



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 2011 Open to Public Inspection
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012		D Employer identification number	
B Check if applicable	C Name of organization UNIVERSITY OF PORTLAND		93-0401259
☐ Address change	Doing Business As		E Telephone number
☐ Name change			(503) 943-7337
☐ Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 178,696,363
☐ Terminated	5000 N Willamette Blvd		
☐ Amended return	City or town, state or country, and ZIP + 4 Portland, OR 972035798		
☐ Application pending			
	F Name and address of principal officer Rev E William Beauchamp 5000 N Willamette Blvd Portland, OR 97203		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)
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527			H(c) Group exemption number ▶
J Website: ▶ www.up.edu			
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 1935	M State of legal domicile OR

Part I		Summary	
Activities & Governance	1 Briefly describe the organization's mission or most significant activities The University of Portland, an independently governed Catholic university guided by the Congregation of Holy Cross, addresses significant questions of human concern through interdisciplinary studies of the arts, sciences, and humanities and through studies in majors and professional programs at the undergraduate and graduate levels. As a diverse community of scholars dedicated to excellence and innovation, we pursue teaching and learning, faith and formation, leadership and service in the classroom, residence halls, and all activities of campus life. Because we value the development of the entire person, the university honors faith and reason as ways of knowing, promotes ethical reflection, and prepares people who respond to the needs of the world and its human family.		
	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	51
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	46
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	2,907
6 Total number of volunteers (estimate if necessary)	6	75	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	265,154	
b Net unrelated business taxable income from Form 990-T, line 34	7b	89,730	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	16,196,219	12,779,335
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	146,334,086	152,350,671
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,136,465	3,685,767
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-980	-62,375
		166,665,790	168,753,398
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	54,127,428	57,059,378
	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)	58,987,517	61,426,464
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ☒ 2,348,090		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	38,346,928	40,818,727
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	151,461,873	159,304,569
	19 Revenue less expenses. Subtract line 18 from line 12	15,203,917	9,448,829
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	333,644,824	340,210,989
	21 Total liabilities (Part X, line 26)	102,548,824	100,442,989
	22 Net assets or fund balances. Subtract line 21 from line 20	231,096,000	239,768,000

Part II		Signature Block		
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
Sign Here	Signature of officer		2013-02-13 Date	
	Alan Timmins VP for Financial Affairs & CFO Type or print name and title			
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed ☐	Preparer's taxpayer identification number (see instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4			EIN
				Phone 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

The University of Portland, an independently governed Catholic university guided by the Congregation of Holy Cross, addresses significant questions of human concern through interdisciplinary studies of the arts, sciences, and humanities and through studies in majors and professional programs at the undergraduate and graduate levels. As a diverse community of scholars dedicated to excellence and innovation, we pursue teaching and learning, faith and formation, leadership and service in the classroom, residence halls, and all activities of campus life. Because we value the development of the entire person, the university honors faith and reason as ways of knowing, promotes ethical reflection, and prepares people who respond to the needs of the world and its human family.

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 \$ 57,059,378 including grants of \$ 57,059,378) (Revenue \$ 0)

Student Financial Aid Programs. A high-quality, personalized education at the University of Portland is an investment in each student's future success. We recognize that some students and their families may need assistance to meet some of their college costs, and we strive to help fill the gap between the cost of attendance and funds available to each student. We connect students with a wide range of internal and external funding options, but the expenses included in this category reflect scholarships and grants through institutional funds, annual and endowed gifts, and matching of government funds.

4b

(Code) (Expenses \$ 42,104,957 including grants of \$ 0) (Revenue \$ 129,607,615)

Postsecondary Education. The primary mission of the University of Portland is education. 3,887 students were enrolled in 2011-12 in the College of Arts and Science, Pamplin School of Business, School of Education, School of Nursing, and Shiley School of Engineering. The University has been repeatedly recognized as one of the top ten master's universities in the west.

4c

(Code) (Expenses \$ 26,117,688 including grants of \$ 0) (Revenue \$ 22,761,939)

Extracurricular Programs and Campus Life. The University of Portland recognizes that an education should develop the entire person and accordingly maintains diverse and comprehensive extracurricular programs on campus. Expenses and revenues listed here include residence halls, dining, NCAA Division I athletics, and conferences.

(Code) (Expenses \$ 9,396,176 including grants of \$ 0) (Revenue \$ 0)

Student Services Programs. The University of Portland provides comprehensive support programs for our students to enable and promote their academic pursuits as well as their personal growth. Expenses in this category include International Student Services, Health and Career Services, Admissions, Registrar, Student Government and Activities, Financial Aid, and Intramurals.

(Code) (Expenses \$ 3,774,581 including grants of \$ 0) (Revenue \$ 0)

Library Programs. The Wilson W. Clark Memorial Library serves the University of Portland community as a dynamic teaching library. The library accomplishes this through interactive instruction, by acquiring and organizing multi-format collections that support the curriculum, and by facilitating access to resources in the library and beyond.

4d

Other program services (Describe in Schedule O)

(Expenses \$ 13,170,757 including grants of \$ 0) (Revenue \$ 0)

4e

Total program service expenses \$ 138,452,780

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)? If "Yes," complete Schedule A 	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		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? If "Yes," complete Schedule C, Part II		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	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? If "Yes," complete Schedule D, Part VI. 	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I 	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV 	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		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	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <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	Yes	
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	185			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	2,907			
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	Yes			
b	If "Yes," enter the name of the foreign country: AU See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	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		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?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
11b	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		No
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		
13	Did the organization have a written whistleblower policy?		No
14	Did the organization have a written document retention and destruction policy?		No
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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	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?		

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. Alan P Timmins 5000 N Willamette Blvd Portland, OR 972035798 (503) 943-7507	

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

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

Form **990** (2011)

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	3,469,546	0	734,325

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. ▶ 53

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
Bon Appetit Management Co 100 Hamilton Ave Ste 400 Palo Alto, CA 94301	Food Services	6,671,593
Kaiser Foundation Health Plan of the NW 3600 N Interstate Ave Portland, OR 97227	Health Plan	4,544,374
Todd Construction Inc PO Box 949 Tualatin, OR 97062	Construction	763,523
AETNA Student Health 1 Charles Park Cambridge, MA 02142	Health Plan	599,093
Standard Insurance Co 900 SW 5th Portland, OR 97204	Insurance	520,971
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 58		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a	0				
	b	Membership dues	1b	0				
	c	Fundraising events	1c	700,870				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	1,077,485				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	11,000,980				
	g	Noncash contributions included in lines 1a-1f \$ 1,327,127						
	h	Total. Add lines 1a-1f						12,779,335
Program Service Revenue			Business Code					
	2a	Tuition and Fees	611310	123,545,287	123,545,287	0	0	
	b	Room and Board	611310	18,124,147	18,124,147	0	0	
	c	Off-Campus Programs	611310	6,062,328	6,062,328	0	0	
	d	Athletics	900099	2,053,253	1,796,785	256,468	0	
	e							
	f	All other program service revenue		2,565,656	2,355,438	8,742	201,476	
	g	Total. Add lines 2a-2f			152,350,671			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		1,404,073	0	-56	1,404,129	
	4	Income from investment of tax-exempt bond proceeds . .		13,921	0	0	13,921	
	5	Royalties		14,742	0	0	14,742	
	6a	(i) Real						
		(ii) Personal						
	b	Less rental expenses						
	c	Rental income or (loss)		0	0			
	d	Net rental income or (loss)						
	7a	(i) Securities						
		(ii) Other						
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)		2,267,773	0	0	2,267,773	
	d	Net gain or (loss)			2,267,773	0	0	2,267,773
	8a	Gross income from fundraising events (not including \$ 700,870 of contributions reported on line 1c) See Part IV, line 18		a				
	b	Less direct expenses		a	98,871			
	c	Net income or (loss) from fundraising events . .		b	176,928	-78,057	0	-78,057
9a	Gross income from gaming activities See Part IV, line 19		a					
b	Less direct expenses		a	1,750				
c	Net income or (loss) from gaming activities . .		b	810	940	0	940	
10a	Gross sales of inventory, less returns and allowances		a					
b	Less cost of goods sold		a					
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d			0				
12	Total revenue. See Instructions			168,753,398	151,883,985	265,154	3,824,924	

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	0		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	54,805,203	54,805,203		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	2,254,175	2,254,175		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	2,686,263	1,511,236	989,397	185,630
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	0	0	0
7	Other salaries and wages	42,757,563	31,392,798	10,245,527	1,119,238
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,291,046	2,666,210	541,538	83,298
9	Other employee benefits	9,174,616	4,758,771	4,333,520	82,325
10	Payroll taxes	3,516,976	2,793,291	624,379	99,306
11	Fees for services (non-employees)				
a	Management	0	0	0	0
b	Legal	254,351	0	254,351	0
c	Accounting	107,020	0	107,020	0
d	Lobbying	0	0	0	0
e	Professional fundraising See Part IV, line 17	0			0
f	Investment management fees	123,008	0	123,008	0
g	Other	1,728,165	1,236,998	491,167	0
12	Advertising and promotion	501,809	170,534	296,748	34,527
13	Office expenses	3,591,276	1,624,242	1,947,311	19,723
14	Information technology	1,123,042	31,678	1,090,659	705
15	Royalties	45,847	45,847	0	0
16	Occupancy	4,247,229	610,858	3,635,301	1,070
17	Travel	3,166,673	2,517,613	465,376	183,684
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	2,742,891	1,728,457	981,356	33,078
20	Interest	3,456,744	3,255,435	201,309	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	5,833,139	3,624,852	2,208,287	0
23	Insurance	902,959	850,133	3,533	49,293
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	Dining hall service	5,264,678	5,264,678	0	0
b	Non-professional services	5,008,111	3,055,691	1,659,058	293,362
c	Allocation of Indirect Expenses Reported in Column C	-98,106	11,927,407	-12,154,774	129,261
d	Unrelated business income tax	3,468	0	3,468	0
e					
f	All other expenses	2,816,423	2,326,673	456,160	33,590
25	Total functional expenses. Add lines 1 through 24f	159,304,569	138,452,780	18,503,699	2,348,090
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			25,832	1	15,182
	2	Savings and temporary cash investments			7,812,167	2	8,318,288
	3	Pledges and grants receivable, net			13,410,627	3	9,617,849
	4	Accounts receivable, net			2,018,893	4	2,508,696
	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			3,993,230	7	3,591,427
	8	Inventories for sale or use			0	8	0
	9	Prepaid expenses and deferred charges			1,071,366	9	772,869
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a	264,624,636			
	b	Less: accumulated depreciation	10b	87,021,941	172,271,022	10c	177,602,695
	11	Investments—publicly traded securities			29,584,958	11	30,339,824
	12	Investments—other securities. See Part IV, line 11			101,522,389	12	105,326,176
	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			1,934,340	15	2,117,983
	16	Total assets. Add lines 1 through 15 (must equal line 34)			333,644,824	16	340,210,989
Liabilities	17	Accounts payable and accrued expenses			6,540,220	17	9,175,401
	18	Grants payable			0	18	0
	19	Deferred revenue			7,774,900	19	6,975,741
	20	Tax-exempt bond liabilities			78,804,346	20	76,527,872
	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			0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D			9,429,358	25	7,763,975
	26	Total liabilities. Add lines 17 through 25			102,548,824	26	100,442,989
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			112,579,000	27	124,391,000
	28	Temporarily restricted net assets			47,960,000	28	42,321,000
	29	Permanently restricted net assets			70,557,000	29	73,056,000
	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			231,096,000	33	239,768,000
	34	Total liabilities and net assets/fund balances			333,644,824	34	340,210,989

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	168,753,398
2	Total expenses (must equal Part IX, column (A), line 25)	2	159,304,569
3	Revenue less expenses Subtract line 2 from line 1	3	9,448,829
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	231,096,000
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-776,829
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	239,768,000

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 UNIVERSITY OF PORTLAND	Employer identification number 93-0401259
--	--

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

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

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

Part 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 D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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 UNIVERSITY OF PORTLAND	Employer identification number 93-0401259
--	--

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	106,192,116	87,175,501	74,082,444	99,889,494
b	Contributions	3,075,240	6,984,145	4,788,487	2,676,606
c	Investment earnings or losses	3,299,103	15,651,172	11,472,608	-23,703,012
d	Grants or scholarships	1,847,921	1,968,252	1,732,782	2,033,521
e	Other expenditures for facilities and programs	1,395,812	1,650,450	1,435,256	2,747,123
f	Administrative expenses	0	0	0	0
g	End of year balance	109,322,726	106,192,116	87,175,501	74,082,444

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 17 %

b

Permanent endowment ▶ 83 %

c

Term endowment ▶ 0 %

3a

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

(i)

unrelated organizations

(ii)

related organizations

3a(i)

Yes

No

3a(ii)

No

b

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

3b

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	0	4,038,338		4,038,338
b Buildings	0	176,582,775	37,165,440	139,417,335
c Leasehold improvements	0	0	0	0
d Equipment	0	45,896,696	37,875,675	8,021,021
e Other	0	38,106,827	11,980,826	26,126,001
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				177,602,695

Schedule D (Form 990) 2011

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	168,753,398
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	159,304,569
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	9,448,829
4	Net unrealized gains (losses) on investments	4	-776,575
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	-254
9	Total adjustments (net) Add lines 4 - 8	9	-776,829
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	8,672,000

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	111,403,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	-776,575
b	Donated services and use of facilities	2b	309,166
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIV)	2d	176,011
e	Add lines 2a through 2d	2e	-291,398
3	Subtract line 2e from line 1	3	111,694,398
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	0
b	Other (Describe in Part XIV)	4b	57,059,000
c	Add lines 4a and 4b	4c	57,059,000
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	168,753,398

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	102,731,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	309,166
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIV)	2d	176,265
e	Add lines 2a through 2d	2e	485,431
3	Subtract line 2e from line 1	3	102,245,569
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	0
b	Other (Describe in Part XIV)	4b	57,059,000
c	Add lines 4a and 4b	4c	57,059,000
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	159,304,569

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
SchD_P05_S00_L01a	Schedule D, Part V, Line 1a	During the 2010 tax year the University changed its fiscal year to end on June 30 instead of May 31. In 2010 two Form 990s were submitted, one for the 12 months ended May 31, 2011 and the other for the month of June 2011. Endowment activity and balance amounts listed for the last three years in Schedule D Part V are as of 6/30/11, 5/31/10, and 5/31/09.
SchD_P05_S00_L03a(i)	Schedule D, Part V, Line 3a(i)	The University invests most of its endowment with a religious affiliate that shares the University's Catholic ministry and education mission. These assets are held in the affiliate's endowment and are invested for the University's benefit.
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The endowment supports a wide spectrum of campus life including student scholarships, faculty development efforts, the library, and a variety of other academic and student service programs.
SchD_P11_S00_L08	Schedule D, Part XI, Line 8	Rounding.
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Other reconciling items include fundraising expenses included in Part VIII (\$176,928), gaming expenses included in Part VIII (\$810), and rounding.
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Scholarships of \$57,059,000 are included in the University's financial statements as contra-revenue. They are revenue and expense in the 990.
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	Other reconciling items include fundraising expenses included in Part VIII (\$176,928), gaming expenses included in Part VIII (\$810), and rounding.
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	Scholarships of \$57,059,000 are included in the University's financial statements as contra-revenue. They are revenue and expense in the 990.

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
UNIVERSITY OF PORTLAND

Employer identification number

93-0401259

Part I

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II

- 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

- 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

- 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

	YES	NO
1	Yes	
2	Yes	
3	Yes	
4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	
5a		No
5b		No
5c		No
5d		No
5e		No
5f		No
5g		No
5h		No
6a	Yes	
6b		No
7	Yes	

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
SchE_P01_S00_L03	Schedule E, Part I, Line 3	An advertisement stating our racially nondiscriminatory policy was placed in the primary regional newspaper in the spring. Additionally, the policy is featured on our website.
SchE_P01_S00_L06	Schedule E, Part I, Line 6	The University participates in a variety of federal and state student grant and aid programs, including Pell Grants, Academic Competitiveness Grants, SMART Grants, Supplemental Educational Opportunity Grants, and Oregon Opportunity Grants.

OMB No 1545-0047

Open to Public Inspection

93-0401259

[illegible]

3 Enter total number of other organizations or entities ►

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

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☒

Yes

☐

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐

Yes

☒

No

Part V

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

Identifier	Return Reference	Explanation
SchF_P01_S00_L02	Schedule F, Part I, Line 2	Scholarships and grants are distributed to students by posting the funds directly to their student accounts to offset charges for tuition, fees, and room and board. Any remaining credit is refunded to the student via check or direct deposit for use in purchasing books, housing, food, etc.

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
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

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.

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
		Gala Dinner (event type)	Golf Tournament (event type)	3 (total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	605,453	93,667	100,622	799,742
	2 Less Charitable contributions	586,569	77,258	37,043	700,870
	3 Gross income (line 1 minus line 2)	18,884	16,409	63,579	98,872
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Non-cash prizes	0	18,369	4,824	23,193
	6 Rent/facility costs	20,385	26,467	31,186	78,038
	7 Food and beverages	40,165	0	25,692	65,857
	8 Entertainment	0	0	5,000	5,000
	9 Other direct expenses	0	1,575	3,265	4,840
	10 Direct expense summary Add lines 4 through 9 in column (d)				(176,928)
	11 Net income summary Combine lines 3 and 10 in column (d).				-78,056

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))
Revenue	1 Gross revenue				
Direct Expenses	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
------------	-----------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
UNIVERSITY OF PORTLAND

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
93-0401259

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) Scholarships from institutional funds for tuition, fees, and room & board	3531	51,919,294	0		
(2) Scholarships from annual donations for tuition, fees, and room & board	188	633,684	0		
(3) Scholarships from endowed donations for tuition, fees, and room & board	524	1,805,508	0		
(4) Scholarships from institutional match of government funds for tuition, fees, and room & board	268	446,717	0		

Part IV

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

Identifier	Return Reference	Explanation
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Scholarships and grants are distributed to students by posting the funds directly to their student accounts to offset charges for tuition, fees, and room and board. Any remaining credit is refunded to the student via check or direct deposit for use in purchasing books, housing, food, etc.

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
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

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 ☒ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☒ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☒ Health or social club dues or initiation fees ☒ 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	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☐ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ 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? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c	No
	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? If "Yes," to line 5a or 5b, describe in Part III	5b	No
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? If "Yes," to line 6a or 6b, describe in Part III	6b	No
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	

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.

[illegible]

Part III **Supplemental Information**

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

Identifier	Return Reference	Explanation
SchJ_P01_S00_L01a	Schedule J, Part I, Line 1a	First class travel is allowed only for flights exceeding 8 hours and with officer approval per written policy. Companion travel is allowed with a bona fide business purpose and approval of an officer. University residences (on-campus) are only provided to University employees who are required to be available on campus at all hours; the President is also provided with basic housekeeping services. Social/business association memberships are provided in limited circumstances with officer approval when required for development activities per written policy.
SchJ_P01_S00_L03	Schedule J, Part I, Line 3	For compensation review procedures see note in Schedule O for Part VI, Section B, Line 15.

Software ID: 11000129
Software Version: v1.00
EIN: 93-0401259
Name: UNIVERSITY OF PORTLAND

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) 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 compensation				
Rev E William Beauchamp CSC	(i)	296,852	0	20,850	32,654	43,908	394,264	0
	(ii)	0	0	0	0	0	0	0
Br Donald Stabrowski CSC	(i)	177,500	0	4,600	19,525	6,134	207,759	0
	(ii)	0	0	0	0	0	0	0
Mr James Lyons	(i)	145,697	0	9,383	16,445	67,881	239,406	0
	(ii)	0	0	0	0	0	0	0
Mr James Ravelli	(i)	165,700	0	2,840	19,239	10,227	198,006	0
	(ii)	0	0	0	0	0	0	0
Dr John Watzke	(i)	155,697	0	1,050	17,325	16,407	190,479	0
	(ii)	0	0	0	0	0	0	0
Dr Robin Anderson	(i)	208,057	0	4,310	24,138	21,983	258,488	0
	(ii)	0	0	0	0	0	0	0
Dr Joanne Warner	(i)	157,734	0	1,167	17,577	8,577	185,055	0
	(ii)	0	0	0	0	0	0	0
Mr Lawrence Williams	(i)	187,543	0	7,640	20,828	16,125	232,136	0
	(ii)	0	0	0	0	0	0	0
Dr Thomas Greene	(i)	142,500	0	17,183	17,387	1,084	178,154	0
	(ii)	0	0	0	0	0	0	0
Dr Zia Yamayee	(i)	135,034	0	876	14,915	7,053	157,878	0
	(ii)	0	0	0	0	0	0	0
Mr Eric Reveno	(i)	323,197	28,750	8,318	38,912	17,126	416,303	0
	(ii)	0	0	0	0	0	0	0
Dr Mojtaba Takallou	(i)	92,360	0	102,176	21,698	16,770	233,004	0
	(ii)	0	0	0	0	0	0	0
Dr Howard Feldman	(i)	140,848	0	4,290	16,058	15,989	177,185	0
	(ii)	0	0	0	0	0	0	0
Dr Arjun Chatrath	(i)	158,823	0	1,090	17,705	11,043	188,661	0
	(ii)	0	0	0	0	0	0	0
Dr Brian Adams	(i)	137,284	0	16,086	14,947	16,436	184,753	0
	(ii)	0	0	0	0	0	0	0
Mr Denis Ransmeier	(i)	122,074	0	976	12,112	2,195	137,357	0
	(ii)	0	0	0	0	0	0	0
Mr John Goldrick	(i)	125,268	0	14,553	14,615	27,358	181,794	0
	(ii)	0	0	0	0	0	0	0

Schedule K (Form 990) Department of the Treasury Internal Revenue Service	Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ▶ Attach to Form 990. ▶ See separate instructions.						OMB No 1545-0047					
							2011 Open to Public Inspection					
	Name of the organization UNIVERSITY OF PORTLAND							Employer identification number 93-0401259				

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 State of Oregon-Oregon Facilities Authority	93-6001787	00068608J	12-20-2007	86,727,005	See Part VI		X		X		X

Part II Proceeds									
		A		B		C		D	
1	Amount of bonds retired	10,170,000							
2	Amount of bonds defeased	0							
3	Total proceeds of issue	86,727,005							
4	Gross proceeds in reserve funds	6,196,147							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrow	32,582,827							
7	Issuance costs from proceeds	1,031,436							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	47,003,879							
11	Other spent proceeds	0							
12	Other unspent proceeds	0							
13	Year of substantial completion	2010							
		Yes	No						
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?	X							
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use											
				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						
2	Are there any lease arrangements that may result in private business use of bond-financed property?			X							

Part III

Private Business Use (Continued)

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

Part IV

Arbitrage

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

Part V

Procedures To Undertake Corrective Action

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

Part VI

Supplemental Information

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

Identifier	Return Reference	Explanation
SchK_P01_S00_L00e	Schedule K, Part I, Column e	Part I Column e reports an accurate issuance price of \$86,727,005. The instructions for Column e say to report the amount listed on Row 21 of Form 8038, but that form erroneously lists an issue price of \$87,727,005. Row 18 of the Form 8038 shows the correct issue price.
SchK_P01_S00_L00f	Schedule K, Part I, Column f	Description of purpose of tax-exempt bond: Land acquisition and building projects - \$47,003,879, Bond issuance costs - \$1,031,436, Reserve fund - \$6,108,863, Refunding of 1997 and 2000 issues - \$32,582,827.

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization UNIVERSITY OF PORTLAND	Employer identification number 93-0401259
---	---

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

- 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$ _____										

Part III Grants or Assistance Benefitting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Kristin Sponaugle	Family member of Nancy Bryant, Regent	56,378	Employment		No
(2) Fr James Lies CSC	Family member of Fr William Lies CSC, Regent	89,830	Employment		No
(3) Christopher Greene	Family member of Thomas Greene, Dean	32,626	Employment		No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE 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.

Department of the Treasury
Internal Revenue Service

Name of the organization
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

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	X	2	244,500	Appraisal
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		5	\$1
5 Clothing and household goods	X		336	\$1, Cost
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	33	533,908	Market quote
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	X	1	388	Retail price
19 Food inventory	X	4	28,637	\$1, Cost
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts	X	1	2,000	Appraisal
23 Scientific specimens	X	1	1	\$1
24 Archeological artifacts				
Building				
25 Other ► (<u>fixtures</u>)	X	1	512,430	Retail price
Classroom				
26 Other ► (<u>equipment</u>)	X	9	4,919	\$1, Appraisal, Retail Price
Travel and Event				
27 Other ► (<u>Vouchers</u>)	X	2	2	\$1
28 Other ► (<u> </u>)				

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

29

1

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

30a

Yes

No

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

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

31

Yes

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

32a

Yes

b If "Yes," describe in Part II

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

Part 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
SchM_P01_S00_L00	Schedule M, Part I	Column b is reporting number of contributions
SchM_P01_S00_L04	Schedule M, Part I, Line 4	"\$1 " - When a third party valuation (such as market price or independent appraisal) is not readily available for a non-cash gift the University recognizes revenue of \$1 per gift
SchM_P01_S00_L32b	Schedule M, Part I, Line 32b	UP periodically uses realtors or auction houses to assist in the disposal of gifted real property No such third parties were used in the report year UP also uses licensed brokers to sell gifts of marketable securities Such sales occurred in the tax year

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
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

Identifier	Return Reference	Explanation
F990_P01_S00_L08	Form 990, Part I, Line 8	During the 2010 tax year the University changed its fiscal year to end on June 30 instead of May 31. In 2010 two Form 990s were submitted, one for the 12 months ended May 31, 2011 and the other for the month of June 2011. To increase comparability, prior year revenue and expense figures listed in Part I are for the 12 months ended May 31, 2011. Prior year asset and fund balances listed in Part I and Part X are as of June 30, 2011.
F990_P04_S00_L08	Form 990, Part IV, Line 8	The University has previously reported collections of works of art and historical treasures, but we have determined that they do not meet the definitions contained in SFAS 116 so we are answering "No" to Part IV Line 8.
F990_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	The bylaws grant Congregation of Holy Cross the right to appoint up to nine board members.
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	The Audit Subcommittee reviewed and approved the filing, which was subsequently distributed to the entire board electronically through a website. A summary of Schedule B rather than the full Schedule was distributed to the Board and Audit Subcommittee to maintain donor confidentiality.
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The salaries of all officers and key employees are reviewed by the Audit Subcommittee of the Board of Regents annually. All salaries (except the Athletic Director and Men's Head Basketball Coach) are compared to two CUPA (College & University Personnel Association) benchmarks (Masters Schools and Private Religious Schools) as well as the prior year compensation provided for the position. The Athletic Director and Men's Head Basketball Coach salaries are compared with counterpart salaries for teams in the West Coast Conference.
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	Financial statements are available on www.up.edu. Governing documents are available to the public upon request.
F990_P07_S0A_L01a	Form 990, Part VII, Section A, Line 1a	Rev Jeffrey L Allison CSC was employed by the University as an Instructor and as a Graduation and Degree Audit Coordinator. Rev Francis J Murphy CSC was employed by the University as Pastoral Care Counselor and Adjunct Instructor. All of Fr Allison's and Fr Murphy's compensation listed in Part VII was related to their employment; they received no compensation connected to membership on the Board of Regents.
F990_P10_S00_L01	Form 990, Part X, Line 1	During the 2010 tax year the University changed its fiscal year to end on June 30 instead of May 31. In 2010 two Form 990s were submitted, one for the 12 months ended May 31, 2011 and the other for the month of June 2011. Prior year asset and fund balances are as of June 30, 2011.
F990_P11_S00_L05	Form 990, Part XI, Line 5	Other changes in net assets include unrealized investment losses (which are included in the fair market values included in the balance sheet but are excluded in revenues reported on the 990) and adjustments for rounding.

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
UNIVERSITY OF PORTLAND

Employer identification number
93-0401259

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
(1) Northwest Academic Computing Consortium Inc 3203 SE Woodstock Blvd Suite 326 Portland, OR 97202 84-1172799	Foster academic technology	OR	501(c)(3)	11 Type I	N/A		No
(2) Friends of Saturday Academy 5000 N Willamette Blvd Portland, OR 97203 20-3770321	Education	OR	501(c)(3)	9	University of Portland		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 trust (18) 5000 N Willamette Blvd Portland, OR 97203	Charitable trust	OR	N/A	T			

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

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

Yes

1j

No

1k

Yes

1l

No

1m

Yes

1n

No

1o

No

1p

No

1q

Yes

1r

Yes

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Friends of Saturday Academy	a-iv	12,000	Cash
(2) Charitable remainder trust (18)	q	158,717	Cash
(3) Charitable remainder trust (18)	r	165,053	Cash
(4)			
(5)			
(6)			

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

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
------------	------------------	-------------	--

Additional Data

Software ID: 11000129
Software Version: v1.00
EIN: 93-0401259
Name: UNIVERSITY OF PORTLAND

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services
(Code) (Expenses \$ 9,396,176 including grants of \$ 0) (Revenue \$ 0) Student Services Programs The University of Portland provides comprehensive support programs for our students to enable and promote their academic pursuits as well as their personal growth Expenses in this category include International Student Services, Health and Career Services, Admissions, Registrar, Student Government and Activities, Financial Aid, and Intramurals
(Code) (Expenses \$ 3,774,581 including grants of \$ 0) (Revenue \$ 0) Library Programs The Wilson W Clark Memorial Library serves the University of Portland community as a dynamic teaching library The library accomplishes this through interactive instruction, by acquiring and organizing multi-format collections that support the curriculum, and by facilitating access to resources in the library and beyond

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				
Mr Joseph B Allegretti Trustee	1	X						0	0	0	
Rev Jeffrey L Allison CSC Trustee	40	X						52,129	0	9,811	
Mr Thomas D Arndorfer Trustee	1	X						0	0	0	
Mr Richard Baek Trustee	1	X						0	0	0	
Mr John M Becker Trustee	1	X						0	0	0	
Mr Ralph G Bliquez Trustee	1	X						0	0	0	
Mr John G Block Trustee	1	X						0	0	0	
Mrs Mary R Boyle Trustee	1	X						0	0	0	
Mrs Nancy K Bryant Trustee	1	X						0	0	0	
Mrs Annie T Buell Trustee	1	X						0	0	0	
Ms Catherine David Buley Trustee	1	X						0	0	0	
Ms Sarah N Carroll Trustee	1	X						0	0	0	
Mr Matthew W Chapman Trustee	1	X						0	0	0	
Mr Earle M Chiles Trustee	1	X						0	0	0	
Mr Kevin M Cooper Trustee	1	X						0	0	0	
Mr Russell E Danielson Trustee	1	X						0	0	0	
Mr Frank D Dulcich Trustee	1	X						0	0	0	
Rev Carl F Ebey CSC Trustee	1	X						0	0	0	
Mr Patrick J Fennessy Trustee	1	X						0	0	0	
Mr Robert W Franz Trustee	1	X						0	0	0	
Mr Mark B Ganz Trustee	1	X						0	0	0	
Rev Peter A Jarret CSC Trustee	1	X						0	0	0	
Ms Patricia K Johnson Trustee	1	X						0	0	0	
Mr Charles Keller Trustee	1	X						0	0	0	
Mr Patrick H Kessi Trustee	1	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				
Rev James R Lackenmier CSC Trustee	1	X						0	0	0	
Mr Keith R Larson Trustee	1	X						0	0	0	
Rev William Lies CSC Trustee	1	X						0	0	0	
Mr D Allen Lund Trustee	2	X						0	0	0	
Mr Luis Machuca Trustee	1	X						0	0	0	
Rev Edward A Malloy CSC Trustee	1	X						0	0	0	
Mr Ralph Miller Trustee	1	X						0	0	0	
Mr Timothy J Morgan Trustee	1	X						0	0	0	
Rev Francis J Murphy CSC Trustee	30	X						36,887	0	9,020	
Mr James P Murphy Trustee	1	X						0	0	0	
Rev Thomas O'Hara CSC Trustee	1	X						0	0	0	
Mr James T Price Trustee	1	X						0	0	0	
Mrs Larree M Renda Trustee	1	X						0	0	0	
Dr Don V Romanaggi Trustee	1	X						0	0	0	
Rev John Ryan CSC Trustee	1	X						0	0	0	
Mr Stephen L Shepard Trustee	1	X						0	0	0	
Ms Milann Siegfried Trustee	1	X						0	0	0	
Ms Darlene Shiley Trustee	1	X						0	0	0	
Mr Karl A Smith Trustee	1	X						0	0	0	
Mr Edwin A Sweo Trustee	1	X						0	0	0	
Mr William R Tagmyer Trustee	1	X						0	0	0	
Mr Thomas J Tomjack Trustee	1	X						0	0	0	
Ms Kay Dean Toran Trustee	1	X						0	0	0	
Rev David T Tyson CSC Trustee	1	X						0	0	0	
Mr Ted R Winnowski Trustee	1	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			
Mr Eugene J Wizer Trustee	1	X						0	0	0
Mr Darryl P Wong Trustee	1	X						0	0	0
Dr Carolyn Y Woo Trustee	1	X						0	0	0
Rev E William Beauchamp CSC President	40	X		X				317,702	0	76,562
Br Donald Stabrowski CSC Provost	40			X				182,100	0	25,659
Rev Mark Poorman CSC Executive Vice President	40			X				99,330	0	23,816
Mr James Lyons Vice President - University Relations	40			X				155,080	0	84,326
Fr Gerard Olinger CSC Vice President - Student Affairs	40			X				97,140	0	47,655
Mr Alan Timmins Vice President - Financial Affairs	40			X				65,754	0	1,646
Mr James Ravelli Vice President - University Operations	40			X				168,540	0	29,466
Dr John Watzke Dean - School of Education	40				X			156,747	0	33,732
Dr Robin Anderson Dean - Pamplin School of Business	40				X			212,367	0	46,122
Dr Joanne Warner Dean - School of Nursing	40				X			158,901	0	26,154
Mr Lawrence Williams Athletic Director	40				X			195,183	0	36,953
Dr Thomas Greene Dean - Graduate School	40				X			159,683	0	18,471
Dr Zia Yamayee Dean - Shiley School of Engineering	40				X			135,910	0	21,968
Mr Eric Reveno Men's Basketball Coach	40					X		360,265	0	56,039
Dr Mojtaba Takallou Associate Professor	40					X		194,536	0	38,467
Dr Howard Feldman Associate Professor	40					X		145,138	0	32,047
Dr Brian Adams Associate Professor	40					X		153,370	0	31,383
Dr Arjun Chatrath Associate Professor	40					X		159,913	0	28,748
Mr John Goldrick Former Vice President - Enrollment Management	40						X	139,821	0	41,973
Mr Denis Ransmeier Former Vice President - Financial Affairs	40						X	123,050	0	14,307