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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047
	The organization may have to use a copy of this return to satisfy state reporting requirements	2011 Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012		D Employer identification number 93-0386892	
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization PACIFIC UNIVERSITY Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 2043 COLLEGE WAY City or town, state or country, and ZIP + 4 FOREST GROVE, OR 97116		E Telephone number (503) 352-2819
		G Gross receipts \$ 130,184,262	
F Name and address of principal officer DR LESLEY HALLICK 2043 College Way Forest Grove, OR 97116		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527			
J Website: ▶ WWW.PACIFICU.EDU			
K Form of organization ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶ SCHOOL		L Year of formation 1849	M State of legal domicile OR

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities A DIVERSE & SUSTAINABLE COMMUNITY DEDICATED TO DISCOVERY & EXCELLENCE IN TEACHING, SCHOLARSHIP AND PRACTICE, PACIFIC UNIVERSITY INSPIRES STUDENTS TO THINK, CARE, CREATE, AND PURSUE JUSTICE IN OUR WORLD		
	2 Check this box ☒ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	32
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	2,607
	6 Total number of volunteers (estimate if necessary)	6	425
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	312,677	
7b Net unrelated business taxable income from Form 990-T, line 34	7b	13,894	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	3,617,179	3,959,911
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	105,882,266	110,385,078
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,695,067	3,476,470
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-144,970	-160,585
		115,049,542	117,660,874
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	22,275,527	23,981,608
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	52,950,566	53,853,934
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	16b Total fundraising expenses (Part IX, column (D), line 25) ☒ 3,429,700		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	33,019,290	34,150,794
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	108,245,383	111,986,336
	19 Revenue less expenses Subtract line 18 from line 12	6,804,159	5,674,538
	Net Assets or Fund Balances		Beginning of Current Year
20 Total assets (Part X, line 16)		218,974,639	217,634,763
21 Total liabilities (Part X, line 26)		107,714,168	105,080,579
22 Net assets or fund balances Subtract line 21 from line 20		111,260,471	112,554,184

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

Sign Here	Signature of officer			2013-05-08	
	MICHAEL MALLERY VP OF FINANCE & ADMINISTRATION Type or print name and title				
Paid Preparer's Use Only	Preparer's signature	ROBISON Sue	Date		Preparer's taxpayer identification number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	KPMG LLP 1918 Eighth Avenue Suite 2900 Seattle, WA 98101			EIN
					Phone no

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

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

PACIFIC UNIVERSITY BEGAN AS A SCHOOL FOR ORPHANS FROM THE OREGON TRAIL IN 1848 AND IN 1849 WAS CHARTERED AS A COLLEGE FOUNDED BY CONGREGATIONALISTS AND MODELED AFTER THE BEST SCHOOLS OF NEW ENGLAND OVER TIME, THE UNIVERSITY HAS GROWN INTO A UNIQUE COMBINATION OF UNDERGRADUATE AND GRADUATE PROGRAMS IN LIBERAL ARTS AND SCIENCES, EDUCATION, BUSINESS AND HEALTH TODAY, PACIFIC'S FOCUS ON TEACHING AND LEARNING IN A CLOSE NURTURING ENVIRONMENT LEADS TO GENUINE TRANSFORMATION IN STUDENTS' LIVES DISTINGUISHED BY ITS INQUIRY-BASED CURRICULA AND INTERDISCIPLINARY COLLABORATION, PACIFIC OFFERS STUDENTS EXCEPTIONAL OPPORTUNITIES FOR EXPERIENTIAL LEARNING, LEADERSHIP AND CIVIC ENGAGEMENT VISION 2020 PACIFIC UNIVERSITY WILL EMBRACE DISCOVERY AS AN ESSSENTIAL CHARACTERISTIC OF TEACHING, LEARNING, SCHOLARSHIP, PRACTICE, AND CREATIVE EXPRESSION WE WILL ACHIEVE EXCELLENCE AND DISTINCTION BY INVESTING IN EXCEPTIONAL PEOPLE WE WILL EMBRACE A RICH DIVERSITY OF IDEAS, PEOPLES AND CULTURES WE WILL INCO

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a	(Code) (Expenses \$ 34,296,715 including grants of \$) (Revenue \$ 96,505,317)
	INSTRUCTION - ACADEMIC DEPARTMENTS PROVIDE EDUCATIONAL SERVICES TO ATTENDING STUDENTS
4b	(Code) (Expenses \$ 23,981,608 including grants of \$ 23,981,608) (Revenue \$)
	GRANTS AND SCHOLARSHIPS - THE UNIVERSITY PROVIDES MONETARY SUPPORT THROUGH GRANTS, SCHOLARSHIPS, AND FINANCIAL AID TO QUALIFIED STUDENTS
4c	(Code) (Expenses \$ 23,746,926 including grants of \$) (Revenue \$ 11,018,808)
	OTHER STUDENT SUPPORT SERVICES - DORM, CAFETERIA AND ACTIVITIES ARE PROVIDED TO STUDENTS TO ENHANCE THE ACADEMIC SOCIAL ENVIRONMENT AT THE UNIVERSITY
	(Code) (Expenses \$ 3,203,876 including grants of \$) (Revenue \$ 2,562,744)
	CLINICS-PART OF CURRICULUM
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 3,203,876 including grants of \$) (Revenue \$ 2,562,744)
4e	Total program service expenses \$ 85,229,125

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> 	1	Yes
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (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? <i>If "Yes," complete Schedule C, Part I.</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 "Yes," complete Schedule C, Part II.</i> 	4	Yes
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i> 	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? <i>If "Yes," complete Schedule D, Part I.</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? <i>If "Yes," complete Schedule D, Part III.</i> 	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? <i>If "Yes," complete Schedule D, Part IV.</i> 	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i> 	10	Yes
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	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? <i>If "Yes," complete Schedule D, Part VII.</i> 	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? <i>If "Yes," complete Schedule D, Part VIII.</i> 	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 "Yes," complete Schedule D, Part IX.</i> 	11d	Yes
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	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)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i> 	12a	Yes
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i> 	13	Yes
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</i>	14b	No
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 ? <i>If "Yes," complete Schedule F, Part II and IV.</i>	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 ? <i>If "Yes," complete Schedule F, Part III and IV.</i>	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? <i>If "Yes," complete Schedule G, Part I.</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? <i>If "Yes," complete Schedule G, Part II.</i> 	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i> 	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part IV

Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance						
Check if Schedule O contains a response to any question in this Part V ☐						
		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	329			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return. .	2a	2,607			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes			
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a				No
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	Yes			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes			
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a				
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the aggregate amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	35		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	32
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed ☒ OR
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☐ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ☒ ALLIE LOSLI 2043 COLLEGE WAY FOREST GROVE, OR 97116 (503) 352-2819

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

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 persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

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

[illegible]

Part VII

1b	Sub-Total	▼			
c	Total from continuation sheets to Part VII, Section A	▼			
d	Total (add lines 1b and 1c)	▼	1,874,669	0	176,573

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3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

Section B. Independent Contractors

\$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
KPMG LLP Dept 0771 PO Box 120771 DALLAS, TX 753120771	ACCOUNTING	187,478
Eye Designs LLC 220 West 5th Avenue COLLEGEVILLE, PA 19426	Optical Contractor	120,989
Nu Technologies PO Box 347224 PITTSBURGH, PA 152514224	Phone services	112,346

\$100,000 of compensation from the organization ➡ 3

Part VIII Statement of Revenue

				(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	214,585			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	1,513,930			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,231,396			
	g	Noncash contributions included in lines 1a-1f \$ 75,157					
	h	Total. Add lines 1a-1f		3,959,911			
Program Service Revenue	2a	EDUCATIONAL & EXTRACURRICULAR PROGRAMS	Business Code 611600	96,505,317	96,505,317		
	b	CLINICAL SERVICES	621400	2,562,744	2,562,744		
	c	AUXILLARY SERVICES	532000	11,317,017	11,018,808	298,209	
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		110,385,078			
	Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		2,519,618		14,468
4		Income from investment of tax-exempt bond proceeds . . .		0			
5		Royalties		0			
6a		Gross rents	(i) Real (ii) Personal				
b		Less rental expenses					
c		Rental income or (loss)					
d		Net rental income or (loss)					
7a		Gross amount from sales of assets other than inventory	(i) Securities (ii) Other 13,147,634 6,252				
b		Less cost or other basis and sales expenses	12,188,269 8,765				
c		Gain or (loss)	959,365 -2,513				
d		Net gain or (loss)		956,852			956,852
8a		Gross income from fundraising events (not including \$ 214,585 of contributions reported on line 1c) See Part IV, line 18	a 165,769				
b		Less direct expenses	b 326,354				
c		Net income or (loss) from fundraising events . . .		-160,585			-160,585
9a		Gross income from gaming activities See Part IV, line 19	a				
b		Less direct expenses	b				
c		Net income or (loss) from gaming activities . . .		0			
10a		Gross sales of inventory, less returns and allowances	a				
b		Less cost of goods sold	b				
c		Net income or (loss) from sales of inventory . . .		0			
Miscellaneous Revenue		Business Code					
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d		0				
12	Total revenue. See Instructions		117,660,874	110,086,869	312,677	3,301,417	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	23,981,608	23,981,608		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,055,880	341,735	714,145	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	39,581,915	27,437,956	10,484,180	1,659,779
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,210,641	2,194,770	884,738	131,133
9	Other employee benefits	6,948,254	4,749,774	1,914,691	283,789
10	Payroll taxes	3,057,244	2,089,909	842,467	124,868
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	112,062		112,062	
c	Accounting	167,001		167,001	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	41,236		41,236	
g	Other	0			
12	Advertising and promotion	0			
13	Office expenses	2,650,206	1,811,661	730,302	108,243
14	Information technology	0			
15	Royalties	0			
16	Occupancy	3,190,566	2,181,047	879,206	130,313
17	Travel	0			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,236,096	1,528,579	616,188	91,329
20	Interest	4,564,423	3,120,206	1,257,792	186,425
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	4,352,556	2,975,375	1,199,409	177,772
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	ADMIN COSTS	5,452,913	3,727,570	1,502,628	222,715
b	CATERING & MEALS SERVICES	2,488,642	2,271,847	171,699	45,096
c	INTERSCHOLASTIC ACTIVITIES	1,867,408	1,801,438	57,454	8,516
d	EQUIPMENT	1,698,520	1,161,096	468,051	69,373
e					
f	All other expenses	5,329,165	3,854,554	1,284,262	190,349
25	Total functional expenses. Add lines 1 through 24f	111,986,336	85,229,125	23,327,511	3,429,700
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			17,535,189	1	20,484,244
	2	Savings and temporary cash investments			1,228,064	2	2,576,239
	3	Pledges and grants receivable, net			3,923,914	3	1,785,213
	4	Accounts receivable, net			1,847,406	4	1,895,173
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L			0	6	0
	7	Notes and loans receivable, net			6,840,701	7	6,455,603
	8	Inventories for sale or use			288,359	8	396,960
	9	Prepaid expenses and deferred charges			3,090,122	9	3,658,702
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a	167,667,414			
	b	Less: accumulated depreciation	10b	46,296,023	122,513,475	10c	121,371,391
	11	Investments—publicly traded securities			27,517,714	11	25,898,509
	12	Investments—other securities. See Part IV, line 11			8,196,830	12	8,129,087
	13	Investments—program-related. See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets. See Part IV, line 11			25,992,865	15	24,983,642
	16	Total assets. Add lines 1 through 15 (must equal line 34)			218,974,639	16	217,634,763
Liabilities	17	Accounts payable and accrued expenses			7,365,836	17	6,961,075
	18	Grants payable			0	18	0
	19	Deferred revenue			4,431,667	19	4,894,494
	20	Tax-exempt bond liabilities			77,539,342	20	75,874,890
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties			5,809,581	24	5,059,567
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			12,567,742	25	12,290,553
	26	Total liabilities. Add lines 17 through 25			107,714,168	26	105,080,579
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			61,586,267	27	65,116,261
	28	Temporarily restricted net assets			14,972,222	28	12,883,129
	29	Permanently restricted net assets			34,701,982	29	34,554,794
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			111,260,471	33	112,554,184
	34	Total liabilities and net assets/fund balances			218,974,639	34	217,634,763

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	117,660,874
2	Total expenses (must equal Part IX, column (A), line 25)	2	111,986,336
3	Revenue less expenses Subtract line 2 from line 1	3	5,674,538
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	111,260,471
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-4,380,825
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	112,554,184

Part XII Financial Statements and Reporting

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

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

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization PACIFIC UNIVERSITY	Employer identification number 93-0386892
--	--

Part I Reason for Public Charity Status

(All organizations must complete this part.) See instructions

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

- 1

☐

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

☒

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- e

☐

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

☐

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

☐

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

(i)

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

(ii)

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

(iii)

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

☐

Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage						
14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))		14				
15 Public Support Percentage for 2010 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization						
b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization						
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions						

Part IIIPart III

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

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

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions			

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

Facts And Circumstances Test

Explanation

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

OMB No 1545-0047

2011

Open to Public Inspection

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

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

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

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

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

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

Name of the organization PACIFIC UNIVERSITY	Employer identification number 93-0386892
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

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

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

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

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

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

Part II-A

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

- A

Check

☐

if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B

Check

☐

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

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

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

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

Part II-B

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

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
	a Volunteers?		No	
	b Paid staff or management (include compensation in expenses reported on lines 1 c through 1 i)?		No	
	c Media advertisements?		No	
	d Mailings to members, legislators, or the public?		No	
	e Publications, or published or broadcast statements?		No	
	f Grants to other organizations for lobbying purposes?		No	
	g Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		30,882
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
	i Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1 c through 1 i			30,882
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

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

Attach to Form 990. See separate instructions.

Name of the organization
PACIFIC UNIVERSITY

Employer identification number
93-0386892

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

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

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

1

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

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

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

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

4

Number of states where property subject to conservation easement is located

5

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

Yes

No

6

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

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

\$

8

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

Yes

No

9

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

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

1a

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

b

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

(i)

Revenues included in Form 990, Part VIII, line 1

\$

(ii)

Assets included in Form 990, Part X

\$

2

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

a

Revenues included in Form 990, Part VIII, line 1

\$

b

Assets included in Form 990, Part X

\$

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV

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

1a

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

☐ Yes

☐ No

b

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

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	35,425,366	30,601,967	25,570,959	26,588,734
b	Contributions	596,897	839,549	3,903,626	3,513,711
c	Investment earnings or losses	-560,319	5,190,726	2,326,380	-3,346,086
d	Grants or scholarships	683,848	627,812	633,447	
e	Other expenditures for facilities and programs	559,161	579,065	565,521	1,185,400
f	Administrative expenses				
g	End of year balance	34,218,935	35,425,365	30,601,997	25,570,959

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 37 370 %

b

Permanent endowment ▶ 50 530 %

c

Term endowment ▶ 12 100 %

3a

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

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐ Yes

☐ No

b

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

3b

☐ Yes

☐ No

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		6,496,765		6,496,765
b Buildings		136,821,597	30,615,109	106,206,488
c Leasehold improvements				
d Equipment		16,148,587	11,952,381	4,196,206
e Other		8,200,465	3,728,533	4,471,932
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				121,371,391

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements				
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		117,660,874
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		111,986,336
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		5,674,538
4	Net unrealized gains (losses) on investments	4		-3,234,983
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8		-1,145,842
9	Total adjustments (net) Add lines 4 - 8	9		-4,380,825
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10		1,293,713
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return				
1	Total revenue, gains, and other support per audited financial statements	1		89,624,795
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a	-3,234,983	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d	-693,232	
e	Add lines 2a through 2d	2e		-3,928,215
3	Subtract line 2e from line 1	3		93,553,010
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b	24,107,864	
c	Add lines 4a and 4b	4c		24,107,864
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5		117,660,874

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return				
1	Total expenses and losses per audited financial statements	1		88,331,082
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIV)	2d	326,354	
e	Add lines 2a through 2d	2e		326,354
3	Subtract line 2e from line 1	3		88,004,728
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b	23,981,608	
c	Add lines 4a and 4b	4c		23,981,608
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5		111,986,336

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
OTHER ADJUSTMENTS	SCHEDULE D, PART XI, LINE 8	ACTUARIAL ADJUSTMENTS (353,444) PARTNERSHIP INCOME (99,166) SPLIT INTEREST AGREEMENTS (220,685) QUASI ENDOWMENT FUND (472,547) TOTAL ADJUSTMENT (1,145,842)
OTHER ADJUSTMENTS - REVENUE	Schedule D, Part XII, Line 4b	Scholarships - Reclass 23,981,608 Actuarial Adjustments 353,444 Partnership K-1 Gain 99,166 Direct Fund Raising Expense - Reclass (326,354) TOTAL ADJUSTMENT 24,107,864
OTHER ADJUSTMENTS - EXPENSES	SCHEDULE D, PART XIII, LINE 4B	Scholarships - Reclass 23,981,608
OTHER ADJUSTMENTS -REVENUE ON BOOKS NOT RETURN	Part XII Line 2d	Split Interest Agreements (220,685) Quasi Endowment Fund (472,547) Total Line 2d Adjustments (693,232)
Other Adjustments Expense on Books not Return	Part XIII Line 2d	Direct Fundraising Expense - Reclass 326,354
ENDOWMENT FUNDS	PART V, LINE 4	The endowment funds are used to help the University plan beyond the current year. The fund grows each year through additional gifts and successful investing. The endowment primarily provides funding for scholarships, professorships and other school programs each year.
FIN 48 FOOTNOTE	PART X, LINE 2	THE INTERNAL REVENUE SERVICE HAS RECOGNIZED THE UNIVERSITY AS EXEMPT FROM TAX UNDER THE PROVISIONS OF SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE EXCEPT TO THE EXTENT OF UNRELATED BUSINESS INCOME UNDER SECTIONS 511 THROUGH 515. MANAGEMENT BELIEVES THAT UNRELATED BUSINESS INCOME TAX, IF ANY, IS IMMATERIAL, AND THEREFORE, NO TAX PROVISION HAS BEEN MADE. THE UNIVERSITY ACCOUNTS FOR INCOME TAXES IN ACCORDANCE WITH FASB ASC NO. 740-10, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES - AN INTERPRETATION OF FASB STATEMENT 109 WHICH CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTERPRISE'S FINANCIAL STATEMENTS AND PRESCRIBES A THRESHOLD OF MORE LIKELY THAN NOT FOR RECOGNITION OF TAX BENEFITS OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. ASC 740-10 ALSO PROVIDES RELATED GUIDANCE ON MEASUREMENT, DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, AND DISCLOSURE.

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
PACIFIC UNIVERSITY

Employer identification number

93-0386892

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

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
RACIALLY NONDISCRIMINATORY POLICY	SCHEDULE E, LINE 3	DUE TO THE SIZE OF THE SCHOOL, ITS GEOGRAPHICAL LOCATION, AND THE COMMUNITY IT SERVES, THE NON-DISCRIMINATION POLICY AND RACIAL COMPOSITION OF THE STUDENT BODY IS WELL-KNOWN TO ALL SEGMENTS OF THE GENERAL COMMUNITY SERVED AND IS PUBLISHED LOCALLY.
FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENTAL AGENCY	SCHEDULE E, LINE 6A	PACIFIC UNIVERSITY RECEIVES FINANCIAL AID OR ASSISTANCE FROM GOVERNMENTAL AGENCIES, INCLUDING US GOVERNMENT GRANTS, LOANS AND OTHER GOVERNMENT GRANTS.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
PACIFIC UNIVERSITY

Employer identification number
93-0386892

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

1

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

a

☐ Mail solicitations

b

☐ Internet and e-mail solicitations

c

☐ Phone solicitations

d

☐ In-person solicitations

e

☐ Solicitation of non-government grants

f

☐ Solicitation of government grants

g

☐ Special fundraising events

2a

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

☐ Yes ☐ No

b

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

3

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

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2011

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

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		FUNDRAISING (event type)	(event type)	0 (total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	380,354		380,354
	2	Less Charitable contributions	214,585		214,585
	3	Gross income (line 1 minus line 2)	165,769		165,769
Direct Expenses	4	Cash prizes	0		0
	5	Non-cash prizes	29,912		29,912
	6	Rent/facility costs	155,843		155,843
	7	Food and beverages	0		0
	8	Entertainment	45,017		45,017
	9	Other direct expenses	95,582		95,582
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			(326,354)
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			-160,585

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

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

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

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

b If "No," Explain _____

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

b If "Yes," Explain _____

- 11

Does the organization operate gaming activities with nonmembers?

Yes

No
- 12

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

Yes

No

13

Indicate the percentage of gaming activity operated in

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

14

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

Name

Address

15a

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

Yes

No

b

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

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

\$

Description of services provided

Director/officer

Employee

Independent contractor

17

Mandatory distributions

a

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

Yes

No

b

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

Part IV

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

Identifier	ReturnReference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
PACIFIC UNIVERSITY

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Employer identification number

93-0386892

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes

☐ No
- 2

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

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3

Enter total number of other organizations listed in the line 1 table ▶

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) ACADEMIC AWARDS SCHOLARSHIPS	1394	22,293,074	0	N/A	N/A
(2) ENDOWED SCHOLARSHIPS	379	801,605	0	N/A	N/A
(3) RESTRICTED NAMED SCHOLARSHIPS	524	725,533	0	N/A	N/A
(4) TUITION EXCHANGE WAIVERS	14	23,853	0	N/A	N/A
(5) TUALATIN ACADEMIC WAIVERS	19	137,543	0	N/A	N/A

Part IV

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

Identifier	Return Reference	Explanation
MONITOR PROCESS	SCHEDULE I, PART 1, LINE 2	PACIFIC UNIVERSITY AWARDS FEDERAL AND STATE AID ONLY TO U S CITIZENS AND ELIGIBLE NON-CITIZENS ELIGIBLE NON-CITIZENS ARE DEFINED AS THOSE LIVING IN THE U S FOR "OTHER THAN A TEMPORARY PURPOSE", THEY CAN POSSESS A VARIETY OF DOCUMENTS WHICH DEMONSTRATES THAT STATUS, INCLUDING I-551S, I-151S, AND I-94S WITH CERTAIN STAMPS APPLICANTS WHO FILE A FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) HAVE THEIR FAFSA DATA MATCHED WITH DATA IN SEVERAL FEDERAL DATABASES, INCLUDING THE SOCIAL SECURITY ADMINISTRATION AND THE DEPARTMENT OF HOMELAND SECURITY WHEN THOSE DATABASE MATCHES ARE NOT SUCCESSFUL, WE OBTAIN DOCUMENTATION FROM THE APPLICANTS TO ENSURE THAT WE ARE AWARDING FEDERAL AND STATE AID ONLY TO ELIGIBLE RECIPIENTS THAT DOCUMENTATION BECOMES PART OF THEIR FINANCIAL AID FILES AND IS RETAINED FOR AT LEAST FIVE YEARS ELIGIBLE NON-CITIZENS MUST ALSO BE OREGON RESIDENTS TO RECEIVE STATE AID INSTITUTIONAL AID ONLY IS AWARDED TO CERTAIN INTERNATIONAL STUDENTS WHO ARE IN THE U S SOLELY OR PRIMARILY TO PURSUE POSTSECONDARY EDUCATION ON AN ON-GOING BASIS, STAFF IN FINANCIAL AID AND BUSINESS OFFICE MONITORS THE ACTIVITY OF ALL AWARDING AND DISBURSEMENT ACTIVITY OF AWARDS AND LOANS ON A MONTHLY BASIS AT A MINIMUM ANY DIFFERENCES OR ANOMALIES ARE INVESTIGATED IMMEDIATELY AND, IF NEEDED, CORRECTED

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
PACIFIC UNIVERSITY

Employer identification number

93-0386892

Part I

Questions Regarding Compensation

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

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN MILLER	(i)	184,150	0	0	0	23,233	207,383	0
	(ii)	0	0	0	0	0	0	0
(2) JAMES SHEEDY	(i)	185,336	0	0	0	20,693	206,029	0
	(ii)	0	0	0	0	0	0	0
(3) JENNIFER SMYTHE	(i)	168,146	0	0	0	26,569	194,715	0
	(ii)	0	0	0	0	0	0	0
(4) SUSAN STEIN	(i)	151,724	0	0	0	0	151,724	0
	(ii)	0	0	0	0	0	0	0
(5) DR LESLEY HALICK	(i)	345,575	0	185,620	0	30,155	561,350	0
	(ii)	0	0	0	0	0	0	0
(6) MICHAEL MALLERY	(i)	186,378	0	0	0	23,365	209,743	0
	(ii)	0	0	0	0	0	0	0
(7) Ann Barr-Gillespie	(i)	169,927	0	0	0	20,875	190,802	0
	(ii)	0	0	0	0	0	0	0
(8) Michel Hersen	(i)	160,045	0	0	0	9,945	169,990	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part IIISupplemental 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
HOUSING ALLOWANCE	SCHEDULE J, PART I, LINE 1A	THE UNIVERSITY PROVIDES HOUSING ALLOWANCE AND AUTOMOBILE ALLOWANCE TO THE UNIVERSITY PRESIDENT. THE AMOUNT IS TAXED AND IS INCLUDED IN THE PRESIDENT'S FORM W-2.

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
PACIFIC UNIVERSITY

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2011

Open to Public Inspection

Employer identification number
93-0386892

Part I

Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A Pacific University	93-0386892	345648CE7	08-01-2005	46,425,000	Construct New HEALTH Campus	X			X		X
B Pacific University	93-0386892	345648CX5	07-23-2009	35,305,000	Construct New Building		X		X		X

Part II

Proceeds

	A	B	C	D
1 Amount of bonds retired	600,000	0		
2 Amount of bonds defeased	11,557,498	0		
3 Total proceeds of issue	41,881,709	34,735,307		
4 Gross proceeds in reserve funds	3,563,018	2,320,583		
5 Capitalized interest from proceeds	0	3,272,095		
6 Proceeds in refunding escrow	0	0		
7 Issuance costs from proceeds	579,798	694,706		
8 Credit enhancement from proceeds	1,238,701	0		
9 Working capital expenditures from proceeds	0	0		
10 Capital expenditures from proceeds	26,247,416	28,447,923		
11 Other spent proceeds	0	0		
12 Other unspent proceeds	0	0		
13 Year of substantial completion	2007	2011		
	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?		X		X
15 Were the bonds issued as part of an advance refunding issue?	X		X	
16 Has the final allocation of proceeds been made?	X		X	
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X	

Part III

Private Business Use

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

Part IIIPrivate Business Use (Continued)

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

Part IVArbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	X		X					
2	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				
b	Name of provider	0		0					
c	Term of hedge								
d	Was the hedge superintegrated?		X		X				
e	Was a hedge terminated?		X		X				
4a	Were gross proceeds invested in a GIC ?	X			X				
b	Name of provider	RBC		0					
c	Term of GIC	3 5							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X							
5	Were any gross proceeds invested beyond an available temporary period?		X		X				
6	Did the bond issue qualify for an exception to rebate?		X		X				

Part VProcedures To Undertake Corrective Action

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

Part VISupplemental Information

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

Identifier	Return Reference	Explanation
SCHEDULE K PART III LINE 3A	0	PACIFIC UNIVERSITY HAS FOOD SERVICE IN THE BUILDING IT IS A SMALL KIOSK FOR FACULTY AND STAFF THIS SERVICE IS INCIDENTAL AND SUPPORTS THE ORGANIZATION'S ACTIVITIES

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

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

Name of the organization
PACIFIC UNIVERSITY

Employer identification number
93-0386892

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	17	75,157	AVG MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ►()				
27 Other ►()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement29

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

No

No

No

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

Cat No 51227J

Schedule M (Form 990) 2011

Part III

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
Number of Contributions	Sch M Part I	The number of contributions reported in Part I is the total number of contributions received

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 PACIFIC UNIVERSITY	Employer identification number 93-0386892
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Identifier	Return Reference	Explanation
REVIEW OF FORM 990	FORM 990, PART VI, LINE 11 A & B	A DRAFT OF THE FORM 990 FOR FISCAL YEAR 2011-2012 WILL BE SENT TO EACH MEMBER OF THE BOARD BEFORE FILING THE BOARD HAS DELEGATED THE AUDIT COMMITTEE TO REVIEW THE FORM 990 THE REVIEW PROCESS WILL TAKE PLACE BEFORE THE FORM 990 IS FILED AND WILL INCLUDE PARTIES FROM THE TAX FIRM, THE CONTROLLER, THE VP FOR FINANCE & ADMINISTRATION, AND THE AUDIT COMMITTEE AFTER REVIEW, A COPY OF THE RETURN WILL BE PROVIDED TO EACH BOARD MEMBER, PREFERABLY BY EMAIL TRANSMISSION

Identifier	Return Reference	Explanation
ENFORCEMENT OF WRITTEN CONFLICT OF INTERERST POLICY	FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF TRUSTEES CONFLICT OF INTEREST POLICY IS INCLUDED AS ARTICLE 6, SECTION 5 OF THE BYLAWS WHICH GOVERN THE ACTIONS OF THE BOARD OF TRUSTEES OF PACIFIC UNIVERSITY a) TRUSTEES SHALL DISCLOSE TO THE BOARD ANY POSSIBLE CONFLICT OF INTEREST AT THE EARLIEST PRACTICAL TIME. A TRUSTEE SHALL BE CONSIDERED TO HAVE A CONFLICT OF INTEREST IF (i) SUCH TRUSTEE HAS EXISTING OR POTENTIAL FINANCIAL OR OTHER INTERESTS WHICH IMPAIR OR MIGHT REASONABLY APPEAR TO IMPAIR SUCH MEMBER'S INDEPENDENT, UNBIASED JUDGMENT IN THE DISCHARGE OF SUCH TRUSTEE'S RESPONSIBILITIES TO THE UNIVERSITY, OR (ii) SUCH TRUSTEE IS AWARE THAT A MEMBER OF HIS OR HER FAMILY, OR ANY ORGANIZATION IN WHICH SUCH TRUSTEE (OR MEMBER OF HIS OR HER FAMILY) IS AN OFFICER, DIRECTOR, EMPLOYEE, MEMBER, PARTNER, TRUSTEE OR CONTROLLING STOCKHOLDER, HAS SUCH EXISTING OR POTENTIAL FINANCIAL OR OTHER INTERESTS. FOR THE PURPOSES OF THIS PROVISION, A FAMILY MEMBER IS DEFINED AS A SPOUSE, PARENT, SIBLING, CHILD AND ANY OTHER RELATIVE IF RESIDING IN THE SAME HOUSEHOLD AS THE TRUSTEE. b) ALL TRUSTEES AND COMMITTEE MEMBERS SHALL REFRAIN FROM CONFLICTS OF INTERESTS, THE PERCEPTION OF CONFLICTS OF INTEREST AND REQUESTING SPECIAL FAVORS. HOWEVER, IF CONFLICTS DO OCCUR, TRUSTEES AND COMMITTEE MEMBERS SHOULD DISCLOSE THEIR INTEREST DURING THE TRANSACTION OF BUSINESS AND ABSTAIN FROM VOTING ON ISSUES WHERE A CONFLICT IS PRESENT. ANNUALLY, BOARD MEMBERS RECEIVE A COPY OF THE CONFLICT OF INTEREST STATEMENT AND ARE REQUIRED TO COMPLETE A DISCLOSURE STATEMENT. THIS STATEMENT IS RETURNED TO THE OFFICE OF THE PRESIDENT AND KEPT ON FILE. THE PRESIDENT AND CHAIRMAN OF THE BOARD FOLLOW-UP WITH THE BOARD MEMBERS REGARDING COMPLETING THE DISCLOSURE STATEMENT. THE OFFICE OF THE PRESIDENT MONITORS RECEIPT OF THE SIGNED STATEMENT TO ENSURE ALL BOARD MEMBERS COMPLETE THE DISCLOSURE. ALL RESPONSES ARE REVIEWED BY THE PRESIDENT. IF A MEMBER DISCLOSES A CONFLICT OF INTEREST, A COPY IS SENT TO THE VP OF FINANCE. ADDITIONALLY, UPON DISCOVERY OF A POSSIBLE CONFLICT OF INTEREST OR AT ANY OTHER TIME REQUESTED BY THE COMMITTEE OF TRUSTEES, TRUSTEES WILL BE ASKED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT AND RETURN IT TO THE OFFICE OF THE PRESIDENT. THE UNIVERSITY'S INSTITUTIONAL CONFLICT OF INTEREST POLICY FOR ALL EMPLOYEES REQUIRES EMPLOYEES TO DISCLOSE ALL CONFLICTS OF INTEREST WITH THE UNIVERSITY. A COPY OF THIS CONFLICT OF INTEREST POLICY IS DELIVERED ELECTRONICALLY TO EMPLOYEES ANNUALLY AND IS INCLUDED AMONG UNIVERSITY INSTITUTIONAL POLICIES POSTED IN THE HUMAN RESOURCES WEB PAGE ONLINE. HTTP://WWW.PACIFICU.EDU/HR/POLICIES/INDEX CFM THIS POLICY PROVIDES THAT A CONFLICT OF INTEREST EXISTS IF AN EMPLOYEE'S ACTIONS, ACTIVITIES, OR PRACTICES ON BEHALF OF THE UNIVERSITY EITHER (A) RESULT IN PREFERENTIAL TREATMENT OR AN IMPROPER GAIN OR ADVANTAGE TO THE EMPLOYEE, THE EMPLOYEE'S FAMILY OR BUSINESS ASSOCIATES, OR (B) HAS A DETRIMENTAL EFFECT ON THE UNIVERSITY'S INTERESTS. A CONFLICT OF INTEREST MAY OCCUR WHEN AN EMPLOYEE FAILS TO EXERCISE DUE CARE, SKILL OR JUDGMENT ON BEHALF OF THE UNIVERSITY IN THE PERFORMANCE OF THE EMPLOYEE'S DUTIES BECAUSE OF AN INTEREST INCONSISTENT WITH THE MISSION GOALS OR WORK OF THE UNIVERSITY. EMPLOYEES MUST PROVIDE FULL DISCLOSURE OF ALL FACTS AND CIRCUMSTANCES RELATED TO ANY TRANSACTION, CONTRACT OR ACTIVITY IN WHICH THEY ARE INVOLVED, OR MAY BECOME INVOLVED, THAT MIGHT DIRECTLY OR INDIRECTLY CREATE A CONFLICT OF INTEREST WITH THE UNIVERSITY. DISCLOSURE IS MADE TO THE EMPLOYEE'S IMMEDIATE SUPERVISOR WHO MUST REPORT THE MATTER TO THE VICE-PRESIDENT OF FINANCE AND ADMINISTRATION. FAILURE TO DISCLOSE A CONFLICT OF INTEREST SUBJECTS THE EMPLOYEE TO DISCIPLINE UP TO AND INCLUDING TERMINATION OF EMPLOYMENT. SECTION 4.10 OF THE UNIVERSITY HANDBOOK GOVERNS FACULTY CONFLICTS OF INTERESTS RELATED TO OUTSIDE CONSULTING OR PARTICIPATION IN COMMERCIAL OR GOVERNMENTAL ENTERPRISES THAT HAVE THE POTENTIAL FOR CREATING A CONFLICT OF INTEREST WITH UNIVERSITY OBLIGATIONS. A CONFLICT OF INTEREST DISCLOSURE FORM MUST BE SUBMITTED NO LATER THAN SEPTEMBER 15 ANNUALLY TO A DEPARTMENT CHAIR OR DIRECTOR AND TO THE COLLEGE DEAN BY FACULTY MEMBERS WITH APPOINTMENTS OF 0.5 FTE OR GREATER. THE UNIVERSITY RECENTLY ADOPTED A CONSENSUAL RELATIONS POLICY WHICH PROHIBITS EMPLOYEES FROM EXERCISING AUTHORITY OR PROFESSIONAL INFLUENCE OR ACTING IN A SUPERVISORY CAPACITY OVER ANOTHER EMPLOYEE OR STUDENT WITH WHOM ONE HAS A CONSENSUAL INTIMATE, ROMANTIC OR SEXUAL RELATIONSHIP (ACTUAL OR POTENTIAL CONFLICT OF INTEREST). HTTP://WWW.PACIFICU.EDU/HR/POLICIES/INDEX CFM

Identifier	Return Reference	Explanation
COMPENSATION REVIEW PROCESS	FORM 990, PART VI, SECTION B, LINE 15	THE BY LAWS OF PACIFIC UNIVERSITY SPECIFICALLY STATE THAT THE BOARD OF TRUSTEES IS RESPONSIBLE TO APPOINT THE PRESIDENT AND SET APPROPRIATE CONDITIONS OF EMPLOYMENT WHICH INCLUDE COMPENSATION THE BOARD SHALL ESTABLISH THE CONDITIONS OF EMPLOYMENT OF OTHER KEY INSTITUTIONAL OFFICERS WHO SERVE AT THE PLEASURE OF THE PRESIDENT (IN CONSULTATION WITH THE BOARD AS MAY BE APPROPRIATE) A COMMITTEE OF THE BOARD COMPRISED ENTIRELY OF INDIVIDUALS WHO DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION ARRANGEMENT OR PROPERTY TRANSACTION WILL BE AUTHORIZED BY THE BOARD TO REVIEW COMPENSATION DATA AND OTHER EMPLOYMENT INFORMATION APPROPRIATE FOR THE POSITION OF THE PRESIDENT IN 2006, THE UNIVERSITY CONTRACTED WITH AN OUTSIDE FIRM TO CONDUCT A BENCHMARKING STUDY IN ORDER TO OBTAIN COMPETITIVE AND RELEVANT COMPENSATION DATA THIS BENCHMARKING STUDY INCLUDED RELEVANT INFORMATION ABOUT PACIFIC UNIVERSITY AND THE RESPONSIBILITIES AND ROLE OF THE PRESIDENT SUCH INFORMATION INCLUDED A JOB DESCRIPTION FOR THE POSITION, PACIFIC'S COMPENSATION PHILOSOPHY, GOALS, ROLES AND RESPONSIBILITIES AND OTHER PERTINENT INFORMATION IN ADDITION, THE FIRM CONDUCTED A COMPREHENSIVE SURVEY OF COMPENSATION PACKAGES OF UNIVERSITY PRESIDENTS THAT INCLUDED 12 TO 15 PEER INSTITUTIONS THE SURVEY ITSELF INCLUDED REQUESTS OF INFORMATION ON BASE COMPENSATION, BONUSES, DEFERRED COMPENSATION, AND RETIREMENT PROGRAMS AND INCLUDED VARIOUS PERQUISITES THE FIRM MONITORED RESPONSES AND ANALYZED THE DATA AND THEN PREPARED A REPORT OF THE RESULTS THIS BENCHMARKING REPORT ALSO INCLUDED RECOMMENDATIONS OF THE RANGE OF PERCENTILES FOR COMPENSATION BASED ON THE PEER GROUP AND INCLUDED RECOMMENDATIONS REGARDING THE STRUCTURE OF THE PACKAGE THIS BENCHMARKING STUDY IS OBTAINED AND RELIED HEAVILY UPON BY MEMBERS OF THE EXECUTIVE COMMITTEE AND A SUMMARY OF THE FINDINGS ARE REPORTED IN THE COMMITTEE MINUTES AND SHARED WITH THE BOARD OF TRUSTEES ONCE A POTENTIAL PRESIDENT IS SELECTED, A SPECIAL MEETING OF THE BOARD OF TRUSTEES IS THEN CONDUCTED TO REVIEW THE PROCESS AND TO VOTE IN FAVOR OF ELECTING THE NEW PRESIDENT DURING THIS PROCESS MINUTES ARE TAKEN AND EACH TRUSTEE PRESENT MUST CALL OUT THEIR VOTE AND THEIR VOTE IS RECORDED IN THE MINUTES LISTING THE INDIVIDUALS WHO ELECTED IN FAVOR THEN AT THE NEXT REGULAR BOARD OF TRUSTEES MEETING A MOTION IS MADE AND MUST BE PASSED APPOINTING THE NEXT PRESIDENT THIS IS FULLY DOCUMENTED IN THE MINUTES OF THE MEETING

Identifier	Return Reference	Explanation
PUBLIC DISCLOSURE	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS AND PACIFIC UNIVERSITY'S ARTICLES OF INCORPORATION ARE OF RECORD IN THE OFFICE OF THE OREGON SECRETARY OF STATE. CURRENT ARTICLES OF INCORPORATION AND BYLAWS FOR THE BOARD OF TRUSTEES ARE AVAILABLE FROM THE OFFICE OF THE PRESIDENT OF THE UNIVERSITY UPON REQUEST. THE INSTITUTIONAL CONFLICT OF INTEREST POLICY AND THE CONSENSUAL RELATIONS POLICY ARE SITUATED ON THE INSTITUTION'S HUMAN RESOURCES WEBSITE AT HTTP://WWW.PACIFICU.EDU/HR/POLICIES/INDEX.CFM SECTION 4.10 OF THE UNIVERSITY HANDBOOK IS FOUND ONLINE AT HTTP://WWW.PACIFICU.EDU/HR/POLICIES/INDEX.CFM PDF FINANCIAL STATEMENTS ARE AVAILABLE ON THE INSTITUTION'S BUSINESS OFFICE WEBSITE AT HTTP://PACIFICU.EDU/OFFICES/BO/STAFFFACULTY/INDEX.CFM ALL OF THE DOCUMENTS ABOVE ARE ALSO AVAILABLE BY REQUEST.

Identifier	Return Reference	Explanation
Reconciliation of Net Assets	Part XI Line 5	Net Unrealized Losses (3,928,215) Actuarial Adjustments (353,444) Partnership Income (99,166) Total (4,380,825)

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
PACIFIC UNIVERSITY

Employer identification number
93-0386892

Part I

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

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

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) CHARITABLE REMAINDER TRUSTS (10)	CRUT	OR	NA	TRUST			
(2) CHARITABLE REMAINDER TRUSTS (2)	CRAT	OR	NA	TRUST			
(3) GEORGE ROSSMAN TRUST US BANK 111 SW 5TH AVE 6TH FLOOR PORTLAND, OR 97204 93-6051550	CHARIT TRUST	OR	NA	TRUST	0	0	100 000 %
(4) JUDITH SCOTT WALTER TRUST PO BOX 20160 LONG BEACH, CA 908013160 95-6007893	CHARIT TRUST	OR	NA	TRUST	73,549	0	100 000 %
(5) JOSEPH B VANDERVELDEN FOUNDATION 2781 KITTITAS HWY ELLENSBURG, WA 98926 93-6286524	CHARIT TRUST	OR	NA	TRUST	104,716	0	100 000 %
(6) ELISE EILERS ELLIOTT 1993 TRUST 225 BUSH STREET SUITE 500 SAN FRANCISCO, CA 94104 01-0679337	REVOCABLE TRU	OR	NA	TRUST	233,794	0	100 000 %

Part V

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

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

1

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

a

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

b

Gift, grant, or capital contribution to 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)

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)

r

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

Yes

No

1a

Yes

1b

No

1c

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

No

1k

No

1l

No

1m

No

1n

No

1o

No

1p

No

1q

No

1r

No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) JUDITH SCOTT WALTER TRUST	A	73,549	CASH RECEIVED
(2) JOSEPH B VANDERVELDEN FOUNDATION	A	104,716	CASH RECEIVED
(3) ELISE EILERS ELLIOTT 1993 TRUST	A	233,794	CASH RECEIVED
(4)			
(5)			
(6)			

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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Additional Data

Software ID:
Software Version:
EIN: 93-0386892
Name: PACIFIC UNIVERSITY

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

4d. Other program services					
(Code	) (Expenses \$	3,203,876	including grants of \$	) (Revenue \$	2,562,744)
CLINICS-PART OF CURRICULUM					

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
KENNETH C MCGILL TRUSTEE	1 0	X						0	0	0
DR RICHARD MILES TRUSTEE	1 0	X						0	0	0
JOSEPH A RODRIGUEZ TRUSTEE	1 0	X						0	0	0
TIM SCHAUERMANN TRUSTEE	1 0	X						0	0	0
SHERRY H SMITH TRUSTEE	1 0	X						0	0	0
WILLIAM H STOLLER TRUSTEE	1 0	X						0	0	0
TOMMY THAYER TRUSTEE	1 0	X						0	0	0
SHEILA MANUS VORTMAN TRUSTEE	1 0	X						0	0	0
GEORGE W BURLINGHAM TRUSTEE	1 0	X						0	0	0
MINDY CAMERON TRUSTEE	1 0	X						0	0	0
MANUEL CASTANEDA TRUSTEE	1 0	X						0	0	0
PATRICK CH CLARK TRUSTEE	1 0	X						0	0	0
BRIAN B DOHERTY TRUSTEE	1 0	X						0	0	0
MARK FRANDSEN TRUSTEE	1 0	X						0	0	0
REBECCA GRAHAM TRUSTEE	1 0	X						0	0	0
DAVID C HAMILL TRUSTEE	1 0	X						0	0	0
RICHARD E HANSON TRUSTEE	1 0	X						0	0	0
LAWRENCE W HARRIS III TRUSTEE	1 0	X						0	0	0
DR YVONNE KATZ TRUSTEE	1 0	X						0	0	0
KIM W LEDBETTER TRUSTEE	1 0	X						0	0	0
DR LORELY FRENCH FACULTY TRUSTEE	40 0	X						52,631	0	10,458
DR LESLEY HALLICK PRESIDENT/TRUSTEE	40 0	X		X				531,195	0	30,155
GARY PACARRO TRUSTEE	1 0	X						0	0	0
Julie Berglund Baker TRUSTEE	1 0	X						0	0	0
EVONA M BRIM TRUSTEE	1 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DR MARY FARRELL FACULTY TRUSTEE	40 0	X						79,637	0	11,280
NANCY M PHILLIPS TRUSTEE	1 0	X						0	0	0
LISA WHUI WEN WANG STUDENT TRUSTEE	1 0	X						0	0	0
GERALD C YOSHIDA TRUSTEE	1 0	X						0	0	0
DR GEORGE J BROWN TRUSTEE	1 0	X						0	0	0
LISA HARGIS TRUSTEE	1 0	X						0	0	0
GENE ZURBRUGG TRUSTEE	1 0	X						0	0	0
DR DON R KANIA TRUSTEE	1 0	X						0	0	0
TYLER OSHIRO STUDENT TRUSTEE	1 0	X						5,500	0	0
DR DOUG WEBERLING TRUSTEE	1 0	X						0	0	0
JOHN MILLER VP ACADEMIC AFFAIRS	40 0			X				184,150	0	23,233
MICHAEL MALLERY VP FINANCE & ADMINISTRATION	40 0			X				186,378	0	23,365
JAMES SHEEDY DIR OF OPTOMETRIC RESEARCH	40 0					X		185,336	0	20,693
JENNIFER SMYTHE DEAN OPTOMETRY	40 0					X		168,146	0	26,569
SUSAN STEIN DEAN PHARMACY	40 0					X		151,724	0	0
Ann Barr-Gillespie Executive Dean-(CHP) & Vice Pr	40 0					X		169,927	0	20,875
Michel Hersen Dean/SPP	40 0					X		160,045	0	9,945