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DLN: 93493135052034

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2012

OMB No 1545-0047

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2012 calendar year, or tax year beginning 07-01-2012 , 2012, and ending 06-30-2013 D Employer identification number B Check if applicable UNIVERSITY OF SAN DIEGO Address change 95-2544535 Doing Business As Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number 5998 ALCALA PARK Terminated (619) 260-4600 City or town, state or country, and ZIP + 4 SAN DIEGO, CA 921102492 _____Amended return Application pending G Gross receipts \$ 688,142,407 Name and address of principal officer **H(a)** Is this a group return for MARY E LYONS PHD affiliates? 5998 ALCALA PARK SAN DIEGO, CA 921102492 **H(b)** Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 Website: ► WWW SANDIEGO EDU L Year of formation 1949 M State of legal domicile CA Part I Summary Briefly describe the organization's mission or most significant activities POST SECONDARY EDUCATION Activities & Governance 2 Check this box 🚩 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 31 Number of independent voting members of the governing body (Part VI, line 1b) 4 30 5,560 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 6 1,043 Total number of volunteers (estimate if necessary) . . . 719,442 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 . 7a \boldsymbol{b} Net unrelated business taxable income from Form 990-T, line 34 $\,$ 7b -723,467 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . . 43,452,120 33,537,357 Program service revenue (Part VIII, line 2g) . . . 342,331,632 346,331,647 12,740,966 17,279,888 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . <u>11,5</u>23,550 10,474,700 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 410,048,268 407,623,592 13 88,538,954 92,554,962 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines **15** 179,882,303 **Expenses** 173,576,938 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 b Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \frac{7,790,289}{}$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 92,260,129 91,379,675 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 354,376,021 363,816,940 18 43,806,652 19 Revenue less expenses Subtract line 18 from line 12 55,672,247 t Assets or ed Balances **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 1,009,539,708 1,080,271,002 271,830,418 21 Total liabilities (Part X, line 26) . . 291,559,473 22 Net assets or fund balances Subtract line 21 from line 20 717,980,235 808,440,584 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 2014-05-08 Signature of office Sign

TERRY KALFAYAN VP FOR FINANCE AND CFO

Type or print name and title

Here

orm	990 (20	12)				Page 2
Part		tatement of Program Ser heck if Schedule O contains a re				
	UNIVERS		AN CATHOLIC		ITTED TO ADVANCING ACAD	
		DICATED TO ETHICAL CONDU			E AND INCLUSIVE COMMUNIT E	Y, AND PREPARING
2	the prior	organization undertake any signi Form 990 or 990-EZ?		ervices during the year	which were not listed on	⊤Yes 🗸 No
	•	describe these new services on				
3	services	organization cease conducting, o		nt changes in how it co	nducts, any program	┌ Yes ┌ No
_	·	describe these changes on Sch				
4	expense)(4) organizations	s are required to report	ree largest program services, as t the amount of grants and alloca	
4a	(Code) (Expenses \$	298,059,707	ıncludıng grants of \$	92,554,962) (Revenue \$	355,882,965)
		VERSITY OF SAN DIEGO IS ENGAGED IN SIONAL STUDENTS, AND 876 LAW STUDI			TELY 5,440 UNDERGRADUATE STUDENT D FOR THE STUDENT POPULATION	S AND 1,270 GRADUATE AND
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other	program services (Describe in S	chedule O)			
	(Expen		ncluding grants o	f \$) (Revenue \$)
4e	Total p	rogram service expenses 🕨	298,059,707			

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^{\bullet}	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,	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 1	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 2	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			
а	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
С	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	
е	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
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥦	13	Yes	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, 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		

Par	t 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? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		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? If "Yes," complete Schedule L, Part II	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? If "Yes," complete Schedule L, Part III	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	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 $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

е .	Statements Regarding Other IRS Fillings and Tax Compliance			г
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 806			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
а	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			
)	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	
3	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	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	
)	If "Yes," enter the name of the foreign country •CJ			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N c
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
а	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
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
	If "Yes," indicate the number of Forms 8282 filed during the year			
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	H		140
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
1	Initiation fees and capital contributions included on Part VIII, line 12 10a			
)	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
1	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
1	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
•	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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		
)	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			
:	Enter the amount of reserves on hand			
1	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Se	ction 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			_
	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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Code	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed ►CA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website V Upon request V 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 ►OFFICE OF THE CONTROLLER 5998 ALCALA PARK HUGHES ADMINISTRAT SAN DIEGO, CA (619) 260-2302

Form	990	(2012)
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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

	1	1								
(A) Name and Title	(B) A verage hours per week (list any hours for related	(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-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2005 11200,	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form 990 (2012)

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	more than one box, unless compensation compensation person is both an officer and a director/trustee) compensation from the organization (W-organizations)						Reportable compensation from related organizations (W-	'	(F) Estima mount of compens from t	other ation he	
		for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-M15C)		rganizatio relate organiza	d
											\perp		
											-		
1b c	Sub-Total	s to Part VII. S	· · · ection A	٠.				*			+		
d	Total (add lines 1b and 1c) .	-						Þ	5,517,373	1	0		642,066
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	an			
												Yes	No
3	Did the organization list any f oon line 1a? <i>If</i> "Yes," complete S					key •	emplo	yee, •	or highest compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	1 65	No
Se	ction B. Independent Co	ntractors											
1	Complete this table for your fix	e highest comp										.	
	compensation from the organiz	zation Report co	mpens	ation	tort	ne c	alenda	arye	ar ending with or wi	thin the organization	n's T	tax year	\

(A)	(B)	(C)
Name and business address	Description of services	Compensation
TURNER CONSTRUCTION 9330 SCRANTON AVENUE SUITE 330 SAN DIEGO CA 92121	GENERAL CONTRACTOR	6,199,314
BSD BUILDERS INC 8825 RECHO ROAD SUITE A SAN DIEGO CA 92121	GENERAL CONTRACTOR	1,579,739
CAMBRIDGE ASSOCIATES 100 SUMMER STREET 13 BOSTON MA 21100	INVESTMENT MANAGER	837,792
DOWLING CONSTRUCTION INC 5735 KEARNY VILLA ROAD SUITE 103 SAN DIEGO CA 92123	GENERAL CONTRACTOR	575,753
GC MORGAN CONSTRUCTION 3755 AVACADO BLVD 408 LA MESA CA 91941	GENERAL CONTRACTOR	479,874
3. Total number of independent contractors (including but not limited to those lists	ad above) who received more than	

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 ►5

Part V	1111	Statement o	f Revenue ıle O contaıns a respor	see to any question	in thic Part VIII			_
		CHECK II SCHEUC	ne o contains a respon	ise to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
တည	1a	Federated camp	paigns 1a					
E E	ь	Membership du	es 1b					
۳ ورت	С	Fundraising eve	ents 1c	324,326				
şΨ	4	_	ations 1d					
<u>.</u> ⊒.	u	_		0.004.100				
ns. High	е	Government grants	s (contributions) 1e	9,994,108				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and 1f included above	23,218,923				
きぎ	g		ons included in lines	572,055	i	i		
<u>ā</u> #	_	1a-1f \$			22 527 257			
<u>ರ೯</u>	h	Total. Add lines	s 1a-1f	· · · · •	33,537,357			
<u>ā</u> :				Business Code				
že E	2a	TUITION AND FEES	·	900099	306,238,704	306,238,704		
<u>æ</u>	b	STUDENT RES & BO	DARD	721310	35,678,341	35,678,341		
-S-	С	PARKING SERVICE:	S	611710	2,467,172	2,467,172		
<u>2</u>	d	STUDENT LOAN INT	TEREST	611710	1,947,430	1,947,430		
Program Serwce Revenue	e f	All other progra	m service revenue					
Ě	g	Total. Add lines	32a-2f		346,331,647			
	3	Investment inc	ome (ıncludıng dıvıden	ds, interest,	F 224 72F			F 224 725
	_		aramounts)	F	5,234,735			5,234,735
	4		tment of tax-exempt bond	proceeds	3			
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	415,888	(II) I CISOIIdi				
	ь	Less rental	222,476					
	c	expenses Rental income	193,412					
		or (loss)			193,412			193,412
	d	Net rental incor	me or (loss)	-	193,412			193,412
	7a	Gross amount from sales of assets other than inventory	(1) Securities 244,095,940	(II) O ther 48,022,301				
	ь	Less cost or other basis and sales expenses	233,855,571	46,217,522				
	С	Gaın or (loss)	10,240,369	1,804,779				
	d	Net gain or (los	s)	• > -	12,045,148			12,045,148
Other Revenue	8a	Gross income fi events (not incl \$ 324, of contributions See Part IV, lin	uding ,326 reported on line 1c)	454 222				
her	ь	Less direct evi	penses b	154,323 223,246				
₹	c		loss) from fundraising	,	-68,923			-68,923
	9a		rom gaming activities	·				
	b	less direct evi	penses b					
	С		loss) from gaming acti	vities				
	10a	Gross sales of returns and allo						
	ь	Less cost of go						
		_	loss) from sales of inve	entory 🛌				
		Miscellaneous		Business Code				
	11a	BOOKSTORE		451211	6,845,829	6,830,519	15,310	
	b	ATHLETICS &	RECREATION	611710	1,469,158	1,469,158		
	С	SUMMER CON		611710	899,455	290,920	608,535	
	d	All other revenu			1,135,769	960,721	95,597	79,451
	е	Total. Add lines	s 11a-11d	🕨	10,350,211			
	12	Total revenue.	See Instructions .	🕨	407,623,592	355,882,965	719,442	17,483,828
	ı				701,023,332	555,002,505	117,442	17,703,020

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 (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 92,554,962 92,554,962 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 5,068,054 3,753,912 262,209 1,051,933 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 137,372,696 105,116,959 28,647,605 3,608,132 Pension plan accruals and contributions (include section 401(k) 12,482,373 10,255,124 1,622,260 604,989 and 403(b) employer contributions) 16,327,520 13,550,044 2,756,486 Other employee benefits 20,990 10 8,631,660 7,091,499 418,355 1,121,806 11 Fees for services (non-employees) Management Legal 104,323 104,323 271,835 271,835 Professional fundraising services See Part IV, line 17 Investment management fees 1,909,243 1,699,084 210,159 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 14,967,823 11,429,471 3,004,660 533,692 Schedule O) Advertising and promotion . . 939,912 313,280 3,797 12 622,835 13 Office expenses 5,341,862 1,808,503 2,821,913 711,446 4,729,035 2,837,421 1,891,614 14 Information technology . . 15 Royalties . 6,928,406 16 Occupancy 5,891,651 1,036,242 513 **17** 7,205,141 5,947,355 1,098,815 158,971 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 1,395,617 1,076,625 262,204 56,788 20 8,661,071 7,078,117 1,582,954 Payments to affiliates 21 22 Depreciation, depletion, and amortization . 15,405,556 8,947,113 6,279,887 178,556 23 1,282,042 155,095 1,126,947 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 COST OF SALES 10,949,589 10,917,050 32,502 37 EQUIPMENT 2,914,751 1,474,215 1,436,973 3,563 MISCELLANEOUS OTHER 2,714,193 1,055,215 1,264,802 394,176 d BOOKS AND OTHER LIBRARY 2,541,595 2,541,595 3,117,681 2,255,862 817,468 e All other expenses 44,351 Total functional expenses. Add lines 1 through 24e 25 363,816,940 298,059,707 57,966,944 7,790,289 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 ► [if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Pai	't X	Balance Sheet Check if Schedule O contains a response to any question in	n this Part X .				
-		, , , , , , , , , , , , , , , , , , , ,			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			beginning or year	1	Elia or year
	2	Savings and temporary cash investments			2,511,548	2	4,250,746
	3	Pledges and grants receivable, net			34,435,167		30,880,028
	4	Accounts receivable, net			7,922,366	4	8,041,019
	5	Loans and other receivables from current and former officer key employees, and highest compensated employees Comschedule L	220,000				
Assets	6	Loans and other receivables from other disqualified persons section 4958(f)(1)), persons described in section 4958(c) employers and sponsoring organizations of section 501(c)(beneficiary organizations (see instructions) Complete Part	(3)(B), and contril (9) voluntary emp	outing	220,000	6	
Š	,	Notes and loans receivable, net			34,439,611	7	37,711,809
Ą	7 8	Inventories for sale or use		•	2,161,989	-	2,087,072
	9	Prepaid expenses and deferred charges			6,600,755		6,398,415
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		,409,084	0,000,700	9	0,000,410
	ь	Less accumulated depreciation		,443,013	474,429,215	10c	487,966,071
	11	Investments—publicly traded securities		, ,	326,534,758	-	354, 138, 440
	12	Investments—other securities See Part IV, line 11			, ,	12	<u> </u>
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			120,284,299		148,797,402
	16	Total assets. Add lines 1 through 15 (must equal line 34)		_	1,009,539,708		1,080,271,002
	17	Accounts payable and accrued expenses		•	42,746,628		45,066,975
	18	Grants payable		,,	18	,,	
	19	Deferred revenue			17,692,913		16,200,168
	20	Tax-exempt bond liabilities			178,447,154	20	171,835,117
	21	Escrow or custodial account liability Complete Part IV of S			,,	21	,,
Liabilities	22	Loans and other payables to current and former officers, dir key employees, highest compensated employees, and disq	ectors, trustees,				
<u> </u>		persons Complete Part II of Schedule L			u.	22	
	23	Secured mortgages and notes payable to unrelated third pa	rties		7,144,351	23	6,457,452
	24	Unsecured notes and loans payable to unrelated third partic	es			24	
	25	Other liabilities (including federal income tax, payables to i and other liabilities not included on lines 17-24) Complete			45.528.427	25	32.270.706
	26	D			<u>' ' ' </u>	25	
<u>ب</u> ش	26	Total liabilities. Add lines 17 through 25		te	291,559,473	26	271,830,418
ĕ	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets			449,077,613	27	525,796,452
<u>छ</u>	28	Temporarily restricted net assets		105,563,375	28	115,899,174	
<u> </u>	29	Permanently restricted net assets			163,339,247	29	166,744,958
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), chec	ck here ► ┌ and		100,000,211	23	
ō	30	complete lines 30 through 34. Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fur				31	
\$ \$2	32	Retained earnings, endowment, accumulated income, or oth		•		32	
¥	33	Total net assets or fund balances			717,980,235	33	808,440,584
Net	34	Total liabilities and net assets/fund balances			1,009,539,708	-	
	34	rotar navinties and net assets/lund Dalances			1,009,539,708	34	1,080,271,002

Pa	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				্য.
1	Total revenue (must equal Part VIII, column (A), line 12)	1		407,6	523,592
2	Total expenses (must equal Part IX, column (A), line 25)	2		363.8	316,940
3	Revenue less expenses Subtract line 2 from line 1	3			306,652
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
	_	4		717,9	80,235
5	Net unrealized gains (losses) on investments	5		45,6	501,355
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)				
	·	9		1,0	52,342
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		808,4	40,584
Pai	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	ı			_
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?	9	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits explain why in Schedule O and describe any steps taken to undergo such audits.	equired	3b	Yes	

Software ID: **Software Version:**

EIN: 95-2544535

Name: UNIVERSITY OF SAN DIEGO

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation of Compensated Employees, and Indeper	ident Contra	ectors	, I FL	iste	es,	, key	EII	npioyees, nigne	st	
(A) Name and Title	(B) Average hours per week (list		than	not one on is ran trust	box s bot d a tee)	, th		(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
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
FRANK D ALESSIO VICE CHAIR AND TRUSTEE	1 00	х		х				0	0	0
RICHARD M BARTELL TRUSTEE	1 00	х						0	0	0
CINDY BASSO TRUSTEE	1 00	х						0	0	0
CONSTANCE M CARROLL PHD TRUSTEE	1 00	х						0	0	0
RICHARD K DAVIS TRUSTEE	1 00	х						0	0	0
VERY REV MSGR RICHARD F DUNCANSON TRUSTEE	1 00	х						0	0	0
RON L FOWLER CHAIR AND TRUSTEE	1 00	х		х				0	0	0
DANIEL C HERBERT TRUSTEE	1 00	х						0	0	0
MARGARITA PALAU HERNANDEZ ESQ SECRETARY AND TRUSTEE	1 00	х		х				0	0	0
SISTER KATHLEEN HUGHES RSCJ TRUSTEE	1 00	х						0	0	0
ROGER AP JOSEPH TRUSTEE	1 00	х						0	0	0
DONALD R KNAUSS TRUSTEE	1 00	х						0	0	0
STANLEY W LEGRO TRUSTEE	1 00	х						0	0	0
MARY E LYONS PRESIDENT & TRUSTEE	1 00	х		х				544,606	0	52,088
LUIS MAIZEL TRUSTEE	1 00	х						0	0	0
SUSAN H MALLORY TRUSTEE	1 00	х						0	0	0
JAMES V MAZZO TRUSTEE	1 00	х						0	0	0
JAMES B MCCARTHY TRUSTEE	1 00	х						0	0	0
LIAM E MCGEE TRUSTEE	1 00	х						0	0	0
ANN NAVARRA TRUSTEE	1 00	х						0	0	0
SISTER CAROLYN OSIEK RSCJ THD TRUSTEE	1 00	х						0	0	0
JAMES C PETERS TREASURER AND TRUSTEE	1 00	Х		х				0	0	0
JAMES D POWERS IV TRUSTEE	1 00	х						0	0	0
VERY REV MSGR LAWRENCE M PURCELL TRUSTEE	1 00	Х						0	0	0
JOHN T REDMOND TRUSTEE	1 00	x						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (C)
Position (do not check **(E)** Reportable

Name and Title	A verage hours per week (list	Position (do not check more than one box, unless person is both an officer and a director/trustee)						Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
BYRON C ROTH TRUSTEE	1 00	х						0	0	0
DAVID H SHAFFER TRUSTEE	1 00	х						0	0	0
DARLENE MARCOS SHILEY TRUSTEE	1 00	х						0	0	0
HERBERT B TASKER TRUSTEE	1 00	х						0	0	0
KEVIN GREEN TRUSTEE	1 00	х						0	0	0
ROYAL W CARSON TRUSTEE	1 00	х						0	0	0
JULIE H SULLIVAN EXECUTIVE VICE PRESIDENT AND PROVOST	40 00			х				513,690	0	34,054
TIMOTHY L O'MALLEY VICE PRESIDENT	40 00			х				257,355	0	44,899
REV MSGR D DILLABOUGH VICE PRESIDENT	40 00			х				228,014	0	46,003
CARMEN M VAZQUEZ VICE PRESIDENT	40 00			х				264,179	0	29,128
LEENDERT R HERING VICE PRESIDENT	40 00			х				186,730	0	5,314
STEVEN FERRUOLO DEAN, SCHOOL OF LAW	40 00				х			322,788	0	53,776
DAVID F PYKE DEAN, SCHOOL OF BUSINESS	40 00				х			397,039	0	46,534
SALLY B HARDIN DEAN, SCHOOL OF NUSING	40 00				х			194,609	0	45,777
PAULA A CORDEIRO DEAN, SOLES	40 00				х			193,178	0	39,153
MARY BOYD DEAN, ARTS & SCIENCES	40 00				х			226,511	0	46,107
JASON LEMON DEAN, CONTINUING EDUCATION	40 00				х			175,066	0	28,459
WILLIAM GRIER HEAD COACH, MEN'S BASKETBALL	40 00					х		592,623	0	51,181
JAMES OLIVERO FACULTY, CONTINUING EDUCATION	40 00					х		558,654	0	0
STEVEN SMITH FACULTY, SCHOOL OF LAW	40 00					х		306,663	0	43,404
FRANKLIN PARTNOY FACULTY, SCHOOL OF LAW	40 00					х		280,725	0	44,484
DAVID MCGOWEN FACULTY, SCHOOL OF LAW	40 00					х		274,943	0	31,705

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As Filed Data -

DLN: 93493135052034

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

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

Inspection

UNIVE	RSITY	OF SAN DI	EGO										
Do	rt I	Pone	on for Du	blic Charity Sta	tue (All or	2201721000	must some	nlota this r	95-25445		10.00		
				te foundation becaus						istruct	.10115.		
1	/ ga			ion of churches, or a									
2	<u>'</u>		•	d in section 170(b)(1				CCC1011 170(1	2)(±)(A)(i).				
3	Ë			perative hospital se			•	n 170(h)(1)	(A)(iii)				
4	i-			h organization opera						1)(Δ)(iii) Ent	erthe	
•	•			ity, and state	cea iii conjan	ccion with a	nospital acs	cribed iii se		-/(-/(,	ci ciic	
5				erated for the benefi	t of a college	or universi	ty owned or o	perated by	a governmen	tal unıt	describ	oed in	
		sect ior	170(b)(1)((A)(iv). (Complete P	art II)								
6	\sqcap	A feder	ral, state, or	local government o	r government	tal unit desc	rıbed ın secti	ion 170(b)(1	L)(A)(v).				
7	\sqcap			at normally receives			support from	a governme	ental unit or f	rom the	genera	al public	2
	_			on 170(b)(1)(A)(vi).			uulaka Dawk II						
8 9	<u> </u>		-	described in section			•		utions mam	harchin	foor	nd area	
9	,	An organization that normally receives (1) more than 331/3% 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 331/3% of											
		•		oss investment inco	•	-		•	• •				
										tax) 110	iii busi	1103303	
10	Г	acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4).											
11	i-	_	^	ganized and operated			•			o carry	out the	nurno	ses of
	'	one or	more public	ly supported organiz	ations descr	ibed in sect	ion 509(a)(1) or section	509(a)(2) S				
				bes the type of supp							II.		- 4 - 4
_	_			b Type II c									
е	1	•	_	ox, I certify that the ion managers and ot	_							•	
			n 509(a)(2)	ion managers and oc	ner than one	or more par	mery support	ca organiza	cions desemb	ca iii sc	ection :	/ 0 J (u)(1,01
f			rganization this box	received a written d	etermination	from the IR	S that it is a	Type I, Typ	e II, or Type	III sup	porting	organı	zation,
g				2006, has the organ	ızatıon accep	oted any gift	or contributi	on from any	of the				,
			ng persons?										
				irectly or indirectly o				persons de	scribed in (ii)	'		Yes	No
				governing body of th		_	n /				11g(i)		
		• •	•	er of a person descr	• •		- 5				11g(ii		
L				lled entity of a person ng information about							11g(iii	<u>) </u>	<u> </u>
h		PTOVIGE	e the followin	ng mormation about	the support	eu organizat	1011(5)						
	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	ı notıfy	(vi) Is	the		(vii) Ar	nount of
	suppo			organization	organizati		the organi		organizat				etary
OI	rganiz	ation		(described on lines 1- 9 above	col (i) lis		ın col (i) d		col (i) org			sup	port
				or IRC section	your gove docume		suppor	(1	In the o	5 ′			
				(see									
				instructions))	Yes	No	Yes No Yes			No			
							† · • • • • • • • • • • • • • • • • • •	 	<u> </u>		_		
						 							
						ļ		ļ					

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	<u>iplete Pa</u>	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(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							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
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						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,	 	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493135052034

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Political Campaign and Lobbying Activities

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 **Employer identification number** UNIVERSITY OF SAN DIEGO 95-2544535 Complete if the organization is exempt under section 501(c) or is a section 527 organization. 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). 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 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes 3 Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 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 **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2				
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election				
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN				
	expenses, and share of excess lobb	expenses, and share of excess lobbying expenditures) heck I if the filing organization checked box A and "limited control" provisions apply								
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly						
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals				
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)							
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)							
c	Total lobbying expenditures (add lines 1a and 1b									
d	O ther exempt purpose expenditures									
e	Total exempt purpose expenditures (add lines 1c	c and 1d)								
f	Lobbying nontaxable amount Enter the amount fo									
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:							
	Not over \$500,000	20% of the amount on li	ne 1e							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000						
	Over \$1,000,000 but not over \$1,500,000	0,000								
	Over \$1,500,000 but not over \$17,000,000									
	Over \$17,000,000	\$1,000,000								
	Grassroots nontaxable amount (enter 25% of lin	e 1f)								
_	Subtract line 1g from line 1a If zero or less, ente	•		-						
i	Subtract line 1f from line 1c If zero or less, ente			-						
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1				
-	section 4911 tax for this year?					┌ Yes ┌ No				
_	4-Voor Av	veraging Period U	Inder Section	F01/b)						
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five				
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1				
	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 nontavable amount									

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)).

Eor e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)	
activ		Yes	No	4	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?	Yes				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
C	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			14	4,942
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	Other activities?		Νo			
j	Total Add lines 1c through 1i				14	4,942
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912			1		
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?					
Par	t IIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5),	or s	ectio	n
					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		
	till-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."	No" C				
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).					
а	Current year	2a				
Ь	Carryover from last year	2b				
С	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
PART IV, SUPPLEMENTAL INFORMATION		PART IIB, LINE 1J FACULTY WITH THE UNIVERSITY'S SCHOOL OF LAW IN THE CENTER FOR PUBLIC INTEREST AND CHILDREN'S ADVOCACY INSTITUTE OFFERED THEIR RESEARCH DATA AND LEGAL EXPERTISE IN AN ATTEMPT TO INFLUENCE PENDING LEGISLATION CONCERNING CONSUMERS RIGHTS AND CHILDREN'S HEALTH, SAFETY AND WELFARE NO ATTEMPT WAS MADE BY THE UNIVERSITY TO INFLUENCE A POLITICAL CAMPAIGN OF ANY OFFICE, NOR WERE ANY POLITICAL CONTRIBUTIONS MADE

DLN: 93493135052034

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Open to Public

ema	Revenue Service	m 990. ► See separate instructions.			Inspection	on
	me of the organization VERSITY OF SAN DIEGO		Emp	loyer ident if icat	ion number	
			<u>9</u> 5-2	2544535		
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Accounts.	Complete	ıf the
	<u>.</u>	(a) Donor advised funds		(b) Funds and o	ther accoun	ts
	Total number at end of year					
	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
	Aggregate value at end of year					
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	5	or advı	sed	┌ Yes	┌ No
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?				┌ Yes │	⊏ No
al	rt II Conservation Easements. Complete if	the organization answered "Yes" t	o Forn	n 990 Part IV		,
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of an Preservation of a G	certifie	d historic struct	ure	
	easement on the last day of the tax year				- 1 - 6 - 1 - 24	
3	Total number of conservation easements		2a	Held at the I	ena or the Y	ear
•	Total acreage restricted by conservation easements					
	Number of conservation easements on a certified histo	oric structure included in (a)				
	Number of conservation easements included in (c) acc	, ,	2c			
i	historic structure listed in the National Register	quired alter 0/17/00, and not on a	2d			
	Number of conservation easements modified, transferr	red, released, extinguished, or terminate	d by th	ne organization d	urıng	
	the tax year 🗠					
	Number of states where property subject to conservat	ion easement is located ►				
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	dling of	violations, and	┌ Yes │	┌ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	nents c	luring the year		
	A mount of expenses incurred in monitoring, inspecting	a, and enforcing conservation easements	s durino	o the vear		
	▶ \$,, and cimerenty content and a content of		y , c		
	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sec	tion 17	70(h)(4)(B)(ı)	┌ Yes │	┌ No
	In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the	e footnote to the organization's financial				
.	the organization's accounting for conservation easement IIII Organizations Maintaining Collection		0r O+	har Similar A	ccetc	
لك	Complete if the organization answered "Y		J. J.	Siiiillai P		
1	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	.16 (ASC 958), not to report in its revei	or rese	arch in furtherar		
o	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ets held for public exhibition, education,				:
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			▶ \$	4,061	 1,789
	If the organization received or held works of art, histor following amounts required to be reported under SFAS		or finan			
1	Revenues included in Form 990, Part VIII, line 1			► \$		
	Revenues included in Form 550, Fall VIII, lille I			₽ ⊅		

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	<u>, His</u>	<u>tori</u>	<u>cal Treas</u>	sures, or O	<u>the</u>	<u>r Similar <i>i</i></u>	<u>Asse</u>	ts (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	eck	any of the fo	ollowing that a	re a	sıgnıfıcant u	ise of	ıts	
а	Public exhibition		d	Γ	Loan or ex	xchange progra	ams				
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and expla	ın hov	v the	y further the	e organızatıon'	's ex	empt purpos	e in		
5	During the year, did the organization solicit							nılar	_		_
Do.	assets to be sold to raise funds rather than							!! +		Yes	✓ No
Pal	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar					ion answered	ı Y	es to Form	1 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					s or other asso	ets i	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follow	ving t	able	_					
									Amou	ınt	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year					—	1e				
f	Ending balance						1 f				
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?						Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natio	n has been	provided in P	art >	KIII			Γ
Pa	rt V Endowment Funds. Complete										
_		(a)Current year	(b) F	rior y		Two years back	(d) ¹		_		ears back
1a	Beginning of year balance	345,592,715		-	799,097	260,074,374		220,839,5			57,919,923
Ь	Contributions	15,282,749		29,9	964,033	21,096,254		16,513,0	/2]	16,378,533
С	Net investment earnings, gains, and losses	40,951,073		-5,6	542,158	50,953,163		27,996,60	05	-5	59,320,886
d	Grants or scholarships	1,770,336		1,	507,177	1,636,097		1,586,23	39		1,375,202
e	Other expenditures for facilities and programs	4,467,313		4,0	021,080	3,688,597		3,688,59	96		2,479,947
f	Administrative expenses										282,888
g	End of year balance	395,588,888		345,	592,715	326,799,097		260,074,3	74	22	20,839,533
2	Provide the estimated percentage of the cur	rent year end baland	e (lın	e 1 g	, column (a)) held as					
а	Board designated or quasi-endowment ►	42 000 %									
b	Permanent endowment ► 58 000 %										
c	Temporarily restricted endowment 🕒										
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse	ssion of the organiza	ation t	that a	are held and	d admınıstered	for	the			
	organization by							г.	7- (*)	Yes	No
	(i) unrelated organizations			•			•	—	Ba(i) Ba(ii)		No No
b	(ii) related organizations				ule R?		•	· · · <u>[</u>	3b	<u> </u> 	NO
4	Describe in Part XIII the intended uses of the	•					•			<u> </u>	<u> </u>
Par	t VI Land, Buildings, and Equipme										
	Description of property		Í	(a)	Cost or other (investment)			(c) Accumulat depreciation		(d) Bo	ok value
1a	Land				11,648,231	51,027,	875			6	2,676,106
	Buildings				. ,	487,472,	_	111,993,	853		5,478,149
c	Leasehold improvements					1		. ,			
	Equipment					74,199,	187	28,449,	160	4	5,750,027
e	Other					4,061,	-	<u> </u>			4,061,789
	I. Add lines 1a through 1e (Column (d) must e		X, colu	mn (B), line 10(c	(),)	•	🕨	\neg	48	7,966,071
	,	,	,		(-	· · · · · ·			 e D (F		90) 2012

Part VIII Investments—Other Securities. See	FOITH 330, FAIL A, IIIIC 12.	
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Other		
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
	+	
	+	
	F	
Down TV Other Access Con Form COO Down V I	ıne 15.	
Other Assets. See Form 990, Part X, I		(h) Book value
(a) Descr	ıptıon	(b) Book value
(a) Descr	iption	(b) Book value
(a) Descr	ıptıon	(b) Book value
(a) Descr	ıptıon	(b) Book value
(a) Descr	ıptıon	(b) Book value
(a) Descr	ıptıon	(b) Book value
(a) Descr	ıptıon	(b) Book value
(a) Descr	ıptıon	(b) Book Value
(a) Descr	ıptıon	(b) Book Value
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(a) Descr	ıptıon	(b) Book Value
(a) Descr	ıptıon	(b) Book Value
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(a) Descr	ıptıon	(b) Book Value
(a) Descr	ıptıon	(b) Book Value
(a) Descr	ıptıon	(b) Book Value
(a) Descr	ıptıon	(b) Book Value
(a) Descr	Iption	(b) Book Value
(a) Descr	Iption	(b) Book Value
(a) Descr		
(a) Description (a) Description (b) must equal Form 990, Part X, col.(B) line 1	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part	<i>5.</i>)	
(a) Description (a) Description (b) must equal Form 990, Part X, col.(B) line 1	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability	<i>5.</i>)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES BOND INTEREST RATE SWAP	5.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes REFUNDABLE ADVANCES	5.)	

Reconciliation of Revenue per Audited Financial Statements With Revenue p	<u>er ke</u>	turn
Total revenue, gains, and other support per audited financial statements	1	360,257,000
Amounts included on line 1 but not on Form 990, Part VIII, line 12		
Net unrealized gains on investments		
Donated services and use of facilities		
Recoveries of prior year grants		
Other (Describe in Part XIII)		
Add lines 2a through 2d	2e	45,601,355
Subtract line 2e from line 1	3	314,655,645
Amounts included on Form 990, Part VIII, line 12, but not on line 1		
Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Other (Describe in Part XIII)		
Add lines 4a and 4b	4c	92,967,947
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	407,623,592
XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per l	Return
Total expenses and losses per audited financial statements	1	269,798,000
Amounts included on line 1 but not on Form 990, Part IX, line 25		
Donated services and use of facilities		
Prior year adjustments		
Other losses		
Other (Describe in Part XIII)		
Add lines 2a through 2d	2e	445,722
Subtract line 2e from line 1	3	269,352,278
Amounts included on Form 990, Part IX, line 25, but not on line 1:		
Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Other (Describe in Part XIII)		
Add lines 4a and 4b	4c	94,464,662
Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	363,816,940
	Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains on investments	Total revenue, gains, and other support per audited financial statements

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	THEY SEEK TO STIMULATE INTEREST AND PRIDE AS WELL AS EMPHASIZE THE CULTURAL VALUE OF USD'S FINE ARTS PROGRAMS
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE UNIVERSITY OF SAN DIEGO ENDOWMENT FUNDS ARE UTILIZED BASED ON DONOR'S INTENT, AS OF JUNE 30, 2013 THE ALLOCATION OF ENDOWMENT FUNDS WAS AS FOLLOWS ACADEMIC SUPPORT - 30%, TUITION FUNDED QUASI - 38%, SCHOLARSHIPS - 14%, INSTRUCTION - 5%, PLANT MAINTENANCE AND OPERATIONS - 3%, PUBLIC SERVICE - 5% AND OTHER INSTITUTIONAL SUPPORT - 5%
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE UNIVERSITY IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ("IRC") AND SECTION 23701(D) OF THE CALIFORNIA REVENUE AND TAXATION CODE THE UNIVERSITY FOLLOWS THE PROVISIONS OF ACCOUNTING STANDARDS CODIFICATION ("ASC") 740-10, INCOME TAXES, RELATED TO ACCOUNTING FOR UNCERTAIN TAX POSITIONS THE UNIVERSITY HAS NO UNRECOGNIZED TAX BENEFITS OR LIABILITIES AS OF JUNE 30, 2013 AND 2012 THE UNIVERSITY FILES AN EXEMPT ORGANIZATION RETURN AND APPLICABLE UNRELATED BUSINESS INCOME TAX RETURN IN THE U S FEDERAL JURISDICTION AND WITH THE CALIFORNIA FRANCHISE TAX BOARD THE UNIVERSITY IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY TAXING AUTHORITIES FOR YEARS BEFORE 2009 FOR ITS FEDERAL FILINGS AND FOR YEARS BEFORE 2008 FOR ITS STATE FILINGS
PART XI, LINE 4B - OTHER ADJUSTMENTS		RENTAL EXPENSES INCLUDED IN INCOME -222,476 SCHOLARSHIPS INCLUDED IN EXPENSES 92,554,962 SPECIAL EVENT EXPENSES INCLUDED IN INCOME - 223,246 ROUNDED FINANCIAL STATEMENT DIFFERENCE 1,806 RECLASS INVESTMENT MANAGEMENT FEES 1,909,243 K-1 PASSTHROUGH LOSS -1,052,342
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES INCLUDED IN INCOME 222,476 FUNDRAISING EXPENSES INCLUDED IN INCOME 223,246
PART XII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIPS INCLUDED IN EXPENSES 92,554,962 ROUNDED FINANCIAL STATEMENT DIFFERENCE 457 RECLASS INVESTMENT MANAGEMENT FEES 1,909,243

Additional Data

Software ID: Software Version:

EIN: 95-2544535

Name: UNIVERSITY OF SAN DIEGO

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

(a) Description	(b) Book value
(1) WEST COAST CONFERENCE	718,807
(2) ALTERNATIVE ASSET PARTNERSHIPS - REAL ESTATE	9,741,227
(3) MARKETABLE ALTERNATIVES - OPPORTUNISTIC	5,487,848
(4) ALTERNATIVE ASSET PARTNERSHIPS - VENTURE CAPITAL	9,828,807
(5) ALTERNATIVE ASSET PARTNERSHIPS - INTERNATIONAL PRIVATE EQUITY	11,831,029
(6) ALTERNATIVE ASSET PARTNERSHIPS - U S PRIVATE EQUITY	7,880,063
(7) MARKETABLE ALTERNATIVES - U S LONG/SHORT	13,924,203
(8) MARKETABLE ALTERNATIVES - DISTRESSED	13,624,517
(9) MARKETABLE ALTERNATIVES - GLOBAL LONG/SHORT	17,730,743
(10) ALTERNATIVE ASSET PARTNERSHIPS - DISTRESSED/DEBT RELATED	7,390,243
(11) MARKETABLE ALTERNATIVES - EVENT DRIVEN	18,985,490
(12) MARKETABLE ALTERNATIVES - DIVERSIFIED ARBITRAGE	22,702,515
(13) ALTERNATIVE ASSET PARTNERSHIPS - ENERGY/RESOURCES	8,951,910

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DLN: 93493135052034

OMB No 1545-0047

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.

Name of the organization UNIVERSITY OF SAN DIEGO

Employer identification number

	95-2544535			
Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	4a	Yes	
J	basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		Νo
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
		-		
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

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

ldentifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	UNIVERSITY OF SAN DIEGO'S RACIALLY NONDISCRIMINATORY POLICY PUBLISHED IN ALL RECRUITING BROCHURES AND ADVERTISEMENTS AS WELL AS UNDERGRADUATE AND GRADUATE BULLETINS AND CATALOGS
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE UNIVERSITY OF SAN DIEGO RECEIVED AN ESTIMATED \$107 4M IN CONTRIBUTIONS FROM FEDERAL AND STATE AGENCIES FOR ASSISTANCE IN PROVIDING POST-SECONDARY EDUCATION THIS INCLUDES \$94 5M IN FEDERAL FAMILY EDUCATION LOANS

Schedule E (Form 990 or 990-EZ) 2012

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DLN: 93493135052034

Statement of Activities Outside the United States

2012

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE F

(Form 990)

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

Open to Public Inspection

miomai	1 to volido dol vido					Zilopestioli
	e of the organization				Employer ident i	fication number
UNIV	ERSITY OF SAN DIEGO				95-2544535	
Pa	rt I General Informatio "Yes" to Form 990, Pa	n on Activiti rt IV, line 14b	es Outside t	he United States. C	omplete if the organiza	ation answered
1	For grantmakers. Does the	organization m	naıntaın record	ls to substantiate the	amount of the grants o	ir
	assistance, the grantees' elig	gibility for the	grants or assi	stance, and the selecti	on criteria used to awa	rd
	the grants or assistance?					│ Yes │ No
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's p	rocedures for monitori	ng the use of grant fur	nds outside
3	Activites per Region (The follow	ving Part I, line :	3 table can be d	uplicated if additional spa	ace 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
	CENTRAL AMERICA AND THE CARRIBBEAN		_	INVESTMENTS		4,892,632
	EUROPE (INCLUDING ICELAND AND GREENLAND)				STUDY ABROAD PROGRAMS	2,617,835
	Sub-total	0	0			7,510,467 0
D	Total from continuation sheets to Part I	0	0			
C	Totals (add lines 3a and 3b)	0	0			7,510,467

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nu	mher of other or	nanizations or en	tities					

Schedule F (Form 990) 2012

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		1
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		 		+
	 		 		 	 	+
					<u> </u>		
					<u> </u>	<u> </u>	
							<u> </u>
			1				
		+ + +			,		1
		+ + +			+		
	 	+			+		+
			<u> </u>		-		+
	 		 		 	 	
			 		<u> </u>	 	
						1	

Part IV Foreign Forms

1	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	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	Γ	Yes	দ	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u>\script</u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	<u> </u>	Yes	Γ	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	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	<u> </u>	Νo

Schedule F (Form 990) 2012

Part V	Supplemental	Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	ReturnReference	Explanation
METHOD USED TO ACCCOUNT FOR EXPENDITURES		SCHEDULE F, PART I, LINE 3 BOOK

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DLN: 93493135052034

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

UNIVERSITY OF SAN DIEGO

SCHEDULE G

Fundraising or Gaming Activities

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

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

Supplemental Information Regarding

Open to Public Inspection

Employer identification number

				95-2544535	
Part I Fundraisi	ng Activities. Complet	e if the organi	zation answered "Yes"	to Form 990, Part IV	, line 17.
a	mail solicitations ions	eement with any) or entity in cor r entities (fundra	e Solicitation of nor f Solicitation of gov g Special fundraisin individual (including office inection with professional f	n-government grants vernment grants ig events rs, directors, trustees fundraising services?	F Yes F No ndraiser is
(i) Name and addres individual or entity (fundraise	,	(iii) Did fundraiser ha custody oi control of contribution		(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes No			
Total	nich the organization is regi	stered or license	d to solicit funds or has be	een notified it is exempt	from registration or

Sche	dule	G (Form 990 or 990-EZ) 2012				Page 2			
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut						
			(a) Event #1 SPORTS BANQUET (event type)	(b) Event #2 USD WINE CLASSIC (event type)	(c) O ther events 4 (total number)	(d) Total events (add col (a) through col (c))			
Revenue	1	Gross receipts	221,400	98,469	158,780	478,649			
	2	Less Contributions	184,650	50,965	88,711	324,326			
	3	Gross income (line 1 minus line 2)	36,750						
Direct Expenses	4	Cash prizes							
	5	Noncash prizes							
	6	Rent/facility costs							
	7	Food and beverages .							
	8	Entertainment							
Δ	9	Other direct expenses .	86,800	35,234	101,212	223,246			
	10	Direct expense summary Add lir	nes 4 through 9 in column	(d)		(223,246)			
	11	Net income summary Combine I	ine 3, column (d), and line	. 10		-68,923			
Par	t II	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than			
Revenue		\$13,000 OH FOHH 990-EZ, II	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))			
Rev	1	Gross revenue							
Direct Expenses	2	Cash prizes							
	3	Non-cash prizes							
	4	Rent/facility costs							
	5	Other direct expenses							
	6	Volunteerlabor	☐ Yes	┌ Yes_	│ Yes No				
	7	7 Direct expense summary Add lines 2 through 5 in column (d)							
	8	Net gaming income summary Combine lines 1 and 7 in column (d)							
9 a b	Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states? Yes No If "No," explain								
10a b	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No								

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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.

OMB No 1545-0047

DLN: 93493135052034

Open to Public

Department of the Treasury

Schedule I

(Form 990)

Attach to Form 990

Name of the organization						Employer identification	on number
UNIVERSITY OF SAN DIEGO						95-2544535	
Part I General Information	on on Grants and	Assistance				•	
 Does the organization maintain the selection criteria used to an Describe in Part IV the organiz 	ward the grants or ass	sistance?					✓ Yes 🗀
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
2 Enter total number of section 5	01(c)(3) and govern	nent organizations list	ed in the line 1 table			•	

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) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) USD SCHOLARSHIPS	3247	60,292,446			
(2) STUDENT AID - GRADUATE AND LAW	466	15,682,429			
(3) STUDENT AID - ATHLETICS AND RECREATION	193	6,939,866			
(4) STUDENT AID - PRIVATE	207	1,523,949			
(5) ENDOWED SCHOLARSHIPS	95	1,986,128			
(6) STUDENT AID - RESIDENCE AND BOARD	81	921,894			
(7) FEDERAL SCHOLARSHIPS AND GRANTS	481	5,208,251			

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

e ompiece ems pare to provide	somplete this part to provide the information required hir art 1, mile 2,1 art 111, column (b), and any other additional information										
Identifier	Return Reference	Explanation									
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 THE UNIVERSITY AWARDS SCHOLARSHIPS TO INDIVIDUAL STUDENTS TO OFFSET THE COST OF TUITION, FEES, AND ROOM AND BOARD									

Schedule I (Form 990) 2012

DLN: 93493135052034

OMB No 1545-0047

Schedule J

(Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

Open to Public Inspection

Name of the organization UNIVERSITY OF SAN DIEGO

Employer identification number

95-2544535

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use 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)(1)-(111) 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	(D) Nontaxable	(E) Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2012

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

Schedule J (Form 990) 2012

Software ID: Software Version:

EIN: 95-2544535

Name: UNIVERSITY OF SAN DIEGO

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

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees									
(A) Name		(B) Breakdown of	of W-2 and/or 1099-MIS	3C compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form	
·		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ	
MARY E LYONS	(ı) (ıı)		46,000	39,500 0	30,000 0	22,088 0	596,694 0	0	
JULIE H SULLIVAN	(ı) (ıı)		82,570	85,980 0	29,006	5,048 0	547,744	0	
TIMOTHY L O'MALLEY	(ı) (ıı)		19,030	22,500	27,946 0	16,953 0	302,254	0	
REV MSGR D DILLABOUGH	(I) (II)		22,881	39,500 0	23,373	22,630	274,017	0	
CARMEN M VAZQUEZ	(I) (II)		42,643	39,500 0	25,406 0	3,722	293,307	0	
LEENDERT R HERING	(ı) (ıı)		0	6,583	4,720 0	594 0	192,044	0	
STEVEN FERRUOLO	(ı) (ıı)		0 0	0	30,000	23,776 0	376,564	0	
DAVID F PYKE	(ı) (ıı)		15,000	78,320 0	30,000	16,534 0	443,573	0	
SALLY B HARDIN	(ı) (ıı)		0	22,500	24,360 0	21,417 0	240,386	0	
PAULA A CORDEIRO	(ı) (ıı)		0 0	22,500	24,120 0	15,033 0	232,331	0	
MARY BOYD	(ı) (ıı)		0	28,730 0	26,190 0	19,917 0	272,618	0	
JASON LEMON	(ı) (ıı)		4,167	53,275 0	18,840 0	9,619 0	203,525	0	
WILLIAM GRIER	(1) (11)		54,800	34,000	30,000	21,181 0	643,804	0	
JAMES OLIVERO	(1) (11)		5 511,779 0	0	0	0	558,654 0	0	
STEVEN SMITH	(ı) (ıı)		0 0	10,077	30,000	13,404	350,067	0	
FRANKLIN PARTNOY	(I) (II)		0 0	1 -1	,	1		0	
DAVID MCGOWEN	(I) (II)		0	0	29,801	1,904 0	306,648	0 0	

DLN: 93493135052034

Open to Public

Inspection

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

► Attach to Form 990. ► See separate instructions.

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number

UN	IVERSITY OF SAN DIEGO										95-2544535				
L p	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	e price		(f) Description of purpose		(g)	(g) Defeased) On nalf of suer	fina) Pool ancing
							—			Ye	s No	Yes	No	Yes	No
A	CALIFORNIA STATEWIDE COMMUNITIES DEVELOPMENT AUTHORITY	68-0164610	130911V56	11-16-2005	95,4	15,000	NOT	OTE 1			×		x		x
В	CALIFORNIA EDUCATION FACILITIES AUTHORITY	52-1705592	130178YD2	03-15-2011	18,6	40,000	CEF	JRRENT REFU EFA SEE NOT	E 2		x		х		х
c _	CALIFORNIA MUNICIPAL FINANCE AUTHORITY	20-1563466	13048TKY8	10-06-2011	43,5		CEF	CURRENT REFUNDING 1999 CEFA, 2001 COUNTY OF SAN DIEGO COP SEE NOTE 2			×		х		Х
D	CALIFORNIA EDUCATION FACILITIES AUTHORITY	20-1563466	13048TKY8	07-03-2012	10,7	96,502		JRRENT REFU 102 CEFA SEE			x		х		x
Pá	art III Proceeds						_								
	A mount of bonds retired			_	A	\dashv	В			С			D		
1	A mount of bonds retired Amount of bonds legally defeas						\dashv	+					<u> </u>		
<u>2</u> 3	Total proceeds of issue								0.500.215			74.450	10,796,502		
3 4	Gross proceeds in reserve fund	ds .				01,587,	,50/	<u>'</u>	.9,562,315		43,574,459			10,790,502	
5	Capitalized interest from proces					4,556,982									
6	Proceeds in refunding escrows					4,550,902									
7	Issuance costs from proceeds					544,802 3,904			7,496			3,018			
8	Credit enhancement from proce						,000	+	0,50			7,122			
9	Working capital expenditures fr	rom proceeds			ſ										
10	Capital expenditures from proc	eeds			ſ	87,884,!	,533	3							
11	Other spent proceeds			1	1	1,730,9	,992	2							
12	Other unspent proceeds				Ī										
13	Year of substantial completion				20	09									
_					Yes	No		Yes	No	Yes	'	No	Yes		No
14	Were the bonds issued as part	of a current refundir	ng issue?		Х	<u> </u>		Х		Х			Х		
15	Were the bonds issued as part	of an advance refun	ding issue?		<u> </u>	Х			Х			Х			Х
16	Has the final allocation of proce	eeds been made?			Х			X		Х			Х		
17	allocation of proceeds?	•	d records to suppo	ort the final	Х			×		Х			Х		
Pa	rt IIII Private Business Us	<u>se</u>						_							
				'	<u> </u>	<u> </u>	\longrightarrow	B			<u> </u>			D I	

property financed by tax-exempt bonds?

financed property?

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

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

No

Χ

Χ

Yes

No

Χ

Χ

Yes

No

Χ

Χ

Yes

No

Χ

Χ

Yes

Part Private Business Use (Continued) D В C Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Х Х Χ Х of bond-financed property? 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? Are there any research agreements that may result in private business use of bond-Χ Χ Х Χ financed property? 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? Enter the percentage of financed property used in a private business use by entities 4 0 00000% % % other than a section 501(c)(3) organization or a state or local government 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 0 00000% % % % 501(c)(3) organization, or a state or local government Total of lines 4 and 5 0 00000% % 0/∩ % Does the bond issue meet the private security or payment test? 7 Χ Χ Χ Χ 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 Х Χ Χ Х issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of % % % % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Х Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage В С D Α Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T? 1 Χ Χ Χ Х If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Х Χ Exception to rebate? b Х Х Χ Х No rebate due? c Χ Χ Χ Χ If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Х Χ Χ into a qualified hedge with respect to the bond issue? GEORGE K BAUM Name of provider FINANCIAL SERVICES Term of hedge 40 000000000000 C Was the hedge superintegrated? d Χ Was a hedge terminated? Χ

Par	Part IV Arbitrage (Continued)									
		Α		В		С		D		
		Yes	No	Yes	No	Yes	No	Yes	No	
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	X			Х		x		Х	
ь	Name of provider	JP MORGAN CHASE BANK								
С	Term of GIC	4 50000	0000000							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	х								
6	Were any gross proceeds invested beyond an available temporary period?	X			Х		x		Х	
7	Has the organization established written procedures to monitor the requirements of section 148?	x		X		X		X		

Part V Procedures To Undertake Corrective Action

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?

						T T T T T T T T T T T T T T T T T T T				
Α		В		С		D				
Yes	No	Yes	No	Yes	No	Yes	No			
X		X		X		X				

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).			
Identifier	Identifier Return Reference Explanation		
		NOTE 1 CONSTRUCTION OF SCHOOL OF LEADERSHIP AND EDUCATION SCIENCES FACILITY, STUDENT HOUSING FACILITIES, STUDENT LIFE PAVILION, AND RENOVATION OF STUDENT UNIVERSITY CENTER AND ACADEMIC, ADMINISTRATIVE AND STUDENT FACILITIES CURRENT REFUNDING OF CEFA SERIES 1995 BONDS OUTSTANDING AS OF 11/16/05 NOTE 2 CURRENT REFUNDING OF PRIOR REVENUE BOND ISSUES ONLY NO ADDITIONAL CAPITAL EXPENDITURE INCURRED WITH BOND PROCEEDS NOTE 3 PART II LINE 11 (A) REBATE OF \$1,730,992 MADE TO US TREASURY AUGUST 2010	

Schedule K (Form 990) 2012

DLN: 93493135052034

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

Noncash Contributions

Name of the organization UNIVERSITY OF SAN DIEGO

Employer identification number

Da	rt I Types of Property				95-2544535			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	Method of noncash contr			ts
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	Χ	14	572,055	MARKET VALUE			
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► ()							
	O ther ▶()							
	O ther ►()							
	Other ► ()							
	Number of Forms 8283 received for which the organization comple				29			
							Yes	N
1	During the year, did the organiza							
	must hold for at least three year for exempt purposes for the enti				d to be used	30a		N
•	If "Yes," describe the arrangeme	ent in Part I	II					
	Does the organization have a gif			review of any non-standard	contributions?	31	Yes	
•	Does the organization hire or us contributions?	e third parti	les or related organizations	to solicit, process, or sell	noncash 	32a	Yes	
,	If "Yes," describe in Part II							
	If the organization did not report describe in Part II	t an amount	in column (c) for a type of	property for which column (a) is checked,			

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
THIRD PARTY USE		THE UNIVERSITY UTILIZES A BROKER TO SELL STOCK GIFTS RECEIVED

Schedule M (Form 990) (2012)

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0 (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.

Employer identification number Name of the organization UNIVERSITY OF SAN DIEGO 95-2544535

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 4	
	FORM 990, PART VI, SECTION B, LINE 11	A COPY OF THE FORM 990 IS PRESENTED TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES AND A COPY OF THE 990 IS AVAILABLE TO THE ORGANIZATION'S ENTIRE GOVERNING BOARD ONLINE AT THE SE CURED TRUSTEE WEBSITE BEFORE IT IS FILED
	FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR THE BOARD OF DIRECTORS AND EXCUTIVE MANAGEMENT ARE REQUIRED TO SIGN A CONFLICT O F INTEREST DISCLOSURE STATEMENT ANY CONFLICT IS REVIEWED AND HANDLED IN ACCORDANCE WITH T HE WRITTEN POLICY
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF TRUSTEE EXECUTIVE COMPENSATION COMMITTEE, WHICH IS INDEPENDENT, DETERMINES CO MPENSATION USING COMPARABLE DATA AND CONTEMPORANEOUSLY DOCUMENTING ITS DECISIONS THIS PRO CESS IS DONE ANNUALLY FOR THE PRESIDENT AND THE VICE PRESIDENTS THE EXECUTIVE VICE PRESID ENT AND PROVOST DETERMINES THE COMPENSATIONS FOR THE DEANS USING MARKET BENCHMARK DATA PRE PARED BY INDEPENDENT PERSONS AND THE BENCHMARK SCHOOLS ARE SELECTED BY THE EXECUTIVE COMPE NSATION COMMITTEE OF THE BOARD
	FORM 990, PART VI, SECTION C, LINE 18	FORMS 990 AND 990T ARE AVAILABLE TO THE PUBLIC BY VIEWING THE GUIDESTAR WEBSITE AND UPON R EQUEST FROM THE OFFICE OF THE CONTROLLER AT 619-260-2302, ACCOUNTING@SANDIEGO EDU, OR ONSI TE FROM THE OFFICE OF THE CONTROLLER FORM 1023 IS AVAILABLE UPON REQUEST FROM THE OFFICE OF THE CONTROLLER AT 619-260-2302, ACCOUNTING@SANDIEGO EDU, OR ONSITE FROM THE OFFICE OF T HE CONTROLLER
	FORM 990, PART VI, SECTION C, LINE 19	AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST FROM THE OFFICE OF THE CONTROLLER AT 619-260-2302, ACCOUNTING@SANDIEGO EDU, GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST F ROM THE OFFICE OF THE PRESIDENT AT 619-260-4520, CONFLICT OF INTEREST POLICY IS AVAILABLE ONLINE AT WWW SANDIEGO EDU
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	K-1 PASSTHROUGH LOSS 1,052,342

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

Statement: 1. TRANSFEROR: NAME: UNIVERSITY OF SAN DIEGOFEIN: 95-2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-2492TRANSFER:A) TRANSFEREE FOREIGN CORPORATIONNAME: BC LUXCO MIDCO SARLFEIN: 98-1085652ADDRESS: 9A, RUE GABRIEL LIPPMAN MUNSBACH L-5365 LUXEMBOURGB) UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 12/4/2012 CASH - \$119,442

> COMMON STOCK3. CONSIDERATION RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED: A) ACTIVE BUSINESS PROPERTY: NOT APPLICABLEB) STOCK OR SECURITIES: NOT APPLICABLEC)

DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE LEASED: NOT APPLICABLEE) PROPERTY TO BE SOLD: NOT

APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED

PROPERTY: NOT APPLICABLEH) FOREIGN LOSS BRANCH: NOT APPLICABLEI) OTHER INTANGIBLES: NOT APPLICABLES. TRANSFER

OF FOREIGN BRANCH WITH PREVIOUSLY DEDUCTED LOSSES: NOT

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

Statement: 1. TRANSFEROR: NAME: UNIVERSITY OF SAN DIEGOFEIN: 95-2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-2492TRANSFER: A) TRANSFEREE FOREIGN CORPORATIONNAME:

> BRAVISSIMA ABFEIN: N/AADDRESS: PO BOX 270 851 04 SUNDSVALL STOCKHOLM 1AN, STOCKHOLM KOMMUNB)

UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 07/31/2012 CASH - \$200,576 COMMON STOCK3. CONSIDERATION

RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED:A) ACTIVE BUSINESS PROPERTY: NOT APPLICABLEB) STOCK OR SECURITIES:

NOT APPLICABLEC) DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE LEASED: NOT APPLICABLEE) PROPERTY TO BE

SOLD: NOT APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED PROPERTY: NOT APPLICABLEH) FOREIGN

LOSS BRANCH: NOT APPLICABLEI) OTHER INTANGIBLES: NOT APPLICABLES. TRANSFER OF FOREIGN BRANCH WITH PREVIOUSLY

DEDUCTED LOSSES: NOT APPLICABLE

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

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

2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-

2492TRANSFER:A) TRANSFEREE FOREIGN CORPORATIONNAME: BKM HOLDINGS (CAYMAN) LTD. FEIN: N/AADDRESS: 190 ELGIN AVENUE, GEORGE TOWN GRAND CAYMAN, KY1-9005B) UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 12/20/2012 CASH - \$197,084

COMMON STOCK3. CONSIDERATION RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED: A) ACTIVE BUSINESS PROPERTY: NOT APPLICABLEB) STOCK OR SECURITIES: NOT APPLICABLEC)

DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE LEASED: NOT APPLICABLEE) PROPERTY TO BE SOLD: NOT

APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED PROPERTY: NOT APPLICABLEH) FOREIGN LOSS BRANCH: NOT

APPLICABLEI) OTHER INTANGIBLES: NOT APPLICABLES. TRANSFER OF FOREIGN BRANCH WITH PREVIOUSLY DEDUCTED LOSSES: NOT

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

Statement: 1. TRANSFEROR: NAME: UNIVERSITY OF SAN DIEGOFEIN: 95-2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-2492TRANSFER: A) TRANSFEREE FOREIGN CORPORATIONNAME: CANERA ENERGY CORP.FEIN: N/AADDRESS: 202 - 6TH AVENUE, SUITE 800 CALGARY, ALBERTA, CANADAB) UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 12/18/2012 CASH - \$130,706 COMMON STOCK 03/08/2012 NOTE - \$20,999 COMMON STOCK3.

CONSIDERATION RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED: A) ACTIVE BUSINESS PROPERTY: NOT

APPLICABLEB) STOCK OR SECURITIES: NOT APPLICABLEC)

DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE

LEASED: NOT APPLICABLEE) PROPERTY TO BE SOLD: NOT

APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED

PROPERTY: NOT APPLICABLEH) FOREIGN LOSS BRANCH: NOT

APPLICABLEI) OTHER INTANGIBLES: NOT APPLICABLES. TRANSFER

OF FOREIGN BRANCH WITH PREVIOUSLY DEDUCTED LOSSES: NOT

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

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

2544535ADDRESS: 5998 ALCALA PARK SAN DIEGO, CA 92110-2492TRANSFER: A) TRANSFEREE FOREIGN CORPORATIONNAME: OPPS 7B TRB INVESTMENTS HOLDINGS LTDFEIN: N/AADDRESS: 333 SOUTH GRAND AVENUE, FL 28 LOS ANGELES, CA 90071B) UNIVERSITY OF SAN DIEGO TRANSFERRED THE FOLLOWING PROPERTY: DATE PROPERTY TRANSFERRED PROPERTY RECEIVED 12/21/2012 OTHER PROPERTY - \$140,368 COMMON STOCK 3.

CONSIDERATION RECEIVED SEE ABOVE4. PROPERTY TRANSFERRED: A) ACTIVE BUSINESS PROPERTY: NOT

APPLICABLEB) STOCK OR SECURITIES: NOT APPLICABLEC)

DEPRECIATED PROPERTY: NOT APPLICABLED) PROPERTY TO BE

LEASED: NOT APPLICABLEE) PROPERTY TO BE SOLD: NOT APPLICABLEF) TRANSFERS TO FSC'S: NOT APPLICABLEG) TAINTED

PROPERTY: NOT APPLICABLEH) FOREIGN LOSS BRANCH: NOT

APPLICABLEI) OTHER INTANGIBLES: NOT APPLICABLES. TRANSFER OF FOREIGN BRANCH WITH PREVIOUSLY DEDUCTED LOSSES: NOT

DLN: 93493135052034

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

TY 2012 Functional Currency and Exchange Rate QBU Statement

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

QBU Id	Country of Operation	Functional Currency
US DOLLAR		0.00000

DLN: 93493135052034

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

TY 2012 Functional Currency and Exchange Rate QBU Statement

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

QBU Id	Country of Operation	Functional Currency
US DOLLAR		0.00000

DLN: 93493135052034

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

TY 2012 Functional Currency and Exchange Rate QBU Statement

Name: UNIVERSITY OF SAN DIEGO

EIN: 95-2544535

QBU Id	Country of Operation	Functional Currency
US DOLLAR		0.00000