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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2012</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013



B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization SACRED HEART UNIVERSITY INCORPORATED		D Employer identification number 06-0776644	
	Doing Business As			
	Number and street (or P O box if mail is not delivered to street address) 5151 PARK AVENUE	Room/suite	E Telephone number (203) 371-7872	
	City or town, state or country, and ZIP + 4 FAIRFIELD, CT 06825		G Gross receipts \$ 209,842,972	
	F Name and address of principal officer JOHN PETILLO 5151 PARK AVENUE FAIRFIELD, CT 06825		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: ▶ WWW.SACREDHEART.EDU				
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation 1963	M State of legal domicile CT

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE UNIVERSITY IS A CO-EDUCATIONAL INSTITUTION OF HIGHER LEARNING OFFERING UNDERGRADUATE AND GRADUATE DEGREES, AS WELL AS CONTINUING EDUCATION IN A VARIETY OF DISCIPLINES, WITH A COMMITMENT TO LEADERSHIP IN CATHOLIC HIGHER EDUCATION		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	19
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	3,426
6 Total number of volunteers (estimate if necessary)	6	150	
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	587,458	
b Net unrelated business taxable income from Form 990-T, line 34	7b	-257,680	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year 12,935,689	Current Year 12,436,911
	9 Program service revenue (Part VIII, line 2g)	180,430,118	188,510,887
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	3,092,472	8,632,779
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-106,244	-131,821
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	196,352,035	209,448,756
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	39,371,382
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)		75,414,936	78,936,933
16a Professional fundraising fees (Part IX, column (A), line 11e)		0	0
b Total fundraising expenses (Part IX, column (D), line 25) <input checked="" type="checkbox"/> 1,850,434			
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		64,308,691	68,244,544
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		179,095,009	188,432,452
19 Revenue less expenses Subtract line 18 from line 12		17,257,026	21,016,304
Net Assets or Fund Balances			Beginning of Current Year
	20 Total assets (Part X, line 16)	333,780,638	376,276,478
	21 Total liabilities (Part X, line 26)	153,264,596	167,684,803
	22 Net assets or fund balances Subtract line 21 from line 20	180,516,042	208,591,675

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			2014-05-14 Date	
	MICHAEL J KINNEY SR VP FOR FINANCE & ADMIN Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name ELIZABETH SOLECKI		Preparer's signature		Date
	Firm's name  BLUM SHAPIRO & COMPANY PC CPA'S			Check <input type="checkbox"/> if self-employed	PTIN P00235171
	Firm's address  29 S MAIN STREET PO BOX 272000 WEST HARTFORD, CT 061272000			Phone no (860) 561-4000	

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

Part III

Statement of Program Service Accomplishments

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

☐

1

Briefly describe the organization’s mission

AT SACRED HEART UNIVERSITY, WE NOT ONLY PREPARE STUDENTS FOR THE FUTURE, BUT ALSO GIVE THEM A DEEPER APPRECIATION OF WHO THEY ARE AND ALL THEY CAN BE THROUGH OUR DISTINCTIVE MISSION AND COMMITMENT TO LEADERSHIP IN CATHOLIC HIGHER EDUCATION, WE HELP STUDENTS HELP OTHERS AND, TOGETHER, WE MAKE A DIFFERENCE IN THE WORLD THE SHU MISSION THE PURSUIT OF TRUTH AND KNOWLEDGE AS INTRINSICALLY VALUABLE, COMMITMENT TO EXCELLENCE IN ALL THAT WE DO , RESPONSIBILITY FOR THE COMMON GOOD OF SOCIETY, RECOGNITION OF THE DIGNITY AND WORTH OF EVERY HUMAN BEING, PRESERVATION, TRANSMISSION AND DEVELOPMENT OF THE LIBERAL ARTS AND CATHOLIC INTELLECTUAL TRADITION OUR VISION IS TO SHAPE GRADUATES KNOWLEDGEABLE OF SELF, ROOTED IN FAITH, EDUCATED IN MIND, COMPASSIONATE IN HEART, RESPONSIVE TO SOCIAL AND CIVIC OBLIGATIONS AND ABLE TO RESPOND TO AN EVER-CHANGING WORLD

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 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 \$ 63,107,225 including grants of \$) (Revenue \$ 156,937,376)

SACRED HEART CONTINUES TO OFFER A WIDE RANGE OF UNDERGRADUATE AND GRADUATE PROGRAMS REGARDLESS OF WHAT UNDERGRADUATE PROGRAM OR GRADUATE STUDIES ARE CHOSEN, OUR FOCUS ON ACADEMIC OPPORTUNITIES - ROOTED IN THE CATHOLIC INTELLECTUAL TRADITION AND THE PRINCIPLES OF ENGAGED LEARNING - CREATES AN ABSORBING, CUSTOMIZED EDUCATIONAL EXPERIENCE FOR EACH STUDENT

4b

(Code) (Expenses \$ 41,250,975 including grants of \$ 41,250,975) (Revenue \$ 0)

SACRED HEART UNIVERSITY'S STUDENT FINANCIAL ASSISTANCE OFFICE IS COMMITTED TO HELPING STUDENTS AND THEIR FAMILIES FIND THE MOST AFFORDABLE OPTIONS AVAILABLE FOR ATTENDING COLLEGE FOR FULL-TIME UNDERGRADUATE STUDENTS, THERE ARE BASICALLY TWO TYPES OF FINANCIAL ASSISTANCE FIRST, TRADITIONAL MERIT OR NEED-BASED AID, AND SECOND, A RANGE OF OTHER OPTIONS OPEN TO STUDENTS AND THEIR FAMILIES WHETHER THEY QUALIFY FOR TRADITIONAL AID OR NOT SEVERAL FINANCIAL ASSISTANCE OPTIONS ARE ALSO AVAILABLE TO QUALIFIED PART-TIME UNDERGRADUATE STUDENTS AND GRADUATE STUDENTS

4c

(Code) (Expenses \$ 31,830,116 including grants of \$ 0) (Revenue \$ 2,724,343)

SACRED HEART UNIVERSITY IS COMMITTED TO SERVING THE NEEDS OF ITS DIVERSE STUDENT POPULATION BY OFFERING AN ARRAY OF SERVICES DESIGNED TO ENSURE STUDENT SUCCESS THESE SERVICES, PROVIDED THROUGH ACADEMIC ADVISING, STUDENT LIFE, CAREER SERVICES, JANDRESEVITS LEARNING CENTER, THE OFFICE OF SPECIAL SERVICES, AND THE WELLNESS CENTER, AIM TO SERVE STUDENTS IN A MANNER THAT IS CONSISTENT WITH THE MISSION THE UNIVERSITY ALSO PROMOTES ACTIVE ENGAGED LEARNING OUTSIDE OF THE CLASSROOM OUR ATHLETICS PROGRAMS ARE ABOUT MORE THAN JUST COMPETITION AND WINNING THEY ARE BUILT ON A LONGSTANDING TRADITION OF HELPING OUR STUDENT-ATHLETES REALIZE THEIR POTENTIAL, STRENGTHEN THEIR CHARACTER, AND EMPOWER THEIR MINDS WHILE DEVELOPING SELF-CONFIDENCE AND VALUABLE LEADERSHIP SKILLS

(Code) (Expenses \$ 29,402,692 including grants of \$) (Revenue \$ 28,268,710)

OTHER GENERAL AND AUXILIARY SERVICES

4d

Other program services (Describe in Schedule O)
























(Expenses \$ 29,402,692 including grants of \$) (Revenue \$ 28,268,710)

4e

Total program service expenses

165,591,008

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

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 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 lines 24b through 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, highest 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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <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 direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If "Yes" to line 35a, 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		
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 11b 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	624
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	3,426
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes
b	If "Yes," enter the name of the foreign country ► EI , LU 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 as charitable contributions?	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	Yes
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. See the instructions for additional information the organization must report on Schedule O	13a	
b	Enter the 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 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	19	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
1b	Enter the number of voting members included in line 1a, above, who are independent	18	
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
7b	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		
8a	The governing body?	8a	Yes
8b	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	Yes
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	No
11b Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
12c	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?		
15a	The organization's CEO, Executive Director, or top management official	15a	Yes
15b	Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)
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 during the tax year
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization MICHAEL J KINNEY 5151 PARK AVENUE FAIRFIELD, CT (203) 371-7872

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

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

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

- 1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) TERESA M RESSEL TREASURER	1 00	X		X				0	0	0
(2) MARY-ANN BUNTING TRUSTEE	1 00	X						0	0	0
(3) WILLIAM E MITCHELL TRUSTEE	1 00	X						0	0	0
(4) JAMES T MORLEY JR CHAIRMAN OF THE BOARD	1 00	X		X				0	0	0
(5) REV MSGR WILLIAM A GENUARIO JCD TRUSTEE	1 00	X						0	0	0
(6) ROBERT J MATURA TRUSTEE	1 00	X						0	0	0
(7) LINDA E MCMAHON TRUSTEE	1 00	X						0	0	0
(8) LOIS SCHINE TRUSTEE	1 00	X						0	0	0
(9) JEFFREY A SONNENFELD TRUSTEE	1 00	X						0	0	0
(10) FRANK R MARTIRE VICE CHAIRMAN	1 00	X		X				0	0	0
(11) ROBERT L CORCORAN TRUSTEE	1 00	X						0	0	0
(12) CHRISTOPHER K MCLEOD SECRETARY	1 00	X		X				0	0	0
(13) ROSANNE BADOWSKI TRUSTEE	1 00	X						0	0	0
(14) VINCENT MAFFEO TRUSTEE	1 00	X						0	0	0
(15) NORBERT BECKER TRUSTEE	1 00	X						0	0	0
(16) PATRICK J CAROLAN MD TRUSTEE	1 00	X						0	0	0
(17) REV ROBERT M KINNALLY TRUSTEE	1 00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(18) JOHN J PETILLO PRESIDENT	35 00	X		X				551,751	0	34,369
(19) MURRAY D MARTIN TRUSTEE	1 00	X						0	0	0
(20) MICHAEL J KINNEY SR VICE PRESIDENT	35 00			X				277,789	0	30,667
(21) MICHAEL LAROBINA ESQ GENERAL COUNSEL	35 00			X				178,618	0	14,712
(22) LAURA NIESEN DE ABRUNA PROVOST AND VICE PRESIDENT	35 00			X				291,189	0	24,266
(23) JAMES BARQUINERO SR VICE PRESIDENT	35 00				X			250,590	0	26,943
(24) ROBERT M HARDY VICE PRESIDENT	35 00				X			193,329	0	16,709
(25) MEGAN ROCK VICE PRESIDENT	35 00				X			226,002	0	22,328
(26) ANTHONY J CERNERA FORMER PRES/PROF OF RELIG STUDIES	35 00					X		348,033	0	24,343
(27) PATRICIA W WALKER DEAN	35 00					X		205,022	0	16,814
(28) THOMAS V FORGET FORMER VP/ASSOC PROFESSOR	35 00					X		219,576	0	21,782
(29) DAVID COPPOLA VICE PRESIDENT	35 00					X		190,831	0	27,754
(30) PHILIP MCCABE VICE PRESIDENT	35 00					X		205,336	0	13,901
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								3,138,066	0	274,588
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶93										

		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	No
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
CHARTWELL'S HIGHER EDUCATION C/O BANK OF AMERICA PO BOX 91337 CHICAGO IL606931853	FOOD SERVICES	7,978,705
DELTAK EDU INC 1415 WEST 22ND STREET OAK BROOK IL60523	ONLINE EDUCATION SERVICES	2,756,748
SASAKI ASSOCIATES INC 64 PLEASANT STREET WATERTOWN MA 02472	ARCHITECTURAL SERVICES	2,039,134
EASTERN LAND MANAGEMENT INC 142 HAMILTON AVENUE STAMFORD CT 06902	COMMERCIAL LANDSCAPE MANAGEMENT	833,777
NATIONAL PUBLIC RADIO PO BOX 79540 BALTIMORE MD 21279	BROADCASTING	718,755
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 ▶92		

Part VIII

Statement of Revenue

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

				(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	730,344			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	3,179,759			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	8,526,808			
	g	Noncash contributions included in lines 1a-1f \$		277,130			
	h	Total. Add lines 1a-1f		12,436,911			
Program Service Revenue	2a	TUITION AND FEES	Business Code 611310	156,937,376	156,937,376		
	b	AUXILIARY ACTIVITIES	611310	27,425,461	27,425,461		
	c	OTHER INCOME	900099	2,346,250	1,805,634	540,616	
	d	PIIT CENTER & ATHLETICS	611310	1,801,800	1,761,958	39,842	
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		188,510,887			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		2,235,303		
4		Income from investment of tax-exempt bond proceeds . .					
5		Royalties					
6a		(i) Real					
		(ii) Personal					
		Gross rents					
		Less rental expenses					
b		135,543					
c		-25,852					
d		Net rental income or (loss)		-25,852		7,000	-32,852
7a		(i) Securities					
		(ii) Other					
		Gross amount from sales of assets other than inventory					
		Less cost or other basis and sales expenses					
b		0					
c		6,397,476					
d		Net gain or (loss)		6,397,476			6,397,476
8a		Gross income from fundraising events (not including \$ 730,344 of contributions reported on line 1c) See Part IV, line 18					
		a	152,704				
		b	258,673				
c		Net income or (loss) from fundraising events . .		-105,969			-105,969
9a		Gross income from gaming activities See Part IV, line 19					
	a						
	b						
c	Net income or (loss) from gaming activities . .						
10a	Gross sales of inventory, less returns and allowances						
	a						
	b						
c	Net income or (loss) from sales of inventory . .						
Miscellaneous Revenue			Business Code				
11a							
	b						
	c						
	d						
	e						
12	Total revenue. See Instructions		209,448,756	187,930,429	587,458	8,493,958	

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).

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.				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	41,250,975	41,250,975		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	2,085,168	572,949	1,265,836	246,383
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	741,656	238,763	502,893	
7	Other salaries and wages.	59,560,699	52,764,824	5,834,623	961,252
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	3,407,059	2,900,462	437,737	68,860
9	Other employee benefits.	8,835,713	7,860,203	845,695	129,815
10	Payroll taxes.	4,306,638	3,666,282	553,314	87,042
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	509,322	29,951	479,371	
c	Accounting.	178,185		178,185	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	852,907		852,907	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	17,460,639	15,374,962	1,957,250	128,427
12	Advertising and promotion.	895,532	348,414	546,593	525
13	Office expenses.	3,173,608	2,721,774	329,855	121,979
14	Information technology.	521,317	407,875	113,369	73
15	Royalties.				
16	Occupancy.	10,501,971	9,749,135	735,894	16,942
17	Travel.	3,838,502	3,478,316	317,846	42,340
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	540,807	483,264	52,543	5,000
20	Interest.	4,542,017	3,245,387	1,296,630	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	11,491,787	10,367,205	1,124,582	
23	Insurance.	1,964,518	857,291	1,107,227	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	CONTRACT SERVICES	5,750,701	4,441,519	1,299,682	9,500
b	PURCHASING	2,668,548	2,207,872	457,454	3,222
c	MISCELLANEOUS	2,202,853	1,773,474	429,525	-146
d	DUES AND SUBSCRIPTIONS	1,151,330	850,111	271,999	29,220
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	188,432,452	165,591,008	20,991,010	1,850,434
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		13,639,305	1	28,971,266
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		3,797,754	3	3,991,787
	4	Accounts receivable, net		1,566,922	4	1,425,636
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	317,769,889		
	b	Less accumulated depreciation	10b	122,701,141	181,251,872	10c 195,068,748
	11	Investments—publicly traded securities		112,572,913	11	124,121,845
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		20,951,872	15	22,697,196
	16	Total assets. Add lines 1 through 15 (must equal line 34)		333,780,638	16	376,276,478
Liabilities	17	Accounts payable and accrued expenses		18,270,628	17	18,752,802
	18	Grants payable			18	
	19	Deferred revenue		8,377,567	19	21,342,367
	20	Tax-exempt bond liabilities		114,334,341	20	110,906,865
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other 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		11,973,533	23	16,388,674
	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		308,527	25	294,095
	26	Total liabilities. Add lines 17 through 25		153,264,596	26	167,684,803
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		157,036,995	27	182,069,579
	28	Temporarily restricted net assets		11,351,507	28	13,921,406
	29	Permanently restricted net assets		12,127,540	29	12,600,690
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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		180,516,042	33	208,591,675
	34	Total liabilities and net assets/fund balances		333,780,638	34	376,276,478

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	209,448,756
2	Total expenses (must equal Part IX, column (A), line 25)	2	188,432,452
3	Revenue less expenses Subtract line 2 from line 1	3	21,016,304
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	180,516,042
5	Net unrealized gains (losses) on investments	5	7,038,130
6	Donated services and use of facilities	6	21,200
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-1
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	208,591,675

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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 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	
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	
3b	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	

Additional Data

Software ID:

Software Version:

EIN: 06-0776644

Name: SACRED HEART UNIVERSITY INCORPORATED

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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
TERESA M RESSEL TREASURER	1 00	X		X				0	0	0
MARY-ANN BUNTING TRUSTEE	1 00	X						0	0	0
WILLIAM E MITCHELL TRUSTEE	1 00	X						0	0	0
JAMES T MORLEY JR CHAIRMAN OF THE BOARD	1 00	X		X				0	0	0
REV MSGR WILLIAM A GENUARIO JCD TRUSTEE	1 00	X						0	0	0
ROBERT J MATURA TRUSTEE	1 00	X						0	0	0
LINDA E MCMAHON TRUSTEE	1 00	X						0	0	0
LOIS SCHINE TRUSTEE	1 00	X						0	0	0
JEFFREY A SONNENFELD TRUSTEE	1 00	X						0	0	0
FRANK R MARTIRE VICE CHAIRMAN	1 00	X		X				0	0	0
ROBERT L CORCORAN TRUSTEE	1 00	X						0	0	0
CHRISTOPHER K MCLEOD SECRETARY	1 00	X		X				0	0	0
ROSANNE BADOWSKI TRUSTEE	1 00	X						0	0	0
VINCENT MAFFEO TRUSTEE	1 00	X						0	0	0
NORBERT BECKER TRUSTEE	1 00	X						0	0	0
PATRICK J CAROLAN MD TRUSTEE	1 00	X						0	0	0
REV ROBERT M KINNALLY TRUSTEE	1 00	X						0	0	0
JOHN J PETILLO PRESIDENT	35 00	X		X				551,751	0	34,369
MURRAY D MARTIN TRUSTEE	1 00	X						0	0	0
MICHAEL J KINNEY SR VICE PRESIDENT	35 00			X				277,789	0	30,667
MICHAEL LAROBINA ESQ GENERAL COUNSEL	35 00			X				178,618	0	14,712
LAURA NIESEN DE ABRUNA PROVOST AND VICE PRESIDENT	35 00			X				291,189	0	24,266
JAMES BARQUINERO SR VICE PRESIDENT	35 00				X			250,590	0	26,943
ROBERT M HARDY VICE PRESIDENT	35 00				X			193,329	0	16,709
MEGAN ROCK VICE PRESIDENT	35 00				X			226,002	0	22,328

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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
ANTHONY J CERNERA FORMER PRES/PROF OF RELIG STUDIES	35 00					X		348,033	0	24,343
PATRICIA W WALKER DEAN	35 00					X		205,022	0	16,814
THOMAS V FORGET FORMER VP/ASSOC PROFESSOR	35 00					X		219,576	0	21,782
DAVID COPPOLA VICE PRESIDENT	35 00					X		190,831	0	27,754
PHILIP MCCABE VICE PRESIDENT	35 00					X		205,336	0	13,901

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
SACRED HEART UNIVERSITY INCORPORATED

Employer identification number
06-0776644

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 described in **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 - Non-functionally integrated
- 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 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 monetary support |
|------------------------------------|----------|--|--|----|---|----|--|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

Part II

Support Schedule for Organizations Described in Sections 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
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 2012 (line 6, column (f) divided by line 11, column (f))		14				
15 Public support percentage for 2011 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2012. 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—2011. If the organization did not check a 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—2012. 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—2011. 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 Section 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. 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—2011. 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.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and 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

2012

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, Part V, line 35c (Proxy Tax), then

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

Name of the organization SACRED HEART UNIVERSITY INCORPORATED	Employer identification number 06-0776644
--	--

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 in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

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

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

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

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

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

Part II-A

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

- A
- Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B
- Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount Enter the amount from the following table in both columns															
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B

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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)	(b)	
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		
j	Total. Add lines 1c through 1i.			0
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 carry over 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) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

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

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	PART II-B, LINE 1	SACRED HEART UNIVERSITY MAY INDIRECTLY INCUR LOBBYING EXPENSE THROUGH DUES PAID TO OTHER ORGANIZATIONS

SCHEDULE D
(Form 990)

Supplemental Financial Statements

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SACRED HEART UNIVERSITY INCORPORATED

Employer identification number
06-0776644

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? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? <div><input type="checkbox"/> Yes<input type="checkbox"/> No</div>	

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 education)☐ Preservation of an historically important land area☐ Protection of natural habitat☐ Preservation of a certified historic structure☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 section 170(h)(4)(B)(ii)?

☐ Yes☐ No

9

In Part XIII, 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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), 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▶\$ _____0

(ii) Assets included in Form 990, Part X▶\$ _____624,765

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 (ASC 958) relating to these items

a

Revenues included in Form 990, Part VIII, line 1▶\$ _____

b

Assets included in Form 990, Part X▶\$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

Part III

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

- 3

Using the organization's acquisition, 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 XIII
- 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 XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	
- 2a

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

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

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

- | | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back | |
|----|--|---------------|---------------------|---------------------|--------------------|-------------|
| 1a | Beginning of year balance | 112,727,911 | 108,336,892 | 81,912,232 | 67,039,061 | 75,715,465 |
| b | Contributions | 1,784,436 | 5,514,054 | 6,318,543 | 6,641,974 | 5,501,555 |
| c | Net investment earnings, gains, and losses | 15,742,517 | 54,371 | 21,349,512 | 8,570,742 | -12,772,805 |
| d | Grants or scholarships | | | | | 474,106 |
| e | Other expenditures for facilities and programs | 5,122,312 | 521,859 | 636,823 | | 569,523 |
| f | Administrative expenses | 852,907 | 655,547 | 606,572 | 339,545 | 361,525 |
| g | End of year balance | 124,279,645 | 112,727,911 | 108,336,892 | 81,912,232 | 67,039,061 |
- 2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

84 000 %

b

Permanent endowment

16 000 %

c

Temporarily restricted endowment

0 %

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

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

(i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No
- b

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

3b

☐ Yes

☐ No

4

Describe in Part XIII 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		17,152,580		17,152,580
b Buildings		155,409,811	46,022,035	109,387,776
c Leasehold improvements		74,837,205	30,934,958	43,902,247
d Equipment		43,682,677	36,447,124	7,235,553
e Other		26,687,616	9,297,024	17,390,592
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				195,068,748

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return					
1	Total revenue, gains, and other support per audited financial statements			1	174,820,152
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			2e	
a	Net unrealized gains on investments	2a	7,038,130		
b	Donated services and use of facilities	2b	42,928		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	-42,103,878		
e	Add lines 2a through 2d			2e	-35,022,820
3	Subtract line 2e from line 1			3	209,842,972
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b	-394,216		
c	Add lines 4a and 4b		4c		
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)			5	209,448,756
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return					
1	Total expenses and losses per audited financial statements			1	146,744,519
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			2e	
a	Donated services and use of facilities	2a	21,728		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	394,221		
e	Add lines 2a through 2d			2e	415,949
3	Subtract line 2e from line 1			3	146,328,570
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b	42,103,882		
c	Add lines 4a and 4b		4c		
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)			5	188,432,452

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
	PART III, LINE 4	WORKS OF ART ARE CONTRIBUTED TO THE UNIVERSITY FROM VARIOUS DONORS. THE SCHOOL DISPLAYS THEM IN VARIOUS LOCATIONS ACROSS THE UNIVERSITY FOR PUBLIC VIEWING.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE UNIVERSITY USES THE FUNDS FOR STUDENT SCHOLARSHIPS, TO PROVIDE EDUCATIONAL AND SUPPORT SERVICES, AND TO MAINTAIN AND EXPAND THE UNIVERSITY CAPITAL INFRASTRUCTURE IN ORDER TO SUSTAIN THE UNIVERSITY'S FINANCIAL STABILITY.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE UNIVERSITY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(A), AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, AS AMENDED. ACCORDINGLY, IT IS NOT SUBJECT TO INCOME TAXES EXCEPT TO THE EXTENT IT HAS TAXABLE INCOME FROM ACTIVITIES THAT ARE NOT RELATED TO ITS EXEMPT PURPOSE. THE UNIVERSITY RECOGNIZES THE EFFECT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED. NO PROVISION FOR INCOME TAXES WAS REQUIRED FOR FISCAL 2013 OR 2012.
PART XI, LINE 2D - OTHER ADJUSTMENTS		FINANCIAL AID -41,250,975 INVESTMENT FEES -852,907 MISC ADJUSTMENT 4
PART XI, LINE 4B - OTHER ADJUSTMENTS		FUNDRAISING EXPENSES -258,673 RENTAL EXPENSES -135,543
PART XII, LINE 2D - OTHER ADJUSTMENTS		FUNDRAISING EXPENSES 258,673 RENTAL EXPENSES 135,543 MISC ADJUSTMENT 5
PART XII, LINE 4B - OTHER ADJUSTMENTS		FINANCIAL AID 41,250,975 INVESTMENT FEES 852,907

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

2012

Open to Public Inspection

Name of the organization
SACRED HEART UNIVERSITY INCORPORATED

Employer identification number
06-0776644

Part I		YES	NO
<div>1</div> <div>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?</div>	1	Yes	
	2	Yes	
	3	Yes	
	4a	Yes	
<div>2</div> <div>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?</div>	4b	Yes	
	4c	Yes	
	4d	Yes	
	5a		No
<div>3</div> <div>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</div>	5b		No
	5c		No
	5d		No
	5e		No
<div>4</div> <div>Does the organization maintain the following?</div> <div>a Records indicating the racial composition of the student body, faculty, and administrative staff?</div> <div>b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</div> <div>c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</div> <div>d Copies of all material used by the organization or on its behalf to solicit contributions?</div> <div>If you answered "No" to any of the above, please explain If you need more space, use Part II</div>	5f		No
	5g		No
	5h		No
	6a	Yes	
<div>5</div> <div>Does the organization discriminate by race in any way with respect to</div> <div>a Students' rights or privileges?</div> <div>b Admissions policies?</div> <div>c Employment of faculty or administrative staff?</div> <div>d Scholarships or other financial assistance?</div> <div>e Educational policies?</div> <div>f Use of facilities?</div> <div>g Athletic programs?</div> <div>h Other extracurricular activities?</div> <div>If you answered "Yes" to any of the above, please explain If you need more space, use Part II</div>	6b		No
	7	Yes	

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

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE UNIVERSITY IS COMMITTED TO FULLFILLING ITS MISSION WITHOUT DISCRIMINATION ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, RELIGION, AGE, SEXUAL ORIENTATION, DISABILITY OR VETERAN STATUS
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	SACRED HEART UNIVERSITY RECEIVES FUNDS FROM THE US DEPARTMENT OF EDUCATION THE UNIVERSITY RECEIVES PELL GRANTS, SEOG GRANTS AND FEDERAL WORK-STUDY FUNDS WHICH ARE FINANCIAL AID PROGRAMS THE UNIVERSITY ALSO RECEIVES STATE FUNDS AND PROCESSES AID ACCORDING TO THE CRITERIA OF STATE GOVERNMENT AGENCIES PRIMARY STATE FUNDING IS FROM THE CONNECTICUT DEPARTMENT OF HIGHER EDUCATION, OTHER STATES INCLUDE, DELAWARE, MASSACHUSETTS, PENNSYLVANIA, RHODE ISLAND AND VERMONT THE STATES ARE SUBJECT TO CHANGE EACH YEAR DEPENDING ON WHICH STATES OFFER ASSISTANCE TO THEIR RESIDENTS ATTENDING AN OUT OF STATE INSTITUTION

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
SACRED HEART UNIVERSITY INCORPORATED

Employer identification number
06-0776644

Part I

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers. 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 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EUROPE (INCLUDING ICELAND & GREENLAND) -	2	6	PROGRAM SERVICES	EDUCATIONAL	1,274,503
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES/MISSION RELATED TRIPS	EDUCATIONAL	159,276
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	EDUCATIONAL	48,800
3a Sub-total	2	6			1,482,579
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	2	6			1,482,579

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 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

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (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, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (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

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization
SACRED HEART UNIVERSITY INCORPORATED

Employer identification number
06-0776644

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

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

a ☐ Mail solicitations

b ☐ Internet and email solicitations

c ☐ Phone solicitations

d ☐ In-person solicitations

e ☐ Solicitation of non-government grants

f ☐ Solicitation of government grants

g ☐ Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

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

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<u>PIONEER GOLF TOURNAMENT</u>	<u>DISCOVERY GALA</u>	<u>3</u>	(add col (a) through col (c))	
		(event type)	(event type)	(total number)		
	1	Gross receipts	240,268	517,555	125,225	883,048
	2	Less Contributions . . .	179,583	460,855	89,906	730,344
3	Gross income (line 1 minus line 2)	60,685	56,700	35,319	152,704	
Direct Expenses	4	Cash prizes				
	5	Noncash prizes . . .	30,578	2,000	2,990	35,568
	6	Rent/facility costs . . .	28,080		22,830	50,910
	7	Food and beverages .				
	8	Entertainment				
	9	Other direct expenses .	27,405	103,294	41,496	172,195
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶				(258,673)
	11	Net income summary Combine line 3, column (d), and line 10 ▶				-105,969

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
Direct Expenses	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
	6	Volunteer labor	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>	<div><input type="checkbox"/> Yes</div> <div><input type="checkbox"/> No</div>
	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 _____

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 Enter 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 of the third party

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 Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	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

2012

Open to Public
Inspection

Name of the organization
SACRED HEART UNIVERSITY INCORPORATED

Employer identification number
06-0776644

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. Part II can be duplicated if additional space is needed.

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

2

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

▶

3

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

▶

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated 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) FEDERAL AID	327	376,913			
(2) STATE AID	512	1,586,206			
(3) RESIDENCE HALL ASSISTANT WAIVERS AND AWARDS	81	633,562			
(4) OTHER SCHOLARSHIPS WHICH ARE NEEDS BASED OR BASED ON ATHLETIC OR ACADEMIC TALENTS	3408	38,654,294			

Part IV

Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), 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 THE THREE AREAS OF FINANCIAL ASSISTANCE TO STUDENTS ARE LOANS, GRANTS, AND EMPLOYMENT (WORK-STUDY) THESE ARE GENERALLY AWARDED ON THE BASIS OF FINANCIAL NEED, DETERMINED BY AN ANALYSIS OF FAMILY INCOME AND ASSETS SCHOLARSHIPS ARE ANOTHER SOURCE OF FINANCIAL ASSISTANCE, AWARDED ON THE BASIS OF ACADEMIC ACHIEVEMENT, ATHLETICS OR PERFORMING ARTS, COMMUNITY SERVICE OR LEADERSHIP CRITERIA FOR MERIT BASED AWARDS MAY ALSO INCLUDE A FINANCIAL NEEDS REQUIREMENT THE UNIVERSITY MONITORS THE AMOUNT ISSUED BY CALCULATING A COST OF ATTENDANCE, ASSESSING AN ESTIMATED FAMILY CONTRIBUTION (EFC), AND DERIVING A LEVEL OF FINANCIAL NEED ONCE THE AMOUNT OF AID HAS BEEN DETERMINED FOR THE INDIVIDUAL, IT IS DISPERSED TO THE STUDENT'S ACCOUNT AND IS CONTROLLED BY THE BURSAR'S OFFICE SEVERAL REPORTS/SURVEYS ARE USED ANNUALLY TO MONITOR THE DISTRIBUTION OF GRANT ASSISTANCE, FOR EXAMPLE, FISAP REPORT TO USDE, A-133 AUDIT, FEDERAL IPEDS REPORT, STATE ANNUAL AUDIT, AND VARIOUS SURVEYS THAT TYPICALLY USE INFORMATION FROM THE COMMON DATA SET (CDS)

Schedule J (Form 990) <div>Department of the Treasury Internal Revenue Service</div>	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
		2012
		Open to Public Inspection

Name of the organization SACRED HEART UNIVERSITY INCORPORATED	Employer identification number 06-0776644
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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 <div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>			
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 of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>			
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 <div><div>a Receive a severance payment or change-of-control payment?</div><div>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div><div>c Participate in, or receive payment from, an equity-based compensation arrangement?</div></div> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4a		No
		4b		No
		4c		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 5a or 5b, describe in Part III	5a	Yes	
		5b		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of <div><div>a The organization?</div><div>b Any related organization?</div></div> If "Yes," to line 6a or 6b, describe in Part III	6a	Yes	
		6b		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	Yes	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	Yes	

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is 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, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(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 as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
	PART I, LINE 1A	THE UNIVERSITY FUNDS A GOLF CLUB MEMBERSHIP IN THE NAME OF AN OFFICER. THE MEMBERSHIP IS USED FOR UNIVERSITY EVENTS AND THE ENTERTAINMENT OF PROSPECTIVE DONORS AND CONTRIBUTORS. THE GOLF COURSE IS ALSO AVAILABLE FOR THE UNIVERSITY GOLF TEAM PRACTICES.
	PART I, LINE 3	COMPENSATION FOR THE UNIVERSITY'S PRESIDENT/CEO IS DETERMINED THROUGH AN EXTENSIVE REVIEW OF THE JOB RESPONSIBILITIES AND EXPECTATIONS OUTLINED BY THE BOARD. THE COMPENSATION COMMITTEE THEN PERFORMS A REVIEW OF EXTERNAL MARKET AND INDUSTRY SURVEY AND STUDY DATA. CONSIDERATION OF ALL ADDITIONAL RESPONSIBILITIES ARE DETAILED OUT IN SPECIFIC LANGUAGE IN AN EMPLOYMENT CONTRACT APPROVED BY OUR LEGAL COUNSEL. FINAL SALARY RANGES ARE THEN DETERMINED BY THE COMPENSATION COMMITTEE. COMPENSATION IS DETERMINED BY THE EVALUATION OF THE JOB DESCRIPTION AGAINST EXTERNAL MARKET DATA AVAILABLE AS WELL AS THE REVIEW OF OUR INTERNAL EMPLOYEE DATA. CONSIDERATION OF ADDITIONAL RESPONSIBILITIES AND OTHER FACTORS MAY ALSO CONTRIBUTE IN DETERMINING COMPENSATION. THE DELIBERATION AND DECISION ARE CONTEMPORANEOUSLY DOCUMENTED.
	PART I, LINE 5	BONUSES ARE PAID TO SENIOR STAFF MEMBERS BASED IN PART ON ACHIEVING BUDGETED REVENUE GOALS.
	PART I, LINE 6	BONUSES ARE PAID TO SENIOR STAFF MEMBERS BASED IN PART ON ACHIEVING THE TRANSFER TO THE TRUSTEE RESERVES. SENIOR STAFF MEMBERS HAVE PERFORMANCE MEASURES FOR MANAGING THE UNIVERSITY TO MAINTAIN A BALANCED BUDGET.
	PART I, LINE 7	THERE ARE QUANTITATIVE MEASURES THAT ARE APPLIED IN DETERMINING BONUSES TO SENIOR STAFF MEMBERS. THE PRESIDENT AND THE BOARD HAVE DISCRETION TO ADJUST THE PAYMENTS FOR UNUSUAL CIRCUMSTANCES. IN ALL CASES, THESE PAYMENTS ARE REVIEWED WITH AND APPROVED BY THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES.
	PART I, LINE 8	LAURA NIESEN DE ABRUNA, PROVOST AND VICE PRESIDENT, IS IN HER INITIAL CONTRACT WITH THE UNIVERSITY. PART I, LINE 9. COMPENSATION FOR THE UNIVERSITY'S OTHER OFFICERS AND KEY EMPLOYEES IS ORIGINALLY DETERMINED BASED ON EXTERNAL MARKET AND INDUSTRY SURVEY AS WELL AS THE REVIEW OF OUR INTERNAL EMPLOYEE DATA. ANY ADDITIONAL RESPONSIBILITIES ARE ALSO CONSIDERED. THE DATA IS REVIEWED BY A COMMITTEE AUTHORIZED BY THE BOARD OF TRUSTEES. DECISIONS AND AUTHORIZATIONS ARE DOCUMENTED AND PLACED ON FILE WITH THE VICE PRESIDENT OF HUMAN RESOURCES.

Software ID:
Software Version:
EIN: 06-0776644
Name: SACRED HEART UNIVERSITY INCORPORATED

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JOHN J PETILLO	(i) (ii)	318,694 0	178,750 0	54,307 0	28,063 0	6,306 0	586,120 0	0 0
MICHAEL J KINNEY	(i) (ii)	217,683 0	54,269 0	5,837 0	22,416 0	8,251 0	308,456 0	0 0
MICHAEL LAROBINA ESQ	(i) (ii)	169,860 0	0 0	8,758 0	13,672 0	1,040 0	193,330 0	0 0
LAURA NIESEN DE ABRUNA	(i) (ii)	238,590 0	24,096 0	28,503 0	21,256 0	3,010 0	315,455 0	0 0
JAMES BARQUINERO	(i) (ii)	183,730 0	45,980 0	20,880 0	19,012 0	7,931 0	277,533 0	0 0
ROBERT M HARDY	(i) (ii)	151,828 0	36,791 0	4,710 0	15,209 0	1,500 0	210,038 0	0 0
MEGAN ROCK	(i) (ii)	182,007 0	40,029 0	3,966 0	18,101 0	4,227 0	248,330 0	0 0
ANTHONY J CERNERA	(i) (ii)	345,657 0	0 0	2,376 0	20,000 0	4,343 0	372,376 0	0 0
PATRICIA W WALKER	(i) (ii)	162,416 0	31,233 0	11,373 0	13,276 0	3,538 0	221,836 0	0 0
THOMAS V FORGET	(i) (ii)	196,009 0	20,763 0	2,804 0	16,133 0	5,649 0	241,358 0	0 0
DAVID COPPOLA	(i) (ii)	146,736 0	30,815 0	13,280 0	12,925 0	14,829 0	218,585 0	0 0
PHILIP MCCABE	(i) (ii)	169,820 0	31,093 0	4,423 0	13,609 0	292 0	219,237 0	0 0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SACRED HEART UNIVERSITY INCORPORATED

Employer identification number
06-0776644

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	SACRED HEART UNIVERSITY - SERIES F	06-0776644	20774LD93	12-11-2003	21,700,000	RESIDENTIAL HOUSING		X		X		X
B	SACRED HEART UNIVERSITY - SERIES G	06-0776644	20774U7W9	06-29-2011	44,158,819	CONSTRUCTION PROJECTS, REFINANCE OF DEBT, (SEE PART VI)		X		X		X
C	SACRED HEART UNIVERSITY - SERIES H	06-0776644	20774YFA0	02-14-2012	47,740,000	REFUNDING OF SERIES E BONDS ISSUED 12/1/98 (SEE PART VI)		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	2,655,000		915,000		2,115,000			
2	Amount of bonds legally defeased								
3	Total proceeds of issue	21,700,000		44,158,819		51,549,213			
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows	11,873,235		11,873,235		51,548,514			
7	Issuance costs from proceeds	433,932		875,145		699			
8	Credit enhancement from proceeds	173,254							
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	21,092,814		28,223,370					
11	Other spent proceeds	5,000		5,000					
12	Other unspent proceeds								
13	Year of substantial completion	2005		2013		2012			
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X	X		X			
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		
16	Has the final allocation of proceeds been made?	X			X	X			
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X			

Part III

Private Business Use

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

Part 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 of bond-financed property?	X		X					
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X		X					
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0%		0%		%		%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 00000%		0 00000%		%		%	
6	Total of lines 4 and 5	0%		0%		%		%	
7	Does the bond issue meet the private security or payment test?		X		X				
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X		X				

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		X		X		
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X	X		X			
b	Exception to rebate?		X		X		X		
c	No rebate due?	X			X		X		
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X			X		X		
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								

Part IV Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		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?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X		X			

Part V Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has 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?		X		X		X		

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 PART IV, ARBITRAGE, LINE 2C	DATE REBATE COMPUTATION PERFORMED	ISSUER NAME SACRED HEART UNIVERSITY - SERIES F DATE THE REBATE COMPUTATION WAS PERFORMED 02/11/2008
PART 1 B (F) CONTINUED -		REFUNDING AND DEFEASANCE OF EARLIER BOND ISSUE SERIES C (ISSUE DATE 4/24/1996)
PART 1 C (F) CONTINUED -		SERIES H INCLUDED NO PROJECTS ALL PROCEEDS WERE USED TO REFUND SERIES E ISSUE
PART III, LINE 9 -		THE UNIVERSITY ADHERES TO WRITTEN POLICIES THAT REQUIRE THE TIMELY IDENTIFICATION OF VIOLATIONS AND THE DIRECTIVE FOR SELF-REMEDIATION THESE POLICIES ARE BEING MODIFIED TO INCLUDE MORE SPECIFIC LANGUAGE REGARDING REMEDIATION THE ANTICIPATED COMPLETION DATE OF THE REVISED POLICY IS JUNE 2014
PART V -		THE UNIVERSITY ADHERES TO A WRITTEN POLICY TO ENSURE TIMELY IDENTIFICATION OF VIOLATIONS AND ADDRESSES ACTIONS FOR REMEDIATION THAT ENCOMPASSES THE INTERNAL REVENUE SERVICE VOLUNTARY CLOSING AGREEMENT PROGRAM, HOWEVER DOES NOT SPECIFICALLY IDENTIFY THE PROGRAM THE UNIVERSITY IS CURRENTLY IN THE PROCESS OF MODIFYING ITS POLICIES AND PROCEDURES TO INCLUDE SPECIFIC LANGUAGE CONCERNING VCAP IF SELF-REMEDIATION IS NOT AVAILABLE THE ANTICIPATED COMPLETION DATE OF THE REVISED POLICY IS JUNE 2014

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
SACRED HEART UNIVERSITY INCORPORATED

Employer identification number
06-0776644

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		5,935	FMV
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes	X	1	1,000	FMV
8 Intellectual property				
9 Securities—Publicly traded	X	14	223,305	FMV
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				
RAFFLE				
25 Other ► (GIFTS)	X	88	34,417	FMV
OTHER				
26 Other ► (SUNDRY)	X	54	12,473	FMV
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

0

30a

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

30a

No

b

If "Yes," describe the arrangement in Part II

31

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

31

No

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b

If "Yes," describe in Part II

33

If the organization did not report an amount 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, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. 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

2012

**Open to Public
Inspection**

Name of the organization SACRED HEART UNIVERSITY INCORPORATED	Employer identification number 06-0776644
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FOLLOWING IS THE SUCCESSION OF THE REVIEWS THAT OCCUR PRIOR TO FILING FORM 990 REVISIONS TO THE RETURN MAY BE MADE AT ANY POINT PRIOR TO FINAL FILING OF THE RETURN THE RETURN IS PREPARED BY AN OUTSIDE PREPARER WITH THE ASSISTANCE OF THE ACCOUNTING STAFF THE RETURN IS THEN INDEPENDENTLY REVIEWED BY THE CONTROLLER, THE VICE PRESIDENT FOR FINANCE, AND THE SENIOR VICE PRESIDENT FOR FINANCE AND ADMINISTRATION COPIES OF THE RETURN ARE PROVIDED TO THE PRESIDENT, EACH MEMBER OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES AND THE CORPORATE SECRETARY FOR THEIR REVIEW AND COMMENT PRIOR TO FILING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EVERY YEAR, THE CONFLICT OF INTEREST POLICY IS REVIEWED ALL KEY EMPLOYEES, TRUSTEES AND OFFICERS OF THE UNIVERSITY ARE REQUIRED TO REVIEW AND COMPLETE THE FORMS AS APPROPRIATE, SIGN, AND SUBMIT THE FORMS TO THEIR MANAGER OR BOARD SECRETARY FOR REVIEW AND SIGNATURE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR THE UNIVERSITY'S PRESIDENT/CEO IS DETERMINED THROUGH AN EXTENSIVE REVIEW OF THE JOB RESPONSIBILITIES AND EXPECTATIONS OUTLINED BY THE BOARD. THE COMPENSATION COMMITTEE THEN PERFORMS A REVIEW OF EXTERNAL MARKET AND INDUSTRY SURVEY AND STUDY DATA. CONSIDERATION OF ALL ADDITIONAL RESPONSIBILITIES ARE DETAILED OUT IN SPECIFIC LANGUAGE IN AN EMPLOYMENT CONTRACT APPROVED BY OUR LEGAL COUNSEL. FINAL SALARY RANGES ARE THEN DETERMINED BY THE COMPENSATION COMMITTEE. COMPENSATION FOR OTHER KEY EMPLOYEES IS DETERMINED BY THE EVALUATION OF THE JOB DESCRIPTION AGAINST EXTERNAL MARKET DATA AVAILABLE AS WELL AS THE REVIEW OF OUR INTERNAL EMPLOYEE DATA. CONSIDERATION OF ADDITIONAL RESPONSIBILITIES AND OTHER FACTORS MAY ALSO CONTRIBUTE IN DETERMINING COMPENSATION. COMPENSATION FOR THE UNIVERSITY'S OTHER OFFICERS AND KEY EMPLOYEES IS ORIGINALLY DETERMINED BASED ON EXTERNAL MARKET AND INDUSTRY SURVEY AS WELL AS THE REVIEW OF OUR INTERNAL EMPLOYEE DATA. ANY ADDITIONAL RESPONSIBILITIES ARE ALSO CONSIDERED. THE DATA IS REVIEWED BY A COMMITTEE AUTHORIZED BY THE BOARD OF TRUSTEES. DECISIONS AND AUTHORIZATIONS ARE DOCUMENTED AND PLACED ON FILE WITH THE VICE PRESIDENT OF HUMAN RESOURCES. FINAL ANNUAL SALARY RECOMMENDATIONS FROM THE PRESIDENT ARE SUBMITTED FOR REVIEW AND APPROVED BY THE HUMAN RESOURCES COMPENSATION COMMITTEE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	GUIDESTAR.ORG POSTS THE UNIVERSITY'S 990 FILING ANNUALLY. THIS MAKES THE 990 WIDELY AVAILABLE THROUGH THE INTERNET. COPIES ARE ALSO MADE AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST. GOVERNING DOCUMENTS AND THE ANNUAL FINANCIAL REPORT ARE MADE AVAILABLE TO BOARD MEMBERS AND IN COMPLIANCE WITH DEBT COVENANTS. UNIVERSITY EMPLOYEE AND FACULTY HANDBOOKS ARE POSTED ON THE UNIVERSITY WEBSITE. IN ADDITION, ALL STAFF AND FACULTY RECEIVE A HARD COPY. THE CONFLICT OF INTEREST POLICY IS ANNUALLY DISTRIBUTED ONLY TO KEY EMPLOYEES, DIRECTORS, AND OFFICERS OF THE UNIVERSITY TO SIGN AND RETURN.

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	MISC -1

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	THE FINANCIAL STATEMENTS AND TAX RETURN ARE INDEPENDENTLY REVIEWED BY THE CONTROLLER, THE VICE PRESIDENT FOR FINANCE, AND THE SENIOR VICE PRESIDENT FOR FINANCE AND ADMINISTRATION COPIES ARE THEN PROVIDED TO THE PRESIDENT AND MEMBERS OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES AND THE CORPORATE SECRETARY FOR THEIR REVIEW AND COMMENT PRIOR TO COMPLETION AND FILING