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DLN: 93493135047213

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2011

OMB No 1545-0047

ZUII

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

Open to Public

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A Forthe B Check if a		C Name of orga		g U/-U1-2011	and ending 06-30-20	12	D Emplo	yer ide	ntification number
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Amended			state or country, and ZI A 921102492	P + 4					
Applicatio	on pending	,							
		MARYELY	and address of princ	ipal officer		1	s this a group ffiliates?	return	for ┌Yes ┌ No
			ALA PARK 50,CA 92110249.	2		U/b) A	!! -66:1:-+		
			,				re all affiliates f "No" attach		ed? Yes No (see instructions)
Tax-exer	mpt status	5 01(c)(3)	「 501(c)() ◀ (ın	sert no)	1947(a)(1) or 527	1	Group exempt		
Websit	: e: ► WW\	<i>W</i> SANDIEGO	EDU						
Form of o	rganization	✓ Corporation	Trust Association	Other ►		L Year	of formation 19	49 M	State of legal domicile CA
Part I	Sumr	nary				•			
		scribe the org CONDARY E	ganization's mission DUCATION	n or most sigi	nificant activities				
<u> </u>									
2 3	Charlette	s hov 🗺 🚓	ho organization die	continued it-	oporations of diameter	of mars #1	an 3 E0/ - f.+-	nct	cata
		,			operations or disposed		an 25% of its 		
		_	_		VI, line 1a) ng body (Part VI, line 1b		}	3 4	32
انت		•	_	_	ig body (Part VI, line 16 2011 (Part V, line 2a)	•	•	5	5,345
			eers (estimate if ne					6	1,401
E 7a					nn (C), line 12			7a	1,538,135
			s taxable income fro	•				7a 7b	-374,152
	Tree differ	atea basiness	, taxable medille no	7111 1 01111 3 3 0	1,11110 54 1 1		Prior Year	75	Current Year
8	Contrib	uitions and ar	ants (Part VIII, line	e 1h)			37,052,	656	43,452,120
a ~						·	324,413,		342,331,632
Heyeni 10							16,237,		12,740,966
Æ 11					c, 9c, 10c, and 11e)	·	13,143,		11,523,550
12					art VIII, column (A), lır	ne 一	10,110,		11,323,330
					<u> </u>		390,847,	073	410,048,268
13), lines 1-3)		83,720,	221	88,538,954
14					, line 4)			0	0
β 15	Salarie: 5-10)	s, other comp	ensation, employee	e benefits (Pa	rt IX, column (A), lines		163,387,	352	173,576,938
SE 16а 16а ь					ne 11e)			0	0
품 ㅂ			es (Part IX, column (D),						
17					i,11f-24e)	•	91,580,		92,260,129
18		· ·	•	•	X, column (A), line 25)	<u> </u>	338,687,8		354,376,021
19 8 9	Revenu	e less expens	ses Subtract line 1	8 from line 1	2	Begir	52,159, nning of Curre		55,672,247 End of Year
Secretary 20 21 22	-	k- /B- : ::	lung d.C.)				Year 073 403	434	
20 五 五 2 2 2 1 2 1			, line 16)			-	972,492,		1,009,539,708 291,559,473
		· ·	•		ne 20		273,626, 698,866,		717,980,235
Part II		ture Block		HE ZI HUHH H			555,000,	-00	7 1 7 ,300,233
Jnder pena	alties of pe and belief,	rjury, I declare	that I have examined		including accompanying : preparer (other than offic				
	****						2013-05-14		
Sign	F Signat	ure of officer					Date		
Here		H SULLIVAN EXE or print name an	CUTIVE VP AND PROVOS d title	ST					
Paid	Preparer's signature		J MAYER		Date	Check if self-employed	(see inst	ructions)	er identification number
Preparer's	Firm's nai	me (or yours	MOSS ADAMS LLP				EIN ▶ 91	L-018931	18
Jse Only		and ZIP + 4	9665 GRANITE RIDGE	DRIVE SUITE 60	00		_		
			SAN DIEGO, CA 92123	3			Phone no)) (85	58) 627-1400

May the IRS discuss this return with the preparer shown above? (see instructions)

Form	า 990 (2011)				Page 2
Par	t IIII Statement of Program Check if Schedule O contain				୮
1	Briefly describe the organization's	mission			
EXP	UNIVERSITY OF SAN DIEGO IS A ANDING LIBERAL AND PROFESSI DERS DEDICATED TO ETHICAL C	ONAL KNOWLEDGE, (CREATING A DIVERSE	AND INCLUSIVE COMMU	
2	Did the organization undertake and the prior Form 990 or 990-EZ?				┌ Yes ┌ No
	If "Yes," describe these new servi				
3	Did the organization cease conducts services? If "Yes," describe these changes of the services of the service			nducts, any program	┌ Yes ┌ No
4	· ·				
7	Describe the organization's progra expenses Section 501(c)(3) and grants and allocations to others, t	501(c)(4) organization	is and section 4947(a)(1) trusts are required to rep	
4a	(Code) (Expens	es \$ 288,449,464	ıncludıng grants of \$	88,538,954) (Revenue \$	352,257,246)
	THE UNIVERSITY OF SAN DIEGO IS ENGA PROFESSIONAL STUDENTS, THIS PROGR				GRADUATE, AND 975 LAW AND
4b	(Code) (Expens	es \$	including grants of \$) (Revenue \$)
4 c	(Code) (Expens	es \$	including grants of \$) (Revenue \$)
4d	Other program services (Descri (Expenses \$	oe in Schedule O) including grants o	of \$) (Revenue \$)
4e	Total program service expenses▶	\$ 288,449,40	64		

art IV	Checklis	t of	Required	Schedules

Par	t 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	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
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	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		N o
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		N o
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		N o
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N o
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	
		F	orm 990	(2011)

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•	. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 887			
L				
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
_	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	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 •CJ			
	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
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	EL		No
		5b		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
c -	Door the communication have annual assessment that are named to make the at 100,000 and did the			NI a
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
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
а	services provided to the payor?	/a	165	
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
		75	103	-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
А	If "Yes," indicate the number of Forms 8282 filed during the year			
u	These, indicate the number of forms 5252 med during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
а	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
9	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.			
а	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		
		70		
10	Section 501(c)(7) organizations. Enter			
	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			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
		120		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	year			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
ь	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
L-	If "Vac " has it filed a Form 7.20 to report these payments? If "No " provide an explanation in Schedule O	4.46		

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

Se	ction A. Governing Body and Management			
			Yes	No
1-	Enter the number of voting members of the governing body at the and of the tax			
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	9		No	
Se	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			
Re	venue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			.,,
-	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			1
	List the States with which a conv of this Form 990 is required to be filed ►CA			

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.

☐ O wn website ☐ A nother's website ☐ U pon 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 POFFICE OF THE CONTROLLER
 5998 ALCALA PARK HUGHES ADMINISTRAT
 SAN DIEGO, CA 92110

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee	
(A) Name and Title	(B) A verage hours per week (describe	unles an	on (d e tha	n one son er ar	e bo: is bo nd a	x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and	
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations	
See Additional Data Table											
				\vdash			_				

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

	(A) Name and Title	(B) Average hours per week (describe	unles an	on (d e tha	n on son er a	e bo ıs b nd a	x, oth		Rep comp fro organi	(D) ortable ensation om the zation (W-	(E) Reportable compensation from related organizations (W- 2/1099-		(F) Estimated amount of othe compensation from the organization an		
		hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organiza		
See A	ddıtıonal Data Table														
												+			
												+			
												+			
						<u> </u>						+			
												_			
												_			
												_			
1b	Sub-Total				•	٠.		<u> </u>	<u> </u>		l	1			
С	Total from continuation sheets							F							
d	Total (add lines 1b and 1c) .						•	<u> </u>		5,129,233		0		591,637	
2	Total number of individuals (incl \$100,000 of reportable compen						above) who	o receive	ed more tha	in				
													Τ.,		
3	Did the organization list any for	mer officer, dired	tor or t	ruste	e k	eve	mplov	ee c	or highes	st compens	ated employee		Yes	No	
	on line 1a? If "Yes," complete Sch											3		No	
4	For any individual listed on line in organization and related organization and related organization.														
5	Did any person listed on line 1a	receive or accru	ie comi	- oensa	- ation	- n froi	n anv	- unre	lated ord	anization (or individual for	4	Yes		
	services rendered to the organiz		-				-		_		•	5		No	
_	ation D. Todonoudout Con														
1	ection B. Independent Con Complete this table for your five		nsated	ındep	end	ent o	contra	ctors	that red	ceived mor	e than				
	\$100,000 of compensation from or within the organization's tax y	n the organizatio 'ear									ng with		(6		
		(A) me and business ad	dress							Desc	(B) ription of services		(C Comper		
806 V	TRACY CLINIC VEST ADAMS BLVD									EDUCATION	AL SERVICES			655,162	
CAME 100 S	INGELES, CA 90007 PRIDGE ASSOCIATES SUMMER STREET 13 ON, MA 21100									INVESTMEN ⁻	「 MANAGERS			477,237	
MOSS 9665	GRANITE RIDGE DRIVE 600 DIEGO, CA 92123									AUDIT AND	TAX SERVICES		260,978		
REST 1306	ORWARE 9 DRESSAGE LANE DIEGO, CA 92130									CONSULTING	G SERVICES			107,815	

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 \blacktriangleright 4

Part V	<u> </u>	Statement o	r kevenue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
#\$	1a	Federated cam	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b					
عَجَ	l c	Fundraising eve	ents 1c	365,648				
£e=	d		zations 1d					
$\overline{D}_{\frac{m}{n}}$		Government grant		10,112,574				
는 도 도	e	_						ļ
늘	f	All other contributions are similar amounts no	ons, gifts, grants, and 1f ot included above	32,973,898				
ē€	g	Noncash contri	ibutions included in					
뒫		lines 1a-1f \$,359,112					
ပိုန်း	h	Total. Add lines	s 1a-1f	▶	43,452,120			
- O				Business Code				
Ĭ	2a	TUITION AND FEES	6	900099	304,128,909	303,967,538	161,371	
e, e	Ь	STUDENT RES & B	OARD	721310	34,761,752	34,761,752	,	
or or		PARKING SERVICE			· · · · · ·	, ,		
Ģ S	١.			611710	2,592,688	2,592,688		
À	d	STUDENT LOAN IN	TEREST	611710	848,283	848,283		
Ξ	e	-						
Program Serwce Revenue	f	All other progra	am service revenue	\Box				
<u>ک</u>	g	Total Add lines	s 2a-2f	b -	342,331,632			
	3				342,331,032			
			ome (including dividen ar amounts)	. F	4,742,817			4,742,817
	4		stment of tax-exempt bond	· · ·	5			5
	5			· · · · · · · · · · · · · · · · · · ·	_			
		Royaldes	(ı) Real	(II) Personal				
	6a	Gross rents	540,083	(II) Fersonal				
	ь	Less rental	426,850					
		expenses	,					
	C	Rental income or (loss)	113,233					
	d	Net rental inco	me or (loss)		113,233			113,233
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other	244,095,941	48,022,301				
		than inventory Less cost or	236,686,154	47,433,944				
	Ь	other basis and	230,000,134	47,433,544				
	_	sales expenses Gaın or (loss)	7,409,787	588,357				
	C C			·	7,998,144			7,998,144
	d 8a		ss)		7,550,144			7,550,144
Other Revenue		events (not inc \$ 365 of contributions	rom fundraising luding ,648 s reported on line 1c) ne 18					
L L			а	256,978				
÷.	ь	Less direct ex	penses b	433,111				
δ	c	Net income or	(loss) from fundraising	events 🟲	-176,133			-176,133
	9a		rom gaming activities ne 19 a					
	ь	less direct ov	penses b					
	c		(loss) from gaming acti	vities -				
	10a	Gross sales of returns and allo	inventory, less owances .					
	ь	Less cost of g	a oods sold b					
	С		(loss) from sales of inv					
		Miscellaneou	s Revenue	Business Code				
	11a	BOOKSTORE		451211	7,062,453	7,047,268	15,185	
	ь	ATHLETICS &	RECREATION	611710	1,634,028	1,634,028		
	c	SUMMER CON	FERENCES	611710	1,107,583	234,838	872,745	
	d		ue		1,782,386	1,170,851	488,834	122,701
	e		s 11a-11d		11,586,450			
	12	Total revenue.	See Instructions .	▶	410,048,268	352,257,246	1,538,135	12,800,767

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

	heck if Schedule O contains a response to any question in this Part IX		(B))	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	88,538,954	88,538,954		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	5,061,070	3,401,609	624,355	1,035,106
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	129,687,355	99,004,472	27,131,932	3,550,951
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	12,143,284	9,049,253	2,531,725	562,306
9	Other employee benefits	18,345,111	13,766,336	4,491,776	86,999
10	Payroll taxes	8,340,118	6,215,109	1,738,812	386,197
11	Fees for services (non-employees)				
а	Management				
b	Legal	141,740		141,740	
c	Accounting	257,180		257,180	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	1,448,794	1,279,488	169,306	
g	Other	15,512,025	12,052,117	2,936,186	523,722
12	Advertising and promotion	884,244	551,705	319,138	13,401
13	Office expenses	5,447,126	2,535,763	2,185,352	726,011
14	Information technology	5,013,217	3,007,930	2,005,287	
15	Royalties				
16	Occupancy	7,405,336	7,404,686		650
17	Travel	6,325,780	5,285,001	893,104	147,675
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				· ·
19	Conferences, conventions, and meetings	1,647,482	1,417,505	186,435	43,542
20	Interest	9,202,167	7,277,222	1,924,945	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,695,299	8,460,760	6,234,539	
23	Insurance	1,481,788	207,238	1,274,550	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	COST OF SALES	12,189,310	12,142,261	47,049	
b	EQUIPMENT	2,982,188	1,455,559	1,519,563	7,066
С	BOOKS AND OTHER LIBRARY	2,193,887	2,193,887		
d	RECRUITING	1,332,801	918,424	414,377	
e					
f	All other expenses	4,099,765	2,284,185	1,424,374	391,206
25	Total functional expenses. Add lines 1 through 24f	354,376,021	288,449,464	58,451,725	7,474,832
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 1 1 2.511.548 2 2.559.984 2 Savings and temporary cash investments 3 21,917,759 3 34,435,167 7.394.567 7.922.366 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 309.200 5 220.000 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 32,920,643 7 34,439,611 2.182.448 8 2.161.989 9 6.942.225 9 6,600,755 Prepaid expenses and deferred charges 601, 191, 187 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 126,761,972 b Less accumulated depreciation 10b 472,001,829 **10c** 474,429,215 322,801,488 11 326,534,758 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 103,462,288 15 **15** 120,284,299 972,492,431 16 16 1,009,539,708 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 39,986,542 17 42,746,628 17 Accounts payable and accrued expenses . 18 18 19 19,689,985 19 17,692,913 20 181.953.946 20 178.447.154 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 7,790,573 23 7,144,351 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 45,528,427 24,205,217 25 D 26 273,626,263 26 291,559,473 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 440,557,560 27 Unrestricted net assets 449,077,613 104, 132, 860 28 105,563,375 28 Temporarily restricted net assets Fund 29 154, 175, 748 29 163,339,247 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ž 33 698.866.168 33 717,980,235 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 972,492,431 1.009.539.708 34

1.6	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		410,0	048,268
2	Total expenses (must equal Part IX, column (A), line 25)	2		354,3	376,021
3	Revenue less expenses Subtract line 2 from line 1	3		55,6	572,247
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		698,8	366,168
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-36,5	558,180
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		717,9	80,235
Par	The triangle of the contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2 c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in on a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes	

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

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

Employer identification number

UNIVE	RSITY	OF SAN DI	EGO								
			- (- 5		/ All .			.1.111	95-2544		
Par				blic Charity Sta						instructions	<u> </u>
1		zation is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i).									
2	<u> </u>		· ·	d in section 170(b)(1)(±)(A)(i).			
3	<u> </u>			perative hospital se				n 170(h)(1)	V A V IIII		
4	<u>'</u>			h organization opera						(1)(A)(iii) i	Entar the
-	'			ity, and state	teu iii conjun	iction with a	nospital desi	cribed iii se	CCIOII 170(D)	(1)(A)(III). I	inter the
			•								
_	_	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
5	,	_	•	(A)(iv). (Complete P	=	e or universi	ty owned or o	perated by	a governmei	itai unit desc	cribed in
6	Г			local government o	•	tal unit desc	ribed in secti	on 170(b)(1)(A)(v).		
7	,			at normally receives						from the gen	eral nublic
•	'	describ		at normany receives	a sabstantit	ar pare or les	Support Hom	a governm	circui unic or	nom the gen	crar pablic
		sect ior	170(b)(1)((A)(vi) (Complete P	art II)						
8	Γ	A com	munity trust	described in sect ior	n 170(b)(1)(A)(vi) (Con	nplete Part II	·)			
9	Γ	An org	anızatıon th	at normally receives	(1) more th	ian 331/3% (of its support	from contri	butions, me	mbershıp fee	s, and gross
		receipt	s from activ	rities related to its e	xempt functı	ons—subjec	t to certaın e	xceptions, a	and (2) no m	ore than 331	./3% of
		ıts sup	port from gr	oss investment inco	me and unre	lated busine	ss taxable ın	come (less	section 511	. tax) from bu	ısınesses
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee section 5	509(a)(2). (C	omplete Pa	rt III)		
10		An org	anızatıon or	ganized and operated	d exclusively	to test for p	oublic safety	Seesection	1 509(a)(4).		
11	Γ			ganized and operated							
	one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See sectic the box that describes the type of supporting organization and complete lines 11e through 11h						ee section :	609(a)(3). Check			
			Type I	b Type I			: - Functional			d Typ	e III - Other
e	Г			ox, I certify that the							
	•		_	on managers and ot	-					•	
_			1 509(a)(2)								
f			rganization this box	received a written d	etermination	from the IR	S that it is a	Type I, Typ	e II or Type	III supporti	ng organization,
g				2006, has the organ	ızatıon acce	oted any gift	or contributi	on from any	of the		,
_		followir	ng persons?	-							
				rectly or indirectly c			_	persons des	scribed in (ii		Yes No
				governing body of th			ation?			110	
			-	er of a person descri			_			11g	
_				lled entity of a perso						11g	(iii)
h		Provide	e the followi	ng information about	the support	ed organizat	ion(s)				
				(iii)	/:- \						
				Type of	(iv) Is the		(v)		(vi		
	(i)			organization	organizati		Did you not		Ist		(vii)
Name suppo organiz			(ii) EIN	(described on lines 1- 9 above	col (ı) lıst		organizati col (i) of		organiza col (i) or		A mount of
			EIN	or IRC section	your gove		suppor		in the		support?
0,	game	41.011		(see	docume	nt,		,			
				ınstructions))	Yes	No	Yes	No	Yes	No	
1											

Total

instructions

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

▶□

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

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

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

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

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

17

18

17

18

▶[

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

Schedule A (Form 990 or 990-EZ) 2011

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DLN: 93493135047213

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. > See separate instructions.

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

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

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

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

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

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

Name	of th	ne c	rga	nızatıoı	n
UNIVER	SITY	OF:	SAN	DIEGO	

Employer identification number

Part I-A	Complete if the organization	on is exempt under section 503	L(C)	or is a	section 52	organization.

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

art I-B	Complete if the or	ganization is exem	pt under section 501(:)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made?
- b If "Yes," describe in Part IV

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

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
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Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount								
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(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

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

	· · · · · · · · · · · · · · · · · · ·	(8	a)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		118,124
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV		No	
j	Total lines 1c through 1i			118,124
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Ī	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5), o	r section

501(c)(6).

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

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

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

Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
PART IV, SUPPLEMENTAL INFORMATION		PART IIB, LINE 1J FACULTY WITH THE UNIVERSITY'S SCHOOL OF LAW IN THE CENTER FOR PUBLIC INTEREST AND CHILDREN'S ADVOCACY INSTITUTE OFFERED THEIR RESEARCH DATA AND LEGAL EXPERTISE IN AN ATTEMPT TO INFLUENCE PENDING LEGISLATION CONCERNING CONSUMERS RIGHTS AND CHILDREN'S HEALTH, SAFETY AND WELFARE NO ATTEMPT WAS MADE BY THE UNIVERSITY TO INFLUENCE A POLITICAL CAMPAIGN OF ANY OFFICE, NOR WERE ANY POLITICAL CONTRIBUTIONS MADE

1

DLN: 93493135047213

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Open to Public

	F Attach to Fo	orm 990. F See separate instructions.	Inspection
	me of the organization IVERSITY OF SAN DIEGO		Employer identification number
D-	Ouganizations Maintaining Dancy As	luised Funds on Other Cimiles Fo	95-2544535
- 6	organizations Maintaining Donor Ac organization answered "Yes" to Form 99		inds or Accounts. Complete if the
	organization anonotou 100 to 1011115	(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 advis funds are the organization's property, subject to the o		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the benconferring impermissible private benefit	efit of the donor or donor advisor, or for an	y other purpose Yes No
	rt II Conservation Easements. Complete		Form 990, Part IV, line 7.
1 2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quali	on or pleasure)	historically importantly land area ertified historic structure of a conservation
	easement on the last day of the tax year	Г	Held skales Find of Ales Ween
а	Total number of conservation easements		Held at the End of the Year
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified his		2c
d	Number of conservation easements included in (c) ac	` ` '	2d
3	Number of conservation easements modified, transfe		
•	the taxable year -	med, released, extinguished, or terminate	a by the organization during
4	Number of states where property subject to conserva	ition easement is located ►	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		lling of violations, and Yes No
6	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ents during the year ►
7	Amount of expenses incurred in monitoring, inspecting	ng, and enforcing conservation easements	during the year
	▶ \$		
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	(d) above satisfy the requirements of sec	tion Yes No
9	In Part XIV, describe how the organization reports co balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easem	he footnote to the organization's financial	
Par	t III Organizations Maintaining Collectio Complete of the organization answered "		or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	th in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ir	
	(i) Revenues included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$4,061,789
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1		▶ - \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	<u>:, His</u>	tori	<u>cal Tre</u>	easures, or C	<u> the</u>	<u>er Similar Ass</u>	ets (c	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	lowing th	at are a signific	ant ı	use of its collection	n	
а	Public exhibition		d	\sqcap	Loan o	r exchange prog	rams	5		
Ь	Scholarly research		e	Γ	Other					
c	✓ Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	un hov	w the	v further	the organization	ı's e	xempt purpose in		
•	Part XIV	onections and expla	1111 110	, ciic	y luicher	the organization	15 0	xempe purpose m		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								Yes	✓ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						ed "Y	es" to Form 99	0,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	ediary	for c	ontrıbut	ons or other as:	sets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	/ıng ta	able	г		T		
						-		Amo	unt	
C	Beginning balance					}	1c			
d	Additions during the year					-	1d			
e	Distributions during the year					-	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, lin	e 21?					Γ	Yes	☐ No
	If "Yes," explain the arrangement in Part XI\									
Pa	rt V Endowment Funds. Complete									
4-	Daniman of warmhalana	(a)Current Year 326,799,097	(b	Prior '	Year ,074,374	(c)Two Years Back 220,839,5	-	d) Three Years Back 267,919,923	(e)Four	Years Back
1a	Beginning of year balance	29,964,033			,074,374	16,513,0	_	16,378,533		
b	Contributions	-5,642,158			<u> </u>	27,996,6	_	-59,320,886		
С	Investment earnings or losses				,953,163		_	, ,		
d	Grants or scholarships	1,507,177			,636,097	1,586,2	_	1,375,202		
е	Other expenditures for facilities and programs	4,021,080		3	,688,597	3,688,5	96	2,479,947		
f	Administrative expenses							282,888		
g	End of year balance	345,592,715		326	,799,097	260,074,3	74	220,839,533		
2	Provide the estimated percentage of the yea	r end balance held	as				•	<u>.</u>		
а	Board designated or quasi-endowment 🕨	35 000 %								
b	Permanent endowment 🕨 65 000 %									
c	Term endowment ▶									
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that a	are held	and administere	d for	the		
	organization by								Yes	No
	(i) unrelated organizations			•			٠	3a(i)		No
	(ii) related organizations						•	3a(ii)	<u> </u>	No
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•					٠	<u>3b</u>		
4						<u> </u>				
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	70, Pa							
	Description of property				Cost or ot (investm			(c) Accumulated depreciation	(d) Bo	ok value
1a	Land				10,568,	297 51,027	,875		(51,596,172
b i	Buildings					464,340	,210	101,805,426	36	52,534,784
c I	Leasehold improvements									-
d I	Equipment					71,193	,016	24,956,546	4	16,236,470
	Other					4,061	-			4,061,789
	I. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colui	mn (B)), line	10(c).)		<u> </u>		47	74,429,215
	, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·						Schedule D (

Part VII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or category	(b)Book value		od of valuation
(including name of security)	(B)Book value	Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
o their			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•		
		12	
Part VIII Investments—Program Related. Se	e Form 990, Part X, line		
(a) Description of investment type	(b) Book value		od of valuation
		Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, II	ne 15.		
(a) Descri	ption		(b) Book value
See Additional Data Table			
See Additional Data Fable			
Total. (Column (b) should equal Form 990, Part X, col.(B) line.	15.)		120,284,299
			120,207,299
Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
	 		
REFUNDABLE ADVANCES	11,962,201		
BOND INTEREST RATE SWAP	33,566,226		
	I		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	45,528,427		

Sche	dule D (Form 990) 2011		Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	410,048,268
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	354,376,021
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	55,672,247
4	Net unrealized gains (losses) on investments	4	-37,113,180
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	555,933
9	Total adjustments (net) Add lines 4 - 8	9	-36,557,247
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	19,115,000
_	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	283,791,000
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	-37,113,180
3	Subtract line 2e from line 1	3	320,904,180
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	89,144,088
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	410,048,268
_	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	264,676,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	-	
a	Donated services and use of facilities		
b	Prior year adjustments	1	
С	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	859,961
3	Subtract line 2e from line 1	3	263,816,039
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)]	
С	Add lines 4a and 4b	4c	90,559,982

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,

Total expenses Add lines $\bf 3$ and $\bf 4c.$ (This should equal Form 990, Part I, line 18)

Identifier	Return Reference	Explanation			
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE UNIVERSITY OF SAN DIEGO ENDOWMENT FUNDS AR UTILIZED BASED ON DONOR'S INTENT, AS OF JUNE 30, 2012 THE ALLOCATION OF ENDOWMENT FUNDS WAS AS FOLLOWS ACADEMIC SUPPORT - 32%, TUITION FUNDER QUASI - 35%, SCHOLARSHIPS - 15%, INSTRUCTION - 6% PLANT MAINTENANCE AND OPERATIONS - 3%, PUBLIC SERVICE - 5% AND OTHER INSTITUTIONAL SUPPORT - 4%			
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE UNIVERSITY FOLLOWS THE PROVISIONS OF ACCOUNTING STANDARDS CODIFICATION ("ASC") 740-10, INCOME TAXES, RELATED TO ACCOUNTING FOR UNCERTAIN TAX POSITIONS THE UNIVERSITY HAS NO UNRECOGNIZED TAX BENEFITS OR LIABILITIES AS OF JUNE 30, 2012 AND 2011 THE UNIVERSITY FILES AN EXEMPT ORGANIZATION RETURN AND APPLICABLE UNRELATED BUSINESS INCOME TAX RETURN IN THE U S FEDERAL JURISDICTION, AND WITH THE CALIFORNIA FRANCHISE TAX BOARD THE UNIVERSITY IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY TAXING AUTHORITIES FOR YEARS BEFORE 2008 FOR ITS FEDERAL FILINGS AND FOR YEARS BEFORE 2007 FOR ITS STATE			
PART XI, LINE 8 - OTHER ADJUSTMENTS		ROUNDED FS DIFFERENCE 933 K-1 PASSTHROUGH LOSSES 555,000 TOTAL TO SCHEDULE D, PART XI, LINE 8 555,933			
		PART III, LINE 4 THEY SEEK TO STIMULATE INTEREST AND PRIDE AS WELL AS EMPHASIZE THE CULTURAL VALUE OF USD'S FINE ARTS PROGRAMS			
		SCH D,PART XII, LINE 4B RECONCILIATION OF REVENUE SCHOLARSHIPS RECLASSED TO EXPENSE 89,109,784 SPECIAL EVENT EXPENSES RECLASSED FROM EXP (433,111) RENTAL EXPENSES RECLASSED FROM EXP (426,850) INV MGMT FEES RECLASSED TO EXP 1,448,794 K-1 PASSTHROUGH LOSSES (555,000) ROUNDED FINANCIAL STATEMENT DIFFERENCE 471 TOTAL LINE 4B 89,144,088			
		SCH D,PART XIII, LINE 2D RECONCILIATION OF EXPENSES RENTAL EXPENSE RECLASSED 426,850 SPECIAL EVENT EXPENSE RECLASSED 433,111 TOTAL LINE 2D 859,961			
		SCH D,PART XIII, LINE 4B RECONCILIATION OF EXPENSES SCHOLARSHIPS RECLASSED TO EXPENSES 89,109,784 INV MGMT FEES RECLASSED TO EXPENSES 1,448,794 ROUNDED FINANCIAL STATEMENT DIFFRENCE 1,404 TOTAL LINE 4B 90,559,982			
		SCHEDULE D, PART III, LINE 4 THEY SEEK TO STIMULATE INTEREST AND PRIDE AS WELL AS EMPHASIZING THE CULTURAL VALUE OF USD'S FINE ARTS PROGRAM			

354,376,021

Additional Data

Software ID: Software Version:

EIN: 95-2544535

Name: UNIVERSITY OF SAN DIEGO

Form 990, Schedule D, Part IX, - Other Assets

(a) Description	(b) Book value
WEST COAST CONFERENCE	852,837
ALTERNATIVE ASSET PARTNERSHIPS - REAL ESTATE	6,647,717
MARKETABLE ALTERNATIVES - OPPORTUNISTIC	4,037,262
ALTERNATIVE ASSET PARTNERSHIPS - VENTURE CAPITAL	9,790,288
ALTERNATIVE ASSET PARTNERSHIPS - INTERNATIONAL PRIVATE EQUITY	10,928,705
ALTERNATIVE ASSET PARTNERSHIPS - U S PRIVATE EQUITY	7,270,573
MARKETABLE ALTERNATIVES - U S LONG/SHORT	14,131,948
MARKETABLE ALTERNATIVES - DISTRESSED	7,737,683
MARKETABLE ALTERNATIVES - GLOBAL LONG/SHORT	8,176,337
ALTERNATIVE ASSET PARTNERSHIPS - DISTRESSED/DEBT RELATED	9,172,384
MARKETABLE ALTERNATIVES - EVENT DRIVEN	15,736,833
MARKETABLE ALTERNATIVES - DIVERSIFIED ARBITRAGE	19,101,418
ALTERNATIVE ASSET PARTNERSHIPS - ENERGY/RESOURCES	6,700,314

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As Filed Data -

DLN: 93493135047213

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

▶ 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.

Schools

Name of the organization UNIVERSITY OF SAN DIEGO

Employer identification number

95-2544535 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d Yes d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? Νo 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? Νo 5e f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h Νo h Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes b Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05

of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Yes

Part II Supplemental Information

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

ldentifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	UNIVERSITY OF SAN DIEGO'S RACIALLY NONDISCRIMINATORY POLICY PUBLISHED IN ALL RECRUITING BROCHURES AND ADVERTISEMENTS AS WELL AS UNDERGRADUATE AND GRADUATE BULLETINS AND CATALOGS
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE UNIVERSITY OF SAN DIEGO RECEIVED AN ESTIMATED \$115 4M IN CONTRIBUTIONS FROM FEDERAL AND STATE AGENCIES FOR ASSISTANCE IN PROVIDING POST-SECONDARY EDUCATION THIS INCLUDES \$103 0M IN FEDERAL FAMILY EDUCATION LOANS

Schedule E (Form 990 or 990-EZ) 2011

DLN: 93493135047213

OMB No 1545-0047

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

▶ Attach to Form 990. ▶ See separate instructions.

Statement of Activities Outside the United States

Open to Public **Inspection**

Name of the organization UNIVERSITY OF SAN DIEGO

SCHEDULE F

Department of the Treasury Internal Revenue Service

(Form 990)

Employer identification number

95-2544535

Pa	rt I General Information "Yes" to Form 990, Page 1990,	n on Activiti rt IV, lıne 14b	es Outside tl	he United States. C	omplete if the organiz	ation answered
1	For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	organization m gibility for the	naıntaın record grants or assıs	stance, and the selecti	on criteria used to awa	
2	For grantmakers. Describe in Pa United States	rt V the organiz	atıon's proceduı	res for monitoring the use	e of grant funds outside th	ne
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENTS		4,640,160
	-					
	_					
3a	Sub-total	0	0			4,640,160
	Total from continuation sheets to Part I	0	0			0

c Totals (add lines 3a and 3b)

4,640,160

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

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

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

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	<u>\</u>	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	দ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	দ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	▽	Yes	Γ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	ে	No

Schedule F (Form 990) 2011

Additional Data

Software ID: Software Version:

EIN: 95-2544535

Name: UNIVERSITY OF SAN DIEGO

Schedule F (Form 990) 2011

Page **5**

Part V Supplemental Information

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

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As Filed Data -

DLN: 93493135047213

OMB No 1545-0047

(Form 990 or 990-EZ)

Department of the Treasury

SCHEDULE G

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.

Supplemental Information Regarding

Open to Public Inspection

Internal Revenue Service		► Attach	Inspection				
Name of the organization UNIVERSITY OF SAN DIEGO						Employer ide 95-254453	entification number
Pa	rt I Fundraising	Activities. Complet	e if the	organıza	tion answered "Yes"	to Form 990, Part I'	V, line 17.
a b c d	Mail solicitations Internet and e-ma Phone solicitation In-person solicita Did the organization had or key employees liste If "Yes," list the ten hi	s	eement wi) or entity r entities	e f g ith any ind y in conne (fundraise	Solicitation of no Solicitation of go Special fundraiside dividual (including office ection with professional ers) pursuant to agreem	n-government grants vernment grants ng events ers, directors, trustees fundraising services? eents under which the fu	
	(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrai cust cont	Did ser have ody or trol of putions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
Tota		the organization is regis	stered or	▶	to solicit funds or has b	een notified it is exemp	ot from registration or

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form							
			(a) Event #1 SPORTS BANQUET (event type)	(b) Event #2 BASEBALL EVENT (event type)	(c) O ther Events 6 (total number)	(d) Total Events (Add col (a) through col (c))			
Revenue	1	Gross receipts	241,458	97,709	283,459	622,626			
	2	Less Charitable contributions	205,501	75,059	85,088	365,648			
<u> </u>	3	Gross income (line 1 minus line 2)	35,957	22,650	198,371	256,978			
	4	Cash prizes							
မှာ	5	Non-cash prizes							
Expenses	6	Rent/facility costs							
ă	7	Food and beverages							
Drea	8	Entertainment							
ឨ	9	Other direct expenses .	81,567	23,777	327,767	433,111			
	10	Direct expense summary Add line	es 4 through 9 ın column	(d)		(433,111)			
	11	Net income summary Combine lin	nes 3 and 10 ın column (d)		-176,133			
Par	t II	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than			
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))			
	1	Gross revenue							
Ses	2	Cash prizes							
xpenses	3	Non-cash prizes							
ш	4	Rent/facility costs							
Direct	5	Other direct expenses							
	6	Volunteer labor	┌ Yes ┌ No	Г Yes Г No	│ Yes │ No				
	7	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 a b	Ist	Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states?							
		Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?							

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3				
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No				
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity									
	formed to administer charitable gaming?								
13	Indicate the percentage of gamii	ag activity operated in		1 1					
a				13a					
b									
14		f the person who prepares the organiza							
	Name ►								
	Address ►								
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?								
		imount of gaming revenue retained by the third party 🟲 \$							
С	If "Yes," enter name and address	S							
	Name 🟲								
	Address ►								
16	Gaming manager information								
	Name 🟲								
	Gaming manager compensation 🟲 \$								
	Description of services provided 🟲								
17 a	Director/officer								
b	Enter the amount of distributions	o other exempt organizations or sp		-					
_	n the organization's own exempt activities during the tax year • \$								
Par	Part IV Complete this part to provide additional information for responses to quuestion on Schedule G (see instructions.)								
	Identifier	ReturnReference	Explana	tion					
		•	•						

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Schedule I (Form 990)

Department of the Treasury

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

DLN: 93493135047213

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number UNIVERSITY OF SAN DIEGO 95-2544535 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use (a) Name and address of **(b)** EIN (c) IRC Code (d) Amount of cash (f) Method of (a) Description of (h) Purpose of grant (e) A mount of nonorganization section grant valuation non-cash assistance or assistance cash ıf applicable (book, FMV, or government assistance appraisal, other)

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) USD SCHOLARSHIPS	2938	57,364,772			
(2) STUDENT AID - GRADUATE AND LAW	858	15,574,364			
(3) STUDENT AID - ATHLETICS AND RECREATION	190	6,749,873			
(4) STUDENT AID - PRIVATE	189	1,581,716			
(5) ENDOWED SCHOLARSHIPS	85	1,625,962			
(6) STUDENT AID - RESIDENCE AND BOARD	78	899,920			
(7) FEDERAL SCHOLARSHIPS AND GRANTS	456	4,742,347			

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

Identifier	Return Reference	Explanation
	· · · · · · · · · · · · · · · · · · ·	SCHEDULE I, PART I, LINE 2 THE UNIVERSITY AWARDS SCHOLARSHIPS TO INDIVIDUAL STUDENTS TO OFFSET
MONITORING GRANTS		THE COST OF TUITION, FEES, ROOM AND BOARD
INTHELLS		

Schedule I (Form 990) 2011

DLN: 93493135047213

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization UNIVERSITY OF SAN DIEGO

Employer identification number

95-2544535

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the approplate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision 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 Approval by the board or compensation committee			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	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
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
b	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b		6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

					· · · · · · · · · · · · · · · · · · ·	. ,		
(A) Name		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MIS (ii) Bonus & incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
(1) MARY E LYONS	(ı) (ıı)	438,547 0	35,646 0	·	29,400 0	14,861 0	558,164 0	
(2) JULIE H SULLIVAN	(I) (II)	342,538 0	30,274 0		29,400 0	3,309 0	487,161 0	
(3) TIMOTHY L O'MALLEY	(I) (II)	207,992 0	18,760 0		27,265 0	19,507 0	295,524 0	
(4) REV MSGR D DILLABOUGH	(ı) (ıı)	208,937 0	16,114 0	38,500 0	23,088	19,167 0	305,806 0	
(5) CARMEN M VAZQUEZ	(I) (II)	174,545 0	17,299 0	38,500 0	24,786 0	3,621 0	258,751 0	
(6) LEENDERT R HERING	(ı) (ıı)	214,820 0	16,387 0	38,500 0	27,013 0	3,399 0	300,119 0	
(7) KEVIN L COLE	(ı) (ıı)	250,749 0	0	5,714 0	29,400 0	16,845 0	302,708 0	
(8) DAVID F PYKE	(ı) (ıı)	294,029 0	15,000 0	105,522	29,400 0	14,876 0	458,827 0	
(9) SALLY B HARDIN	(ı) (ıı)	167,920 0	0	22,000	23,670 0	16,367 0	229,957 0	
(10) PAULA A CORDEIRO	(I) (II)	169,805 0	0	18,334 0	23,370 0	13,442 0	224,951 0	
(11) MARY BOYD	(I) (II)	192,181 0	0	28,440 0	25,320 0	17,277 0	263,218 0	
(12) WILLIAM GRIER	(1) (11)	502,559 0	0 0	58,000 0	29,400 0	18,775 0	608,734 0	
(13) JAMES OLIVERO	(1) (11)	46,875 0	473,301 0	0	0 0	0	520,176 0	
(14) STEVEN SMITH	(1) (11)	269,651 0	0	9,819 0	29,400 0	12,983 0	321,853 0	
(15) LA WRENCE ALEXANDER	(1) (11)	260,643 0	0	0 0	27,991 0	7,413 0	296,047 0	
(16) DAVID MCGO WEN	(1) (11)	257,982 0	0	0		1,861 0	288,874 0	
							Schedu	ule J (Form 990) 201

Schedule J (Form 990) 2011 Page **3**

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	SCHEDULE J, PART I, LINE 1A THE PRESIDENT IS PROVIDED ON CAMPUS HOUSING AND IT IS RECORDED AS A NON-TAXABLE BENEFIT
	· '	NON-FIXED PAYMENTS RECEIVED BY LISTED PERSONS ON SCHEDULE J, PART II, REPRESENT DISCRETIONARY BONUSES NOT BASED ON A FORMULA SPECIFIED IN CONTRACTS

Schedule J (Form 990) 2011

Software ID: Software Version:

EIN: 95-2544535

Name: UNIVERSITY OF SAN DIEGO

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

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & ıncentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
MARY E LYONS	(1) (11)	438,547 0	35,646 0	39,710 0	29,400 0	14,861 0	558,164 0	0 0
JULIE H SULLIVAN	(I) (II)	342,538 0	30,274 0	81,640 0	29,400 0	3,309 0	487,161 0	0
TIMOTHY L O'MALLEY	(I) (II)	207,992 0	18,760 0	22,000	27,265 0	19,507 0	295,524 0	0
REV MSGR D DILLABOUGH	(1) (11)	208,937 0	16,114 0	38,500 0	23,088 0	19,167 0	305,806 0	0 0
CARMEN M VAZQUEZ	(1) (11)	174,545 0	17,299 0	38,500 0	24,786 0	3,621 0	258,751 0	0 0
LEENDERT R HERING	(1) (11)	214,820 0	16,387 0	38,500 0	27,013 0	3,399 0	300,119 0	0
KEVIN L COLE	(1) (11)	250,749 0	0	5,714 0	29,400 0	16,845 0	302,708 0	0
DAVID F PYKE	(1) (11)	294,029 0	15,000 0	105,522	29,400 0	14,876 0	458,827 0	0
SALLY B HARDIN	(I) (II)	167,920 0	0	22,000	23,670 0	16,367 0	229,957 0	0
PAULA A CORDEIRO	(I) (II)	169,805 0	0	18,334 0	23,370 0	13,442	224,951 0	0
MARY BOYD	(I) (II)	192,181 0	0	28,440 0	25,320 0	17,277 0	263,218 0	0
WILLIAM GRIER	(I) (II)	502,559 0	0	58,000 0	29,400 0	18,775 0	608,734 0	0
JAMES OLIVERO	(I) (II)	46,875 0	473,301 0	0	0	0	520,176 0	0
STEVEN SMITH	(I) (II)	269,651 0	0	9,819 0	29,400 0	12,983	321,853 0	0
LA WRENCE A LEXANDER	(I) (II)	260,643 0	0	0	27,991 0	7,413 0	296,047 0	0
DAVID MCGOWEN	(1) (11)	257,982 0	0	0	29,031 0	1,861 0		0

Schedule K (Form 990)

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

DLN: 93493135047213

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

UNIVERSITY OF SAN DIEGO

Employer identification number

95-2544535

_										9	5-254	4535			
Р	art I Bond Issues														
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue	Price	(f)) Description	of Purpose	(g) De	(g) Defeased Beh		(h) On Behalf of Issuer (i) P		
										Yes	No	Yes	No	Yes	No
A	CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY	66-0164610	130911V56	11-16-2005	95,41	5,000	NOTE	E 1			x		X		x
В	CALIFORNIA EDUCATION FACILITIES AUTHORITY	52-1705592	130178YD2	03-15-2011	18,64	α $\alpha\alpha\alpha$ α		RENT REFUN SEE NOTE	NDING 1998 : 2		х		Х		Х
С	CALIFORNIA MUNICIPAL FINANCE AUTHORITY	20-1563466	13048TKY8	10-06-2011	43,57	4 4 5 0	CURRENT REFUNDING 1999 CEFA, 2001 COUNTY OF SAN DIEGO COP SEE NOTE			x		Х		Х	
D	CALIFORNIA EDUCATION FACILITIES AUTHORITY	20-1563466	13048TKY8	07-03-2012	10,79			RENT REFUN 2 CEFA SEE			х		х		х
Pa	art III Proceeds							1							
	A mount of bonds retired				-	Α		E	3		С			D	
1 2	Amount of bonds defeased														
3	Total proceeds of issue				 	01 507	F07		10 562 214		42.5	74.450		1.0	706 503
4	Gross proceeds in reserve fun-				+	01,587	,507		19,562,314		43,5	74,459		10	796,502
5	Capitalized interest from proce				1	4,556	982								
6	Proceeds in refunding escrow					7,330	,302								
7	Issuance costs from proceeds				1	544	,802		3,904			7,496			3,018
8	Credit enhancement from proc				1	40,000				,,,,,			3,010		
9	Working capital expenditures f	 from proceeds					,,,,,,								
10	Capital expenditures from prod	ceeds				87,884	,533								
11	Other spent proceeds					1,730	_								
12	Other unspent proceeds														
13	Year of substantial completion	1			20	09									
					Yes	No	,	Yes	No	Yes		No	Yes	s	No
14	Were the bonds issued as part	of a current refund:	ing issue?		Х			Х		Χ			Х		
15	Were the bonds issued as part	of an advance refu	nding issue?			Х			Х			Х			Х
16	Has the final allocation of proc	eeds been made?			Х			Х		Х			Х		
17	Does the organization maintail	n adequate books a	nd records to supp	ort the final	х			Х		Х			х		
Pa	allocation of proceeds? rt III Private Business U	 /se				<u> </u>									
						A			В		С			D	
					Yes	No	,	Yes	No	Yes		No	Yes	s	No

property financed by tax-exempt bonds?

financed property?

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

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

Χ

Χ

Χ

Χ

Χ

Χ

Χ

				4		В		С		D
			Yes	No	Yes	No	Yes	No	Yes	No
За	Are there any management or service contracts that may result in private use?	business		x		×		×		×
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fin property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х		x		x		х
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use to other than a section 501(c)(3) organization or a state or local government.									•
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth 501(c)(3) organization, or a state or local government			0 050 %						
6	Total of lines 4 and 5			0 050 %						
7	Has the organization adopted management practices and procedures to er post-issuance compliance of its tax-exempt bond liabilities?	nsure the	Х			х		Х		Х
Par	t IV Arbitrage			<u>'</u>		•	•		•	•
		Α	T		В		С		D	
		Yes	No	Yes	No	Y	es	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	×			×			x		Х
2	Is the bond issue a variable rate issue?	X			Х			Х		Х
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	x			x			X		Х
b	Name of provider	GEORGE K B							I.	
c	Term of hedge	40 0000	0000000							
d	Was the hedge superintegrated?		×							
e	Was a hedge terminated?		х							
4a	Were gross proceeds invested in a GIC?	Х			Х			Х		Х
b	Name of provider	JP MORGAN BANK	CHASE				,		'	
С	Term of GIC	4 5000	00000000							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	×								
5	Were any gross proceeds invested beyond an available temporary period?	х			Х			х		х
6	Did the bond issue qualify for an exception to rebate?		Х		х			х		Х

Part V Procedures To Undertake Corrective Action

Part VI Supplemental Information

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

Ident if ier	Return Reference	Explanation
		NOTE 1 CONSTRUCTION OF SCHOOL OF LEADERSHIP AND EDUCATION SCIENCES FACILITY, STUDENT HOUSING FACILITIES, STUDENT LIFE PAVILION, AND RENOVATION OF STUDENT UNIVERSITY CENTER AND ACADEMIC, ADMINISTRATIVE AND STUDENT FACILITIES CURRENT REFUNDING OF CEFA SERIES 1995 BONDS OUTSTANDING AS OF 11/16/05 NOTE 2 CURRENT REFUNDING OF PRIOR REVENUE BOND ISSUES ONLY NO ADDITIONAL CAPITAL EXPENDITURE INCURRED WITH BOND PROCEEDS NOTE 3 PART II LINE 11 (A) REBATE OF \$1,730,992 MADE TO US TREASURY AUGUST 2010
		THE ORGANIZATION IS IN THE PROCESS OF FINALIZING WRITTEN POST ISSUANCE BOND PROCEDURES TO ENSURE THAT VIOLATIONS OF FEDERAL TAX REQUIREMENTS ARE TIMELY IDENTIFIED AND CORRECTED THROUGH THE VCAP PROGRAM IF SELF-REMEDIATION IS NOT AVAILABLE UNDER APPLICABLE REGULATIONS

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DLN: 93493135047213

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

Schedule L (Form 990 or 990-EZ)

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.

Open to Public Inspection

UNIVERSITY OF SAN DIEGO							mpioyer i	aent it ica	tion numb	er	
ONIVERSITY OF SAME DIEGO						9	5-25445	35			
									no 40h		
-			res 011 1 01111 9 9 0 , 1	•			(c)				
1 (4)		P		(b) Desc	приоп	or crans	action		Yes	No	
										_	
								r			
								' \$ —— · ¢			
				- organization :				<u> </u>			
). Part IV. line 26.	. or For	m 990-E	Z. Part V	. line 38	a		
, ,						(f)					
(a) Name of interested person and	or from the (c)O		(c)Original				by board or				
purpose		1	principal amount		(b) Description of transaction (C) (b) Description of transaction (C) (C)		1				
(1) DAVID PYKE	Renefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). If the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. In Name of disqualified person (b) Description of transaction (c) Correction of transaction (b) Description of transaction (c) Correction of transaction (d) Description of transaction (e) Description of transaction (f) Correction of transaction (g) Correction of transaction (h) Description of transaction (e) Description of transaction (f) Correction of transaction (g) Correction of transaction (h) Description of transaction (h)	No									
HOME LOAN ASSISTANCE		Х	200,000	20,000		No		No	Yes		
(2) JULIE SULLIVAN HOME LOAN ASSISTANCE		_v	200 000	120,000		No.	Ves		Vas		
(3) MARY BOYD			200,000	120,000		110	103		103		
HOME LOAN ASSISTANCE		Х	120,000	80,000		No		No	Yes		
						+	-	+		<u> </u>	
Total	<u> </u>		▶ \$								
					. line	27.					
(a) Name of interested pers		_	Relationship betwe	een interested per			ount of a	rant or tv	ne of assi	stance	
(a) Name of interested per			and the or	ganızatıon		(5)/			PC 01 4551		
					+						

Part IV Business Transactions Involving Interested Persons
--

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

Complete if the organization	n answered res on	FORM 990, Part IV, III	ie 28a, 28b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
	organızatıon			Yes	No	
					<u> </u>	

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
		FORM 990, SCHEDULE L, PART II, BOX F LOANS TO OFFICERS ARE APPROVED BY THE BOARD OF TRUSTEES FOLLOWING RECEIPT OF A RECOMMENDATION FROM THE EXECUTIVE COMPENSATION COMMITTEE LOANS TO KEY EMPLOYEES
		OR HIGHLY COMPENSATED EMPLOYEES AS CLASSIFIED ON THE FORM 990 ARE APPROVED BY THE EXECUTIVE VICE PRESIDENT AND PROVOST AND/OR PRESIDENT

Schedule L (Form 990 or 990-EZ) 2011

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DLN: 93493135047213

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

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

NonCash Contributions

Open to Public Inspection

Name of the organization UNIVERSITY OF SAN DIEGO

Employer identification number

95-2544535

Pa	rt I Types of Property				33 2344333						
		(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1 g	(d Method of de contribution	etermır	_				
1	Art—Works of art										
2	Art—Historical treasures .										
3	Art—Fractional interests										
4	Books and publications										
5	Clothing and household										
_	goods										
	Boats and planes										
	·										
	Securities—Publicly traded .	X	23	1.359.112	MARKET VALUE						
	Securities—Closely held stock			_,,-		-					
	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										
	Real estate—O ther										
	Collectibles										
	Food inventory										
	Drugs and medical supplies .										
	Taxidermy										
	Scientific specimens										
	Archeological artifacts										
	Other►()					-					
	Other ►()										
	O ther ►()										
28	O ther ▶ ()										
29	Number of Forms 8283 received				29						
	for which the organization compl	eted Form 8	3283, Part IV, Donee Ackn	owledgement	29		I				
202	During the year, did the organize	tion rocoly	a by contribution any propo	rty reported in Dart I. lines	1_20 that it		Yes	No			
Jua	must hold for at least three year										
	for exempt purposes for the enti				a to be used	202		No			
h	If "Yes," describe the arrangem					30a		-110			
						_	V = -				
31	Does the organization have a gif					31	Yes				
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	32a	Yes				
b	If "Yes," describe in Part II										
33	If the organization did not report describe in Part II	t revenues i	n column (c) for a type of p	roperty for which column (a) is checked,						

Part II

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

Identifier	Return Reference	Explanation
THIRD PARTY USE		THE UNIVERSITY UTILIZES A BROKER TO SELL STOCK GIFTS RECEIVED

Schedule M (Form 990) 2011

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135047213

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2011

Open to Public Inspection

Name of the organization UNIVERSITY OF SAN DIEGO

Employer identification number

95-2544535

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE FORM 990 IS PRESENTED TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES AND A COPY OF THE 990 IS AVAILABLE TO THE ORGANIZATION'S ENTIRE GOVERNING BOARD ONLINE AT THE SECURED TRUSTEE WEBSITE BEFORE IT IS FILED
	FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR THE BOARD OF DIRECTORS AND EXCUTIVE MANAGEMENT ARE REQUIRED TO SIGN A CONFLICT OF INTEREST DISCLOSURE STATEMENT ANY CONFLICT IS REVIEWED AND HANDLED IN ACCORDANCE WITH THE WRITTEN POLICY
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF TRUSTEE EXECUTIVE COMPENSATION COMMITTEE, WHICH IS INDEPENDENT, DETERMINES COMPENSATION USING COMPARABLE DATA AND CONTEMPORANEOUSLY DOCUMENTING ITS DECISIONS THIS PROCESS IS DONE ANNUALLY FOR THE PRESIDENT AND THE VICE PRESIDENTS THE EXECUTIVE VICE PRESIDENT AND PROVOST DETERMINES THE COMPENSATIONS FOR THE DEANS USING MARKET BENCHMARK DATA PREPARED BY INDEPENDENT PERSONS AND THE BENCHMARK SCHOOLS ARE SELECTED BY THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD
	FORM 990, PART VI, SECTION C, LINE 18	FORMS 990 AND 990T ARE AVAILABLE TO THE PUBLIC BY VIEWING THE GUIDESTAR WEBSITE AND UPON REQUEST FROM THE OFFICE OF THE CONTROLLER AT 619-260-2302, ACCOUNTING@SANDIEGO EDU, OR ONSITE FROM THE OFFICE OF THE CONTROLLER FORM 1023 IS AVAILABLE UPON REQUEST FROM THE OFFICE OF THE CONTROLLER AT 619-260-2302, ACCOUNTING@SANDIEGO EDU, OR ONSITE FROM THE OFFICE OF THE CONTROLLER
	FORM 990, PART VI, SECTION C, LINE 19	AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST FROM THE OFFICE OF THE CONTROLLER AT 619-260-2302, ACCOUNTING@SANDIEGO EDU, GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST FROM THE OFFICE OF THE PRESIDENT AT 619-260-4520, CONFLICT OF INTEREST POLICY IS AVAILABLE ONLINE AT WWW SANDIEGO EDU
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -37,113,180 K-1 PASSTHROUGH LOSSES 555,000 TOTAL TO FORM 990, PART XI, LINE 5 -36,558,180

Name: UNIVERSITY OF SAN DIEGO

DEDUCTED LOSSES: NOT APPLICABLE

EIN: 95-2544535

Statement: 1. TRANSFEROR: NAME: UNIVERSITY OF SAN DIEGOFEIN: 95-2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-2492TRANSFER: A) TRANSFEREE FOREIGN CORPORATIONNAME: EMMA BC HOLDINGS SCAFEIN: 98-0692687ADDRESS: 9A, RUE GABRIEL LIPPMAN MUNSBACH, LUXEMBOURG L-5365B) UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 02/23/2011 CASH -\$200,121 COMMON STOCK 3. CONSIDERATION RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED: A) ACTIVE BUSINESS PROPERTY: NOT APPLICABLEB) STOCK OR SECURITIES: NOT APPLICABLEC) DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE LEASED: NOT APPLICABLEE) PROPERTY TO BE SOLD: NOT APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED PROPERTY: NOT APPLICABLEH) FOREIGN LOSS BRANCH: NOT APPLICABLEI) OTHER INTANGIBLES: NOT APPLICABLES. TRANSFER OF FOREIGN BRANCH WITH PREVIOUSLY

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

Statement: 1. TRANSFEROR: NAME: UNIVERSITY OF SAN DIEGOFEIN: 95-

2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-2492TRANSFER: A) TRANSFEREE FOREIGN CORPORATIONNAME: VERISURE MIDHOLDING ABFEIN: N/AADDRESS: ADVOKATFIRMAN VINGE KB BOX 1703 111 87 STOCKHOLM, SWEDENB) UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 09/02/2011 CASH -\$271,433 COMMON STOCK 3. CONSIDERATION RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED: A) ACTIVE BUSINESS PROPERTY: NOT APPLICABLEB) STOCK OR SECURITIES: NOT APPLICABLEC) DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE LEASED: NOT APPLICABLEE) PROPERTY TO BE SOLD: NOT APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED PROPERTY: NOT APPLICABLEH) FOREIGN LOSS BRANCH: NOT APPLICABLEI) OTHER INTANGIBLES: NOT

APPLICABLES. TRANSFER OF FOREIGN BRANCH WITH PREVIOUSLY

DEDUCTED LOSSES: NOT APPLICABLE

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

Statement: 1. TRANSFEROR: NAME: UNIVERSITY OF SAN DIEGOFEIN: 95-2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-2492TRANSFER: A) TRANSFEREE FOREIGN CORPORATIONNAME: HERO INVESTMENTS PRIVATE LIMITEDFEIN: N/AADDRESS: HERO NAGAR GT ROAD, LUDHIANA PUNJAB 141003, INDIAB) UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 04/15/2011 CASH -\$47,976 COMMON STOCK 07/28/2011 \$95,951 3. CONSIDERATION RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED:A) ACTIVE BUSINESS PROPERTY: NOT APPLICABLEB) STOCK OR SECURITIES: NOT APPLICABLEC) DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE LEASED: NOT APPLICABLEE) PROPERTY TO BE SOLD: NOT APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED PROPERTY: NOT APPLICABLEH) FOREIGN LOSS BRANCH: NOT APPLICABLEI) OTHER INTANGIBLES: NOT APPLICABLES. TRANSFER OF FOREIGN BRANCH WITH PREVIOUSLY DEDUCTED LOSSES: NOT APPLICABLE

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

Statement: 1. TRANSFEROR: NAME: UNIVERSITY OF SAN DIEGOFEIN: 95-2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-2492TRANSFER: A) TRANSFEREE FOREIGN CORPORATIONNAME: MYOB GROUP PTY LIMITEDFEIN: N/AADDRESS: 12 WESLEY COURT BURWOOD EAST VIC 3151 AUSTRALIAB) UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 09/30/2011 CASH - \$47,133 COMMON STOCK 09/30/2011 \$94,265 3. CONSIDERATION RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED:A) ACTIVE BUSINESS PROPERTY: NOT APPLICABLEB) STOCK OR SECURITIES: NOT APPLICABLEC) DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE LEASED: NOT APPLICABLEE) PROPERTY TO BE SOLD: NOT APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED PROPERTY: NOT APPLICABLEH) FOREIGN LOSS BRANCH: NOT APPLICABLEI) OTHER INTANGIBLES: NOT APPLICABLES. TRANSFER OF FOREIGN BRANCH WITH PREVIOUSLY DEDUCTED LOSSES: NOT APPLICABLE

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

Statement: 1. TRANSFEROR: NAME: UNIVERSITY OF SAN DIEGOFEIN: 95-2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-2492TRANSFER: A) TRANSFEREE FOREIGN CORPORATIONNAME: K.K. BCJ-1FEIN: N/AADDRESS: 8F KISHIMOTO BUILDING 2-2-1 MARUNOUCHI, CHIYODA-KU TOKYO 100-0005 JAPANB) UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 11/30/2011 CASH -\$191,203 COMMON STOCK 11/17/2011 \$24,976 3. CONSIDERATION RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED:A) ACTIVE BUSINESS PROPERTY: NOT APPLICABLEB) STOCK OR SECURITIES: NOT APPLICABLEC) DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE LEASED: NOT APPLICABLEE) PROPERTY TO BE SOLD: NOT APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED PROPERTY: NOT APPLICABLEH) FOREIGN LOSS BRANCH: NOT APPLICABLEI) OTHER INTANGIBLES: NOT APPLICABLES. TRANSFER OF FOREIGN BRANCH WITH PREVIOUSLY

DEDUCTED LOSSES: NOT APPLICABLE

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2011 Functional Currency and Exchange Rate QBU Statement

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

QBU Id	Country of Operation	Functional Currency
US DOLLAR		0.00000

Software ID: Software Version:

EIN: 95-2544535

Name: UNIVERSITY OF SAN DIEGO

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)				(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	l woole	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
MARGARITA PALAU HERNANDEZ ESQ SECRETARY & TRUSTEE	1 00	Х		Х				0	0	0
RICHARD M BARTELL TRUSTEE	1 00	Х						0	0	0
RON L FOWLER CHAIR & TRUSTEE	1 00	Х		х				0	0	0
DAVID H SHAFFER TRUSTEE	1 00	Х						0	0	0
DONALD R KNAUSS TRUSTEE	1 00	Х						0	0	0
FRANK D ALESSIO VICE CHAIR & TRUSTEE	1 00	Х		х				0	0	0
CINDY BASSO EATON TRUSTEE	1 00	Х						0	0	0
CONSTANCE M CARROLL PHD TRUSTEE	1 00	Х						0	0	0
HERBERT B TASKER TRUSTEE	1 00	Х						0	0	0
JAMES B MCCARTHY TRUSTEE	1 00	Х						0	0	0
JAMES C PETERS TREASURER AND TRUSTEE	1 00	Х		х				0	0	0
JAMES V MAZZO TRUSTEE	1 00	Х						0	0	0
REV MSGR RICHARD F DUNCANSON TRUSTEE	1 00	Х						0	0	0
JOHN T REDMOND TRUSTEE	1 00	Х						0	0	0
DANIEL C HERBERT TRUSTEE	1 00	Х						0	0	0
MICHAEL KAPLAN TRUSTEE	1 00	Х						0	0	0
LIAM E MCGEE TRUSTEE	1 00	Х						0	0	0
LUIS MAIZEL TRUSTEE	1 00	Х						0	0	0
JAMES C KRAUSE TRUSTEE	1 00	Х						0	0	0
STANLEY W LEGRO TRUSTEE	1 00	Х						0	0	0
SUSAN H MALLORY TRUSTEE	1 00	Х						0	0	0
ANN NAVARRA TRUSTEE	1 00	Х						0	0	0
JAMES D POWERS IV TRUSTEE	1 00	Х						0	0	0
BYRON C ROTH TRUSTEE	1 00	Х						0	0	0
DARLENE MARCOS SHILEY TRUSTEE	1 00	Х						0	0	0

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)				(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
REV MSGR L PURCELL TRUSTEE	1 00	Х						0	0	0
RICHARD K DAVIS TRUSTEE	1 00	Х						0	0	0
ROBERT A HOEHN TRUSTEE	1 00	Х						0	0	0
ROGER AP JOSEPH TRUSTEE	1 00	X						0	0	0
SR CAROLYN OSIEK RSCJ TRUSTEE	1 00	X						0	0	0
SR KATHLEEN HUGHESRSCJ TRUSTEE	1 00	Х						0	0	0
MARY E LYONS PRESIDENT & TRUSTEE	40 00	Х		х				513,903	0	44,261
JULIE H SULLIVAN EXECUTIVE VP/PROVOST	40 00			х				454,452	0	32,709
TIMOTHY L O'MALLEY VICE PRESIDENT	40 00			х				248,752	0	46,772
REV MSGR D DILLABOUGH VICE PRESIDENT	40 00			х				263,551	0	42,255
CARMEN M VAZQUEZ VICE PRESIDENT	40 00			х				230,344	0	28,407
LEENDERT R HERING VICE PRESIDENT	40 00			х				269,707	0	30,412
KEVIN L COLE FORMER DEAN, SCHOOL OF LAW	40 00				x			256,463	0	46,245
DAVID F PYKE DEAN, SCHOOL OF BUSINESS	40 00				х			414,551	0	44,276
SALLY B HARDIN DEAN, SCHOOL OF NURSING	40 00				х			189,920	0	40,037
PAULA A CORDEIRO DEAN, SOLES	40 00				х			188,139	0	36,812
MARY BOYD DEAN, ARTS & SCIENCES	40 00				х			220,621	0	42,597
WILLIAM GRIER HEAD COACH, MEN'S BASKETBALL	40 00					Х		560,559	0	48,175
JAMES OLIVERO FACULTY, CONTINUING EDUCATION	40 00					х		520,176	0	0
STEVEN SMITH FACULTY, SCHOOL OF LAW	40 00					х		279,470	0	42,383
LAWRENCE ALEXANDER FACULTY, SCHOOL OF LAW	40 00					Х		260,643	0	35,404
DAVID MCGOWEN FACULTY, SCHOOL OF LAW	40 00					х		257,982	0	30,892