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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 09-01-2011 and ending 08-31-2012

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

POINT PARK UNIVERSITY

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

201 WOOD STREET

Room/suite

City or town, state or country, and ZIP + 4

PITTSBURGH, PA 15222

F Name and address of principal officer

DR PAUL HENNIGAN

201 WOOD STREET

PITTSBURGH,PA 15222

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ☐ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

WWW.POINTPARK.EDU

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation

1960

M State of legal domicile

PA

Part I	Summary																								
Activities & Governance	1 Briefly describe the organization's mission or most significant activities HIGHER EDUCATION																								
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																								
	<table><tr><td> 3 Number of voting members of the governing body (Part VI, line 1a) </td><td> 3 </td></tr><tr><td> 4 Number of independent voting members of the governing body (Part VI, line 1b) </td><td> 4 </td></tr><tr><td> 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) </td><td> 5 1,796 </td></tr><tr><td> 6 Total number of volunteers (estimate if necessary) </td><td> 6 0 </td></tr><tr><td> 7a Total unrelated business revenue from Part VIII, column (C), line 12 </td><td> 7a 0 </td></tr><tr><td> 7b Net unrelated business taxable income from Form 990-T, line 34 </td><td> 7b 0 </td></tr></table>	3 Number of voting members of the governing body (Part VI, line 1a)	3	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5 1,796	6 Total number of volunteers (estimate if necessary)	6 0	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0	7b Net unrelated business taxable income from Form 990-T, line 34	7b 0												
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Expenses	<table><tr><td> 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) </td><td> 20,851,492 </td><td> 22,396,307 </td></tr><tr><td> 14 Benefits paid to or for members (Part IX, column (A), line 4) </td><td> 0 </td><td> 0 </td></tr><tr><td> 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) </td><td> 37,916,598 </td><td> 38,698,254 </td></tr><tr><td> 16a Professional fundraising fees (Part IX, column (A), line 11e) </td><td> 38,491 </td><td> 0 </td></tr><tr><td> b Total fundraising expenses (Part IX, column (D), line 25) </td><td> 1,820,621 </td><td> </td></tr><tr><td> 17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) </td><td> 32,743,658 </td><td> 31,826,583 </td></tr><tr><td> 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) </td><td> 91,550,239 </td><td> 92,921,144 </td></tr><tr><td> 19 Revenue less expenses Subtract line 18 from line 12 </td><td> 8,425,125 </td><td> 3,140,885 </td></tr></table>	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	20,851,492	22,396,307	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	37,916,598	38,698,254	16a Professional fundraising fees (Part IX, column (A), line 11e)	38,491	0	b Total fundraising expenses (Part IX, column (D), line 25)	1,820,621		17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	32,743,658	31,826,583	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	91,550,239	92,921,144	19 Revenue less expenses Subtract line 18 from line 12	8,425,125	3,140,885
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Net Assets or Fund Balances	<table><tr><th></th><th>Beginning of Current Year</th><th>End of Year</th></tr><tr><td> 20 Total assets (Part X, line 16) </td><td> 146,782,388 </td><td> 147,657,880 </td></tr><tr><td> 21 Total liabilities (Part X, line 26) </td><td> 80,690,756 </td><td> 75,963,054 </td></tr><tr><td> 22 Net assets or fund balances Subtract line 21 from line 20 </td><td> 66,091,632 </td><td> 71,694,826 </td></tr></table>		Beginning of Current Year	End of Year	20 Total assets (Part X, line 16)	146,782,388	147,657,880	21 Total liabilities (Part X, line 26)	80,690,756	75,963,054	22 Net assets or fund balances Subtract line 21 from line 20	66,091,632	71,694,826												
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Part II

Signature Block

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

Sign Here

Signature of officer

BRIDGET MANCOSH SR VP OF FINANCE & OPERATIONS

Date

2013-07-12

Paid Preparer's Use Only

Preparer's signature

SUSAN M KIRSCH

Date

Check if self-employed

☐

Preparer's taxpayer identification number (see instructions)

P00341397

Firm's name (or yours if self-employed), address, and ZIP + 4

SCHNEIDER DOWNS & CO INC

1133 PENN AVENUE

PITTSBURGH, PA 15222

EIN

25-1408703

Phone no

(412) 261-3644

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization's mission

POINT PARK UNIVERSITY EDUCATES STUDENTS IN A DIVERSE ENVIRONMENT AND PREPARES GRADUATES TO APPLY KNOWLEDGE TO ACHIEVE THEIR GOALS, ADVANCE THEIR PROFESSIONS AND SERVE THEIR COMMUNITIES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If "Yes," describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 54,126,766 including grants of \$ 22,278,420) (Revenue \$ 82,164,484)

INSTRUCTION- INCLUDES 4 ACADEMIC SCHOOLS SERVING APPROXIMATELY 3,382 UNDERGRADUATE AND 538 GRADUATE STUDENTS, AS WELL AS PERFORMING ARTS WHICH PROVIDE APPLIED TRAINING FOR STUDENTS INCLUDES PHYSICAL PLANT ALLOCATION

4b

(Code) (Expenses \$ 9,320,867 including grants of \$) (Revenue \$ 484,110)

STUDENT SERVICES- INCLUDES ADMISSIONS, CAREER DEVELOPMENT, FINANCIAL AID ADMINISTRATION, REGISTRAR, STUDENT ACTIVIES, STUDENT AFFAIRS OFFICE, AS WELL AS 11 MEN'S AND WOMEN'S INTERCOLLEGIATE ATHLETIC TEAMS

4c

(Code) (Expenses \$ 7,754,088 including grants of \$ 117,887) (Revenue \$ 9,369,795)

AUXILIARY ENTERPRISES- EXPENSES THAT SUPPORT DORMITORIES, DINING HALL, CAFE, BOOKSTORE AND RECREATION CENTER FOR STUDENTS, FACULTY AND STAFF OF THE UNIVERSITY

(Code) (Expenses \$ 10,178,888 including grants of \$) (Revenue \$ 9,783)

ACADEMIC SUPPORT- ACADEMIC SUPPORT ARE EXPENSES THAT PROVIDE SUPPORT FOR THE SCHOOL'S PRIMARY ACADEMIC MISSION INCLUDES LIBRARY SERVICES, PROGRAM FOR ACADEMIC SUCCESS, INFORMATION & MEDIA CENTERS & PROVOST OFFICE

4d

Other program services (Describe in Schedule O)

(Expenses \$ 10,178,888 including grants of \$) (Revenue \$ 9,783)

4e

Total program service expenses

\$ 81,380,609

Form 990 (2011)

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	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 		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	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 		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 		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. 		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 	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 	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?		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 	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II and IV 		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV 	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements		
20b			

Part IV

Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance						
Check if Schedule O contains a response to any question in this Part V ☐						
		Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	5,405			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes			
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	1,796			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a				No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?	4a				No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a				No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c				No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e				No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f				No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8				
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?	9a				
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b				
11	Section 501(c)(12) organizations. Enter					
a	Gross income from members or shareholders.	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a				
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a				
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b				
c	Enter the aggregate amount of reserves on hand.	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b				

Part VI

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	34		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	32
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	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	Yes
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	Yes

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed PA , NY
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. JAMES HARDT 201 WOOD STREET PITTSBURGH, PA 15222 (412) 392-3969

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

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

Form **990** (2011)

Part VII

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	2,805,570	0	392,377

2 Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. 35

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MASSARO CORPORATION 120 DELTA DRIVE PITTSBURGH, PA 15238	CONSTRUCTION	6,727,568
ARAMARK SERVICES PO BOX 198532 ATLANTA, GA 303848532	FOOD SERVICE	2,890,560
ISS FACILITY SERVICES INC PENN PLACE PITTSBURGH, PA 15219	HOUSEKEEPING	1,888,896
COSTA CONTRACTING 347 LEFEVER HILL ROAD CHESWICK, PA 15024	CONSTRUCTION	1,447,215
ALLIED BARTON SECURITY SERVICES 500 FIRST AVENUE PITTSBURGH, PA 15219	SECURITY	1,229,155

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 ►19

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	113,849				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	1,320,313				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,215,828				
	g	Noncash contributions included in lines 1a-1f \$ 63,544						
	h	Total. Add lines 1a-1f		3,649,990				
Program Service Revenue			Business Code					
	2a	TUITION & EDUC FEES	611710	81,476,782	81,476,782			
	b	ROOM & BOARD FEES	721310	9,138,115	9,138,115			
	c	PERFORMANCES	711300	671,931	671,931			
	d	PROGRAM RENTAL	531390	305,680	305,680			
	e	BOOKSTORE, CAFE & MISC	451211	234,377	234,377			
	f	All other program service revenue		201,287	201,287			
	g	Total. Add lines 2a-2f		92,028,172				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		647,806			647,806	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties		176,047			176,047	
	6a	(i) Real		(ii) Personal				
		Gross rents	1,013,955					
		b Less rental expenses	488,290					
		c Rental income or (loss)	525,665					
	d	Net rental income or (loss)		525,665			525,665	
	7a	(i) Securities		(ii) O ther				
		Gross amount from sales of assets other than inventory	7,612,486					
		b Less cost or other basis and sales expenses	8,530,231					
		c Gain or (loss)	-917,745					
	d	Net gain or (loss)		-917,745			-917,745	
	8a	Gross income from fundraising events (not including \$ 113,849 of contributions reported on line 1c) See Part IV, line 18	a	65,017				
	b	Less direct expenses	b	112,923				
	c	Net income or (loss) from fundraising events . .		-47,906			-47,906	
	9a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances	a					
	b	Less cost of goods sold . . .	b					
	c	Net income or (loss) from sales of inventory . .						
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions		96,062,029	92,028,172	0	383,867		

Part IX

Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	99,000	99,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	22,273,307	22,273,307		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	24,000	24,000		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,753,655	547,247	886,717	319,691
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	28,744,444	25,622,138	2,567,143	555,163
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,385,005	1,119,789	244,194	21,022
9	Other employee benefits	4,698,538	3,714,215	909,021	75,302
10	Payroll taxes	2,116,612	1,646,036	412,415	58,161
11	Fees for services (non-employees)				
a	Management				
b	Legal	588,482	71,663	516,819	
c	Accounting	218,830	24,750	194,080	
d	Lobbying	54,222		27,111	27,111
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	105,593		105,593	
g	Other	1,639,554	1,340,576	263,025	35,953
12	Advertising and promotion	1,913,971	1,110,496	762,187	41,288
13	Office expenses	2,885,879	2,625,400	148,026	112,453
14	Information technology	316,695	216,112	89,809	10,774
15	Royalties	28,010	28,010		
16	Occupancy	9,873,086	8,368,745	1,267,199	237,142
17	Travel	1,255,000	1,072,062	121,524	61,414
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	829,293	649,170	122,172	57,951
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,721,091	4,785,501	787,993	147,597
23	Insurance	101,330	48,330	53,000	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	FOOD SERVICES	2,591,630	2,439,420	123,307	28,903
b	NON CAPITAL EQUIP	1,788,848	1,750,131	36,026	2,691
c	DANCE & THEATER PRODUCT	756,175	731,829	18,501	5,845
d	BAD DEBT	559,843	559,843		
e					
f	All other expenses	599,051	512,839	64,052	22,160
25	Total functional expenses. Add lines 1 through 24f	92,921,144	81,380,609	9,719,914	1,820,621
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			18,773,540	1	25,155,009
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			6,290,255	3	2,122,599
	4	Accounts receivable, net			936,311	4	564,363
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net			800,968	7	775,626
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			1,094,955	9	1,056,504
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	152,758,646			
	b	Less: accumulated depreciation	10b	58,116,463	95,798,286	10c	94,642,183
	11	Investments—publicly traded securities			21,153,273	11	22,021,820
	12	Investments—other securities. See Part IV, line 11			1,789,226	12	859,469
	13	Investments—program-related. See Part IV, line 11				13	330,307
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			145,574	15	130,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)			146,782,388	16	147,657,880
Liabilities	17	Accounts payable and accrued expenses			6,338,431	17	3,917,058
	18	Grants payable				18	
	19	Deferred revenue			10,508,258	19	10,429,696
	20	Tax-exempt bond liabilities			49,242,958	20	49,625,624
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			11,751,665	23	9,362,236
	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 D			2,849,444	25	2,628,440
	26	Total liabilities. Add lines 17 through 25			80,690,756	26	75,963,054
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			50,813,114	27	55,819,423
	28	Temporarily restricted net assets			7,007,982	28	7,365,496
	29	Permanently restricted net assets			8,270,536	29	8,509,907
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			66,091,632	33	71,694,826
	34	Total liabilities and net assets/fund balances			146,782,388	34	147,657,880

Part XI **Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	96,062,029
2	Total expenses (must equal Part IX, column (A), line 25)	2	92,921,144
3	Revenue less expenses. Subtract line 2 from line 1	3	3,140,885
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	66,091,632
5	Other changes in net assets or fund balances (explain in Schedule O)	5	2,462,309
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	71,694,826

Part XII **Financial Statements and Reporting**

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

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

2011

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

Name of the organization POINT PARK UNIVERSITY	Employer identification number 25-1094922
---	--

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

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

1

☐

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

2

☒

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

3

☐

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

4

☐

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

5

☐

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

6

☐

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

7

☐

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

8

☐

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

9

☐

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

10

☐

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

11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

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

f

☐

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

g

☐

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

(i)

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

(ii)

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

(iii)

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

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

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

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

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

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

Part IIIPart III

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

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

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

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

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

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

Facts And Circumstances Test

Explanation

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047

2011

Open to Public Inspection

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

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

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

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

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

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

Name of the organization POINT PARK UNIVERSITY	Employer identification number 25-1094922
---	--

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

1

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

2

Political expenditures

▶ \$ 0

3

Volunteer hours

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

1

Enter the amount of any excise tax incurred by the organization under section 4955

▶ \$

2

Enter the amount of any excise tax incurred by organization managers under section 4955

▶ \$

3

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

☐ Yes ☐ No

4a

Was a correction made?

☐ Yes ☐ No

b

If "Yes," describe in Part IV

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

1

Enter the amount directly expended by the filing organization for section 527 exempt function activities

▶ \$

2

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities

▶ \$

3

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

▶ \$

4

Did the filing organization file Form 1120-POL for this year?

☐ Yes ☐ No

5

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

Part II-A

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

- A

Check

☐

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

Check

☐

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		54,222													
c Total lobbying expenditures (add lines 1a and 1b)		54,222													
d Other exempt purpose expenditures		92,866,922													
e Total exempt purpose expenditures (add lines 1c and 1d)		92,921,144													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	19,462	47,172	48,938	54,222	169,794
d Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures					

Part II-B

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

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

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE D
(Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

	Held at the End of the Year
2a	
2b	
2c	
2d	

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

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

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

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii) Assets included in Form 990, Part X

▶ \$ _____

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

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

▶ \$ _____

b Assets included in Form 990, Part X

▶ \$ _____

Part III

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

3

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

a

☒

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☐

Loan or exchange programs

e

☐

Other

4

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

5

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

☐ Yes☒ No

Part IV

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

1a

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

☐ Yes☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	24,715,713	22,236,249	20,598,888	20,807,467	
b Contributions	1,345,523	1,074,016	1,064,859	1,067,869	
c Investment earnings or losses	1,662,218	1,762,019	946,350	-905,198	
d Grants or scholarships	282,196	291,452	305,257	302,413	
e Other expenditures for facilities and programs	61,969	65,119	68,591	68,837	
f Administrative expenses					
g End of year balance	27,379,289	24,715,713	22,236,249	20,598,888	

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 67 150 %

b

Permanent endowment ▶ 31 090 %

c

Term endowment ▶ 1 760 %

3a

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

(i)

unrelated organizations

(ii)

related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

b

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

4

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

Part VI

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	5,379,026	10,944,588		16,323,614
b Buildings	4,185,477	109,522,862	41,989,668	71,718,671
c Leasehold improvements		1,522,745	1,466,489	56,256
d Equipment		18,240,274	14,660,306	3,579,968
e Other		2,963,674		2,963,674
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				94,642,183

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	96,062,029
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	92,921,144
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	3,140,885
4	Net unrealized gains (losses) on investments	4	2,097,092
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	365,217
9	Total adjustments (net) Add lines 4 - 8	9	2,462,309
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	5,603,194

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	77,112,658
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	2,097,092
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	966,430
e	Add lines 2a through 2d	2e	3,063,522
3	Subtract line 2e from line 1	3	74,049,136
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	105,593
b	Other (Describe in Part XIV)	4b	21,907,300
c	Add lines 4a and 4b	4c	22,012,893
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	96,062,029

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	71,509,464
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	601,213
e	Add lines 2a through 2d	2e	601,213
3	Subtract line 2e from line 1	3	70,908,251
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	105,593
b	Other (Describe in Part XIV)	4b	21,907,300
c	Add lines 4a and 4b	4c	22,012,893
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	92,921,144

Part XIVSupplemental Information

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

Identifier	Return Reference	Explanation
	PART III, LINE 4	THE PRIMARY PIECE OF THE POINT PARK COLLECTION IS "FREEDOM BOUND," A SCULPTURE BY ARTIST PAIGE BRADLEY, COMMISSIONED AND DONATED BY A BOARD MEMBER. IN 2008 IT WAS INSTALLED AS PART OF THE LAWRENCE HALL LOBBY RENOVATION, WHICH INCLUDES A GRAND ENTRANCE TO THE NEWLY BUILT DANCE COMPLEX. THE UNIVERSITY HOLDS PAINTINGS AND PHOTOGRAPHS ON DISPLAY THROUGHOUT THE CAMPUS THAT WERE ALSO DONATED.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE TOTAL ENDOWMENT CONSISTS OF TWO COLLECTIVE FUND GROUPS, THE ENDOWMENT FUND AND THE BOARD DESIGNATED RESERVE FUND, THE ENDOWMENT FUND, MADE UP OF BOTH PERMANENT & TEMPORARILY RESTRICTED ASSETS, CONSISTS OF APPROXIMATELY 40 INDIVIDUAL FUNDS ESTABLISHED TO SUPPORT NUMEROUS PURPOSES. IT CONSISTS OF 85% RESTRICTED FOR FINANCIAL AID AND 15% FOR OPERATIONS. THE PURPOSE OF THE BOARD DESIGNATED RESERVE FUND, AN UNRESTRICTED ASSET, IS TO MAINTAIN THE LIQUIDITY NECESSARY TO SUPPORT LONG-TERM FISCAL HEALTH OF THE UNIVERSITY.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE UNIVERSITY FOLLOWS STANDARDS ON INCOME TAXES RELATED TO THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES. THE NEW STANDARD REQUIRES THAT AN UNCERTAIN TAX POSITION SHOULD BE RECOGNIZED ONLY IF IT IS "MORE LIKELY THAN NOT" THAT THE POSITION IS SUSTAINABLE BASED ON ITS TECHNICAL MERITS. RECOGNIZABLE TAX POSITIONS SHOULD THEN BE MEASURED TO DETERMINE THE AMOUNT OF BENEFIT RECOGNIZED IN THE FINANCIAL STATEMENTS. THE UNIVERSITY FILES FEDERAL, STATE, AND LOCAL INFORMATION RETURNS, AND NO RETURNS ARE CURRENTLY UNDER EXAMINATION. THE STATUTE OF LIMITATION ON THE UNIVERSITY'S FEDERAL TAX RETURNS REMAINS OPEN FOR THE YEAR ENDED AUGUST 31, 2009. THOUGH THE PRESENT, OTHER RETURNS MAY BE OPEN FOR AN ADDITIONAL YEAR DEPENDING ON JURISDICTION. THE UNIVERSITY CONTINUES TO EVALUATE ITS TAX POSITIONS PURSUANT TO THE NEW STANDARD AND HAS DETERMINED THAT THERE IS NO MATERIAL IMPACT ON THE UNIVERSITY'S FINANCIAL STATEMENTS.
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN VALUE OF INTEREST RATE SWAP 365,217
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE \$488,290 SPECIAL EVENT EXPENSE \$112,923 CHANGE IN VALUE OF INTEREST RATE SWAP \$365,217 TOTAL PART XII LINE 2D \$966,430
PART XII, LINE 4B - OTHER ADJUSTMENTS		FINANCIAL AID \$21,879,600 NONCASH DONATION NOT RECORDED ON FINANCIAL STATEMENTS \$27,700 TOTAL PART XII LINE 4B \$21,907,300
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE \$488,290 SPECIAL EVENT EXPENSE \$112,923 TOTAL PART XIII LINE 2D \$601,213
PART XIII, LINE 4B - OTHER ADJUSTMENTS		FINANCIAL AID \$21,879,600 NONCASH DONATION NOT RECORDED ON FINANCIAL STATEMENTS \$27,700 TOTAL PART XIII LINE 4B \$21,907,300

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

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

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE UNIVERSITY INCLUDES IN ITS BYLAWS AND CATALOGS A STATEMENT CONFIRMING ITS OPPOSITION TO ANY PRACTICE WHICH DEPRIVES ANY INDIVIDUAL OF RIGHTS AND PRIVILEGES BASED ON RACE, RELIGION, SEX, NATIONAL ORIGIN OR HANDICAP. THE UNIVERSITY WILL NOT AFFILIATE NOR EXTEND RECOGNITION TO ANY GROUP WHOSE POLICIES ARE DISCRIMINATORY.
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	LOCAL URBAN REDEVELOPMENT - STOREFRONT ART, COMMONWEALTH OF PA, RACP - PARK PROJECT, HIGHER EDUCATION ASSISTANCE GRANT, PA DEPARTMENT OF WELFARE, PA LIQUOR CONTROL BOARD, FEDERAL U.S. DEPARTMENT OF EDUCATION, SEOG/FWS/PELL, ASSET I3 PROJECT.

1

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDENT FINANCIAL AID	EUROPE	10		POSTING TO STUDENT'S ACCOUNT	24,000		

Part IV Foreign Forms

- 1

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

☐

Yes

☒

No
- 2

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

☐

Yes

☒

No
- 3

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

☐

Yes

☒

No
- 4

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

☐

Yes

☒

No
- 5

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

☐

Yes

☒

No
- 6

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

☐

Yes

☒

No

Part V

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 FINANCIAL AID AWARDS AT POINT PARK UNIVERSITY ARE DETERMINED ON THE BASIS OF ACADEMIC ACHIEVEMENT, COMMUNITY SERVICE, ARTISTIC OR ATHLETIC TALENT AND FINANCIAL NEED ELIGIBILITY GRANTS AND LOANS ARE DISTRIBUTED USING POWERFAIDS APPLICATION AND POSTED TO STUDENT'S ACCOUNTS IN JENZABAR (HIGHER EDUCATION INFORMATION SYSTEM) ANNUALLY THE FINANCIAL AID AREA IS AUDITED BY AN INDEPENDENT ACCOUNTING FIRM

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

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

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

Revenue			(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
			GOLF EVENT	ENDOWMENT FUND SCHOLARSHIP DINNER	1	(Add col (a) through col (c))
			(event type)	(event type)	(total number)	
	1	Gross receipts	120,000	46,291	12,575	178,866
	2	Less Charitable contributions	68,612	39,541	5,696	113,849
3	Gross income (line 1 minus line 2)		51,388	6,750	6,879	65,017
Direct Expenses	4	Cash prizes				
	5	Non-cash prizes			4,000	4,000
	6	Rent/facility costs	49,110	935		50,045
	7	Food and beverages	23,899	8,618	2,250	34,767
	8	Entertainment				
	9	Other direct expenses	18,282	3,295	2,534	24,111
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				(112,923)
	11	Net income summary Combine lines 3 and 10 in column (d). ▶				-47,906

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

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					
Direct Expenses	2	Cash prizes				
	3	Non-cash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶				()
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

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

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

b If "No," Explain _____

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

b If "Yes," Explain _____

- 11

Does the organization operate gaming activities with nonmembers?

Yes

No
- 12

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

Yes

No

13

Indicate the percentage of gaming activity operated in

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

14

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

Name

Address

15a

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

Yes

No

b

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

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation \$

Description of services provided

Director/officer

Employee

Independent contractor

17

Mandatory distributions

a

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

Yes

No

b

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

Part IV

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

Identifier	ReturnReference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

Part I

General Information on Grants and Assistance

- 1

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

☒ Yes ☐ No
- 2

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

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) NEED332 FIFTH AVENUE PITTSBURGH,PA 15222	25-6070821	501(C)(3)	54,000				FINANCIAL AID TO STUDENTS
(2) THE PITTSBURGH FOUNDATION5 PPG PLACE SUITE 250 PITTSBURGH,PA 15222	25-0965466	501(C)(3)	20,000				CITY OF PITTSBURGH PUBLIC SERVICE FUND
(3) URBAN INNOVATION21 1901 CENTRE AVE SUITE 300 PITTSBURGH,PA 15219	26-0379369	501(C)(3)	25,000				ECONOMIC DEVELOPMENT

2

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

3

3

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

0

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIP AID FOR HIGHER ED FOR UNDERGRADUATE AND GRADUATE STUDENTS	3576	21,855,586		N/A	N/A
(2) HOUSING ASSISTANCE TO STUDENT RESIDENT ADVISORS	30	318,600		N/A	N/A
(3) SCHOLARSHIP FOR SCHOOL AGE CHILDREN TO ATTEND SUMMER DANCE PROGRAM	125	99,121		N/A	N/A

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 FINANCIAL AID AWARDS STUDENTS AT POINT PARK UNIVERSITY ARE DETERMINED ON THE BASIS OF ACADEMIC ACHIEVEMENT, COMMUNITY SERVICE, ARTISTIC OR ATHLETIC TALENT AND FINANCIAL NEED ELIGIBILITY GRANTS AND LOANS ARE DISTRIBUTED USING POWERFAIDS APPLICATION AND POSTED TO STUDENT'S ACCOUNTS IN JENZABAR (HIGHER EDUCATION INFORMATION SYSTEM) ANNUALLY THE FINANCIAL AID AREA IS AUDITED BY AN INDEPENDENT ACCOUNTING FIRM

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.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization POINT PARK UNIVERSITY	Employer identification number 25-1094922
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Part I

Questions Regarding Compensation

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

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) PAUL HENNIGAN EDD	(i)	310,342	100,000	49,372	58,375	17,738	535,827	0
	(ii)	0	0	0	0	0	0	0
(2) BRIDGET MANCOSH	(i)	183,192	47,600	190	14,125	18,833	263,940	0
	(ii)	0	0	0	0	0	0	0
(3) MARIANN GEYER	(i)	169,162	22,000	238	12,980	14,658	219,038	0
	(ii)	0	0	0	0	0	0	0
(4) KAREN MCINTYRE PHD	(i)	186,436	46,700	2,956	5,518	2,936	244,546	0
	(ii)	0	0	0	0	0	0	0
(5) RICHARD HASKINS	(i)	150,091	15,000	5,496	11,625	16,565	198,777	0
	(ii)	0	0	0	0	0	0	0
(6) CHARLES FOX DEAN THRU 511	(i)	163,941	0	2,557	10,762	3,523	180,783	0
	(ii)	0	0	0	0	0	0	0
(7) RONALD LINDBLOM	(i)	165,532	12,000	948	12,688	13,821	204,989	0
	(ii)	0	0	0	0	0	0	0
(8) ANGELA H ISAAC PHDDEAN THRU	(i)	151,063	0	648	11,698	47,325	210,734	0
	(ii)	0	0	0	0	0	0	0
(9) FREDRICK JOHNSON	(i)	143,019	10,000	480	10,817	8,633	172,949	0
	(ii)	0	0	0	0	0	0	0
(10) WILLIAM CAMERON	(i)	126,162	10,000	936	9,735	14,408	161,241	0
	(ii)	0	0	0	0	0	0	0
(11) CHARLES PERKINS PHD	(i)	112,254	0	2,316	8,333	1,476	124,379	0
	(ii)	0	0	0	0	0	0	0

Part III

Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	DR. PAUL HENNIGAN, PRESIDENT OF THE UNIVERSITY, IS PAID A MONTHLY HOUSING ALLOWANCE IN PLACE OF STAYING IN A HOUSE ON CAMPUS, THE STANDARD FOR COLLEGES AND UNIVERSITIES. THIS IS REPORTED AS TAXABLE INCOME. THE ONLY PERSONAL SERVICES FOR PAUL HENNIGAN PROVIDED BY THE UNIVERSITY IS BABYSITTING SERVICES FOR HIS CHILDREN IN ORDER TO HELP ACCOMMODATE FOR MR. HENNIGAN'S UNPREDICTABLE WORK SCHEDULE AND FREQUENT OVERNIGHT TRAVEL. SPOUSAL TRAVEL IS NOT REIMBURSABLE PER THE UNIVERSITY'S EXPENSE REIMBURSEMENT POLICY, HOWEVER, THE PRESIDENT'S SPOUSES EXPENDITURES ARE REIMBURSED FOR OFFICIAL BUSINESS, ACCORDING TO THE PRESIDENT'S EMPLOYMENT CONTRACT. GENERALLY TRAVEL FOR COMPANIONS IS INFREQUENT.
	PART I, LINE 7	NON-FIXED PAYMENTS ARE LISTED IN COLUMN (B) (II) BONUS & INCENTIVES COMPENSATION. THEY ARE DETERMINED ANNUALLY BASED ON PERFORMANCE EVALUATIONS.
SUPPLEMENTAL INFORMATION	PART III	PART II, COLUMN C: EFFECTIVE JANUARY 1, 2012, THE BOARD OF DIRECTORS APPROVED THE ADOPTION OF A DEFERRED COMPENSATION PLAN UNDER SECTION 457(F) OF THE INTERNAL REVENUE CODE FOR THE BENEFIT OF ITS PRESIDENT. DURING THE UNIVERSITY'S FISCAL YEAR, THE BOARD APPROVED A \$40,000 CONTRIBUTION TO THE SECTION 457(F) DEFERRED COMPENSATION PLAN FOR THE 2012 CALENDAR YEAR. THE CONTRIBUTION IS REPORTED IN PART II, COLUMN C. THE AWARD IS SUBJECT TO A SUBSTANTIAL RISK OF FORFEITURE.

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	
	Department of the Treasury Internal Revenue Service Name of the organization POINT PARK UNIVERSITY	Employer identification number 25-1094922										

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	ALLEGHENY CO HIGHER EDU BUILDING AUTHORITY	25-1650137		04-29-2008	25,455,000	SEE PART VI		X		X		X
B	ALLEGHENY CO HIGHER EDU BUILDING AUTHORITY	25-1650137	01728RGB9	04-29-2008	6,870,000	SEE PART VI		X		X		X
C	MT LEBANON INDUSTRIAL DEV AUTHORITY	20-5476955		01-19-2007	5,000,000	SEE PART VI		X		X		X
D	MT LEBANON INDUSTRIAL DEV AUTHORITY	20-5476955		12-27-2006	3,830,000	SEE PART VI		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds defeased								
3	Total proceeds of issue	25,455,000		6,870,000		5,000,000		3,830,000	
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds	258,987		69,047		7,250		58,500	
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	25,196,013		6,800,953		4,992,750		3,771,500	
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2010		2009		2008		2008	
14	Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes	No
			X		X		X		X
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		X
16	Has the final allocation of proceeds been made?		X		X		X		X
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X		X		X		X

Part III Private Business Use

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

Part III

Private Business Use (Continued)

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

Part IV

Arbitrage

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

Part V

Procedures To Undertake Corrective Action

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

Part VI

Supplemental Information

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

Identifier	Return Reference	Explanation
SCHEDULE K SUPPLEMENTAL INFORMATION		PART I, LINE A, COLUMN C SERIES A 10,000,000 CUSIP 01728RET2 SERIES B 15,455,000 CUSIP 01728REU9 TOTAL 25,455,000 PART I, LINE A, COLUMN F FOR ACQUISITION AND RENOVATION OF STUDENT APARTMENT HOUSING, RENOVATION OF LOBBY, AND ACQUISITION OF YMCA BUILDING AND RENOVATION INTO STUDENT UNION AND ADDITIONAL CAPITAL PROJECTS PART II, LINE 5, COLUMN A PROCEEDS USED FOR BOND ISSUANCE COSTS WERE \$209,512 PROCEEDS USED FOR CREDIT ENHANCEMENT WERE \$49,475 PART I, LINE B, COLUMN F FOR ACQUISITION AND RENOVATION OF STUDENT APARTMENT HOUSING, RENOVATION OF LOBBY, AND ACQUISITION OF YMCA BUILDING AND RENOVATION INTO STUDENT UNION AND ADDITIONAL CAPITAL PROJECTS PART I, LINE B, COLUMN E ORIGINAL TAXABLE ISSUE PRICE WAS \$6,870,000 A TAX EXEMPT CONVERSION ON JUNE 1, 2010 WAS ISSUED AT OUTSTANDING PRINCIPAL OF \$6,770,000 PART I, LINE C, COLUMN F RENOVATION OF A CLASSROOM/OFFICE BUILDING AND PURCHASE OF AN OFFICE BUILDING, LOBBY RENOVATION AND LIBRARY FURNITURE PART I, LINE D, COLUMN F FOR PURCHASE AND RENOVATION OF A CLASSROOM/OFFICE BUILDING AND PURCHASE OF AN OFFICE BUILDING, LOBBY RENOVATION AND LIBRARY FURNITURE ORIGINALLY ISSUED WITH A \$3,830,000 TAX EXEMPT PORTION OUT OF A TOTAL \$10,000,000 THE TAXABLE PORTION WAS FULLY CONVERTED TO TAX EXEMPT ON 7/16/12 ORIGINAL \$ 3,830,000 12/31/07 \$ 1,084,435 10/31/08 \$ 946,350 7/16/12 \$ 1,470,252 CURRENT TAX EXEMPT AMOUNT \$7,331,037 PART I, LINE D, COLUMN F FOR SUPPORT OF DANCE STUDIO, A LIBRARY, A TELEVISION AND FILM STUDIO, MISCELLANEOUS CAPITAL PROJECTS

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		
	Department of the Treasury Internal Revenue Service Name of the organization POINT PARK UNIVERSITY											Open to Public Inspection	
										Employer identification number		25-1094922	

Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A AUTH FOR IMPROV IN MUNICIPALITIES	25-1196358		08-16-2004	7,000,000	SEE PART VI		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds defeased								
3	Total proceeds of issue	7,000,000							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow								
7	Issuance costs from proceeds	74,518							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	6,925,482							
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2006							
		Yes	No						
14	Were the bonds issued as part of a current refunding issue?		X	Yes	No	Yes	No	Yes	No
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X						

Part III Private Business Use

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

Part III

Private Business Use (Continued)

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

Part IV

Arbitrage

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

Part V

Procedures To Undertake Corrective Action

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

Part VI

Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

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

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

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

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

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

Part IV

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) EXECUTIVE MANAGEMENT SERVICES	FORMER OFFICER - MICHAELITA QUINN - PRESIDENT OF EXECUTIVE MANAGEMENT SVCS	117,880	SEE SCH O EXECUTIVE MANAGEMENT SERVICES (EMS) PROVIDES ENROLLMENT MANAGEMENT SERVICES TO THE UNIVERSITY		No

Part V

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
POINT PARK UNIVERSITY

Employer identification number
25-1094922

Part ITypes of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	3	35,844	STOCK EXCHANGE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (PIANO)	X	1	27,700	APPRAISAL
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

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

291

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	Yes	No
b	If "Yes," describe the arrangement in Part II		No
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?		No
b	If "Yes," describe in Part II		
33	If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II		

Part 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
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization POINT PARK UNIVERSITY	Employer identification number 25-1094922
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE SHALL EXERCISE ALL POWERS OF THE BOARD OF TRUSTEES WHEN THE BOARD IS NOT IN SESSION EXCEPT THAT IT MAY NOT (I) ALIENATE OR ENCUMBER THE REAL ESTATE OR ENDOWMENTS OF THE UNIVERSITY, (II) ENTER INTO FINANCIAL ARRANGEMENTS OR COMMITMENTS WHICH WOULD HAVE A MAJOR EFFECT ON THE UNIVERSITY, (III) SELECT THE PRESIDENT OF THE UNIVERSITY, (IV) ELECT MEMBERS OR OFFICERS OF THE BOARD OF TRUSTEES, OR (V) COMMIT THE UNIVERSITY TO PAYMENTS IN EXCESS OF AVAILABLE REVENUES, UNLESS SPECIFICALLY AUTHORIZED TO DO SO BY THE BOARD

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE RETURN IS PREPARED BY THE UNIVERSITY'S BUSINESS OFFICE. IT IS REVIEWED BY AN INDEPENDENT ACCOUNTING FIRM. THEN THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS CONDUCTS A REVIEW ON BEHALF OF THE BOARD. THE FINAL COPY IS SENT TO ALL VOTING MEMBERS OF THE BOARD BEFORE IT IS FILED.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	CONTAINED WITHIN THE UNIVERSITY'S WRITTEN CODE OF CONDUCT IS THE CONFLICT OF INTEREST POLICY , WHICH IS DISTRIBUTED ANNUALLY TO THE BOARD OF TRUSTEES, AS WELL AS TO ALL FULL-TIME AND PART-TIME EMPLOYEES AND IS AVAILABLE ON THE UNIVERSITY'S WEBSITE THE CONFLICT OF INTEREST STATEMENT THAT IS SIGNED BY DIRECTORS AND OFFICERS STATES, "I ACKNOWLEDGE AN ONGOING RESPONSIBILITY TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST AS THEY MAY ARISE " BOARD MEMBERS COMPLETE A 'CONFLICT OF INTEREST STATEMENT' ANNUALLY THE POLICY MAKES CLEAR THAT NOT ALL CONFLICTING INTERESTS ARE PROHIBITED EACH REPORTED CONFLICT IS EVALUATED TO MAKE CERTAIN THAT DIRECTORS AND OFFICERS PRIMARY OBLIGATION TO THE UNIVERSITY IS NOT COMPROMISED

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD IS RESPONSIBLE FOR HIRING THE CEO, AND THE EXECUTIVE COMMITTEE OF THE BOARD ACTS AS THE COMPENSATION COMMITTEE FOR DETERMINING THE PRESIDENT'S ANNUAL GOALS, OBJECTIVES, PERFORMANCE AND COMPENSATION THE RULES ARE SET FORTH IN THE UNIVERSITY'S BY LAWS, ARTICLE VI, SECTION 2, PARAGRAPH 4 "THE EXECUTIVE COMMITTEE SHALL ALSO ACT AS THE COMPENSATION COMMITTEE FOR PURPOSES OF APPROVING THE PRESIDENT'S ANNUAL GOALS AND OBJECTIVES, EVALUATING THE PRESIDENT'S ANNUAL PERFORMANCE, AND DETERMINING THE PRESIDENT'S ANNUAL COMPENSATION THE EXECUTIVE COMMITTEE IN THIS ROLE SHALL ADHERE TO ALL APPLICABLE STANDARDS PROMULGATED BY THE IRS WITH RESPECT TO COMPENSATION PAYABLE BY EXEMPT ORGANIZATIONS THE PRESIDENT SHALL NOT BE PRESENT WHILE THE EXECUTIVE COMMITTEE DELIBERATES ON THE COMPENSATION, GOALS, AND OBJECTIVE, OR PERFORMANCE OF THE PRESIDENT THE EXECUTIVE COMMITTEE SHALL ALSO PROVIDE ADVICE TO THE PRESIDENT REGARDING THE ANNUAL GOALS AND OBJECTIVES, PERFORMANCE, AND COMPENSATION OF THE PRESIDENT'S EXECUTIVE OFFICERS THE CHAIR OF THE BOARD WILL REPORT TO THE BOARD, AS APPROPRIATE, CONCERNING THE EXECUTIVE COMMITTEE'S DELIBERATIONS AS THE COMPENSATION COMMITTEE FROM TIME TO TIME, THE UNIVERSITY EMPLOYS THE SERVICES OF AN INDEPENDENT FIRM TO DO AN EXECUTIVE BENCHMARKING STUDY AND IMPLEMENT A PEER REVIEW PROCESS FOR THE COMPENSATION OF THE PRESIDENT AND OTHER OFFICERS AND KEY EMPLOYEES IN ORDER TO HELP ADVISE THE COMPENSATION COMMITTEE IN GENERAL THE HUMAN RESOURCES DEPARTMENT USES SURVEYS FROM CUPA-HR [COLLEGE & UNIVERSITY PROFESSIONAL ASSOC] FOR STAFF AND AAUP [AMERICAN ASSOC OF UNIVERSITY PROFESSORS] FOR FACULTY

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE CONFLICT OF INTEREST POLICY IS AVAILABLE ONLINE AS A COMPONENT OF THE UNIVERSITY'S CODE OF CONDUCT THE GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST THE FINANCIAL STATEMENTS ARE NOT AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 2,097,092 CHANGE IN VALUE OF INTEREST RATE SWAP 365,217 TOTAL TO FORM 990, PART XI, LINE 5 2,462,309

Identifier	Return Reference	Explanation
OVERSIGHT OF FINANCIAL STATEMENT AUDIT	FORM 990, PART XI, QUESTION 2C	THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED BY AN INDEPENDENT ACCOUNTING FIRM. IN ADDITION, THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES THE RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND ITS SELECTION OF THE INDEPENDENT ACCOUNTANT. THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Identifier	Return Reference	Explanation
THE NUMBER OF EMPLOYEES IS COMPRISED OF THE FOLLOWING	FORM 990 PART I, LINE 5	FULL TIME STAFF 324 FULL TIME FACULTY 130 PART TIME FACULTY 329 PART TIME STAFF 185 PART TIME STUDENTS 828

Additional Data

Software ID:
Software Version:
EIN: 25-1094922
Name: POINT PARK UNIVERSITY

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

4d. Other program services			
(Code	) (Expenses \$	10,178,888	including grants of \$ (Revenue \$ 9,783)
ACADEMIC SUPPORT- ACADEMIC SUPPORT ARE EXPENSES THAT PROVIDE SUPPORT FOR THE SCHOOL'S PRIMARY ACADEMIC MISSION INCLUDES LIBRARY SERVICES, PROGRAM FOR ACADEMIC SUCCESS, INFORMATION & MEDIA CENTERS & PROVOST OFFICE			

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DENNIS L ASTORINO BOARD MEMBER	1 50	X						0	0	0
RICHARD W BOYD BOARD MEMBER	1 50	X						0	0	0
E MICHAEL BOYLE BOARD MEMBER	1 50	X						0	0	0
MARK BROADHURST BOARD MEMBER	1 50	X						0	0	0
JAMIE CAMPOLONGO BOARD MEMBER	1 50	X						0	0	0
PAUL COSTA BOARD MEMBER/PART TIME PROF	1 50	X						2,091	0	0
GARY M DEJIDAS BOARD MEMBER	1 50	X						0	0	0
WAYNE FONTANA BOARD MEMBER	1 50	X						0	0	0
KISHORE GOPAUL BOARD MEMBER	1 50	X						0	0	0
EDWARD HABERLE BOARD MEMBER	1 50	X						0	0	0
JOSEPH B HAVRILLA BOARD MEMBER	1 50	X						0	0	0
JULIE A LYDA EFF 112 BOARD MEMBER	1 50	X						0	0	0
TIMOTHY W MCGUIRE SR PHD BOARD MEMBER	1 50	X						0	0	0
PEGGY T MCKNIGHT EFF 1011 BOARD MEMBER	1 50	X						0	0	0
J KEVIN MCMAHON BOARD MEMBER	1 50	X						0	0	0
JAMES MILLER BOARD MEMBER	1 50	X						0	0	0
TODD C MOULES BOARD MEMBER	1 50	X						0	0	0
JOSEPH MURIN BOARD MEMBER	1 50	X						0	0	0
DAVID J PEART EFF 112 BOARD MEMBER	1 50	X						0	0	0
LUCAS PIATT BOARD MEMBER	1 50	X						0	0	0
RICHARD E RAUH BOARD MEMBER/PART TIME PROF	1 50	X						10,300	0	0
DR LOREN H ROTH MD BOARD MEMBER	1 50	X						0	0	0
CAROL SAVAGE BOARD MEMBER	1 50	X						0	0	0
CHARLES J STOUT BOARD MEMBER	1 50	X						0	0	0
MARY BETH TAYLOR BOARD MEMBER	1 50	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN R TOMAYKO PHD BOARD MEMBER	1 50	X						0	0	0
NANCY D WASHINGTON PHD BOARD MEMBER	1 50	X						0	0	0
JAKE WHEATLEY BOARD MEMBER	1 50	X						0	0	0
GEORGE R WHITE PHDEXIT 112 BOARD MEMBER	1 50	X						0	0	0
KATHLEEN WHITEEFF 412 BOARD MEMBER	1 50	X						0	0	0
KAREN FARMER WHITE EFF 712 BOARD MEMBER	1 50	X						0	0	0
ANNE LEWIS BOARD MEMBER/CHAIR	3 00	X		X				0	0	0
DAVID S DUNCAN BOARD MEMBER/TREASURER	3 00	X		X				0	0	0
JAMES MEREDITH BOARD MEMBER/SECRETARY	3 00	X		X				0	0	0
DONALD J JENKINS BOARD MEMBER/V CHAIR	3 00	X		X				0	0	0
PAUL HENNIGAN EDD PRESIDENT	40 00			X				459,714	0	76,113
BRIDGET MANCOSH SR VP OF FINANCE & OPERATI	40 00			X				230,982	0	32,958
MARIANN GEYER VP EXTERNAL AFFAIRS	40 00			X				191,400	0	27,638
KAREN MCINTYRE PHD SR VP ACAD/STUDENT AFFAIRS	40 00			X				236,092	0	8,454
RICHARD HASKINS VP/DEV & ALUMNI	40 00			X				170,587	0	28,190
TRUDY WILLIAMS ASST VP FOR ADMISSIONS	40 00			X				103,198	0	8,188
CHARLES FOX DEAN THRU 511 (PROF EFF 6/11) DEAN OF A&S/ PROF	40 00				X			166,498	0	14,285
RONALD LINDBLOM ASSOC VP, ARTISTIC DIR COPA	40 00				X			178,480	0	26,509
ANGELA H ISAAC PHDDEAN THRU 1/12) (PROF EFF 2/12)	40 00				X			151,711	0	59,023
FREDRICK JOHNSON DEAN OF PERFORMING ARTS	40 00				X			153,499	0	19,450
WILLIAM CAMERON VP FOR OPERATIONS	40 00					X		137,098	0	24,143
ROBERT FESSLER EFF 511 PROF &ACTING DEAN OF ARTS & SCIENCES	40 00					X		123,649	0	10,683
TIM HUDSON PHDDEAN THRU 5/11) (PROF EFF 6/11)	40 00					X		133,042	0	16,278
DIMITRIS KRANIOU PROFESSOR	40 00					X		122,349	0	7,320
KEITH PAYLO DEAN- STUDENT AFFAIRS	40 00					X		120,310	0	23,336

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES PERKINS PHD FORMER OFFICER/ CURRENT PROFESSOR	40 00						X	114,570	0	9,809