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DLN: 93493318047992

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2011

Open to Public Inspection

A Fo	r the 2	2011 ca	lendar year, or tax year beginning	07-01-2011 and ending 06	5-30-2012		D Employe	er identification number
		pplicable	C Name of organization Dominican University					
_	Iress ch	_	Doing Business As			_	36-216 E Telephor	
Naı	ne chai	nge	9					
Init	ıal retu	rn	Number and street (or P O box if mail	is not delivered to street address)	Room/suit	e		66-2490 eipts \$ 91,204,623
☐ Ter	mınate	d	7900 W Division				G Gloss led	eipts \$ 91,204,023
☐ Am	ended	return	City or town, state or country, and ZIP	+ 4		_		
Гарр	lication	pending	River Forest, IL 603051099					
			F Name and address of princi	pal officer		H(a) Is th	∎ is a group re	eturn for
			Amy McCormack 7900 W Division				ites?	⊤Yes √ No
			River Forest, IL 603051099			U/h) Ara si	ll affiliates in	ncluded?
								list (see instructions)
I Ta	x-exem	pt status	▽ 501(c)(3) □ 501(c)() ◄ (ins	ert no)	527			n number ► 0928
J W	ebsite	e:► ww	w dom edu					
K Forr	n of ord	nanization	Corporation Trust Association	Other ►	<u>'</u>	L Year of fo	rmation 1901	. M State of legal domicile IL
	rt I		mary			1 - 1041 0110		. I state of logar dominone 12
			escribe the organization's mission	or most significant activitie	 S			
	/	AS A SI	NSINAWA DOMINICAN-SPONSO	RED INSTITUTION, DOM	INICAN U			
e e		TRUTH, WORLD	TO GIVE COMPASSIONATE SEF	RVICE AND TO PARTICIPA	ATE IN TH	IE CREATIO	NOFAMO	RE JUST AND HUMANE
≧	<u> </u>	WORLD						
Ě								
Governance	-							
			nis box দ if the organization disc				:5% of its n	et assets
Activities &			of voting members of the governing					3 30
Ħ			of independent voting members of					4 27
Ę			mber of individuals employed in ca		ne 2a) .			5 1,733
đ			mber of volunteers (estimate if nec	• •				6 200
			related business revenue from Par				_	7a 0
	ь	Net unre	lated business taxable income from	m Form 990-T, line 34 .	•	T		7b 0
						Pric	r Year	Current Year
g _i	8	Contri	butions and grants (Part VIII, line	1h)			7,273,89	
Revenue	9		ım service revenue (Part VIII, line				69,715,73	
<u>3</u>	10		ment income (Part VIII, column (1,400,36			
	11		revenue (Part VIII, column (A), lir		-		875,09	1,112,482
	12		revenue—add lines 8 through 11 (r				79,265,08	84,743,863
	13		s and similar amounts paid (Part I)				23,061,80	
	14		ts paid to or for members (Part IX,					0 0
	15	Saları	es, other compensation, employee	benefits (Part IX, column (A), lines			
Expenses		5-10)					35,412,89	
কু	16a	Profes	sional fundraising fees (Part IX, co	olumn (A), line 11e)				0 0
ਬੁ	Ь	Total fu	ndraısıng expenses (Part IX, column (D),	ine 25) 🕦 4,020,107				
	17	Other	expenses (Part IX, column (A), lin	es 11a-11d, 11f-24e) .			19,983,87	18,964,614
	18		expenses Add lines 13–17 (must				78,458,57	
	19	Reven	ue less expenses Subtract line 18	3 from line 12			806,51	
Not Assets or Fund Balances							g of Current 'ear	End of Year
9	20	Totala	assets (Part X, line 16)		_		116,679,58	116,812,199
d AS	21		iabilities (Part X, line 26)				47,765,14	
2 E	22		sets or fund balances Subtract lir				68,914,44	
Pai	t II		ature Block				, ,	, ,
			erjury, I declare that I have examined	this return, including accomp	anying scl	nedules and s	tatements, a	nd to the best of my
	ledge a ledge.	and belie	f, it is true, correct, and complete. De	eclaration of preparer (other t	han officer) is based on	all information	on of which preparer has any
		****	**			20	012-11-12	
Sign	1	Signa	ature of officer				ate	
Here	e		MCCORMACK Snr VP for Finance & Admin	stration				
		Туре	or print name and title					
		Preparer		Date 2012 11 12		heck if		axpayer identification number
Paid		signature		2012-11-12		elf- nployed 🕨 🦳	(see instruc	ctions)
Prepa	arer's		ame (or yours 👠 GRANT THORNTON LLP	I			<u> </u>	
Use (Only	ıf self-er	mployed), and ZIP + 4 175 W JACKSON BLVD :	STE 2000			EIN 🕨	
		4441033,	170 11 3110110011 5215	51 L 2000			Phone no	• (312) 856-0200
		1	CHICAGO, IL 60604				1	

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

DOMINICAN UNIVERSITY PROVIDES UNDERGRADUATE AND GRADUATE INSTRUCTION TO STUDENTS AND ADMINISTERS ALL OF ITS PROGRAMS WITHOUT DISCRIMINATION AS TO RACE, COLOR, GENDER, RELIGION, NATIONAL OR ETHNIC ORIGIN, DISABILITY, AGE, MARITAL STATUS OR SEXUAL ORIENTATION AS A SINSINAWA DOMINICAN-SPONSORED INSTITUTION, DOMINICAN UNIVERSITY PREPARES STUDENTS TO PURSUE TRUTH, TO GIVE COMPASSIONATE SERVICE AND TO PARTICIPATE IN THE CREATION OF A MORE JUST AND HUMANE WORLD

52,163,063 including grants of \$

INSTRUCTIONAL THE UNIVERSITY OFFERS INSTRUCTION THROUGH THE UNDERGRADUATE COLLEGE OF ARTS AND SCIENCES, THE ADULT, DEGREE-COMPLETION SCHOOL OF LEADERSHIP AND CONTINUING STUDIES, AND FOUR GRADUATE PROGRAMS BUSINESS, LIBRARY AND INFORMATION SCIENCE, EDUCATION, AND SOCIAL WORK THE ROSARY COLLEGE OF ARTS AND SCIENCES STRIVES TO EMBODY A COMMUNITY OF LEARNERS SEEKING TRUTH THROUGH FREE AND OPEN INQUIRY AND DIALOGUE WITH A DIVERSE ARRAY OF PERSONS, PLACES, TEXTS, OBJECTS, IDEAS AND EVENTS, PAST AND PRESENT, SUPPORTIVE OF EACH LEARNER'S DEVELOPMENT AND COMMITTED TO USING TALENTS TO MAKE A POSITIVE CONTRIBUTION TO THE WORLD THE COLLEGE STRIVES TO PRODUCE GRADUATES OF A LIBERAL ARTS AND SCIENCES PROGRAM WHO CAN THINK CRITICALLY, COMMUNICATE IDEAS WELL, ORALLY AND IN WRITING, AND ACHIEVE BOTH BREADTH OF UNDERSTANDING ACROSS FIELDS AND DEPTH OF KNOWLEDGE IN ONE FIELD THE BRENNAN SCHOOL OF BUSINESS PROVIDES ETHICS-CENTERED MANAGEMENT EDUCATION FOR STUDENTS WHO ARE EITHER ENTERING BUSINESS PROFESSIONS OR CONTINUING THEIR PROFESSIONAL DEVELOPMENT THE CURRICULUM PROVIDES STUDENTS WITH AN ENDURING FOUNDATION IN BUSINESS AND LEADERSHIP SKILLS AND AN UNDERSTANDING OF THE BEST IN CURRENT BUSINESS PROFILES IN THE FIELDS OF ACCOUNTING BUSINESS ECONOMICS AND INTERNAL BUSINESS. THE STUDENT BODY WITH

24,416,025) (Revenue \$

DEVELOPMENT THE CURRICULUM PROVIDES STUDENTS WITH AN ENDURING FOUNDATION IN BUSINESS AND LEADERSHIP SKILLS AND AN UNDERSTANDING OF THE BEST IN CURRENT BUSINESS PRACTICES RESONANT WITH THE UNIVERSITY'S CORE VALUES OF CARITAS ET VERITAS MORE THAN 500 STUDENTS PURSUE UNDERGRADUATE AND GRADUATE DEGREES IN THE FIELDS OF ACCOUNTING, BUSINESS, ECONOMICS AND INTERNATIONAL BUSINESS THE STUDENT BODY, WITH REPRESENTATIVES FROM AROUND THE WORLD, IS DIVERSE IN TERMS OF BOTH BUSINESS EXPERIENCE AND CULTURAL BACKGROUNDS IN RECENT YEARS, THE BRENNAN SCHOOL OF BUSINESS HAS EXPANDED ITS GLOBAL REACH BY PARTNERING WITH TOP-RANKED UNIVERSITIES ABROAD TO OFFER EXECUTIVE MBA PROGRAMS IN POLAND AND THE CZECH REPUBLIC THE GOALS OF THE GRADUATE SCHOOL OF LIBRARY AND INFORMATION SCIENCE ARE TO EDUCATE INDIVIDUALS FOR POSITIONS IN A WIDE SPECTRUM OF ESTABLISHED AND EMERGING LIBRARY, INFORMATION, KNOWLEDGE, AND MEDIA CONTEXTS, TO PROVIDE CONTINUING EDUCATION FOR THE PROFESSIONAL COMMUNITY, AND TO ADVANCE AND ENHANCE TEACHING BY MEANS OF FACULTY PUBLICATION, SERVICE IN PROFESSIONAL ORGANIZATIONS AND OTHER VENUES THE SCHOOL OF EDUCATION HAS BEEN DEDICATED TO PRODUCING TEACHERS WHO HAVE GONE ON TO BE THE LEADERS, CONTINUING SCHOLARS AND ROLE MODELS IN AMERICAN SCHOOLS WHILE THE PROGRAMS HAVE ADVANCED TO MEET EVER CHANGING NEEDS, THE CORE VALUES OF SCHOLARSHIP, LEADERSHIP AND SERVICE HAVE REMAINED CONSTANT THE GRADUATE SCHOOL OF SOCIAL WORK OFFERS A RIGOROUS AND CHALLENGING CURRICULUM, WHICH EMPHASIZES A GLOBALLY FOCUSED AND FAMILY-CENTERED PRACTICE THE PROGRAM EQUIPS STUDENTS WITH NEW KNOWLEDGE TO ADDRESS DOMESTIC AND INTERNATIONAL SOCIAL WORK ISSUES DOMINICAN UNIVERSITY WAS REACCREDITED BY THE NORTH CENTRAL ASSOCIATION IN 2005 FOR THE MAXIMUM TEN-YEAR TERM THE UNIVERSITY RECEIVED APPROVAL FOR ITS FIRST PH D IN THE GRADUATE SCHOOL OF LIBRARY AND INFORMATION SCIENCE AND THE INAUGURAL CLASS BEGAN IN FALL, 2009 DURING 2011-12, THE UNIVERSITY SERVED 3,612 STUDENTS, EVENLY SPLIT BETWEEN THE UNIVERSITY SERVED APPROVAL FOR INSTITUTIONAL FINANCIAL A

4b (Code) (Expenses \$ 7,943,298 including grants of \$ 0) (Revenue \$ 7,774,207)

FACULTY MEMBERS ARE EXPECTED TO ACTIVELY ENGAGE IN RESEARCH AND PUBLICATION

Academic Support Academic support is provided under the leadership of the Provost and Associate Provost. Faculty are supported by the Center for Teaching and Learning Excellence, whose mission is to support all Dominican faculty (both full-time and part-time), at all stages of their careers, in their roles as teachers, scholars, and citizens of the University and wider communities. Student support, including undergraduate and graduate tutoring programs, is provided by the Academic Learning Resources department and the Academic Enrichment Center. Beginning the first year and extending beyond graduation. Career Development, part of the Academic Enrichment Center, actively assists students of all majors with career-related issues, educating them about the career planning process, internships, job search strategies and the graduate/professional school application process as they transition from college to career. The mission of the Rebecca Crown Library mandates the academic support of students, faculty, and staff for resources and services. In addition to supplying print and electronic materials, services such as reference, circulation, interlibrary loan and instruction provide means through which the university Mission may be realized. The library is a partial depository for U.S. government publications and maintains special collections and archival materials. The library currently houses 34% of all publications printed by the Government Printing Office, the federal agency responsible for publishing information produced by the Federal Government. The collection offers a wide array of publications from all branches of the U.S. government. Collected formats include print, microfiche, and C.D. The collection's strengths include census materials, the Congressional Record and its predecessor, the Congressional Globe, dating to 1834, and a partial collection by providing a high-quality infrastructure along with superior support services to enable the user community to utilize technologies for enhanced teaching, learnin

4c (Code) (Expenses \$ 6,800,120 including grants of \$ 0) (Revenue \$ 6,655,364)

Student Services and Athletics Undergraduate Admissions and the Financial Aid Office are led by the Vice President for Enrollment Management. A freshman class of 416 full-time students was enrolled in 2011. The Vice President coordinates graduate recruitment with the individual colleges. Financial aid for all students, including participation in the U.S. Department of Education's student financial assistance programs, is managed by the Financial Aid Office. The office is audited each year under the compliance requirements of OMB Circular A-133. Student services include the Dean of Students office, providing leadership and supervision to student affairs while serving as a liaison between administration and students and working with the community to develop policy regarding student life, the campus Wellness Center, offering a full array of health care, counseling, and wellness services and programs, the Student Involvement Office, which supports student clubs and organizations and offers leadership training, intramural activities, and other campus activities, and Athletics. The Department of Athletics provides intercollegiate competition opportunities for the student-athletes of Dominican University who have the experience and talent to compete at the intercollegiate level regardless of race, gender, ethnicity or orientation. The overall mission of the department is to provide an experience that will enhance the participant's level of self-esteem, self-motivation and self-actualization through mental and physical training, team dynamics and competitive participation. It is intended that the benefits derived from the sport experience will positively impact many aspects of the student-athlete's life and will serve as a complement to the rigorous academic environment of Dominican University

4d Other program services (Describe in Schedule O)

(Expenses \$ 5,025,392 including grants of \$ 0) (Revenue \$ 5,363,842)

e Total program service expenses►\$ 71,931,873

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A^{2}	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f z}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9	Yes	
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^{\bullet}	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
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	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
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	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		N o
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	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		N o
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		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	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		Fo	orm 990	(2011)

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	• 1	
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 141			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
b	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the	3a		No
ь	year?	3b	Yes	
	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	
ь	If "Yes," enter the name of the foreign country •UK		163	
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N o
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
1	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter Instruction food and capital contributions included on Part VIII. June 12			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	sources against amounts due or received from them)	,		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. 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			
C	Enter the aggregate amount of reserves on hand 13c			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	I
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Ке	evenue Code.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	res	No
	Did the organization have local chapters, branches, or affiliates?	100		INO
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No.
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
-	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure	_		
	List the States with which a copy of this Form 990 is required to be filed▶			
10	Section 6104 requires an organization to make its Form 1022 (or 1024 if applicable), 900, and 900 T (501/c)			

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 V 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 ► RICHARD WALSTRA
 7900 W DIVISION STREET

River Forest, IL 603051066 (708) 524-6772

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	Former Highest compensated amplicate	MISC)	related organizations
See Additional Data Table										
				\vdash			_			

KOR Group 374 Congress Street ste 503 BOSTON, MA 02210

\$100,000 of compensation from the organization \blacktriangleright 35

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

(A) Name and Title		(B) A verage hours per week (describe	unles an	on (d e thai	n one son er ai	e bo ıs b nd a	x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of other compensation from the organization and		
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relati organiza		
See A	dditional Data Table														
												+			
												+			
												+			
												+			
												+			
												+			
												_			
												\perp			
1b	Sub-Total					•		<u> </u>	<u> </u>		L				
С	Total from continuation sheets	to Part VII, Sec	tion A					•							
d	Total (add lines 1b and 1c) .						•	•		2,344,383		0		402,031	
2	Total number of individuals (incl \$100,000 of reportable compen						above) who	receive	ed more tha	ın				
													1		
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch					ey e	mploy	ee, d	or highes	st compens	ated employee	3	Yes	<u>No</u>	
4	For any individual listed on line corganization and related organization	La, is the sum o ations greater th	f report nan \$15	able (com	pens If "Y	sation <i>es," c</i> o	and omple	other co ete Sched	mpensation Jule J for suc	n from the		165		
-	Individual			•		•						4	Yes		
5	Did any person listed on line 1a services rendered to the organiz										• Individual for	5		No	
Se	ection B. Independent Con	tractors													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio													
	Nan	(A) ne and business add	dress							Descr	(B) ription of services		(C Comper		
		ne ana basiness aa								Food Service				,011,743	
Kımco 135 S										Janıtorıal Ser	vices			850,160	
300 S	rgan Chase Riverside AGO, IL 60606									Bankıng				389,701	
6111	nancial North River Road MONT, IL 60018									Bankıng		Ī		379,637	

2 Total number of independent contractors (including but not limited to those listed above) who received more than

370,269

Marketing/Consulting

Form 9		•						Page 9
Part \	<u>/1111</u>	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$	1a	Federated cam	paıgns 1a					
E I	Ь	Membership du	ies 1b					
s, ç ami	c	Fundraising ev	ents 1c	129,970				
<u>ਜ਼</u> ੁੱਛ	d	Related organiz	zations 1d					
ž.	e	Government grant	s (contributions) 1e	5,694,610				
ıtio er ∢	f	All other contribute similar amounts no	ons, gifts, grants, and 1f ot included above	4,416,435				
€€	g	4	ibutions included in					
Contributions, gifts, grants and other similar amounts	h	IIIIes Ia-II \$ _	36,011 s la-1f	<u>▶</u>	10,241,015			
<u> </u>	"	Total. Add lines	5 1d-11		10,211,013			
III e	2a	TUITION & FEES		Business Code	65 492 225	65 492 225		
ever	b	ROOM AND BOARD	<u> </u>	900099 721310	65,482,225	65,482,225		
Program Service Revenue	°	PERFORMING ART		900099	5,175,769 188,073	5,175,769 188,073		
	d	TERT ORTHING ART		900099	166,073	188,073		
R								
<u>ran</u>	f	All other progra	am service revenue					
્રે								
	д 3		s 2a-2f		70,846,067			
			ar amounts)	· -	1,024,606			1,024,606
	4		stment of tax-exempt bond	⊢	0			
	5	Royalties		▶ ↑	0			
			(ı) Real	(II) Personal				
	6a	Gross rents	696,347					
	Ь	Less rental expenses	392,317					
	C	Rental income or (loss)	304,030					
	d	Net rental inco	me or (loss)		304,030			304,030
		Gross amount	(ı) Securities 7,377,030	(II) Other				
	7a	from sales of assets other	7,377,030					
		than inventory						
	Ь	Less cost or other basis and	5,857,337					
	c	sales expenses Gaın or (loss)	1,519,693					
	d	Net gaın or (los	ss)	►	1,519,693			1,519,693
ene	8a	events (not inc	from fundraising luding 1,970					
Other Revenue		of contributions	reported on line 1c) ne 18	312,238				
ē.	b	Less direct ex	penses b	211,106				
õ	С		(loss) from fundraising	events 🟲	101,132			101,132
	9a		from gaming activities ne 19 a					
	b c		penses b (loss) from gaming acti	vities	0			
	10a	Gross sales of returns and allo	inventory, less owances .					
	b c		a oods sold b (loss) from sales of invo	entory 🕨	o			
		Miscellaneou		Business Code				
	11a	PAYMENT PLA	N FEES	900099	221,490			221,490
	b	PARKING AND	SECURITY	900099	175,669			175,669
	c	ALL OTHER RE	VENUE	900099	310,161			310,161
	d	All other reven	ue					
	е		s 11a-11d		707,320			
	12	Total revenue.	See Instructions .	· · •	84,743,863	70,846,067		3,656,781

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)

	ot include amounts reported on lines 6b,	(A)	_ (B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	24,416,025	24,416,025		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,400,850	806,507	276,908	317,435
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	27,440,353	24,743,610	957,781	1,738,962
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,753,925	1,467,330	178,105	108,490
9	Other employee benefits	4,015,381	3,535,040	227,064	253,277
10	Payroll taxes	2,033,644	1,786,974	116,615	130,055
11	Fees for services (non-employees)				
а	Management	812,125	346,262	253,154	212,709
b	Legal	85,251		85,251	
С	Accounting	147,745		147,745	
d	Lobbying	0			
е	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	4,056,745	3,642,198	231,418	183,129
12	Advertising and promotion	603,962	409,882		194,080
13	Office expenses	2,456,384	1,972,164	140,327	343,893
14	Information technology	783,085	754,395		28,690
15	Royalties	0			
16	Occupancy	1,229,527	1,045,553	128,806	55,168
17	Travel	491,503	457,495	12,500	21,508
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	764,714	608,902	90,130	65,682
20	Interest	1,993,090	1,645,482	250,815	96,793
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,342,882	2,841,450	334,288	167,144
23	Insurance	537,622	460,564	51,372	25,686
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	APPRECIATION AND HOSPITALITY	764,234	507,964	178,864	77,406
b	UNCOLLECTIBLE ACCOUNTS	331,378		331,378	
c	INTERCOLLEGIATE SPORTS ACTIVIT	217,350	217,350		
d	HONORARIUM	147,447	144,386	3,061	
e					
f	All other expenses	199,570	122,340	77,230	
25	Total functional expenses. Add lines 1 through 24f	80,024,792	71,931,873	4,072,812	4,020,107
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 453.025 2.711.620 2 2 Savings and temporary cash investments 3 6,294,174 5,503,397 2.780.819 2.633.066 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 5 65.283 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 0 0 6 799,121 785, 198 7 Ω 0 8 955, 182 9 9 1,126,708 Prepaid expenses and deferred charges 118,499,026 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 38,070,867 b Less accumulated depreciation 80,693,584 10c 80,428,159 21,974,338 11 20,848,283 11 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 0 14 14 2,729,343 15 2,710,485 15 116,679,586 16 16 116,812,199 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 3,438,486 17 3,922,001 17 Accounts payable and accrued expenses . 18 18 0 19 63,000 19 87,394 20 35.273.272 20 34.634.838 21 622,498 21 675,880 Escrow or custodial account liability Complete Part IV of Schedule D . . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 22 0 23 Secured mortgages and notes payable to unrelated third parties . . . 1.575.000 23 24 Unsecured notes and loans payable to unrelated third parties 24 0 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 6,792,887 25 10,343,244 D 26 47,765,143 26 49,663,357 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 44,025,693 27 42,925,075 Unrestricted net assets 8,920,573 28 7,955,629 28 Temporarily restricted net assets Fund 29 15,968,177 29 16,268,138 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 68.914.443 33 67.148.842 34 Total liabilities and net assets/fund balances 116.679.586 34 116.812.199

	Check if Schedule O contains a response to any question in this Part XI			. [~	
1	Total revenue (must equal Part VIII, column (A), line 12)			0.4	742.065
2	Total expenses (must equal Part IX, column (A), line 25)	2		·	743,863
3	Revenue less expenses Subtract line 2 from line 1	3			719,071
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		68,9	914,443
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-6,4	184,672
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		67,1	148,842
Par	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII		•	୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t 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		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis			1	
	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?		За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

OMB No 1545-0047

Public Charity Status and Public Support

Department of the Treasury Internal Revenue Service

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Dominican University

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

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

Inspection **Employer identification number**

Day	rt I	Deac	on for Du	ıblic Charity Sta	tue (All or	nanizationo	must com	nlata this :	36-21673 38-21673		ions		
				te foundation becaus						nsuuct	10113		
1	r gain			ion of churches, or a									
2	Ţ.		-	d in section 170(b)(1			=	,,(=,(,,,(,,,					
3	<u></u>			perative hospital se				n 170(h)(1	Λ(Δ)(iii)				
4	Ë			h organization opera						(1)(4)(iii) Ente	r the	
•	'			ity, and state	tea iii conjun	ction with a	nospital des	enbed in se	ction 170(D)((=)(=)(m). Lince	ii tiie	
5	Γ	=	•	erated for the benefi	_	or universi	ty owned or o	perated by	a governmen	ital unit	describe	– ed in	
_	_			(A)(iv). (Complete P	· ·			4-64134					
6	<u> </u>			local government of						_			
7	1	describ	oed in	at normally receives (A)(vi) (Complete P		al part of its	support from	a governme	ental unit or f	rom the	general	public	
8	Γ			: described in sectio i		A)(vi) (Con	nplete Part II	[)					
9	\sqcap			at normally receives					butions, men	nbership	o fees, a	nd gro	ss
	•	_		rities related to its e					•	-	-	_	
				oss investment inco									
				ganızatıon after June						,			
10	\vdash			ganized and operate									
11	<u></u>			ganized and operate						to carry	out the	purpos	ses of
	,	one or the box	more public	ly supported organiz ibes the type of supp b Type I	ations descr porting organ	ibed in secti ization and d	on 509(a)(1) or section s 11e throu	509(a)(2) S igh 11h	ee sect		a)(3).	Check
e	Γ	other the section	han foundat n 509(a)(2)	ox, I certify that the ion managers and ot 	her than one	or more pub	licly support	ed organıza	tions describ	ed in se	ection 50	9 (a)(1) or
f g		check	this box	received a written d 2006, has the organ						III sup	porting o	organiz	zation,
_		followir	ng persons?	-									
		(i) a pe	erson who di	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons des	scribed in (ii)) .		Yes	No
		and (III) below, the	governing body of th	ne the suppor	rted organiza	ation?				11g(i)		
			-	er of a person descrı							11g(ii)		
		(iii) a 3	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	bove?				11g(iii)		<u> </u>
h		Provide	e the followi	ng information about	the supporte	ed organızat	ion(s)						
S	(i) Name suppo ganız	e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	on in ted in rning	(v) Did you not organizat col (i) of suppor	ion in your	(vi) Is th organizat col (i) org in the U	ne tion in ganized		A mo	/ii) unt of port?
				instructions))	Yes	No	Yes	No	Yes	No			
Total													

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su			1		Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶ □
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 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 (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

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

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

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DLN: 93493318047992

OMB No 1545-0047

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 Employer identification number Dominican University 36-2167855 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 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? 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 Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 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 Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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

- Total number of conservation easements
- Total acreage restricted by conservation easements
- Number of conservation easements on a certified historic structure included in (a)
- Number of conservation easements included in (c) acquired after 8/17/06
- 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶_
- Number of states where property subject to conservation easement is located -
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
- Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year -
- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

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

2a

2b

2c

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

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

- 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
- 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

- 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
- Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	<u>tori</u>	<u>cal Tre</u>	easures, or O	<u>the</u>	<u>r Similar Asse</u>	ets (c	<u>ontınued)</u>
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	ie foll	owing th	nat are a significa	nt u	se of its collectio	n	
а	Public exhibition		d	\vdash	Loan o	r exchange progi	ams			
b	Scholarly research		e	Γ	Other					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ın hov	v the y	/ further	the organization	's ex	cempt purpose in		
5	During the year, did the organization solicity assets to be sold to raise funds rather than to								Yes	┌ No
Par	Part IV, line 9, or reported an ar						d "Y	es" to Form 990	0,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	ediary	for c	ontribut	ions or other ass	ets		Yes	√ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ıng ta	able	-				
						_		Amo	unt	
c	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year					-	1e			
f	Ending balance					L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?					⊽	Yes	☐ No
b	If "Yes," explain the arrangement in Part XI\									
Pa	rt V Endowment Funds. Complete									
4-	Daniman of warmhalanaa	(a)Current Year 22,813,514	(b)	Prior \	757,836	(c)Two Years Back 16,327,42	_	Three Years Back (20,559,576)	e) Four	Years Back
1a	Beginning of year balance	319,677			909,852	77,32	_	5,430		
b	Contributions	,			<u> </u>	2,701,84	-			
с	Investment earnings or losses	-526,772			329,670		_	-3,891,580		
d	Grants or scholarships	780,500		3,	183,844	348,75	0	346,000		
e	Other expenditures for facilities and programs							0		
f	Administrative expenses	24 225 242			242 544	10.757.00		46.007.406		
g	End of year balance	21,825,919		22,	813,514	18,757,83	6	16,327,426		
2	Provide the estimated percentage of the year		as							
а	Board designated or quasi-endowment 🕨	31 340 %								
b	Permanent endowment ► 64 890 %									
С	Term endowment ► 3 770 %									
3a	Are there endowment funds not in the posse	ssion of the organiza	ation t	that a	re held	and administere	d for	the		
	organization by							[a ()	Yes	No
	(i) unrelated organizations			•			•	3a(i)		No
b	(ii) related organizations						•	3a(ii)	+	No I
4	Describe in Part XIV the intended uses of th	•					•			<u> </u>
	t VI Land, Buildings, and Equipme					<u> </u>				
r ar	Edita, Ballanigs, and Equipme	int. Sec roini 33	0, i a	Τ			hor	(a) Assumulated		
	Description of property				Cost or o			(c) Accumulated depreciation	(d) Bo	ook value
1a	Land			L		3,070	,652			3,070,652
Ь	Buildings					99,577	,966	28,436,568	7	71,141,398
c	Leasehold improvements					6,091	,192	3,151,566		2,939,626
d I	Equipment					9,669	,820	6,482,733		3,187,087
e	Other					89	,396	0		89,396
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colur	nn (B)	, line	10(c).)			►	8	30,428,159
	,	· · · · · · · · · · · · · · · · · · ·	. /					Schedule D (

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		od of valuation f-year market value
(1)Financial derivatives		Cost of elia-o	i-year market value
(2)Closely-held equity interests Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line :	13.	
(a) Description of investment type	(b) Book value		od of valuation
	. ,	Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, II	ne 15.		
(a) Descri	ption		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 3	15.)		
Part X Other Liabilities. See Form 990, Part X			1
1 (a) Description of Liability	(b) A mount		
-			
Federal Income Taxes	0 500 336		
FINANCIAL INSTRUMENTS	8,589,236		
U S GOVERNMENT GRANTS REFUNDABLE	696,470		
INTEREST PAYABLE	92,291		
ACCRUED POST RETIREMENT OBLIGATION	965,247		
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	10,343,244		
	· · · · · · · · · · · · · · · · · · ·		

	ule D (Form 990) 2011				Page 4
		hange in Net Assets from For	m 990 to Financial Statemer		84,743,863
	Total revenue (Form 990, Part Total expenses (Form 990, Pa			2	80,024,792
_	Excess or (deficit) for the year			3	4,719,071
_	Net unrealized gains (losses) of			4	-6,484,672
5	Donated services and use of fa	cilities		5	
_	Investment expenses			6	
	Prior period adjustments Other (Describe in Part XIV)			8	
_	Total adjustments (net) Add II	nes 4 - 8		9	-6,484,672
10		per financial statements Combine line	es 3 and 9	10	-1,765,601
Part		evenue per Audited Financial er support per audited financial statem	_	er R	
1 2		er Support per audited infancial statem ut not on Form 990, Part VIII, line 12	ents		55,846,125
а		tments	2a -6,484,672		
b		acılıtıes	. 2b		
c d	Recoveries of prior year grant Other (Describe in Part XIV)		. 2c		
u e	Add lines 2a through 2d .		<u>zu</u>	2e	-6,484,672
3	Subtract line 2e from line 1 .			3	62,330,797
4		0, Part VIII, line 12, but not on line 1	1 1		
a b	Investment expenses not incl Other (Describe in Part XIV)	uded on Form 990, Part VIII, line 7b	4a4b22,413,066		
c	Add lines 4a and 4b			4c	22,413,066
5		d 4c. (This should equal Form 990, Pa		5	84,743,863
Part 1	XIII Reconciliation of E Total expenses and losses pe	xpenses per Audited Financia	al Statements With Expenses	per	Return 57,611,726
1	statements			1	57,011,720
2		it not on Form 990, Part IX, line 25			
a b	Donated services and use of f Prior year adjustments		2a	1	
c	Other losses		. 2c	1	
d	Other (Describe in Part XIV)		2d	1	
е 3	Add lines 2a through 2d Subtract line 2e from line 1 .			2e 3	E7 611 736
3 4		0, Part IX, line 25, but not on line 1 :		<u> </u>	57,611,726
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)		4b 22,413,066	1	
с 5	Add lines 4a and 4b Total expenses Add lines 3 a	nd 4c. (This should equal Form 990, Pa	art I line 18)	4c 5	22,413,066 80,024,792
	XIV Supplemental In				00/02 1/, 32
		scriptions required for Part II, lines 3, , Part XII, lines 2d and 4b, and Part X			
	ional information	, rate All, intes 24 and 15, and rate A	TIT, mes za ana 15 //iso complete (.mo p	are to provide any
	Identifier	Return Reference	Explanat		
SCHE	DULE D, PART IV, LINE 2B	ARRANGEMENTS	THE BALANCE INCLUDES A) STU PREPAYMENTS FOR THE JULY/AU	GUS	T SUMMER TERM, B)
			FUNDS ON DEPOSIT FOR VARIOUS ORGANIZATIONS, AND C) CHAR		
			OBLIGATIONS Deposit amounts r student tuition and housing deposit.	elated	to students include
			terms The university also holds fun	ıds for	a number of student
			organizations The university holds designated accounts Student organ	nızatıo	ons deposit funds to and
			request funds from their internal accumiversity's normal receipting and a		
			The balance also includes the unive	rsity'	s obligation under two
			annuitants out of invested annuity f	unds	
SCHE	DULE D, PART V, Line 4	Intended Uses of Endowment Funds	The University's endowment consises established for a variety of purpose:		
			donor-restricted endowment funds, receivable and funds designated by		
			function as endowments Net assets funds, including funds designated by	sasso	ciated with endowment
			function as endowments, are classif	ied ar	nd reported based on
			the existence or absence of donor-i University management, subject to	Board	l ratification, has
			interpreted the Uniform Prudent Ma Funds Act (UPMIFA) as requiring th		
			value of the original gift as of the gift endowment funds absent explicit do		
			contrary As a result of this interpre classifies as permanently restricted		
			value of gifts donated to the perman original value of subsequent gifts to	ent e	ndowment, (b) the
			and (c) accumulations to the perma	nent e	endowment made in
			accordance with the direction of the instrument at the time the accumula		
			The remaining portion of the donor- that is not classified in permanently		
			classified as temporarily restricted amounts are appropriated for expen		
			manner consistent with the standar UPMIFA In accordance with UPMI	d of pr	rudence prescribed by
			consider the following factors in ma	kıng a	determination to
			appropriate or accumulate donor-re (1) The duration and preservation o	f the f	und (2)The purposes
			of the organization and the donor-re General economic conditions (4) T		
			and deflation (5) The expected total appreciation of investments (6) Ot		
			organization (7) The investment po	licies	of the organization
			individual donor-restricted endowm	ent fu	nds may fall below the
			level that the donor or UPMIFA requas a fund of perpetual duration. The	re wer	e no deficiencies of
Sched	ule D, Part X, Line 2	FIN 48	this nature as of June 30, 2012 and The University has received a favor		
oenea.	are 5,1 are x, 2me 2		from the Internal Revenue Service, Federal income taxes under the pro-	statın	g that it is exempt from
			of the Internal Revenue Code of 198	36 (IR	RC), except for income
			Accounting Standards Board issued	l guida	ance that requires tax
			effects from uncertain tax positions financial statements only if the posi		_
			to be sustained if the position were authority Management has determi	to be	challenged by a taxing
			uncertain positions that require recistatements. The organization has no	ogniti	on in the financial
			income taxes as the University has	no un	related business
			recognized in the statement of activ	ities	or statement of
			position The tax years ending 2008 are still open to audit for both Feder		
Sched	ule D, Part XII, Line 4B	Other	OTHER - DISCOUNTS ON TUITIO	NAN	D FEES 23,016,489
			OTHER - RENTAL EXPENSES (392 FUNDRAISING EXPENSES (211,1		
Sched	ule D, Part XIII, Line 4B	Other	22,413,066 OTHER - DISCOUNTS ON TUITIO	ΝΔΝ	D FEES 23.016 489
_ zneu	,, Line 10		OTHER - RENTAL EXPENSES (392	,317) OTHER -
			FUNDRAISING EXPENSES (211,1) 22,413,066		IUIAL

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

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

OMB No 1545-0047

Employer identification number

Dominican University 36-2167855 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes 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? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d Yes 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 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h Νo h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes b Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Yes

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					
PART I, LINE NONDISCRIMINATORY serves all racial segments of the		The school's nondiscriminatory policy is published in a new spaper of general circulation that serves all racial segments of the community, and in university view books, the brochure dealing with student admissions and programs					
SCHEDULE E, PART I, LINE 6A	FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT AGENCY	THE UNIVERSITY RECEIVES FUNDS FROM THE U.S. DEPARTMENT OF EDUCATION FOR SEVERAL STUDENT FINANCIAL ASSISTANCE PROGRAMS, INCLUDING THE FEDERAL PELL GRANT PROGRAM, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT PROGRAM, FEDERAL WORK-STUDY PROGRAM, Federal Perkins loan program, federal family education loan program, Teacher Education Assistance for College and Higher Education Grant Program The university also receives state funding from the Illinois Monetary Assistance Program					

Schedule E (Form 990 or 990-EZ) 2011

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As Filed Data -

DLN: 93493318047992

2011

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

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.

Open to Public **Inspection**

Internal Revenue Service Name of the organization Dominican University

Employer identification number

					36-2167855	
Pa	rt I General Informatio "Yes" to Form 990, Pa			ne United States. C	omplete if the organiz	zation answered
1	For grantmakers. Does the assistance, the grantees' eligible the grants or assistance?	organızatıon n gıbılıty for the	naıntaın record grants or assıs	tance, and the select	ion criteria used to awa	
2	For grantmakers. Describe in Pa United States	art V the organiz	atıon's procedur	es for monitoring the us	e of grant funds outside t	he
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	Europe (Including Iceland and Greenland)	0	1	Program Services	A cademic Program	95,140
_						2
	Sub-total	0	1			95,140
t	Total from continuation sheets to Part I					

c Totals (add lines 3a and 3b)

Pai	Part IV,	line 15, for any	sistance to Organ recipient who recesspace is needed.	nizations or Entiti erved more than \$5,	es Outside the Ur ,000. Check this box	nited States. Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nui	mber of other o	organizations or en	tities					(Form 990) 2011

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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						1	dula E (Earre 000) 2011

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)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	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)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	┍	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	┍	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	No

Schedule F (Form 990) 2011

Identifier	ReturnReference	uctions) required in Part I, line 2, and any Explanation
		<u>'</u>
	1	

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As Filed Data -

DLN: 93493318047992

Employer identification number

OMB No 1545-0047

Open to Public Inspection

SCHEDULE G Supplemental Information Regarding (Form 990 or 990-EZ) **Fundraising or Gaming Activities**

Department of the Treasury

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.

Internal Revenue Service Attach to Form 990 or Form 990-EZ. See separate instructions. Name of the organization

Dominican University						36-2167855		
Part I Fundraising Act	ivities. Complete	e if the o	rganızat	tion answered "Yes"	to Form	990, Part IV	, line 17.	_
 Indicate whether the organ Mail solicitations Internet and e-mail solicitations Phone solicitations In-person solicitations Did the organization have a or key employees listed in If "Yes," list the ten highes to be compensated at least 	licitations : a written or oral agre Form 990, Part VII t paid individuals or	ement wit) or entity entities (e f g th any ind in conne fundraise	Solicitation of no Solicitation of go Special fundraisi Ividual (including office ction with professional rs) pursuant to agreem	n-governr vernment ng events ers, direct fundraisir nents unde	ment grants grants ors, trustees ng services? er which the fur	ndraiser is	No
(i) Name and address of Individual or entity (fundraiser) Total	(ii) Activity	(iii) fundrais custo contrib Yes	er have ody or rol of utions? No	(iv) Gross receipts from activity	(or refundrai	nount paid to stained by) ser listed in col (i)	(vi) A mount paid to (or retained by) organization	
licensing				o sonciciunus of flas b				

Revenue	1		(a) Event #1	(b) Event #2	(c) O ther Events	(1) =
Revenue	1				(c) Other Events	(d) Total Events
Revenue	1		Trustee Benefit		0	(Add col (a) through col (c))
Reveilu	1		(event type)	(event type)	(total number)	
Rev		Gross receipts	442,208	3		442,208
	2	Less Charitable contributions	129,970			129,970
	3	Gross income (line 1 minus line 2)	312,238	3		312,238
	4	Cash prizes	7,000			7,000
မှာ ၂	5	Non-cash prizes				
Expenses	6	Rent/facility costs				
<u>Š</u>	7	Food and beverages	67,300			67,300
Diegra Diegra	8	Entertainment	60,000			60,000
<u></u>	9	Other direct expenses .	76,806			76,806
	10	Direct expense summary Add line	es 4 through 9 in column	(d)		(211,106)
	11	Net income summary Combine lin	nes 3 and 10 ın column (d)		101,132
Part	HII	Gaming. Complete if the or \$15,000 on Form 990-EZ, lin		"Yes" to Form 990, Pa	rt IV, line 19, or repo	·
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
~	1 (Gross revenue				
န	2 (Cash prizes				
Expenses	3 1	Non-cash prizes				
	4 F	Rent/facility costs				
Direct	5 (Other direct expenses				
	6 \	Volunteer labor	┌ Yes	Г Yes	┌ Yes	1
	7	– Direct expense summary Add lines	2 through 5 in column (d)		()
	8	Net gaming income summary Coml	oine lines 1 and 7 in colu	ımn (d)	🛌	
9	Ente	er the state(s) in which the organiza	tion operates gaming ac	tivities		
а	Is th	ne organization licensed to operate lo," Explain	gaming activities in eac	h of these states?		· Fyes Fno
		e any of the organization's gaming l				· · Fyes FNo
b	T1 A	es," Explain				

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3			
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No			
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity					
	formed to administer charitable (gamıng?		· · · · F Yes F	- No			
13	Indicate the percentage of gamii	ag activity operated in		1 1				
a				13a				
b								
14		f the person who prepares the organiza						
	Name ►							
	Address ►							
	revenue?	ntract with a third party from whom the			- No			
	amount of gaming revenue retained by the third party 🟲 \$							
С	If "Yes," enter name and address	S						
	Name 🟲							
	Address ►							
16	Gaming manager information							
	Name 🟲							
	Gaming manager compensation I	\$ \$						
	Description of services provided	>						
17 a		Employee er state law to make charitable distribu		· · ·	- No			
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-			
_		activities during the tax year > \$		hadala C /				
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see				
	Identifier	ReturnReference	Explana	tion				
		•	•					

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

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

OMB No 1545-0047

DLN: 93493318047992

Inspection

Name of the organization

Schedule I

(Form 990)

Department of the Treasury ► Attach to Form 990 Internal Revenue Service

Employer identification number

Part I General Information on Grants and Assistance		
 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance the selection criteria used to award the grants or assistance? 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 organizations 		マYes 「I
Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient receive Part IV and Schedule I-1 (Form 990) if additional space is needed	ed more than \$5,000	. Use
(a) Name and address of organization or government(b) EIN(c) IRC Code section if applicable(d) Amount of cash grant(e) Amount of non- cash assistance(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grad or assistance
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table		lo I (Form 000) 2011

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) UNDERGRADUATE SCHOLARSHIPS AND GRANTS	1709	19,122,237		Book Value	
(2) GRADUATE SCHOLARSHIPS AND GRANTS	473	1,425,716		Book Value	
(3) FEDERAL PELL GRANTS	910	3,652,072		Book Value	
(4) FEDERAL SEOG GRANTS	113	216,000		Book Value	

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
FORM 990, SCHEDULE I,	MONITORING THE USE OF	The awarding of student financial aid grants under the U.S. Department of Education's Student Financial Assistance Program
PART IV, LINE 2	GRANT FUNDS IN THE U S	are monitored by the university's Financial Aid Office, which ensures that the university meets the compliance requirements
		of OMB Circular A -133 The Financial Aid Office is responsible for establishing and maintaining effective internal control
		over compliance with the requirements of laws, regulations, contracts, and grants applicable to federal programs
		Administration of grant activities is coordinated between the academic Office of Research and Sponsored projects, the
		University Advancement and the Business Office These Offices ensure that appropriate controls are established and that
		grant requirements for documentation, tracking, expenditure of funds and reporting are met

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DLN: 93493318047992

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

Open to Public

itemal Revenue	ervice ► Attach to Form 990. ► See separate instructions.		Tusbe	ectio	
Name of t	ne organization nversity	Employer identif	fication nun	nber	
	,	36-2167855			
Part I	Questions Regarding Compensation				
				Vac	N.

1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to pr					
	First-class or charter travel	_	Housing allowance or residence for personal use			
	Travel for companions	▽	Payments for business use of personal residence			
	Γ Tax idemnification and gross-up payments Γ	_	Health or social club dues or initiation fees			
	Discretionary spending account	_	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organiz reimbursement orprovision of all the expenses described			1b	Yes	
2	Did the organization require substantiation prior to reimboufficers, directors, trustees, and the CEO/Executive Dire			2	Yes	
3	Indicate which, if any, of the following the organization us organization's CEO/Executive Director Check all that ap					
	Compensation committee	-	Written employment contract			
		~	Compensation survey or study			
		7	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part \ or a related organization	VII	, Section A, line 1a with respect to the filing organization			
а	a Receive a severance payment or change-of-control payment?					Νo
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
C						Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	th:	e applicable amounts for each item in Part III			
_	Only 501(c)(3) and 501(c)(4) organizations only must co					
5	For persons listed in form 990, Part VII, Section A, line 1 compensation contingent on the revenues of	ıa,	aid the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line 1 compensation contingent on the net earnings of	1a,	dıd the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," descri			7		No
8	Were any amounts reported in Form 990, Part VII, paid o subject to the initial contract exception described in Regi in Part III			8		No
9	If "Yes" to line 8, did the organization also follow the rebusection 53 4958-6(c)?	utta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) Donna M Carroll	(ı) (ıı)	319,500 0	0 0	15,000 0	64,110 0	8,436 0	407,046 0	C
(2) Cheryl Johnson Odım	(ı) (ıı)	206,329 0	0 0	0 0	20,633 0	20,601 0	247,563 0	0
(3) Amy McCormack	(ı) (ıı)	182,717 0	0	0	16,500 0	2,082	201,299 0	C
(4) Mary Ann Rowan	(I) (II)	159,500 0	0	0	6,180 0	1,672 0	167,352 0	C
(5) Graczyna Cıchomska	(ı) (ıı)	175,100 0	0 0	0	17,510 0	13,837	206,447 0	0
(6) Arvid Johnson	(ı) (ıı)	175,850 0	0 0	0	16,500 0	20,535	212,885	C
(7) Susan Roman	(ı) (ıı)	147,126 0	0	0 0	14,713 0	522 0	162,361 0	C
(8) Jeffrey Carlson	(ı) (ıı)	134,113 0	0	0 0	6,706 0	16,065 0	156,884 0	C
(9) Dan Condon	(ı) (ıı)	133,729 0	0 0	0 0	0 0	20,151 0	153,880 0	0
(10) Mark Rodgers	(ı) (ıı)	130,313 0	0 0	0 0	13,031 0	20,350 0	163,694 0	0
(11) Therese Hogan	(ı) (ıı)	108,963			9,807	8,925	127,695	

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
•		Payments for business use of personal residence Annually, the University pays \$15,000 to the President for the use of her home for University functions This arrangement is part of the President's employment contract and the payment was included in her reportable compensation
PART I, LINE 4B	PAYMENT FROM A SUPPLEMENTAL NONQUALIFIED REQUIREMENT PLAN	The University has a non-qualified 457(f) plan for the University's President Donna Carroll the deferred amount for FY 2012 was \$42,110

Schedule J (Form 990) 2011

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

2011

OMB No 1545-0047

DLN: 93493318047992

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

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

Name of the organization Dominican University Employer identification number

Dor	Dominican University									36-2167855				
P	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Pric	:e (f)	(f) Description of Purpose		(g) Defeased		Beh	On alf of suer		Pool
									Yes	No	Yes	No	Yes	No
A	VILLAGE OF RIVER FOREST COOK COUNTY IL	36-6006070		12-01-2009	16,200,0		FUND OF BONDS & NOVATIONS			×	x			х
В	Illinois Finance Authority	86-1091967	45200BYKB	03-15-2006	30,000,0	,000,000 CONSTRUCTION AND RENOVATIONS				х	Х			Х
Pa	art II Proceeds													
	A mount of bonds retired	A .		+	30,000,000		С		D					
$\frac{1}{2}$	Amount of bonds defeased		6,200,000	\ <u>\</u>	30,000,000				-					
3	Total proceeds of issue	+		\	0									
4	Gross proceeds in reserve funds				+		\	0						
	Capitalized interest from proceeds				+		7	0						
6	Proceeds in refunding escrow				+		1	0						
7	Issuance costs from proceed				+		7	314,000						
8	Credit enhancement from pro				+		<u> </u>	0						
9	Working capital expenditures				+	0 0								
10	Capital expenditures from pro	<u> </u>			1			29,686,000						
11	O ther spent proceeds				+	(0						
12	O ther unspent proceeds				+	0		0						
13	Year of substantial completio	 ɔn			200	9	20	07						
					Yes	No	Yes	No	Yes	1	No	Yes	,	No
14	Were the bonds issued as pai	rt of a current refun	ding issue?		Х			Х						
15	Were the bonds issued as pai	rt of an advance ref	iunding issue?			Х	†	х						
16				×		Х								
17					х		x							
Pa	rt IIII Private Business l	Use										1		
	<u> </u>				Α		ı	В		c			D	
					Yes	No	Yes	No	Yes		No	Yes	;	No

property financed by tax-exempt bonds?

financed property?

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

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

Χ

Χ

Χ

Χ

Sche	edule K (Form 990) 2011									Page 2
Par	Private Business Use (Continued)								_	
				A		В		С		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private use?	business	Х			X				
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?		Х							
С	Are there any research agreements that may result in private business use financed property?	e of bond-		х		х				
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use b other than a section 501(c)(3) organization or a state or local government			0 %		0 %				•
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government			4 600 %						
6	Total of lines 4 and 5			4 600 %						
7	Has the organization adopted management practices and procedures to en post-issuance compliance of its tax-exempt bond liabilities?	sure the	Х		Х					
Pai	rt IV Arbitrage								-	
		Α	1		В		С		D	
		Yes	No	Yes	No	Ye	es	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?									
2	Is the bond issue a variable rate issue?	Х		Х						
										

		A		В		L		l 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?								
	Is the bond issue a variable rate issue?	X		X					
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		х		x				
b	b Name of provider		0		0				
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х		Х				
ь	Name of provider	0		0					
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х		х				
6	Did the bond issue qualify for an exception to rebate?		х		x				

Part V **Procedures To Undertake Corrective Action**

Part VI Supplemental Information

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

Ident if ier	Return	Explanation
	Reference	
Procedures to	Schedule K,	DOMINICAN UNIVERSITY HAS NOT VIOLATED ANY APPLICABLE REQUIREMENTS FOR TAX EXEMPT BONDS BENEFITTING THE UNIVERSITY THE
Undertake	Part V	UNIVERSITY IS IN THE PROCESS OF ESTABLISHING WRITTEN PROCEDURES TO ENSURE TIMELY IDENTIFICATION OF VIOLATIONS OF FEDERAL
Corrective		TAX REQUIREMENTS OR TIMELY CORRECTION OF ANY IDENTIFIED VIOLATIONS
Action		

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DLN: 93493318047992

Employer identification number

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Schedule L

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

OMB No 1545-0047

Open to Public Inspection

Dominican University							3	6-21678	55			
Part I Excess Benefit Trar Complete of the organizat										ıne 40b		
1 (a) Name of disqu		alified person			(b) Description o						(c) Corrected?	
										Yes	No	
2 Enter the amount of tax impos	ed on th	ne organ	ızatıon mana	agers or	disqualified perso	ons duri	ng the y	ear unde	r			
section 4958					e organization			Þ	• \$ —			
	-	-			e organization :				<u> </u>			
Part II Loans to and/or F Complete if the organiz					, Part IV, line 26,	, or Forr	n 990-E	Z, Part V	', line 38	a		
(a) Name of interested person and purpose	or fro	oan to om the zation?	(c)Orıg prıncıpal a		(d)Balance due	(e) ∶ defau				(g) Written agreement?		
	То	From				Yes	No	Yes	No	Yes	No	
1) Amy McCormack ee below		×		65,283	65,283		No	Yes		Yes		
									+			
otal				> \$	65,283							
Part III Grants or Assistar Complete if the orga						, line 2	27.					
(a) Name of interested pers	on	(b	-	•	en interested per ganization	son	(c) A m	nount of g	rant or ty	ype of assı	stance	

Part IV	Business	Transactions	Involvina	Interested	Persons.

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

Complete if the organization	Tallsweled les off	ronni 550, rancis, in	ie 20a, 20b, 01 20c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing o organization's revenues?	
	organization			Yes	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
Form 990, Schedule L, Part II		The purpose of the loan was to provide a vice president support for advanced education in the field of educational leadership, and to enhance her portfolio for greater leadership responsibilities in the future

Schedule L (Form 990 or 990-EZ) 2011

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DLN: 93493318047992

Open to Public

Inspection

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Dominican University

Name of the organization

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

NonCash Contributions

Employer identification number

					36-2167855			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of do contribution	etermı	_	
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	2,913	71,011	Comparable Sale			
10	Securities—Closely held stock $\ .$							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .	Х	1	365,000	FMV/Comparable sa	ale		
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
	Archeological artifacts							
	O ther ► ()							
	O ther ▶()							
	O ther ►()							
	Other ► ()				I			
29	Number of Forms 8283 received for which the organization compl				29			1
	for which the organization compl	eteu Follii (5265, Part IV, Dollee Acki	iowieugement			Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I lines.	1-28 that it		163	140
	must hold for at least three year							
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangement					_30a		
31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e thırd partı	es or related organizations	to solicit, process, or sell i	non-cash	32a	Yes	
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenues ı	n column (c) for a type of p	roperty for which column (a) is checked,			

Part II

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

Identifier	Return Reference	Explanation
FORM 990, SCHEDULE M, PART I, LINE 32A		The university uses an independent third party broker to receive donations of stock and real estate. The broker also sells the securities and real estate based on the directions from the university.

Schedule M (Form 990) 2011

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As Filed Data -

DLN: 93493318047992

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
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Name of the organization Dominican University	Employer identification number
,	36-2167855

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 4D	Auxiliary Services	TOTAL EXPENSES \$5,025,392 (INCLUDING NO GRANTS) TOTAL REVENUE \$5,363,842 Auxiliary Services includes student housing and campus dining. The university offers four campus residence hall options, as well as nearby off-site housing. Housing includes a variety of options ranging from suites to single rooms. The student meal plan can be tailored for a number of flex meal arrangements and can be used at several campus dining facilities. Approximately 40% of the student population takes advantage of housing opportunities. Auxiliary Services also includes the activity of the Performing Arts Center, which offers a variety of musical and theater acts to the university and nearby communities. Theater productions are integrated with the undergraduate theater program and utilize many students as part of the productions. Theater students also learn and assist with box office, stage crew and audience/guest artist, and support all musical events.

	urn rence	Explanation
FORM 990, PART VI, body's authorit delegat the con	ty ted to	The Board of Trustees shall have exclusive responsibility for the determination of policy for the Corporation, including the general outlines of procedures essential to implement policy, but the administration of the ordinary activities of the Corporation shall be conducted by its officers and other persons appointed by the officers for that purpose. Subject to the rights of the Members, the responsibilities of the Board of Trustees include, but are not limited to, the following: (a) Appoint or remove the President and other officers of the University in accordance with these Bylaws, (b) Approve degrees in courses upon the recommendation of faculty and honorary degrees on the recommendation of the President, (c) Grant tenure upon the recommendation of the President, (d) Establish and review the educational programs of the University, (e) Oversee long-range planning which ensures that goals, programs, services and functions of the University are consistent with the mission and with educational needs and opportunities, (f) Authorize any changes in tuition and any material changes in fees within the University, (g) Establish annually the budget of the University, which shall be submitted to it upon recommendation of the Finance and Investment Committee, (h) Authorize the construction of new buildings and renovation of existing buildings and assure the proper management of the physical plant, (i) Approve and participate in a comprehensive financial development program to add to the current, special and endow ment resources of the University, (j) Authorize officers or agents of the University to accept gifts for the University, (k) Recommend to the Members the acquisition, purchase, sale, mortgage, lease, transfer or encumbrance of the real property owned or proposed to be owned by the University, (l) Require an independent yearly certified audit of financial accounts, records and resources by a certified public accountant (m) Periodically review these Bylaws and recommend changes to the Members

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 2	Family relationships or Business relationships	FAMILY Relationship RAYMOND PARMER, A TRUSTEE HAS A FAMILY RELATIONSHIP WITH CAROLYN NOONAN PARMER, A TRUSTEE EMERITUS OF DOMINICAN UNIVERSITY James Donahugh has a family relationship with a member of the university Business Relationship Eugene T McEnery MD is a trustee of the university and a director of the Community Bank. Martin J Noll is a trustee of the University and a chairman of the community bank. Kevin M Killips is a trustee of the university and the Chief Financial Officer of the Private Bank. Robert F Coleman is a trustee of the university and a director of the Private Bank.

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 6	members of the organization	MEMBERS ELECT THE MEMBERS OF THE GOVERNING BODY AND APPROVE SIGNIFICANT DECISIONS OF THE GOVERNING BODY

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 7A	member elections & resignations	Members shall be the Prioress, general Councillors or delegates as determined by the Members, and the General Finance Officer of the Sinsinawa Dominican Congregation. The Members may appoint, in their sole discretion, different Members. (a) when the Members, in their sole discretion, decide to increase the number of Members (within the limitations set forth in Article II, Section 1), or (b) when vacancies occur by reason of death, resignation, failure of qualification, or otherwise. At all times the Members shall be comprised of a majority of persons who are elected officials of the Sinsinawa Dominican Congregation. Each Member shall be entitled to one vote on each matter submitted to a vote of the Members. Any Member may resign by filing a resignation with the Elected Chair (unless the Elected Chair is the person resigning, in which case the resignation shall be filled with the remaining Members.) Unless otherwise stated in a resignation, it shall take effect when received by the person or person(s) to whom delivered as specified above, without any need for its acceptance. Any Member may be removed with or without cause by the affirmative vote of a majority of the Members.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 7B	DECISIONS SUBJECT TO APPROVAL	Members amend, restate, or modify the articles of incorporation and the bylaws of the university. Also they approve the acquisition, purchase, sale, mortgage, lease, transfer, or encumbrance of the real property owned by the university. Members ratify the appointment, removal, or replacement of any one or more of the trustees, and approve any plan for dissolution, merger, consolidation, or liquidation of the university. The responsibilities of the Members include the following: (a) To approve the mission of the University, and to assure continuing harmony between the mission of the Sinsinaw a Dominican Congregation and the mission of the University: (b) To amend, restate, or modify the Articles of Incorporation and the Bylaws of the University: (c) To approve the acquisition, purchase, sale, mortgage, lease, transfer, or encumbrance of the real property owned by the Corporation: (d) To ratify the appointment, removal, or replacement of any one or more of the Trustees: (e) To approve any plan for dissolution, merger, consolidation, or liquidation of the Corporation.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 11	BOARD REVIEW OF 990	The tax returns have been reviewed by the grant Thornton tax services team and the returns were provided to the audit and risk management committee. At the meeting, Grant Thornton along with staff reviewed any significant changes. The tax return was approved at the audit and risk management meeting with the understanding that the Senior Vice President for Finance and Administration reviewed and finalized any follow-up that was requested at the meeting. Any follow-up to the items presented at the meeting was completed by the staff and reviewed by grant Thornton tax Service team and final approval by the Senior Vice President for Finance and Administration. Approval by Audit & Risk Management committee was noted in the minutes. A copy of the tax return was emailed to all members of the board of trustees prior to being filed.

ldentifier	Return Reference	Explanation			
FORM 990, PART VI, LINE 12C	CONFLICT OF INTEREST POLICY	Dominican University has a written Conflict of Interest Policy (the policy) that has been approved by the Board of Trustees, which covers each member of the board of trustees, officers and key employees of the Dominican University. The policy requires each member of the Board of Trustees and officers annually 1) to review the policy, 2) to disclose any possible personal, family or business relationships that reasonably could give rise to a conflict involving the University, 3) to acknowledge by his or her signature that he or she is in accordance with the policy. Annually, the policy is mailed to all Trustees and officers for review, sign-off, and return. Follow-up calls and emails are made to ensure all forms are returned timely. Responses are collected and reviewed by the Compliance and Financial Reporting Manager to determine whether conflicts exist. The Board of Trustees performs due diligence process as documented in the policy in determining the proposed or disclosed potential conflict of interest situation. This would include 1) any material facts of the proposed or disclosed transaction not known to the board or committee, 2) the trustees or officer's interest or relationship with respect to the proposed or disclosed transaction. The presence of a trustee or officer who is directly or indirectly a party to a proposed transaction may not be counted when the board or the committee of the board takes action on the proposed transaction. However, this individual may be counted in determining whether a quorum is present for that particular meeting.			

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 15A&B	compensation process for the president, officers, and key employees	Compensation for the President of the University is determined by the Board of Trustees Annually, they determine the base compensation based on the comparability data provided by the Director of Human Resources Bonuses and other indirect compensation is based on meeting stated goals, which are approved by the Executive Committee of the Board of Trustees annually and included as part of the President's contract Bonuses for the president are determined by the Executive Compensation Committee of the Board of Trustees annually as part of her evaluation Bonuses for other members of the senior management team are determined by the President For all other top management positions such as officers, key employees, and academic deans, the President determines the initial compensation based on the data that the Director of Human Resources gathered in relation to market data for similar positions. Annually the Director of Human Resources reviews all compensation, including the senior or top management for equity. Any compensation recommendation is approved by the President and the Senior Vice President of Administration. The compensation review process for the president, officers, and key employees is completed on an annual basis.

ldentifier	Return Reference	Explanation
FORM 990, PART VI, LINE 19	ORGANIZATION DOCUMENTS	Dominican makes its governing documents and financial data, such as conflict of interest policy, bylaws, financial statements, and annual operating budgets, available to the public upon request

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 5	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	NET UNREALIZED GAINS/(LOSS) \$(6,484,672)

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Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493318047992

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization				Employer	identification number		
Dominican University				36-21678	355		
Part I Identification of Disregarded Entities (Com	plete if the organizati	on answered "Yes	" on Form 990, P	art IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) e Total income	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	nizations (Complete g the tax year.)	ıf the organizatioi	n answered "Yes"	on Form 990, I	Part IV, line 34 becau	se it had	l one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity stat (if section 501(c)(Section 5 cont	(g) 512(b)(13) trolled nization
						Yes	No
(1) SINSINAWA DOMINICAN CONGREGATION OF MOST	Preaching	WI	501(C)(3)		1 NA		No
39-0816854							
(2) 585 COUNTRY ROAD Z SINSINAWA WI 53824					N/A		
For Privacy Act and Paperwork Reduction Act Notice, see the Instru	ctions for Form 990.	Cat No 5	0135Y		Schedule R (Form 990) 2011

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

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

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

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

(6)

Pa	rt V	Transactions With Related Organizations (Complete if the organization answered "Yes	s" on Form 990, Par	t IV, line 34, 35, 3	5A, or 36.)		
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 D	uring th	e tax year, did the orgranization engage in any of the following transactions with one or more related orgar	ıızatıons lısted ın Parts	s II-IV?			
а	Recei	t of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a	1	No
b	Gıft, g	ant, or capital contribution to related organization(s)			11	•	No
c	Gıft, g	ant, or capital contribution from related organization(s)			10	:	No
d	Loans	or loan guarantees to or for related organization(s)			10		No
e	Loans	or loan guarantees by related organization(s)			16	:	No
f	Sale	assets to related organization(s)			1f		No
g	Purch	se of assets from related organization(s)			19	ı	No
h	Excha	nge of assets with related organization(s)			11		No
i	Lease	of facilities, equipment, or other assets to related organization(s)			11	Yes	
j	Lease	of facilities, equipment, or other assets from related organization(s)			1j		No
k	Perfor	mance of services or membership or fundraising solicitations for related organization(s)			11	K	No
I	Perfor	nance of services or membership or fundraising solicitations by related organization(s)			11		No
m	Sharır	g of facilities, equipment, mailing lists, or other assets with related organization(s)			1r	n Yes	
n	Sharıı	g of paid employees with related organization(s)			1r	Yes	
0	Reimb	ursement paid to related organization(s) for expenses			10)	No
р	Reimb	ursement paid by related organization(s) for expenses			11	•	No
q	O ther	transfer of cash or property to related organization(s)			10	ı	No
r	O ther	ransfer of cash or property from related organization(s)			11	•	No
2	Ifthe	nswer to any of the above is "Yes," see the instructions for information on who must complete this line, in	icluding covered relati	onships and transact	ion thresholds		
		(a)	(b) Transaction	(c)	(d) Method of determ	ınına ər	nount
		Name of other organization	type(a-r)	Amount involved	involve		iount .
(1) (2)							
(2)							
(3)							
(-)							
(4)							
(5)							

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) organizations?		(g) Share of end-of-year assets	(h) Disproprtionate alloc	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			·	Yes	No			Yes	No		Yes	No	
				·									

Schedule R (Form 990) 2011

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 36-2167855

Name: Dominican University

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

Compensated Employees, and		ient C			tors	5		,_,		
(A) Name and Title	(B) Average hours per		ition (that a					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Richard M King Trustee	1 0	Х						0	0	0
Kevin M Killips Trustee	10	Х						0	0	0
Donna M Carroll	65 0	X		X				334,500	0	71,444
President and Trustee Gregory W Cappelli	1 0	X						0	0	
Trustee Robert F Coleman										
Trustee	1 0	X						0	0	0
Thomas R Dee Trustee	1 0	Х						0	0	0
James P Donahugh Trustee	10	х						0	0	0
Catherine Dooley OP Trustee	1 0	Х						0	0	0
Elizabeth K Dunn Student Trustee	1 0	Х						0	0	0
Manuel Flores Trustee	1 0	Х						0	0	0
Michael J Furey Trustee	1 0	Х						0	0	0
Paul C Gearen Trustee	1 0	Х						0	0	0
Daniel C Hill Trustee	1 0	Х						0	0	0
Judith A Jewison OP Trustee	1 0	Х						0	0	0
Lıly Elızabeth Lı Trustee	10	Х						0	0	0
Eugene T McEnery MD Trustee	1 0	Х						0	0	0
Patrıcıa Mulcahey OP Trustee	1 0	Х						0	0	0
Martın J Noll Trustee	1 0	Х						0	0	0
Raymond C Parmer Trustee	1 0	Х						0	0	0
J David Pepper Trustee	1 0	Х						0	0	0
Raymond J Reid Trustee	1 0	Х						0	0	0
Nancy C Rodriguez Trustee	1 0	Х						0	0	0
Chad Rohman Faculty Trustee	1 0	Х						84,377	0	28,185
Gail L Rosseau MD Trustee	10	Х						0	0	0
M Catherine Crowley Ryan Trustee	1 0	Х						0	0	0

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours		(tion that a			II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
Mary Jo Schuler Trustee	1 0	Х						0	0	0		
Judy Purvin Scully Trustee	1 0	Х						0	0	0		
Susan L Secker Trustee	1 0	Х						0	0	0		
R Matthew Simon Trustee	1 0	Х						0	0	0		
James Winikates Trustee	1 0	Х						10,000	0	0		
Cheryl Johnson Odım VP Academic Affairs	50 0			Х				206,329	0	40,381		
Amy McCormack SVP Finance and Administration	50 0			Х				182,717	0	16,500		
Mary Ann Rowan VP Enrollment Management	50 0			Х				159,500	0	7,137		
Patricia Jill Albin-Hill Chief Information Officer	50 0			х				108,600	0	23,910		
Graczyna Cıchomska VP University Advancement	50 0			х				175,100	0	30,560		
Arvid Johnson Dean Brennan School Business	50 0				х			175,850	0	36,248		
Susan Roman Dean Library Science	50 0				Х			147,126	0	14,713		
Jeffrey Carlson Dean Arts and Science	50 0					Х		134,113	0	22,150		
Dan Condon Dean of Economics	50 0					Х		133,729	0	19,748		
Khalid Razakı Professor of Accountancy	50 0					Х		133,500	0	13,350		
Mark Rodgers Dean School of Social Work	50 0					Х		130,313	0	32,779		
Jeffrey Kraft Chief Marketing Officer	50 0					Х		119,666	0	26,588		
Therese Hogan Former Trustee	0 0						x	108,963		18,338		