 Total of lines 4 and 5	1 040 %							
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	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						
2 Is the bond issue a variable rate issue?	X							
3a Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was a hedge terminated?								
4a Were gross proceeds invested in a GIC?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		X						
6 Did the bond issue qualify for an exception to rebate?	X							

Part 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 L

Transactions with Interested Persons

OMB No 1545-0047

2011

Department of the Treasury
Internal Revenue Service

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

**Open to Public
Inspection**

Name of the organization
WALSH UNIVERSITY INC

Employer identification number

34-086879

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

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

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a.

Part III Grants or Assistance Benefitting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) AULTCARE INSURANCE COMPANY	EDWARD ROTH III IS A BOARD MEMBER OF WALSH AND EXECUTIVE VP OF AULTCARE	772,550	THE UNIVERSITY CONTRACTS WITH AULTCARE INSURANCE COMPANY FOR HEALTH AND DENTAL INSURANCE AS WELL AS THE THIRD PARTY ADMINISTRATOR (AULTRA/AULTRA SELF) OF OUR HEALTH AND DEPENDENT CARE FLEXIBLE SPENDING ACCOUNTS EDWARD J ROTH, III IS CURRENTLY A MEMBER OF THE UNIVERSITY'S BOARD OF DIRECTORS AND IS THE PRESIDENT OF AULTMAN HEALTH FOUNDATION THE SELECTION OF AULTCARE WAS MADE PRIOR TO MR ROTH'S APPOINTMENT TO THE BOARD EVERY TWO YEARS, THE UNIVERSITY RECEIVES COMPETITIVE QUOTES FROM THE RESULTS OF THE MARKET RESEARCH PERFORMED BY OUR BROKERS IF AND WHEN ANY ISSUES CONCERNING AULTCARE ARE TAKEN TO THE BOARD, MR ROTH WILL FOLLOW THE GUIDELINES SET BY THE CONFLICT OF INTEREST POLICY AND WILL ABSTAIN FROM VOTING		No
(2) MERCY MEDICAL	THOMAS CECCONI IS PRESIDENT & CEO OF MERCY MEDICAL AND WALSH BOARD MEMBER	111,561	THE UNIVERSITY CONTRACTS WITH MERCY MEDICAL CENTER, INC TO PROVIDE ATHLETIC TRAINING SERVICES FOR THE UNIVERSITY'S ATHLETIC PROGRAM MERCY MEDICAL CENTER'S WORK HEALTH & SAFETY SERVICES ALSO PROVIDE A STUDENT HEALTH CENTER MANAGEMENT PROGRAM AT THE UNIVERSITY IF AND WHEN ANY ISSUES CONCERNING MERCY MEDICAL ARE TAKEN TO THE BOARD, MR CECCONI WILL FOLLOW THE GUIDELINES SET BY THE CONFLICT OF INTEREST POLICY AND WILL ABSTAIN FROM VOTING		No
(3) AULTRA SELF	EDWARD ROTH III IS A BOARD MEMBER OF WALSH AND EXECUTIVE VP OF AULTRA SELF	305,729	SEE DESCRIPTION FOR AULTCARE		No
(4)					No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation

SCHEDULE 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
WALSH UNIVERSITY INC**Employer identification number**

34-0868798

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	STARTING IN 2010 (FOR THE TAX YEAR ENDING JUNE 30, 2009), EACH YEAR A DRAFT OF THE FORM 990 WILL BE PRESENTED TO THE FINANCE AND AUDIT COMMITTEE FOR DISCUSSION AND APPROVAL AT THE FEBRUARY MEETING. UPON APPROVAL, THE FINANCE AND AUDIT COMMITTEE WILL RECOMMEND APPROVAL OF THE FORM 990 BY THE FULL BOARD. THE APPROVED COPY OF THE FORM 990 WILL BE MADE AVAILABLE TO ALL BOARD MEMBERS THROUGH ELECTRONIC MAIL. SCHEDULE B WILL BE REDACTED IN THE EMAILED VERSION WITH A HARD COPY MADE AVAILABLE TO THE BOARD AT THE FINANCE OFFICE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR, THE PRESIDENT'S OFFICE SENDS OUT "CONFIDENTIAL DISCLOSURE STATEMENTS" TO ALL MEMBERS OF THE BOARD OF DIRECTORS AND THE UNIVERSITY'S OFFICERS BY COMPLETING AND SIGNING THE STATEMENTS EACH MEMBER OR OFFICER IS CERTIFYING THAT THEY HAVE CAREFULLY READ THE WALSH UNIVERSITY BOARD OF DIRECTORS CONFLICT OF INTEREST POLICY, THAT THEY WILL ABIDE BY THE LETTER AND THE SPIRIT OF THE POLICY AND THAT THEY WILL MAKE ALL DISCLOSURES REQUIRED UNDER THE TERMS OF THE POLICY. THE COMPLETED AND SIGNED STATEMENTS ARE SENT TO THE SECRETARY OF THE BOARD OF DIRECTORS. THE SECRETARY AND THE CHAIR OF THE BOARD REVIEW THE STATEMENTS AND MAKE A DETERMINATION AS TO THE LIKELIHOOD OF ANY ACTUAL OR POTENTIAL CONFLICTS OF INTERESTS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	IN THE SPRING OF 2007, THE CURRENT COMPENSATION COMMITTEE WAS FORMED TO AMEND THE PRESIDENT'S CONTRACT. THE COMMITTEE CONSISTS OF THE CHAIRMAN OF THE BOARD OF DIRECTORS, THE VICE-CHAIRMAN OF THE BOARD OF DIRECTORS, THE FINANCE AND AUDIT COMMITTEE CHAIRMAN, AND THE VP OF FINANCE AND BUSINESS AFFAIRS/CFO. ADDITIONAL INPUT CAME FROM THE DIRECTOR OF HUMAN RESOURCES. THE COMMITTEE ESTABLISHED THE PRESIDENT'S CONTRACT AMENDMENT NO. 1, EFFECTIVE JULY 1, 2007, WHICH DEFINES ADDITIONAL BENEFITS. THE COMPENSATION COMMITTEE USED THE FOLLOWING INFORMATION AND SERVICES TO ESTABLISH THE AMENDMENT: THE NAICU PRESIDENTS NETWORK SALARY SURVEY, THE CUPA-HR ADMINISTRATIVE COMPENSATION SURVEY, CONSULTING AND LEGAL SERVICES. EACH YEAR THE CHAIRMAN AND VICE-CHAIRMAN OF THE BOARD APPROVE THE PRESIDENT'S BONUS. THE COMMITTEE WOULD ONLY CONVENE IF THE PRESIDENT WAS BEING AWARDED A HIGHER PERCENTAGE OF INCREASE THAN THE REST OF THE FACULTY AND STAFF OF THE UNIVERSITY. EACH YEAR ALL CONTRACT ADJUSTMENTS AND BONUS ALLOCATIONS ARE APPROVED BY THE BOARD OF DIRECTORS AT THE MAY BOARD MEETING THROUGH THE APPROVAL OF THE NEXT YEAR'S OPERATING BUDGET.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	WALSH UNIVERSITY DOES NOT MAKE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENT AVAILABLE TO THE GENERAL PUBLIC. HOWEVER, THE UNIVERSITY WILL PROVIDE THESE DOCUMENTS TO THE GENERAL PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
REASON TWO TREASURERS LISTED	FORM 990, PART VII, SECTION A	PHILIP DANIELS LEFT UNIVERSITY IN MARCH 2012. MICHELLE BROWN WAS PROMOTED TO TREASURER/VP OF FINANCE AND BUSINESS AFFAIRS AND BEGAN NEW POSITION IN APRIL 2012.

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -450,297 GAIN/LOSS ON DERIVATIVES - 104,409 NET INCOME FROM KENTUCKY DERBY & FASHION SHOW FUNDRAISING EVENTS - 6,603 TOTAL TO FORM 990, PART XI, LINE 5 -561,309

Additional Data

Software ID:
Software Version:
EIN: 34-0868798
Name: WALSH UNIVERSITY INC

Form 990, Special Condition Description:**Special Condition Description****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			
GERALD WALSH CHAIR	2 00	X					0	0	0
DANIEL P CUNNINGHAM CO-VICE-CHAIR	2 00	X					0	0	0
BR JEROME LESSARD CO-VICE-CHAIR	2 00	X					0	0	0
ROBERT F BELDEN DIRECTOR	2 00	X					0	0	0
DENNIS BIERY DIRECTOR	2 00	X					0	0	0
BR LEVI BOUDREAU DIRECTOR	2 00	X					0	0	0
BR DANIEL CARON DIRECTOR	2 00	X					0	0	0
DONALD L CASTER DIRECTOR	2 00	X					0	0	0
THOMAS E CECCONI DIRECTOR	2 00	X					0	0	0
MSGR JAMES CLARKE DIRECTOR	2 00	X					0	0	0
FRANK D'ANGELO DIRECTOR	2 00	X					0	0	0
ROGER DEVILLE DIRECTOR	2 00	X					0	0	0
JOHN E DOWLING DIRECTOR	2 00	X					0	0	0
TIMOTHY FAUTSKO DIRECTOR	2 00	X					0	0	0
GRETCHEN A GRAHAM DIRECTOR	2 00	X					0	0	0
EDWARD KLEKOTKA DIRECTOR	2 00	X					0	0	0
JUDITH BARNES LANCASTER DIRECTOR	2 00	X					0	0	0
JUDGE SARA LIOI DIRECTOR	2 00	X					0	0	0
GREGORY W LUNTZ DIRECTOR	2 00	X					0	0	0
EDWARD A MAHONEY III DIRECTOR	2 00	X					0	0	0
LEONARD MILAZZO DIRECTOR	2 00	X					0	0	0
BISHOP GEORGE MURRY DIRECTOR	2 00	X					0	0	0
MICHAEL A PETRECCA DIRECTOR	2 00	X					0	0	0
ALFONSO REVOLLO DIRECTOR	2 00	X					0	0	0
BR GUY RODDY DIRECTOR	2 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	Office	key employee	Highest compensated employee			
E JEFFREY ROSSI DIRECTOR	2 00	X					0	0	0
EDWARD J ROTH III DIRECTOR	2 00	X					0	0	0
PAUL L RUFLIN DIRECTOR	2 00	X					0	0	0
DR MARK JOSEPH SHEPARD MD DIRECTOR	2 00	X					0	0	0
THEODORE STULTS DIRECTOR	2 00	X					0	0	0
FR JAMES SULLIVAN DIRECTOR	2 00	X					0	0	0
TED SWALDO DIRECTOR	2 00	X					0	0	0
BR MARCEL SYLVESTRE DIRECTOR	2 00	X					0	0	0
DONALD WALKER DIRECTOR	2 00	X					0	0	0
LOUIS ZACHARILLA DIRECTOR	2 00	X					0	0	0
RICHARD L JUSSEAUME PRESIDENT	40 00		X				266,933	0	76,443
LAURENCE BOVE SECRETARY/PROVOST	40 00		X				130,440	0	23,026
PHILIP J DANIELS TREASURER/VP FOR FINANCE	40 00		X				114,452	0	23,831
MICHELLE BROWN TREASURER/VP FOR FINANCE	40 00		X				82,657	0	8,540
NEIL G WALSH PROFESSOR/FACULTY REP	40 00		X				55,530	0	16,409
CHAD COOK DIVISION CHAIR OF PHYSICAL THERAPY	40 00			X			114,573	0	17,431
BRETT FRESHOUR VP FOR ENROLLMENT	40 00			X			107,103	0	23,774
DALE HOWARD VP FOR ATHLETICS	40 00			X			106,531	0	25,158
BRIDGETTE NEISEL VP FOR ADVANCEMENT	40 00			X			107,468	0	25,042