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DLN: 93493073009613

Form **990** 匆

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)

2011

OMB No 1545-0047

	Revenue	Service	► The organization may have	e to use a copy	of this return to	satisfy s	tate reporting	requirem	nents	Inspection
A Fo	r the 2	2011 cal	lendar year, or tax year begin	ning 07-01-2011	and ending 06	6-30-201	2			-
B Ch	eck ıf ap	pplicable	C Name of organization ST EDWARDS UNIVERSITY					D Emplo	yer ide	ntification number
Add	ress ch	ange	Doing Business As					74-1: E Teleph	10964	
☐ Na	me char	nge	Doing business as					•		
Init	tal retur	m ·	Number and street (or P O box	f maıl ıs not delivere	ed to street address)) Room/su	ııte	, ,	448-8	
Г Тег	mınated	d	3001 S Congress Avenue					G Gross I	eceipts s	\$ 160,733,409
┌ Am	ended r	return	City or town, state or country, ar	nd ZIP + 4		1				
Гарр	olication	pending	Austin, TX 787046489							
		Ī	F Name and address of p	rıncıpal officer			H(a) Is thi	ı sagroup	return	for
			Dr George Martin 3001 South Congress Av	<u> </u>			affilia			┌ Yes ┌ No
			Austin, TX 78704	-			H(b) Are al	l affiliates	include	ed?
										(see instructions)
I Ta	x-exem	pt status	▼ 501(c)(3)	◀(ınsert no)	4947(a)(1) or ☐ !	527		pexempt		
J W	ebsite	::► http	//www stedwards edu							
K For	m of ord	anızatıon	Corporation Trust Associa	ntion □ Other ►			L Year of fo	mation 19	969 M	State of legal domicile TX
	rt I	Sumr	<u> </u>							
Governance	l t	Γο provid the profes	scribe the organization's mis le a culturally diverse studen ssions We prepare graduates , propose solutions and make	t body with an ed through training	lucation that ach j in critical and c	nieves a				
3	2	Check thi	ıs box ┡┬ ıf the organızatıon	discontinued its	operations or di	isposed (of more than 2	5% of its	net as	sets
	3 1	Number o	of voting members of the gove	rning body (Part	VI, line 1a) .				3	32
Ĭĕ.	4 1	Number o	of independent voting member	s of the governir	ng body (Part VI	, line 1b)	i	4	32
Activities &	5 1	Γotal num	nber of individuals employed	ın calendar year	2011 (Part V , lı	ne 2a)			5	2,332
ă	I		nber of volunteers (estimate i						6	0
	I		elated business revenue from	•					7a	0
	b	Net unrei	ated business taxable incom	e from Form 990	-1, line 34 .	•	n.i.	V	7b	0
	8	Cantrub	sutions and grants (Dart VIII	lina 1 h)			Prio	r Year	26.4	Current Year
활	9		outions and grants (Part VIII m service revenue (Part VIII				-	7,867, 29,736,	-	20,366,920
Revenue	10	_	ment income (Part VIII, colu					4,165,		2,133,164
걆	11		revenue (Part VIII, column (<i>F</i>		•			186,	-	117,244
	12		evenue—add lines 8 through		•					
	42						.]	41,956,		160,733,409
	13 14		and similar amounts paid (Pass paid to or for members (Pass					33,257,	035	38,360,751
	15		s, other compensation, emplo						\dashv	
8	13	5-10)	s, other compensation, empire	o, ce benenes (re		,,,		58,601,	886	60,996,761
Expenses	16a	Profess	sional fundraising fees (Part I	X, column (A), lı	ne 11e)				0	0
ਡੋ	b	Total fun	ndraising expenses (Part IX, column	(D), line 25) 🕨 2,33	5,109					
	17		expenses (Part IX, column (A					38,873,	993	38,408,854
	18		xpenses Add lines 13-17 (r				1	.30,732,		137,766,366
. 07	19	Revenu	ie less expenses. Subtract lir	ne 18 from line 1	2		D a min min a	11,223,		22,967,043
Net Assets or Fund Balances							Beginning Y	j of Curre ear	int	End of Year
98.00 98.00 98.00	20	Total a	ssets (Part X, line 16)					259,166,	008	279,309,491
A PE	21	Total li	abilities (Part X, line 26) .				1	.13,800,	061	115,558,594
žÏ_	22	Netass	sets or fund balances Subtra	ct line 21 from li	ne 20		1	.45,365,	947	163,750,897
Unde know		ties of pe	ature Block rjury, I declare that I have exan , it is true, correct, and comple							
		l k					120	13-03-14		
Sign	1	Signat	ture of officer					13-03-14 ite		
Here		Rhond	da Cartwright V P of Financial Affairs	<u> </u>						
			or print name and title							
Paid		Preparer's signature			Date	:	Check if self- employed •	Preparer (see inst		ver identification number
	arer's	Firm's na	me (or yours		•	<u> </u>		EIN Þ		
Use (Unly		and ZIP + 4							

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

Phone no 🕨

┌Yes ┌No

Par	Check if Schedule O conta		omplishments ny question in this Part III		୮
1	Briefly describe the organization	's mission			
orofe disci orog	rovide a culturally diverse student essions. To make graduates compe iplines. To promote excellence in t rams and the broader community. T yze problems, propose solutions ar	etent in a chosen dis eaching and learning To prepare graduate	cipline and to help them ung in an environment that en s through training in critica	derstand and appreciate the co compasses the campus classro	ontributions of other oom, student life
2	Did the organization undertake at the prior Form 990 or 990-EZ?				Yes V No
	If "Yes," describe these new serv	rices on Schedule O			
3	Did the organization cease conduservices?		ficant changes in how it co		Yes 🔽 No
4	Describe the organization's progrexpenses Section 501(c)(3) and grants and allocations to others,	ram service accomp l 501(c)(4) organiza	tions and section 4947(a)	(1) trusts are required to report	
4a	(Code) (Exper	nses \$ 125,630	,592 including grants of \$	38,360,751) (Revenue \$	138,176,634)
	Higher Education The purpose of the c services as counseling, library facilities, support of the educational mission. The	organization's program se athletics, campus activit	ervices is to educate students by sies for students, etc. and by prov	providing instruction, support to acade viding students with residence halls, di	mic programs through such
4b	(Code) (Exper	nses \$	including grants of \$) (Revenue \$)
4 c	(Code) (Exper	nses \$	including grants of \$) (Revenue \$)
4d	Other program services (Descr (Expenses \$	ribe in Schedule O) 0 including gra	nts of \$	0) (Revenue \$	0)
4e	Total program service expenses	► \$ 125,63	0,592		

Part TV	Checklist o	f Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🖼	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 I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		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? <i>If</i> " <i>Yes," complete Schedule D, Part IX.</i>	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		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
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		Νo
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		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	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
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	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? <i>If</i> "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	

Form 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	•	.	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 206			
L				
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
_	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			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		N o
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			_
	over, a financial account in a foreign country (such as a bank account or securities	4-		
	account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country FR			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
		JU		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		
Ja	organization solicit any contributions that were not tax deductible?	va		140
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
u	services provided to the payor?	/u		110
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	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 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess	ı		
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			_
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11				
	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
_	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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	13a		
	allocated to each state	TOG		
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.			
	the states in which the organization is needed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
14-	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
∡-1 0	If "Ves " has it filed a Form 730 to report these payments? If "No " provide an explanation in Schedule O	1.44		110

Austin,TX 787046489 (512)448-8400

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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		N o
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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	Yes	
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	venue Code.)	-	-	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
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			NI.
ь	taxable entity during the year?	16a		No
	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			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orda	nızatıor	n ▶ -
	St Edwards University Att Rhonda Cartwright Vice President for Financial Affairs 3001 S Congress Ave	. s orga	246101	

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

(a) Name and Title A verage hours par week (describe hours for related organizations in Schedule O) See Additional Data Table (b) Position (do not check more than one box, unless person is both an officer and a director/trustee) (c) Position (do not check more than one box, unless person is both an officer and a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations) (describe hours for related organizations) (describe hours for the director/trustee) (describe hours for related organizations) (describe hours for the director/trustee) (describe hours for related organizations) (describe hours for the director/trustee) (de	Check this box if neither the organiz	•	lated o	rganı	ızatı	ons	compe	ensat	ed any current or fo	ormer officer, direct	tor, or trustee
for related organizations in Schedule Officer Schedule O) organizations	(A)	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer and a				(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the		
See Additional Data Table		for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		MISC)	I
	See Additional Data Table										

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

	(A) Name and Title	(B) Average hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						Rep comp fro organiz	(D) ortable ensation m the zation (W- 9-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of othe compensation from the organization ar	
		hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		organiza	
See A	dditional Data Table													
												4		
												+		
												+		
												+		
												+		
1b	Sub-Total			<u> </u>	<u> </u>	<u> </u>		<u> </u>				+		
С	Total from continuation sheets							>						
d 	Total (add lines 1b and 1c) . Total number of individuals (incl) wh	receive	3,375,326	n	0		615,529
2	\$100,000 of reportable compen						above	<i>)</i> wiii	receive	ed more tha	11			
													Yes	No
3	Ord the organization list any form on line 1a? <i>If</i> "Yes," complete Sch	-			-	eye •	mploy •	ee, d	rhighes • • •	t compens	ated employee	3		No
4	For any individual listed on line is organization and related organization and related organization.											4	Yes	
5	Did any person listed on line 1a									ganızatıon d	r individual for	-	1	
	services rendered to the organiz	ation in res, o	complet	.e scri	eaui	e	or suci	i per	SON .		•	5		No
Se 1	ection B. Independent Con Complete this table for your five		sated	ınden	ende	ent c	ontra	ctors	that red	reived more	than			
•	\$100,000 of compensation from or within the organization's tax y	the organizatio												
		(A) me and business add	dress							Descr	(B) uption of services		(C Comper	
91337	ppetit 7 Collections Drive									Food Service	S		3	,892,560
Chica	x 91337 go, IL 60693													
6023	ndt Mechanical Services Inc 3 Condor Parkway Construction ertz, TX 78154								839,210					
1101 Suite	o's Campus Coffee LLC 101 Music Lane uite 303 ustin, TX 78704							784,140						
Echelo 1005	on Holding Ltd Congress Ave									Property Mar	nagement			559,274
Susma	, TX 78701 an Tisdale Gayle									Architest				727 201
Austın	South Mo Pac Expy , TX 78735 Total number of Independent cont	ractors (include	na but =	no+ !	nitas	l to	thosa	licto	d above	Architect	ved more than			727,201
	\$100,000 of compensation from t			וטנ ווו	eC		LIIUSE	iiste	a above,	, wild lecell	eu more cilali			

Form 9								Page 9
Part \	/111	Statement of			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
nts uts	1a	Federated cam						
<u> </u>	b	Membership du	ies 1b					
چ ∰	C		ents 1c					
<u>≅</u> ,ਰੁ <u>ੱ</u>	d		zations 1d	0				
S.E.	e	Government grant						
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	ibutions included in	18,329,535				
ပ္ပန္	h	Total. Add line	s 1a-1f	▶	20,366,920			
<u> </u>				Business Code				
ne u	2a	Tuition, Fees, Aux	ılıary Services Revenue	611310	138,116,081	138,116,081	0	0
Program Serwce Revenue	b		_					
	C							
	d							
Ē	e							
22	f	All other progra	am service revenue		0	0	0	0
Ť	g	Total. Add lines	s 2a-2f		138,116,081			
	3	Investment inc	ome (including dividen	ds, interest				
			aramounts)	<u>-</u>	1,675,589	0	0	1,675,589
	4	Income from inves	stment of tax-exempt bond	proceeds	0	0	0	0
	5	Royalties			0	0	0	0
	6-	Cross rents	(ı) Real 56,691	(II) Personal				
	6a b	Gross rents Less rental	0	0				
		expenses Rental income	56,691	0				
	C	or (loss)						
	d	Net rental inco	me or (loss)		56,691	0	0	56,691
	7a	Gross amount from sales of assets other than post or	(1) Securities 457,575	(II) Other 0				
	b	Less cost or other basis and	U					
	c	sales expenses Gaın or (loss)	457,575	0				
	d	Net gain or (los	s)		457,575	0	0	457,575
ıue	8a	Gross income fevents (not inc	rom fundraising luding 0					
Other Revenue		of contributions	s reported on line 1c) ne 18 a					
Ě	b		penses b	auants 🛌				
Ü	9a	Gross income f	rom gaming activities ne 19					
	b c		a penses b (loss) from gaming acti					
	10a	Gross sales of returns and allo						
	b c	=	oods sold b (loss) from sales of inv	entory ►				
		Miscellaneou	s Revenue	Business Code				
	11a	Insurance Clai	m Recoveries	900099	56,634	56,634	0	0
	Ь							
	C							
	d	All other reven			3,919	3,919	0	0
	12	Total revenue	s 11a-11d		60,553			
		. o.u. ievellue.	SECTION ACTIONS	• • •	160,733,409	138,176,634	0	2,189,855

Part IX Statement of Functional Expenses

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

	neck if Schedule O contains a response to any question in this Part IX ot include amounts reported on lines 6b,		 (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	0		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	38,360,751	38,360,751		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	3,512,403	1,779,626	1,194,127	538,650
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	46,126,124	40,712,055	4,559,115	854,954
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,582,961	2,221,487	322,132	39,342
9	Other employee benefits	5,451,458	4,479,145	854,615	117,698
10	Payroll taxes	3,323,815	2,891,183	309,010	123,622
11	Fees for services (non-employees)				
а	Management				
b	Legal	178,819	80,000	95,819	3,000
c	Accounting	161,214	2,970	158,244	_
d	Lobbying				
е	Professional fundraising See Part IV, line 17				
f	Investment management fees	158,875	158,875		
g	Other				
12	Advertising and promotion	1,452,922	1,412,999	20,857	19,066
13	Office expenses	3,926,040	3,516,122	163,682	246,236
14	Information technology	2,439,552	466,245	1,972,775	532
15	Royalties				
16	Occupancy	7,099,088	6,485,239	613,678	171
17	Travel	1,725,350	1,525,850	96,814	102,686
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,209,856	1,085,338	104,281	20,237
20	Interest	5,147,779	4,955,193	192,586	_
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,516,758	6,660,374	856,384	
23	Insurance	612,572	74,427	538,145	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	Contract, Technical, Other Labor Expense	2,460,213	2,401,203	39,147	19,863
b	Special Events	1,144,250	928,875	39,309	176,066
c	Contingency Expenses	887,710	887,710	0	0
d	Allocate Information Technology Expenses	0	2,292,583	-2,353,540	60,957
e					
f	All other expenses	2,287,856	2,252,342	23,485	12,029
25	Total functional expenses. Add lines 1 through 24f	137,766,366	125,630,592	9,800,665	2,335,109
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 18.623.946 29.058.821 1 2 2 Savings and temporary cash investments 3 2,445,898 3 2.919.415 7,405,166 4.075.066 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 1,823,131 7 1,738,003 8 9 1,455,812 9 1.917.490 Prepaid expenses and deferred charges 228,902,376 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 68,309,516 b Less accumulated depreciation 162,154,427 10c 160,592,860 61,043,211 11 73,977,731 11 3,701,579 4,550,457 12 12 Investments—other securities See Part IV, line 11 13 512,838 13 479,648 Investments—program-related See Part IV, line 11 . . 14 14 15 15 259, 166, 008 279,309,491 16 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 8,904,070 17 9,761,433 17 Accounts payable and accrued expenses . 18 18 19 5,718,352 19 5,710,340 20 92.167.500 20 90.240.000 21 21 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 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 7,010,139 25 9,846,821 D 26 113,800,061 26 115,558,594 **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 94,143,647 27 101, 105, 778 Unrestricted net assets 18,994,469 28 29,020,800 28 Temporarily restricted net assets Fund 29 32,227,831 29 33,624,319 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 ž 33 145.365.947 33 163,750,897 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 259.166.008 34 279.309.491

Pa	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		160.7	733,40
2	Total expenses (must equal Part IX, column (A), line 25)	2			766,36
3	Revenue less expenses Subtract line 2 from line 1	3		22,9	967,04
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		145,3	365,94
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-4,5	582,09
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		163,7	750,89
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			৮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
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 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 its Schedule O		2-	Yes	
			2c	res	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	issuea			
	Separate basis Consolidated basis Both consolidated and separated basis				
За	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?	ie	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

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As Filed Data -

DLN: 93493073009613

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Inspection

Name of the organization ST EDWARDS UNIVERSITY

Employer identification number

JI LDV	MINDS	ONIVERSITY	74-1109641							
Par	+ T	Reason for Public Charity Status (All organizations must complete this pa		tions						
		zation is not a private foundation because it is (For lines 1 through 11, check only one box								
1	Г	A church, convention of churches, or association of churches section 170(b)(1)(A)(i).	,							
2	굣	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(a	A)(iii).							
4	r	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state								
5	Г	An organization operated for the benefit of a college or university owned or operated by a	governmental uni	t describe	d ın					
		section 170(b)(1)(A)(iv). (Complete Part II)								
6	\sqcap	A federal, state, or local government or governmental unit described in section 170(b)(1)	(A)(v).							
7	Γ	An organization that normally receives a substantial part of its support from a governmen described in section 170(b)(1)(A)(vi) (Complete Part II)	tal unit or from th	e general _l	oublic					
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)								
9		An organization that normally receives (1) more than 331/3% of its support from contribu	utions, membersh	ıp fees, an	d gros	ss				
	•	receipts from activities related to its exempt functions—subject to certain exceptions, an	•	-	_					
		its support from gross investment income and unrelated business taxable income (less s	ection 511 tax) fr	om busine	sses					
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part	-							
10	Γ	An organization organized and operated exclusively to test for public safety. See section 5								
11	F	An organization organized and operated exclusively for the benefit of, to perform the funct one or more publicly supported organizations described in section 509(a)(1) or section 5 the box that describes the type of supporting organization and complete lines 11e through a Type I b Type II c Type III - Functionally integrated	ions of, or to carr 09(a)(2) See sec h 11h)(3).	Check				
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly other than foundation managers and other than one or more publicly supported organization section 509(a)(2)		•						
f		If the organization received a written determination from the IRS that it is a Type I, Type check this box		pporting or	ganız	ation,				
g		Since August 17, 2006, has the organization accepted any gift or contribution from any o following persons?		г	1					
		(i) a person who directly or indirectly controls, either alone or together with persons desc	ribed in (II)	11m(i)	Yes	No				
		and (III) below, the governing body of the the supported organization?		11g(i)						
		(ii) a family member of a person described in (i) above?		11g(ii)						
L		(iii) a 35% controlled entity of a person described in (i) or (ii) above?		11g(iii)						
h		Provide the following information about the supported organization(s)								

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see	col (i) listed in your governing document?		Is the organization in col (i) listed in your governing document?		Is the organization in col (i) listed in your governing document?		of Is the organization in col (i) listed in your governing ection e		(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga in the U	on in anized	(vii) A mount of support?
		ınstructions))	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					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

DLN: 93493073009613

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

► Attach to Form 990. ► See separate instructions.

	f the organization RDS UNIVERSITY			Empl	loyer identification number
51 LD1111	CHATEROLI I			74-1	.109641
Part I	Organizations Maintaining Donor Acorganization answered "Yes" to Form 99	0, Part IV, line 6.			·
		(a) Donor ad	vised funds	(b) Funds and other accounts
	al number at end of year				
Agg	regate contributions to (during year)				
Agg	regate grants from (during year)				
Agg	regate value at end of year				
	the organization inform all donors and donor advids are the organization's property, subject to the			nor advis	sed Yes No
use	the organization inform all grantees, donors, and d only for charitable purposes and not for the ben ferring impermissible private benefit				
	Conservation Easements. Complete	if the organization	answered "Yes" t	o Form	<u> </u>
 - 	pose(s) of conservation easements held by the or Preservation of land for public use (e g , recreating Protection of natural habitat Preservation of open space	on or pleasure)	Preservation of ar Preservation of a	certified	d historic structure
	nplete lines 2a–2d if the organization held a quali ement on the last day of the tax year	med conservation con	tribution in the form	T or a co	Held at the End of the Year
a Tot	al number of conservation easements			2a	neid at the Lind of the Fear
	al acreage restricted by conservation easements			2b	
	nber of conservation easements on a certified his		ed ın (a)	2c	
_	nber of conservation easements included in (c) a		. ,	2d	
	nber of conservation easements modified, transfe		uished or terminate		e organization during
	taxable year ►	irica, reieasea, exting	arstica, or terminate	ed by th	e organization during
Nur	nber of states where property subject to conserva	ation easement is loca	nted >		
	es the organization have a written policy regarding procement of the conservation easements it holds?		ing, inspection, han	dling of	violations, and Yes No
Sta	ff and volunteer hours devoted to monitoring, insp	pecting and enforcing	conservation easen	nents du	ırıng the year 🛌
	ount of expenses incurred in monitoring, inspecti	ng, and enforcing cons	ervation easement	s during	the year
►\$ Doe		\/ d\		- 4	
	es each conservation easement reported on line 2 0(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the	requirements of sec	ction	┌ Yes
bala	Part XIV, describe how the organization reports co ance sheet, and include, if applicable, the text of to organization's accounting for conservation easen	the footnote to the org			
art III	Organizations Maintaining Collection Complete if the organization answered '			or Oth	ner Similar Assets.
art,	ne organization elected, as permitted under SFAS historical treasures, or other similar assets held vide, in Part XIV, the text of the footnote to its fin	for public exhibition,	education or resear	ch in fur	
hıst	ne organization elected, as permitted under SFAS corical treasures, or other similar assets held for point of the self of the	public exhibition, educ			
(i)	Revenues included in Form 990, Part VIII, line 1				▶ \$
	Assets included in Form 990, Part X				<u></u>
	ne organization received or held works of art, histo	orical treasures or ot	her similar assets fi	or financ	cial dain, provide the
	owing amounts required to be reported under SFA			or mand	c.a. gam, provide the

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	<u>llections of Art,</u>	Hist	orical	Treas	<u>ures, or Oth</u>	<u>er Similar Ass</u>	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	of the	e followi	ng that a	ire a significan	use of its collection	on	
а	Public exhibition		d	┌ Lo	an or ex	change prograr	ns		
b	Scholarly research		e	┌ ot	ther				
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how	they fu	rther the	organization's	exempt purpose ın		
	Part XIV								
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t							Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Comple	te ıf t	the org	anızatıd		<u> </u>		, 110
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?					or other asset		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $^{\circ}$	/ and complete the f	ollowi	ng table	<u> </u>				
							Amo	ount	
С	Beginning balance					10	2		
d	Additions during the year					10	1		
е	Distributions during the year					10	•		
f	Ending balance					11	=		
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?				Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	•							
Pai	t V Endowment Funds. Complete								
		(a)Current Year	(b)F	Prior Year		+	(d)Three Years Back	(e) Four \	'ears Back
1a	Beginning of year balance	54,848,981		45,178		41,720,070	57,218,963		
b	Contributions	1,398,998		2,487		513,849	975,638		
C	Investment earnings or losses	1,022		9,221		4,603,824	-13,469,625		
d	Grants or scholarships	645,480			,170	432,739	1,206,665		
е	Other expenditures for facilities and programs	1,275,492		1,280	,394	1,087,510	1,502,963		
f	Administrative expenses	158,875		170	,708	139,036	295,278		
g	End of year balance	54,169,154		54,848	,981	45,178,458	41,720,070		
2	Provide the estimated percentage of the year	r end balance held a	s						
а	Board designated or quasi-endowment 🕨	29 25 %							
b	Permanent endowment - 62 07 %								
c	Term endowment ► 868 %								
3a	Are there endowment funds not in the posse	ssion of the organiza	tion th	hat are	held and	administered f	or the		
	organization by							Yes	No
	(i) unrelated organizations						3a(i)		No
	(ii) related organizations						3a(ii	-	<u> </u>
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•					<u>3b</u>	Yes	<u> </u>
4 Par	t VI Land, Buildings, and Equipme								
Реп	Land, Buildings, and Equipme	int. See roilli 990	J, Pai	•			1		
	Description of property				t or other vestment)	(b) Cost or othe basis (other)	r (c) Accumulated depreciation	(d) Bo	ok value
1a	and				0	3,479,88	33		3,479,883
b i	Buildings		. [0	180,970,0	44,487,030	13	6,483,020
c l	easehold improvements		. [0		0 0		0
d i	Equipment		. [0	24,832,1	16,489,460		8,342,698
е (Other	<u></u>	<u> </u>		0	19,620,28	7,333,026	1	2,287,259
Tota	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colum	n (B),	line 10((c).) .		🕨	16	0,592,860
				<u> </u>			Schedule D	(Form 9	90) 2011

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 ella-o	i-year market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line		
(a) Description of investment type	(b) Book value		od of valuation f-year market value
		Cost of end-o	i-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin			
(a) Descrip			(b) Book value
(1)			(2) 20011 14142
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	0		
Unamortized Bond Premium	678,774		
Government Grants Refundable			
	1,888,759		
Fair Value of Interest Rate Swap	5,260,380		
Annuities Payable	506,016		
Capital Leases Payable	430,307		
Other Liabilities	1,082,585		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	0.046.034		
(column (b) should equal form 550, fall N, col (b) line 25)	9,846,821		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	O ther (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	per Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants	_	
d	Other (Describe in Part XIV)	_	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)	_	
C	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		
	Reconciliation of Expenses per Audited Financial Statements With Expense	es per R	leturn
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	_	
С	Other losses	_	
d	Other (Describe in Part XIV)	_	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Ь	Other (Describe in Part XIV)	_	
С _	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	. 5	
	t XIV Supplemental Information		
	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,		

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

additional information

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

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DLN: 93493073009613

OMB No 1545-0047

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.

Employer identification number

ST ED	WARDS UNIVERSITY	74 1100641			
Pa	rt I	74-1109641		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in it other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student adr programs, and scholarships?		2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broads the period of solicitation for students, or during the registration period if it has no solicitation protein that makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain If you need more space use Part II	gram, ın a way	3	Yes	
				res	
4 a	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the pu with student admissions, programs, and scholarships?	blic dealing	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes	
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?		5a		No.
	Admissions policies?		5b		No
	Employment of faculty or administrative staff? I Scholarships or other financial assistance?		5c 5d		No No
	Educational policies?		5e		No
f	Use of facilities?		5f		No
g	Athletic programs?		5g		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		5h		No
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?		6a 6b	Yes Yes	
	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial pondiscrimination? If "No." explain on Pa		7	Vac	

Part II Supplemental Information

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

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

Schedule E (Form 990 or 990-EZ) 2011

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DLN: 93493073009613

OMB No 1545-0047

Statement of Activities Outside the United States

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection**

Naı	me	of t	he	or	ganı	za	tıoı	n
ST	ED	WA	RD	S	UNI	VE	RS	SIT

Employer identification number

ST E	DWARDS UNIVERSITY				74-1109641	
Pa	"Yes" to Form 990, Pa			he United States. C	Complete if the organiza	ation answered
1	For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	organization r gibility for the	naıntaın record grants or assı	stance, and the select	tion criteria used to awa	
2	For grantmakers. Describe in Pa United States	rt V the organiz	zatıon's procedu	res for monitoring the us	e of grant funds outside th	е
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)	1	4	Program Services	Educational and cultural activities for the organization's students and local residence students	933,16
	Central America and the Caribbean	0	0	Program Services	Educational and cultural activities for the organization's students	45,73
	East Asia and the Pacific	0	0	Program Services	Educational and cultural activities for the organization's students	15,62
	South America	0	0	Program Services	Educational and cultural activities for the organization's students	59,61
	South Asia	0	0	Program Services	Educational and cultural activities for the organization's students	12,43
	North America (including Canada and Mexico, but not the United States)	0	0	Program Services	Educational and cultural activities for the organization's students	33,86
	Sub-total					
1	Total from continuation sheets			1	1	

to Part I

c Totals (add lines 3a and 3b)

1,100,428

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 nur	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)	굣	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	[~	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	굣	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	굣	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	굣	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	্ব	Νo

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011 Page **5**

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

ldentifier	Return Reference	Explanation
SchF_P01_S00_L03		Column [f] The University uses the accrual method of accounting. For the European region, cash disbursements are made by cash payment, check, wire transfer and direct charges against funds on deposit at a financial institution. For the other regions, cash disbursements are made by cash payment, check, credit card and wire transfer.

Schedule F (Form 990) 2010

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Schedule I

(Form 990)

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

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

OMB No 1545-0047

DLN: 93493073009613

Department of the Treasury ► Attach to Form 990 **Inspection** Internal Revenue Service Name of the organization Employer identification number ST EDWARDS UNIVERSITY 74-1109641 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, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other)

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) Scholarships to Students	3568	38,360,751			

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

DLN: 93493073009613

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 Inspection

Internal Revenue Service	► Attach to Form 990. ► See separate instructions.	Inspection
Name of the organiz ST EDWARDS UNIVERSIT	' '	dentification number
	74-11096	41

Pa	rt I Questions Regarding Compensation	1				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	<u> - </u>	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain		1b	Yes		
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive		- · · · · · · · · · · · · · · · · · · ·	2	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study					
	Form 990 of other organizations	<u>.</u>	Approval by the board or compensation committee			
4 a	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment?					
b	Participate in, or receive payment from, a supplement	ntal non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	st comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of					
а	The organization?			5a		No
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III					
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III			8		No
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use 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

				,		,		
l	(B) Breakdown of	W-2 and/or 1099-MIS	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	
(I) (II)	255,898 0	0	1,000 0	18,555 0	15,902 0	15,902 0 291,355		
(I) (II)	166,723 0	0	835 0	12,195 0	14,217 0	193,970 0		
(I) (II)	142,320 0	0	696 0	10,166 0	6,880 0	160,062 0		
(ı) (ıı)	136,942 0	0	657 0	10,115 0	14,273 0	161,987 0		
(I) (II)	251,699 0	0	1,000 0	17,798 0	6,527 0	277,024 0	_	
(ı) (ıı)	230,102	0	1,000 0	16,662 0	17,069 0	264,833 0		
(ı) (ıı)	128,206 0	0	675 0	9,860 0	21,809 0	160,550 0		
(ı) (ıı)	141,172 0	0	639 0	10,003 0	1,758 0	153,572 0		
(I) (II)	149,059 0	0	711 0	11,049 0	15,518 0	176,337 0		
(I) (II)	391,028 0	38,700 0	56,938 0	167,125 0	24,814 0	678,605 0		
'								
'								
'								
'								
'								
	(I) (I) (I) (I) (I) (I) (I) (I) (I) (I)	(i) Base compensation (i) 255,898 (ii) 0 (i) 166,723 (ii) 0 (i) 142,320 (ii) 0 (ii) 251,699 (ii) 0 (i) 230,102 (ii) 0 (i) 128,206 (ii) 0 (i) 141,172 (ii) 0 (i) 149,059 (ii) 0	(i) Base compensation (ii) Bonus & incentive compensation (i) (ii) 255,898 (iii) 0 0 (ii) 166,723 (iii) 0 0 (ii) 142,320 (iii) 0 0 (ii) 136,942 (iii) 0 0 (ii) 251,699 (iii) 0 0 (ii) 230,102 (iii) 0 0 (iii) 128,206 (iii) 0 0 (ii) 141,172 (iii) 0 0 (ii) 391,028 38,700	Compensation Comp	(i) Base compensation (ii) Bonus & incentive compensation (iii) Other reportable compensation other deferred compensation (i) 255,898 0 1,000 18,555 (ii) 166,723 0 835 12,195 (ii) 142,320 0 696 10,166 (ii) 136,942 0 657 10,115 (ii) 251,699 0 1,000 17,798 (ii) 230,102 0 1,000 16,662 (iii) 0 0 0 0 (ii) 128,206 0 675 9,860 (iii) 0 0 0 0 (ii) 141,172 0 639 10,003 (iii) 0 0 0 0 (ii) 149,059 0 711 11,049 (iii) 0 0 0 0 (iii) 149,059 0 711 11,049 (iii) 391,028	(i) Base compensation (ii) Bonus & incentive compensation (iii) Other reportable compensation other deferred compensation benefits (i) (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(i) Base compensation (ii) Bouls & incentive compensation (iii) Other reportable compensation other deferred compensation (B)(i)-(D) (i) 255,898 (ii) 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
SchJ_P01_S00_L01a	Schedule J, Part I, Line 1a	Dr George Martin, President, received a housing allowance per employment contract
	Part I, Line 4	George E Martin The University established a non-qualified deferred compensation plan under IRS Code Section 457F for the purpose of providing a retirement benefit for the university president, George E Martin Under the terms of the plan, the university agreed to establish a non-vested retirement account in a financial institution of the university's selection in the name of the university on behalf of the president, make an annual contribution to the retirement account during the term of the plan, invest the account balance and distribute the account balance to the president in accordance with the occurrence of specific events. The president has no rights to or interest in the retirement account prior to the date the account becomes payable to the president under the terms and conditions set for in the plan. The president's right to the retirement benefits is non-vested and forfeitable prior to the payment date. The retirement account is the property of the university at all times prior to the payment date. The president will become 100 percent vested in and entitled to payment of the retirement account at his normal retirement date, upon termination for disability or death, other than cause and voluntary cause for good reason as defined. The president forfeits all interest in the retirement account in the event of termination for cause or voluntary termination for other than good reason as defined.
SchJ_P02_S00_L00	Part II	George E Martin Included in Column B (III) is a housing allowance of \$45,000, taxable automobile allowance of \$3,438, taxable long-term disability insurance of \$1,000 and taxable reimbursements of \$7,500. The payments of the taxable reimbursements, automobile allowance and housing allowance are made pursuant to the terms of the contract with President Martin and the university.

Schedule J (Form 990) 2011

Schedule K

Supplemental Information on Tax Exempt Bonds

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

► Attach to Form 990. ► See separate instructions.

Internal Revenue Service Name of the organization ST EDWARDS UNIVERSITY

Department of the Treasury

(Form 990)

OMB No 1545-0047

DLN: 93493073009613

Open to Public Inspection

Employer identification number

74-1109641

	art I Bond Issues (a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rice	(f)	Description	of Purpose	(g) Defe	eased	(h) Beha Iss	alfof	lf of financin	
										Yes	No	Yes	No	Yes	No
A	San Leanna Education Facilities Corp	20-1275212	00000000	06-04-2004	10,000	0,000 a	Construction and equipment and new dormitory facility and certain utility efficiency upgrades			Х		Х		Х	
В	San Leanna Education Facilities Corp	20-1275212	00000000	01-11-2005	2,91			truction and ormitory fac	equipment foi ility		х		х		Х
С	San Leanna Education Facilities Corp	20-1275212	00000000	08-01-2006	6,96			truction and ormitory fac	equipment foi ility		Х		х		х
D	San Leanna Education Facilities Corp	20-1275212	79846PAX4	06-21-2007	75,608	3,063 S	See S	chedule K, P	art V		Х		х		Х
P	Proceeds														
			4	В		С			D						
1	A mount of bonds retired					905,	,000		70,000	677,000			3,055,000		
_2	A mount of bonds defeased						0		0			0		0	
3	Total proceeds of issue					10,103,	,289		2,952,856	7,133,824			79,425,672		
4	Gross proceeds in reserve fu					0 0						0			
5	Capitalized interest from pro	ceeds				472,051 62,143		261,961				4,478,234			
6	Proceeds in refunding escrov	W				0 0		0				0			
7	Issuance costs from proceed	ds				98,500 35,985		92,214		288,648					
8	Credit enhancement from pro	oceeds					0 0		0		0				
9	Working capital expenditures	s from proceeds					0		0	0			0		
10	Capital expenditures from pr	oceeds				9,532,	,738		2,854,728		6,7	779,649		43	,964,359
11	Other spent proceeds						0		0			0			0
12	Other unspent proceeds						0		0			0			0
13	Year of substantial completion	on			20	05		20	05		2007			2009	
)	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as part of a current refunding issue?					Х			Х			Χ			Х
15	Were the bonds issued as part of an advance refunding issue?					Х			Х			Χ	×		
16	Has the final allocation of proceeds been made?			Х			Х		Х			Х			
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?							Х		Х			х		
Pa	rt III Private Business	Use													
					A			В	С				D		

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-

No

Χ

Χ

Yes

No

Χ

Χ

Yes

Yes

Yes

No

Χ

No

Χ

Sche	edule K (Form 990) 2011										Page 2
Par	t III Private Business Use (Continued)										•
			Α		В		С			D	
			Yes	No	Yes	No	Ye	s No	5	Yes	No
3a	Are there any management or service contracts that may result in private use?		x		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 final property?								Х		
С	Are there any research agreements that may result in private business use financed property?		х		х		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 by entities other than a section 501(c)(3) organization or a state or local government			0 %	0 % 0 %		%	0 0		% 3 2 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government			0 %	0 %			0 %			
6	Total of lines 4 and 5				0 %			0 % 3 2 %			
7	Has the organization adopted management practices and procedures to en post-issuance compliance of its tax-exempt bond liabilities?	×		Х		х			Х		
Pai	rt IV Arbitrage		•			•	•				•
		Α	_		В		С			D	
		Yes	No	Yes	No	•	Yes	No		Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		х		×			x			x
2	Is the bond issue a variable rate issue?	Х		X			Х				X
32	Has the organization or the governmental issuer entered										

	bond issue?		×		×		x		×
	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?	×		X		X			X
ь	Name of provider	Frost National Bank		Frost National Bank		Frost National Bank			
С С	Term of hedge		28 5		30 4		28 4		
d	Was the hedge superintegrated?	х		×		х			
e	Was a hedge terminated?		х		×		х		
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х
ь	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		х		х		х		х
6	Did the bond issue qualify for an exception to rebate?	Х		Х		Х		х	

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

issuance costs are included from the percentage calculation, the private business use percentage would be 3 6%

private business use percentage excludes bond issuance costs of \$92,214. If the issuance costs are included from the percentage calculation, the private business use percentage would be 1.3%. Column D - The private business use percentage excludes bond issuance costs of \$288,648. If the

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DLN: 93493073009613

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

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

NonCash Contributions

Name of the organization ST EDWARDS UNIVERSITY

Employer identification number

Da	rt I Types of Property				/4-1109641			
, c	Types of Property	(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line	(d Method of d contribution	_		
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property			27.762				
	Securities—Publicly traded .	X	2	27,768	A vg mkt val @ gıft o	late		
	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 .							
	Real estate—Commercial					-		
	Real estate—Other							
18	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	O ffice							
	Other ► (<u>Equipment</u>)	X	1	250	Invoice			
	O ther ▶()							
	O ther ▶()							
	Other ► ()				I			
29	Number of Forms 8283 received for which the organization compl				29			0
	for which the organization compl	ctca i oiiii (5205,1 dictv, bolice Acki	iowicagement : : :	L	-	Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1-28 that it			
	must hold for at least three year							
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangement							
				rowaw of any non-otandard	a a ntribution a 2	31	Yes	
31	Does the organization have a gif	·		·		31		
32a	Does the organization hire or us contributions?	e third parti	ies or related organizations	to solicit, process, or sell i	non-cash	32a		No
h	If "Yes," describe in Part II					52a		110
33	If the organization did not report	revenues i	n column (c) for a type of p	roperty for which column (a) is checked.			
	describe in Part II			a control of the cont	,			

Page 2

Part II

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

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

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DLN: 93493073009613

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public

Inspection

Name of the organization ST EDWARDS UNIVERSITY

Employer identification number 74-1109641

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

ldentifier	Return Reference	eturn Reference Explanation								
F990_P06_S0A_L09	Form 990, Part VI, Section A, Line 9	Thomas Matthew Evans, C/O Carroll College, 1601 N Benton Ave , Helena, MT 59625								

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

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

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

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

ldentifier	Return Reference	Explanation
F990_P07_S0A_L01a	. ,	Donna M Jurick SND is a member of the religious order of the Sisters of Notre Dame Sister Jurick does not receive compensation from St. Edward's University, therefore, no Form W-2 is prepared or reported. Sister Jurick participates in St. Edward's University's medical and dental plan. The amounts reported on Part VII, Section A, Column F reflect the value of these benefits. George E. Martin. Included in Column [D] is a housing allowance of \$45,000, taxable automobile allowance of \$3,438, taxable long-term disability insurance of \$1,000 and taxable reimbursements of \$7,500. The payments of the taxable reimbursements, automobile allowance and housing allowance are made pursuant to the terms of the contract with President Martin and the university.

ldentifier	Return Reference	Explanation
F990_P11_S00_L05	Form 990, Part XI, Line 5	Other changes to net assets as follows Net unrealized losses on investments-\$2,102,173 Loss related to change in fair market value of interest rate swaps-\$2,263,253 Loss related to direct write off of uncollectable pledges-\$216,667 Total other changes to net assets [decrease] -\$4,582,093

ldentifier	Return Reference	Explanation
F990_P12_S00_L02b	Form 990, Part XII, Line 2b	St Edward's University, Inc issued consolidated financial statements that are audited and opined by an independent certified public accountant prepared in accordance with GAAP and GAAS for the fiscal year ended June 30, 2012. The university's financial statements consolidate the financial activity of St Edward's University, Inc. with the financial activity of The Catholic Cemetery Association of Austin, Inc. in which the university has a controlling and economic interest. The independent certified public accountant issued an unqualified opinion for the consolidated financial statements for the fiscal year ended June 30, 2012. In the accountant's opinion, based upon their audit and reports of other auditors, the consolidated financial statements presented fairly, in all material respects, the financial position of St. Edward's University, Inc. and its subsidiaries as of June 30, 2012 and changes in the net assets and cash flows for said year ended in conformity with accounting principles generally accepted in the United States of America.

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DLN: 93493073009613

SCHEDULE R (Form 990)

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.

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ST EDWARDS UNIVERSITY								Employer ic	lent	ification number		
Part I Identification of Disregarded Entities (Com	plete if	the organizati	on :	answered "Yes	" or	n Form 990, Pa	art IV	74-11096 7, line 33.)	41			
(a) Name, address, and EIN of disregarded entity		(b) Primary activity		(c) Legal domicile (state or foreign country)		(d)	(e) End-of-year assets			(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organizations during			ıf t	he organizatio	n aı	nswered "Yes"	on F	orm 990, P	art	IV, line 34 because	e it had	one
(a) Name, address, and EIN of related organization				(c) Legal domicile (state or foreign country)		(d) Exempt Code section		(e) Public charity status (if section 501(c)(3))		(f) Direct controlling entity	(g) Section 512(b) controlled organizatio	
(1) Catholic Cemetery Association of Austin 3650 South IH-35 Austin, TX 78704 74-1185658	Private C	Cemetery	TX		501C3		1			N/A		No
(2) Saint Edwards University Association 3 Place Andre Leroy BP 10808 49008 Angers, France CEDEX 01 FR	Educatio	n		FR		0			0	Saint Edwards University Inc		No
For Privacy Act and Paperwork Reduction Act Notice, see the Instruc	tions for	Form 990.		Cat No 5	013	35Y				Schedule R (Fo	orm 990)	2011

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	, , , , , , , , , , , , , , , , , , ,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or aging	(k) Percentage ownership
							Yes	No		Yes	No	
(1) Initiative for Global Education C/O St Edward's University 3001 South Congress Ave Austin, TX 78704 26-3683989	Education	тх	N/A	Related	0	0		No	0		No	1 00 %
Part IV Identi	fication of Polatod	Orgar	vizations Tayah	lo ac a Cornerai	tion or Truct (C	`amplete if the	organ	ız a tı or	a ancwored "Vec"	on E	orm 0	OO Dort IV

Part IV

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

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

Para	Schedule R (Form 990) 2011		Р	age .
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity b Gift, grant, or capital contribution to related organization(s) c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Sale of assets to related organization(s) g Purchase of assets from related organization(s) f Exchange of assets with related organization(s) it Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) it Performance of services or membership or fundraising solicitations for related organization(s) if No Performance of services or membership or fundraising solicitations by related organization(s) in Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) o Reimbursement paid to related organization(s) for expenses in Sharing of paid employees with related organization(s) for expenses in Q Vest Embursement paid to related organization(s) for expenses in Q Vest Embursement paid to related organization(s) for expenses in Q Vest Embursement paid to related organization(s) for expenses in Q Vest Embursement paid to related organization(s) for expenses	Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity b Gift, grant, or capital contribution to related organization(s) c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Sale of assets to related organization(s) f Sale of assets to related organization(s) f Exchange of assets from related organization(s) f Exchange of assets with related organization(s) i Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) j Performance of services or membership or fundraising solicitations for related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) n Reimbursement paid to related organization(s) for expenses q Other transfer of cash or property to related organization(s) 1q Yes 1q Other transfer of cash or property to related organization(s)	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	N
b Gift, grant, or capital contribution to related organization(s) c Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Sale of assets to related organization(s) f Sale of assets to related organization(s) g Purchase of assets from related organization(s) f Exchange of assets with related organization(s) g Purchase of assets with related organization(s) f Lease of facilities, equipment, or other assets to related organization(s) g Lease of facilities, equipment, or other assets from related organization(s) f Performance of services or membership or fundraising solicitations for related organization(s) g Performance of services or membership or fundraising solicitations by related organization(s) g Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) g Reimbursement paid to related organization(s) for expenses q Other transfer of cash or property to related organization(s) f Other transfer of cash or property to related organization(s)	1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
C Gift, grant, or capital contribution from related organization(s) d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Sale of assets to related organization(s) g Purchase of assets from related organization(s) h Exchange of assets with related organization(s) i Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) k Performance of services or membership or fundraising solicitations for related organization(s) j Performance of services or membership or fundraising solicitations for related organization(s) k Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses o Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s) 14 Yes 14 Yes	a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		N
d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s) f Sale of assets to related organization(s) g Purchase of assets from related organization(s) h Exchange of assets with related organization(s) i Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) k Performance of services or membership or fundraising solicitations for related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) n Reimbursement paid to related organization(s) for expenses q Other transfer of cash or property to related organization(s) 10 Ves In	b Gift, grant, or capital contribution to related organization(s)	1b)	N
e Loans or loan guarantees by related organization(s) f Sale of assets to related organization(s) g Purchase of assets from related organization(s) h Exchange of assets with related organization(s) i Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) k Performance of services or membership or fundraising solicitations for related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid to related organization(s) for expenses q Other transfer of cash or property to related organization(s) 10 Yes 11 Yes	c Gift, grant, or capital contribution from related organization(s)	1 c		N
f Sale of assets to related organization(s) g Purchase of assets from related organization(s) h Exchange of assets with related organization(s) i Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) k Performance of services or membership or fundraising solicitations for related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses l Q Other transfer of cash or property to related organization(s) 14 Yes 15 No. 16 No. 17 No. 18 No. 18 No. 18 No. 19 No. 18	d Loans or loan guarantees to or for related organization(s)	1d		N
p Purchase of assets from related organization(s) h Exchange of assets with related organization(s) i Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) k Performance of services or membership or fundraising solicitations for related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) n Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s) 10 Yes 11 N N N 12 Yes 13 N 14 Yes 15 N 16 Yes 17 N 18 N 19 N 19 N 10 Yes 10 Yes 10 Yes 10 Yes 11 N 12 N 13 N 14 Yes	e Loans or loan guarantees by related organization(s)	1e		N
p Purchase of assets from related organization(s) h Exchange of assets with related organization(s) i Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) k Performance of services or membership or fundraising solicitations for related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) n Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s) 10 Yes 11 N N N 12 Yes 13 N 14 Yes 15 N 16 Yes 17 N 18 N 19 N 19 N 10 Yes 10 Yes 10 Yes 10 Yes 11 N 12 N 13 N 14 Yes		100		
h Exchange of assets with related organization(s) i Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) k Performance of services or membership or fundraising solicitations for related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s)				
i Lease of facilities, equipment, or other assets to related organization(s) j Lease of facilities, equipment, or other assets from related organization(s) k Performance of services or membership or fundraising solicitations for related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s) 11				_
j Lease of facilities, equipment, or other assets from related organization(s) k Performance of services or membership or fundraising solicitations for related organization(s) l Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s) 11	h Exchange of assets with related organization(s)			_
k Performance of services or membership or fundraising solicitations for related organization(s) I Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s) 1k N N N N N 1l N N 1n N 1 N 1 N 1 N 1 N 1 N 1	i Lease of facilities, equipment, or other assets to related organization(s)	11		N
k Performance of services or membership or fundraising solicitations for related organization(s) I Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s) 1k N N N N N 1l N N 1n N 1 N 1 N 1 N 1 N 1 N 1		<u> </u>		
Performance of services or membership or fundraising solicitations by related organization(s) m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s) 11	j Lease of facilities, equipment, or other assets from related organization(s)	<u> </u>		_
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s) 1 m N N N N N N N N N N N N N N N N N N	k Performance of services or membership or fundraising solicitations for related organization(s)			N
n Sharing of paid employees with related organization(s) o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s)	I Performance of services or membership or fundraising solicitations by related organization(s)	11		N
o Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s)	m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	n	N
p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s)	n Sharing of paid employees with related organization(s)	1n		N
p Reimbursement paid by related organization(s) for expenses q Other transfer of cash or property to related organization(s)				
q Other transfer of cash or property to related organization(s)	• Reimbursement paid to related organization(s) for expenses	10	Yes	i
The state of the s	p Reimbursement paid by related organization(s) for expenses	1p		N
The state of the s				
r Other transfer of cash or property from related organization(s)	q Other transfer of cash or property to related organization(s)	1 q	Yes	
	r Other transfer of cash or property from related organization(s)	1r	Yes	

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Catholic Cemetery Association of Austin	r	100,000	Fair Market Value
(2) Saint Edwards University Association	q	410,445	Fair Market Value
(3)			
(4)			
(5)			
(6)			

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) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing 1 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: 11000129 **Software Version:** v1.00

EIN: 74-1109641

Name: ST EDWARDS UNIVERSITY

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours		() ition (that a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee 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	
John Mooney Board Member	1	Х						0	0	0	
Sıster Amata Miller Board Member	1	Х						0	0	0	
Marilyn L O Neill Board Member	1	Х						0	0	0	
Duncan Knapp Underwood Board Member	1	Х						0	0	0	
Kevin O Connor Board Member	1	Х						0	0	0	
Kevin J Koch Board Member	1	Х						0	0	0	
Theodore R Popp Board Member	1	Х						0	0	0	
J William Sharman Jr Vice Chair Board Member	1	Х						0	0	0	
F Gary Valdez Secretary Board Member	1	Х						0	0	0	
Brother Richard Daly Board Member	1	Х						0	0	0	
Timothy F Gavin Board Member	1	х						0	0	0	
John H Bauer Chair Board Member	1	х						0	0	0	
Jim A Smith Board Member	1	х						0	0	0	
Peter Winstead Board Member	1	х						0	0	0	
Carolyn Lewis Gallagher Board Member	1	х						0	0	0	
Patricia Berrier Munday Board Member	1	х						0	0	0	
Brother Richard Gilman Board Member	1	х						0	0	0	
Monsignor Elmer Holtman Board Member	1	х						0	0	0	
Edward E Leyden Board Member	1	х						0	0	0	
Brother Donald Blauvelt Board Member	1	х						0	0	0	
Donna VanFleet Board Member	1	х						0	0	0	
Ian J Turpın Board Member	1	Х						0	0	0	
Melba Whatley Board Member	1	Х						0	0	0	
Margaret Crahan Board Member	1	Х						0	0	0	
Brother James Branigan Board Member	1	х						0	0	0	

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours		tlon that			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		
Thomas Carter Board Member	1	Х						0	0	0		
Judge Wilford Flowers Board Member	1	Х						0	0	0		
Joseph Luccı III Board Member	1	Х						0	0	0		
The Most Reverend John McCarthy Board Member	1	Х						0	0	0		
Rev Thomas J O Hara Treasurer Board Member	1	×						0	0	0		
Graham Hughes Abell Board Member	1	Х						0	0	0		
Regina L Lewis Board Member	1	×						0	0	0		
Bhuban R Pandey Assoc VP Institutional Effectiveness & Research	40			х				111,054	0	20,948		
Michael Larkin Vice President University Advancement	40			Х				252,699	0	23,845		
Donna M Jurick SND Exec Vice President & Provost	40			х				0	0	6,048		
George E Martin President	40			х				486,666	0	187,953		
Katherine Paige Booth VP Marketing & Enrollment Management	40			Х				231,102	0	33,216		
Sandra L Pacheco Vice President Student Affairs	40			Х				143,016	0	16,821		
Doris Constantine Assoc VP Student Financial Services	40			Х				109,820	0	26,603		
Tracy L Manier Assoc VP, Dean Undergraduate Admissions	40			х				108,451	0	28,347		
Rhonda D Cartwright Vice President Financial Affairs	40			х				256,898	0	33,978		
Thomas Matthew Evans Assoc VP Professional Ed & Global Initiatives	40			х				128,881	0	31,399		
David Waldron Vice President Information Technology	40			Х				167,558	0	26,283		
Lisa Kirkpatrick Assoc VP & Dean of Students	40			Х				101,312	0	14,911		
Molly Minus Assoc VP for Academic Affairs	40			Х				137,599	0	23,919		
Kıppı Grıffith Assoc VP Alumnı & Parent Programs	40			х				93,992	0	23,619		
Joseph DeMedeiros Assoc VP Advancement	40			Х				107,869	0	13,243		
Barton Glaser Assoc VP Financial Affairs	40			Х				122,608	0	11,199		
Michael Whitfield-Peterson Assoc VP Facilities	40			Х				112,256	0	21,618		
Marianne F Hopper Professor	40					х		141,811	0	11,303		

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	1	(ition i that a			II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee 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	
Marsha C Kelliher Assoc Professor Management and Business	40					х		149,770	0	26,252	
Father Louis T Brusatti Assoc Professor Religious & Theological Studies	40					х		132,718	0	16,999	
Grant W Simpson Jr Professor of Education	40					Х		142,356	0	5,250	
Brenda J Vallance Professor of Political Science	40					Х		136,890	0	11,775	