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DLN: 93493038015014

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2012

OMB No 1545-0047

Open to Public

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

	evenue sei	I .				Inspection
	the 201 k if appli	2 calendar year, or tax year beginning 10-01-2012 , 2012, and ending 09 C Name of organization	-30-2013	D Employ	er ider	ntification number
_	:к іг арріі ess chang	Gallaudet University e		53-01		
– Nam	e change	Doing Business As				
- Initia	l return	Number and street (or P O box if mail is not delivered to street address) Room/	suite	E Telepho	ne numl	per
Term	ıınated	800 FLORIDA AVENÙE NE Suite 102				
- Amei	nded retu			(202)	0 5 1 - 5	<u> </u>
Apple	cation pe			G Gross re	ceipts \$	203,724,447
		F Name and address of principal officer		this a group	return	
		Alan Hurwitz President 800 FLORIDA AVE NE CO 102	aff	iliates?		┌ Yes ┌ No
		WASHINGTON,DC 20002				ded?
Tax-	exempt	status	If'	"No," attach	a lıst	(see instructions)
		· WWW GALLAUDET EDU	H(c) G	roup exemptı	on nun	nber 🟲
		zation Corporation Trust Association Other ►	L Year of	f formation 186	64 M	State of legal domicile DO
Par		Summary				
		efly describe the organization's mission or most significant activities laudet University was established by an act of Congress in 1864 and is th	e only accre	dited univers	ity in t	he world established
,		lusively for deaf and hard of hearing students	,			
	2 Ch	eck this box 🛏 if the organization discontinued its operations or disposed	d of more tha	n 25% of its	net as:	sets
	3 Nu	mber of voting members of the governing body (Part VI, line 1a)		I	з	2:
		mber of independent voting members of the governing body (Part VI, line 1			4	2:
		al number of individuals employed in calendar year 2012 (Part V, line 2a)		- F	5	1,64
		al number of volunteers (estimate if necessary)			6	. (
	7a Tot	al unrelated business revenue from Part VIII, column (C), line 12			7a	5,898,42
	b Ne	unrelated business taxable income from Form 990-T, line 34	<u></u>		7b	-655,34
				rior Year		Current Year
,		ontributions and grants (Part VIII, line 1h)		6,397,5		2,866,173
Paverille Paverille		rogram service revenue (Part VIII, line 2g)	165,070,342		160,778,617 7,257,780	
Ē		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	·	1,309,5		1,032,507
		otal revenue—add lines 8 through 11 (must equal Part VIII, column (A), I	ine			
_		2)		190,235,2		171,935,077
		enefits paid to or for members (Part IX, column (A), lines 1-3)		8,948,7	0	8,372,920
		alaries, other compensation, employee benefits (Part IX, column (A), lines			\dashv	
82		-10)	´ <u> </u>	107,150,7	58	107,179,002
දුරුණය සි		rofessional fundraising fees (Part IX, column (A), line 11e)	•		0	0
		otal fundraising expenses (Part IX, column (D), line 25) 🛌 1,680,199				
		other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		56,673,3	_	56,439,667
		otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25) evenue less expenses Subtract line 18 from line 12		172,772,8		171,991,589 -56,512
-	19	evenue less expenses Subtract me 10 nom me 12		ing of Curren		
Fund Balances				Year		End of Year
78. 19.		otal assets (Part X, line 16)		408,578,1		412,912,869
28		otal liabilities (Part X, line 26)	•	66,986,3		63,318,893
Part		et assets or fund balances Subtract line 21 from line 20		341,591,8	υδ	349,593,976
y kno	wledge	es of perjury, I declare that I have examined this return, including accomp and belief, it is true, correct, and complete Declaration of preparer (other iny knowledge				
		*****		2014-02-07		
ign		Signature of officer		Date		
ere		Paul Kelly VP Administration & Finance Type or print name and title				
		Print/Type preparer's name Preparer's signature	Date (Check 🗀 ıf	PTIN	
aid		Scott Thompsett	9	self-employed	•	
	arer	Firm's name ► GRANT THORNTON LLP	F	Firm's EIN ►		
-	Only	Firm's address ► 666 THIRD AVENUE	F	Phone no (212)	599-01	00
, 56	Unity	NEW YORK, NY 100174057				

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

Yes No

Par		nt of Program Se			tIII	·
1		ne organization's miss				<u> </u>
GALI GALI HEA NAT AND PRO OFT THE 2012	LAUDET UNIVERSI LAUDET IS THE ON RING STUDENTS I IONAL DEMONSTR A WIDE RANGE OF PORTION OF ITS A HE EDUCATION O UNIVERSITY'S UN 2, GALLAUDET ALS	TY ("GALLAUDET" (NLY ACCREDITED U N ADDITION TO IT ATION ELEMENTAR PUBLIC SERVICE ANNUAL REVENUE E F THE DEAF ACT IN RESTRICTED REVE	OR THE "UNIVER NIVERSITY IN T S UNDERGRADU RY AND SECOND PROGRAMS GAL BY DIRECT APPR N FISCAL YEAR 2 NUES WERE DER: PITAL APPROPRI	HE WORLD ESTA ATE AND GRADU ARY EDUCATION LAUDET IS A PR OPRIATION FRO 1013 AND 2012, IVED FROM FEDE ATION TO CONS	ABLISHED BY AN ACT OF COBLISHED EXCLUSIVELY FOR ATE ACADEMIC PROGRAMS PROGRAMS, CONTINUING IVATE UNIVERSITY THAT RIM THE FEDERAL GOVERNME APPROXIMATELY 66% AND ERAL APPROPRIATIONS INSTRUCT, REPAIR AND RESTOB	DEAF OR HARD OF 5, THE UNIVERSITY OFFERS EDUCATION PROGRAMS, ECEIVES A SUBSTANTIAL NT UNDER THE AUTHORIT' 69%, RESPECTIVELY, OF FISCAL YEARS 2013 AND
2	the prior Form 990			_	year which were not listed on	
3	Did the organization services?	on cease conducting,	or make sıgnıfıcaı	nt changes in how	it conducts, any program	「Yes 「No
4	Describe the organexpenses Section		rvice accomplishn	s are required to r	ts three largest program service eport the amount of grants and	
4a	(Code) (Expenses \$	81,010,395	ıncludıng grants of	\$ 1,954,217) (Revenue :	\$ 23,700,555)
	UNIVERSITY AND THE SCHOOL FOR THE DE	E LAURENT CLERC NATION AF AND KENDALL DEMONS	IAL DEAF EDUCATION STRATION ELEMENTAR	CENTER ("CLERC CEI	PONENT PROGRAMS FOR BUDGETING NTER") THE CLERC CENTER CONSIS' ERSITY ENROLLS APPROXIMATELY 1,8 ARY AND SECONDARY SCHOOL STUDE	TS OF THE MODEL SECONDARY 321 UNDERGRADUATE AND
	(Code) (Expenses \$	27,411,160	including grants of	\$ 6,341,045) (Revenue :	\$ 982,646)
	STUDENT SERVICES	, , , ,	PROVIDES A WIDE RA	NGE OF STUDENT SER	VICES INCLUDING COUNSELING, PLA	
4c	(Code) (Expenses \$	24,577,733	including grants of	\$ 0)(Revenue:	\$ 21,015,754)
-	AUXILIARY ENTERPRI ACTIVITIES, OUTREAC DESIGNATION FOR C	SES AUXILIARY ENTERPR CH PROGRAMS and audiol LERC CENTER PROGRAM UNDER KENDALL DEMONS	ISES INCLUDE DORMI ogical services ONLY S, COSTS INCURRED	TORY, FOOD SERVICE THOSE ACTIVITIES WI FOR DORMITORY AND	, BOOKSTORE OPERATIONS, THE UNI HICH ARE REVENUE PRODUCING ARE FOOD SERVICE UNDER THE MODELS OF WHICH PRODUCE REVENUE, ARE F	
	(Code) (Expenses \$	9,565,429	including grants of	\$ 54,658) (Revenue :	\$ 0)
	Research	/ (Expenses p	3,303,123	including grants or	y styoso y (Nevende	
	(Code Public Services) (Expenses \$	4,822,506	including grants of	\$ 23,000) (Revenue :	\$ 866,537)
	Other program se	ervices (Describe in S	Schedule O)			
_	(Expenses \$	•	including grants of	of \$	77,658) (Revenue \$	866,537)
4e	Total program sei	rvice expenses 🕨	147,387,223			

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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	Yes	
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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		No
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		Νo
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? <i>If</i> "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		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "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 IV			1
		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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \blacksquare	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		Νo
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
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	

Par	Statements Regarding Other 1R5 Fillings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	 Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 410		103	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
-	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
2-		2-	V 0.0	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3a 3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	35	163	
-ru	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
E-	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	E ₂		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		No
		5b		140
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7-		No
ч	file Form 8282?	7c		No
u	74			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			1
0		8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 49667	9a 9b		
.O	Section 501(c)(7) organizations. Enter	30		
	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			
1	Section 501(c)(12) organizations. Enter			
	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)			
.2a	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			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		V
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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Se	ection 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		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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	eveni	ıe Cod	e.)
			Yes	No
L0a	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		
l1a	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			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L4	Did the organization have a written document retention and destruction policy?	14	Yes	
L5	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)			
L6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
.7		<u> </u>	D CC	WA
	List the States with which a copy of this Form 990 is required to be filed ►AK, AZ, CO, KY, MD, MA, NH, NY, I	1D, U	, 3C ,	

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of

►PAUL KELLY VP ADMIN FINAN 800 FLORIDA AVE NE WASHINGTON, DC (202)651-5299

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

interest policy, and financial statements available to the public during the tax year

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	more t perso and	han o	one l both ector	box, an o	officer stee)		(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
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2033 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) A verage hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee) Position (do not check Reportable compensation compensation from the organization (W-organization (W-organ						(E) Reportable compensation from related organizations (W- 2/1099-MISC)	С	(F) Estima nount of ompens from t	ted [:] other atıon he	
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	2,1099-MISC)	2,1099-11130)		relate rganiza	ed .
1b	Sub-Total			<u> </u>	<u> </u>			<u></u>					
c	Total from continuation sheet	s to Part VII, S	ection A	١.			•	Þ					
d	Total (add lines 1b and 1c) .				•	•	•	F	3,461,389	0			810,411
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	an			
												Yes	No
3	On line 1a? If "Yes," complete S					key •	emplo	yee, •	or highest compen		3		No
4	For any individual listed on line organization and related organ individual									uch	4	Yes	
5	Did any person listed on line 1 services rendered to the organ										5		No
Se	ction B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization	e highest comp										ax year	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Sigal construction corporation , 2231 Crystal Drive Suite 200 ARLINGTON VA 22202	Construction	13,496,082
Monarc Construction , 2781 hartland Road FALLS CHURCH VA 22043	CONSTRUCTION	5,399,296
bon appetit , 91337 Collections Drive PO box 91 CHICAGO IL 606931337	food services	5,064,005
johnson controls , po box 9052510 CHARLOTTE NC 282905240	energy conservation	4,609,554
clark companies , po box 427 41155 state route 10 DELHI NY 13753	construction	2,163,405
2 Total number of independent contractors (including but not limited to those listed above)	who received more than	_

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶68

Part V	71TT	Statement of Revenue									
		Check if Schedule O contains a resp	onse to any question	In this Part VIII . (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514				
w 89	1a	Federated campaigns 1	a				311				
ants	ь	Membership dues 1	b								
Program Service Revenue Contributions, Giffs, Grants and Other Similar Amounts	c	Fundraising events 1	с								
	d	Related organizations 1	d								
	e	Government grants (contributions) 1	 e								
	f	All other contributions, gifts, grants, and 1	f 2,866,173								
řiti her	'	sımılar amounts not ıncluded above			ļ						
草草	g	Noncash contributions included in lines 1a-1f \$	248,569								
Cor	h	Total. Add lines 1a-1f		2,866,173							
			Business Code								
Program Service Revenue	2a	GOVERNMENT GRANTS & APPROPRIATIONS	900099	117,293,825	117,293,825						
	ь	TUITION	611710	23,924,935	23,924,935						
	С	ROOM AND BOARD	721310	10,863,911	10,863,911						
	d	CONFERENCE CENTER REVENUE	721110	5,923,610		5,923,610					
	e	AUXILIARY SERVICES	611710	1,707,243	1,426,813		280,430				
	f	All other program service revenue		1,065,093	1,065,093						
	g	Total. Add lines 2a-2f		160,778,617							
	3	Investment income (including divide				22.554	0.617.006				
		and other similar amounts)	🟲	3,588,350		-28,656	3,617,006				
	4	Income from investment of tax-exempt bon	_	0							
	5	Royalties	(II) Personal	, and the second							
	6a	Gross rents 150,480	(ii) i cissilai								
	ь	Less rental									
	c	expenses Rental income 150,480	0								
	d	or (loss) Net rental income or (loss)		150,480			150,480				
		(ı) Securities	(II) O ther								
	7a	Gross amount from sales of 33,764,706	101,193								
		assets other than inventory	,								
	ь	Less cost or other basis and 30,101,522	94,947								
		sales expenses	·								
	L C	Gain or (loss) 3,663,184 Net gain or (loss)	6,246	3,669,430			3,669,430				
	d 8a	Gross income from fundraising		3,003,130			3,003,130				
e		events (not including									
Other Revenue		\$ of contributions reported on line 1c)									
Š		See Part IV, line 18									
<u>.</u>	١.		a								
돌	l b	Less direct expenses Net income or (loss) from fundraising	o events	0							
_	9a	Gross income from gaming activities									
		See Part IV, line 19									
			<u> </u>								
	l b	Less direct expenses Net income or (loss) from gaming ac	tivities •	0							
	10a	Gross sales of inventory, less	tivities								
		returns and allowances .	2.7								
		a	2,474,928								
	b c	Less cost of goods sold b Net income or (loss) from sales of in	1,592,901 ventory .	882,027		3,469	878,558				
	٣	Miscellaneous Revenue	Business Code			2,.33					
	11a		1								
	ь										
	С										
	d	All other revenue									
	e	Total. Add lines 11a-11d		0							
	12	Total revenue. See Instructions .		171 025 077	154 574 577	F 000 400	0.505.003				
	ı		•	171,935,077	154,574,577	5,898,423	8,595,904				

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 8,372,920 8,372,920 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 0 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 2,705,728 1,042,042 1,663,686 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) . . . 80,011,196 Other salaries and wages 70,638,322 8,327,563 1,045,311 Pension plan accruals and contributions (include section 401(k) 10,292,397 9,045,556 1,120,605 and 403(b) employer contributions) 126.236 8,990,866 7,803,755 1,079,391 Other employee benefits 107,720 10 5,178,815 4,476,401 640,863 61,551 11 Fees for services (non-employees) O Management 326,847 5,700 321,147 Legal Accounting 344,801 344,801 177,700 177,700 Lobbying Professional fundraising services See Part IV, line 17 0 Investment management fees 344,799 344,799 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 4,850,920 3,679,115 1,147,405 24,400 Schedule O) Advertising and promotion . . 12 48.434 48,434 13 Office expenses . . . 4,097,334 3,972,611 10,393 114,330 3,009,923 1,570,902 1,432,684 14 Information technology . . 6,337 15 82,161 82,161 Royalties . 5,577,330 4,848,441 728,864 25 16 Occupancy **17** 1,857,051 1,681,234 124,694 51,123 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings . 273,303 155,872 117,431 20 1,529,962 1,222,489 307,473 Payments to affiliates 21 O 12,158,225 22 Depreciation, depletion, and amortization . 10,943,387 1,214,838 23 992,647 872,749 119,898 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 CONFERENCE CENTER 5,131,792 5,130,232 1,560 FOOD SERVICES 5,019,335 5,019,335 MAINTENANCE & SVC CONTRACTS 4,718,967 3,787,711 895,244 36,012 d FURNITURE & EQUIPMENT 1,097,068 1,029,865 64,197 3,006 e All other expenses 4,801,068 2,710,840 1,986,080 104,148 Total functional expenses. Add lines 1 through 24e 25 171,991,589 147,387,223 22,924,167 1,680,199 Joint costs. Complete this line only if the organization 26 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

Fall	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
		, ,	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	13,095	1	13,095
	2	Savings and temporary cash investments	28,061,908	2	16,837,058
	3	Pledges and grants receivable, net	5,948,855	3	3,255,992
	4	Accounts receivable, net	5,362,274	4	5,523,019
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
ts	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	0
Assets	_	Niches and Isano uses wells, not	1,205,507	7	1,312,143
Ą	7	Notes and loans receivable, net			
	8	Inventories for sale or use	1,315,310 910,545	8	1,321,539 749,865
	9	Prepaid expenses and deferred charges	910,545	9	749,665
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 346,182,253			404.045.040
	b	Less accumulated depreciation	188,977,908		191,315,912
	11	Investments—publicly traded securities	111,323,265	11	127,757,760
	12	Investments—other securities See Part IV, line 11	51,294,537	12	56,558,876
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	14,164,920	15	8,267,610
	16	Total assets. Add lines 1 through 15 (must equal line 34)	408,578,124	16	412,912,869
	17	Accounts payable and accrued expenses	20,924,178	17	17,532,149
	18	Grants payable	0	18	0
	19	Deferred revenue	2,400,000	19	3,225,000
	20	Tax-exempt bond liabilities	39,407,960	20	38,698,088
er en	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u> </u>		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	4,254,178	2.	3,863,656
	26	D	66,986,316	25	63,318,893
—	26	Total liabilities. Add lines 17 through 25	00,980,310	26	03,310,093
Fund Balances		lines 27 through 29, and lines 33 and 34.			
<u>8</u>	27	Unrestricted net assets	197,363,726	27	201,009,346
ä	28	Temporarily restricted net assets	23,500,941	28	27,418,595
Ξ	29	Permanently restricted net assets	120,727,141	29	121,166,035
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ret	33	Total net assets or fund balances	341,591,808	33	349,593,976
_	34	Total liabilities and net assets/fund balances	408,578,124	34	412,912,869

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		171,9	35,077
2	Total expenses (must equal Part IX, column (A), line 25)	2		171 (91,589
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3			-56,512
5	Net unrealized gains (losses) on investments	4			91,808
6	Donated services and use of facilities	5		8,1	19,820
7	Investment expenses	6			
8	Prior period adjustments	7			
9	Other changes in net assets or fund balances (explain in Schedule O)	8			C 1 1 1 0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	9			61,140
Dor	t XII Financial Statements and Reporting	10		349,5	93,976
Par	TXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				
	Check if Schedule o contains a response to any question in this rate XII	<u> </u>	<u> </u>		
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	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 ☐ 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?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

Software ID: Software Version:

EIN: 53-0199507

Name: Gallaudet University

Form 990, Part VII - Compensation of Compensated Employees, and Indepe	Officers, Dir ndent Contra	ectors actors	Tru,	ıste	es,	Key	En	nployees, Highe	st	
(A) Name and Title	(B) Average hours per week (list any	dire	than pers office ctor/1	not one on is ran	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 related
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations
The Honorable Sherrod Brown Trustee	2 0	Х						0	0	0
Claire Bugen Trustee	2 0	Х						0	0	0
Jameson Crane Jr Trustee	2 0	х						0	0	0
Jorge Diaz-Herrera Trustee	2 0	х						0	0	0
Harvey Goodstein Trustee, Vice Chair	2 0	х		X				0	0	0
Claudia L Gordon Trustee	2 0	Х						0	0	0
Duane Halliburton Trustee	1 5 5	Х						0	0	0
Heather Harker Trustee	2 0	Х						0	0	0
Cheryl Heppner Trustee, secretary	2 0	Х		Х				0	0	0
Jeffrey L Humber Jr Trustee	2 0	Х						0	0	0
Thomas Humphries Trustee	2 0	Х						0	0	0
Nancy Kelly-Jones Trustee	2 0	Х						0	0	0
L Richard Kinney Trustee	1 0 1 0	Х						0	0	0
Richard Ladner Trustee	2 0	Х						0	0	0
Pamela Lloyd-Ogoke Trustee	2 0	Х						0	0	0
James Macfadden Trustee	2 0	Х						0	0	0
James FX Payne Trustee	2 0	х						0	0	0
Benjamin J Soukup Trustee,Chair	1 5 5	Х		Х				0	0	0
Tıffany Wıllıams Trustee 	2 0	х						0	0	0
The Honorable Lynn Woolsey Trustee	2 0	х						0	0	0
The Honorable Kevin Yoder Trustee	2 0	х						0	0	0
T Alan Hurwitz President	39 5 5			х				452,929	0	144,492
Paul Kelly VP Administration & Finance	39 0 1 0			Х				353,781	0	45,415
Stephen Weiner Provost	40 0			х				259,019	0	69,709
Edward Bosso VP Clerc Center	40 0				x			207,471	0	68,429

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

40 0

40 0

40 0

40 0

Donald Beil

Chief of Staff

Laura-Ann Petitto

Albert Benedict

Lynne Murray

Director VL2, CO-PI

Dean, Stdnt Affairs & Acad Supp

VP Dvlp and alumnı relations

Compensated Employees, and Indepe	ndent Contra	actors								
(A) Name and Title	(B) A verage hours per week (list any hours	dıre	than persoffice ctor/	o not one son i er an trus	box s bot d a tee)	th	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	CEI	Key employee	Highest compensated employee	mer			
Carol Erting Dean GSPP	40 0				х			191,445	0	62,781
Catherine Andersen Chief Enrollment Mrktg Officer	40 0				х			238,430	0	15,085
Isaac Agboola Dean, SEBHS	40 0				х			197,194	0	27,910
Fred Weiner Assistant VP A&F	36 0 4 0				х			195,054	0	56,648
Meloyde Batten-Mickens Exec Director Facilities	40 0				х			174,376	0	30,532
Gary Aller Exec Director Business Srvc	40 0				х			170,639	0	53,151
Cynthia King Professor	40 0					х		218,706	0	46,055

Χ

Х

Χ

195,049

215,198

192,846

199,252

0

0

0

0

56,406

67,937

30,265

35,596

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493038015014

Employer identification number

OMB No 1545-0047

Public Charity Status and Public Support

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Gallaudet University

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.

2011

Open to Public Inspection

Рa	rt I	Reas	on for Di	blic Charity Sta	tus (All ord	nanization	s must com	nlete this	nart) See		ions		
				e foundation becaus					 	nisti uct	10113.		
1	Г			on of churches, or a			-			_			
2	Ī		•	in section 170(b)(1									
3	Ė			perative hospital se				on 170(b)(:	L)(A)(iii).				
4	Ė	•		n organization operat	=					(1)(A)(i	iii). Ent	er the	
	·			ty, and state						, , , , , , ,	,		
5	Γ			erated for the benefi	t of a college	or universi	ty owned or o	perated by	a governme	ntal unıt	describ	ed ın	
		sect ior	170(b)(1)(A)(iv). (Complete P	art II)								
6	Γ	A feder	ral, state, or	local government or	government	al unit desc	rıbed ın sect	ion 170(b)	(1)(A)(v).				
7	Γ	_		at normally receives		•	support from	n a governm	nental unit or	from the	genera	l public	:
_	_			n 170(b)(1)(A)(vi).		•		T \					
8	<u> </u>		-	described in section			-	-	.		.		
9	ı			at normally receives									55
		•		ities related to its ex	· ·	=							
				oss investment inco						L Lax) IIO	m busii	iesses	
10	_			janization after June									
10 11	<u> </u>	_		ganized and operated ganized and operated									6
	,	one or the box	more public that descri	ly supported organiz bes the type of supp b Type II c	ations descr orting organ	ıbed ın sect ızatıon and	ion 509(a)(1 complete line) or section es 11e th <u>r</u> o	n 509(a)(2) ugh 11h	See sect	ion 509	(a)(3).	Check
е	Γ	other t	_	ox, I certify that the on managers and ot	_			•	, ,		•	•	
f		If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box											
g			August 17, 2 ng persons?	2006, has the organ	ızatıon accep	oted any gift	or contribut	ion from an	y of the				
				irectly or indirectly o	•		-	persons d	escribed in (i	1)		Yes	No
				governing body of th			n?				11g(i)	+	<u> </u>
				er of a person descr							11g(ii)		
				lled entity of a perso							11g(iii)	<u> </u>
h		Provide	e the follown	ng information about	the supporte	ed organizat	tion(s)						
(i	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is t	he	(v) Did you	u notify	(vi) Is	s the		vii) An	nount of
	suppoi			organization	organizati		the organi		organiza				etary
OI	ganiz	ation		(described on lines 1- 9 above	col (i) list your gove		ın col (i) o suppo		col (i) or in the l	_		sup	port
				or IRC section	docume		Зарро		III the v	0 0 .			
				(see							- 1		
				instructions))	Yes	No	Yes	No	Yes	No			
							† -		1	+			
Tota]							1					

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	iplete Pa	rt III.)	
	ection A. Public Support 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						
11	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: 93493038015014

OMB No 1545-0047

Political Campaign and Lobbying Activities

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.

Inspection

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

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

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

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

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** Gallaudet University 53-0199507 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? 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	ying expenditures)		_	up member s nam	e, address, LTN
<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	o)				
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	rom the following table	ın both			
	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	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	.000		
	Over \$17,000,000	\$1,000,000				
	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)).	

		(6	1)	(b)
-or e activ	ach "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		Νo	
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	
e	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		64,262
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities?	Yes		177,700
j	Total Add lines 1c through 1i			241,962
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), o	r section

501(c)(6).

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

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A,

- line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1
- Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).
- Current year
- b Carryover from last year
- Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3
- 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?
- Taxable amount of lobbying and political expenditures (see instructions)

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
obbying Expenses	Schedule C, Part II-B, LINE 1(G)	The University's Board of Trustees has three voting members of Congress In addition, the University President, the Chief of Staff and the assistant - vice president - administration & finance maintain direct contact with members of the Congress in requesting appropriations and educating Congress on general issues that impact Gallaudet and deaf education. In addition, the assistant vice president also communicates with government officials of the District of Columbia. Amounts reported as lobbying expenses on schedule c represent estimated costs of the president, the chief of staff and the assistant vice president's direct contact with government officials. Amounts reported as lobbying expenditures in schedule c are categorized as salaries and wages on part IX, functional expense, and not as lobbying expenditures. Total Lobbying as Name and Position allocated to specific dept
		T ALAN HURWITZ, PRESIDENT 25,391 FRED WEINER, assistant vp a&F 25,699 DONALD BEIL, CHIEF OF STAFF 13,172 total \$64,262 Line 1(I) - In addition, the university engaged the services of independent lobbyists who provide counsel to improve relationships with congress

2a

2b 2c

3

4

5

DLN: 93493038015014

OMB No 1545-0047

(Form 990)

SCHEDULE D

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Open to Public

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b Inspection Internal Revenue Service ► Attach to Form 990. ► See separate instructions. Name of the organization **Employer identification number** Gallaudet University 53-0199507 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the tax year 🟲 Number of states where property subject to conservation easement is located ▶___ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenues included in Form 990, Part VIII, line 1

Part	Organizations Maintaining Co	llections of Art	t, HIS	torical	<u>ireas</u>	sures, or O	<u>tne</u>	<u>r Similar As</u>	sets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, cl	neck any o	of the fo	ollowing that a	re a	sıgnıfıcant use	ofits	
а	Public exhibition		d	┌ Loa	in or ex	change progr	ams			
b	☐ Scholarly research e ☐ Other									
c	Preservation for future generations									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII									
5	During the year, did the organization solicit								_	_
	assets to be sold to raise funds rather than t								Yes	No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					on answere	a "Y	es" to Form S	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?		•			s or other ass	etsı		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II and complete the	e follov	wıng table						
								An	nount	
С	Beginning balance						1 c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	ne 21?						│ Yes	☐ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anation ha	s been	provided in P	art >	XIII		Γ
Pa	t V Endowment Funds. Complete									
1_	Paginning of ware balance	(a)Current year 159,505,519	(b)	Prior year 145,404,8		Two years back 152,358,848		Three years back 149,166,604	(e)Four y	ears back 51,176,908
1a L	Beginning of year balance	15,482,688		861,1		550,450	_	531,958		1,576,765
b	Contributions	13,402,000		001,1	,,,	330,430		331,930		1,370,703
С	Net investment earnings, gams, and losses	14,898,395		19,361,6	55	-526,172		10,191,997		-5,447,661
d	Grants or scholarships	1,430,112		2,421,1	50	3,072,207		3,322,817		3,794,712
e	Other expenditures for facilities and programs	6,208,293		3,700,9	39	3,906,058		4,208,894		4,344,696
f	Administrative expenses	102 240 107		150 505 5	10	145 404 061		152 250 040	-	10.166.604
g	End of year balance	182,248,197		159,505,5		145,404,861		152,358,848	12	19,166,604
2	Provide the estimated percentage of the cur		ice (lir	ne 1g, colu	ımn (a)) held as				
а	board designated of quasi-endownient	20 746 %								
Ь	Permanent endowment ► 66 196 %									
C	Temporarily restricted endowment \(\begin{array}{c} 13 \\ 13 \\ 14 \\ 14 \\ 15 \\ 15 \\ 15 \\ 15 \\ 15 \\ 16 \\ 1	057 % uld equal 100%								
3a	Are there endowment funds not in the posse organization by	_		that are h	eld and	ladmınıstered	d for		Yes	No
	(i) unrelated organizations						•	3a(No.
b	(ii) related organizations						•	3a(No.
4	Describe in Part XIII the intended uses of th	•					•		<u> </u>	
Par	t VI Land, Buildings, and Equipme				e 10.					
	Description of property		•	(a) Cost basis (inve	or other	(b) Cost or other		(c) Accumulated depreciation	(d) Bo	ok value
1a	_and					1,468,	119			1,468,119
b i	Buildings					260,340,		109,015,67	1	1,324,983
c I	_easehold improvements					33,162,	207	18,443,59	5 1	4,718,611
d I	d Equipment									
	Other		•			23,217,	991	7,458,089	9 1	5,759,902
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	equal Form 990, Part	X, colu	ımn (B), İı	ne 10(c).)			19	1,315,913

Part VIII Investments—Other Securities. Se		
(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		
(3)Other (A)HEDGE FUNDS	39,115,464	F
<u>, , , , , , , , , , , , , , , , , , , </u>	, ,	
(B) PRIVATE REAL ASSET FUNDS	4,663,966	F
(C) DRIVATE EQUITY FUNDS	7 196 141	r
(C) PRIVATE EQUITY FUNDS	7,186,141	F
(D) COMMINGLED FUNDS-FIXED INCOME	5,593,305	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 56,558,876	
Part VIII Investments—Program Related.		
(a) Description of investment type	(b) Book value	(c) Method of valuation
	. ,	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	P	
Part IX Other Assets. See Form 990, Part X	, lıne 15.	<u> </u>
(a) Des	cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of liability		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability	t X, line 25. (b) Book value	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes	t X, line 25. (b) Book value 0	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes CONDITIONAL ASSET RETIREMENT	(b) Book value 0 558,345	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes CONDITIONAL ASSET RETIREMENT REFUNDABLE ADVANCES	t X, line 25. (b) Book value 0 558,345 1,241,545	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes CONDITIONAL ASSET RETIREMENT	(b) Book value 0 558,345	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes CONDITIONAL ASSET RETIREMENT REFUNDABLE ADVANCES	t X, line 25. (b) Book value 0 558,345 1,241,545	>
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes CONDITIONAL ASSET RETIREMENT REFUNDABLE ADVANCES	t X, line 25. (b) Book value 0 558,345 1,241,545	
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Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes CONDITIONAL ASSET RETIREMENT REFUNDABLE ADVANCES	t X, line 25. (b) Book value 0 558,345 1,241,545	.
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Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes CONDITIONAL ASSET RETIREMENT REFUNDABLE ADVANCES	t X, line 25. (b) Book value 0 558,345 1,241,545	

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	174,000,953
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	9,651,581
3	Subtract line 2e from line 1	3	164,349,372
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 344,799		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4 c	7,585,705
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	171,935,077
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	165,998,785
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
_	Other 103563		
d	Other (Describe in Part XIII)		
d e		2e	1,592,901
_	Other (Describe in Part XIII)	2e 3	<u> </u>
e	Other (Describe in Part XIII)	<u> </u>	<u> </u>
e 3	Other (Describe in Part XIII)	3	1,592,901 164,405,884
e 3 4	Other (Describe in Part XIII)	3	
e 3 4 a	Other (Describe in Part XIII)	3	164,405,884
e 3 4 a b c	Other (Describe in Part XIII)	3	

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

Identifier	Return Reference	Explanation
Endowments	Schedule D, Part V	The University's endowment funds are intended to support its educational mission either through the funding of everyday operations or of student scholarships. Over the long-term, the University intends to keep the principal intact, using only the earnings on its investments to fund activities. Form 990, Schedule D, Part XI, XII & XIII Gallaudet University does not receive standalone financial statements, its operations are consolidated with an affiliated organization, Gallaudet University Foundation. The Parts XI, XII and XIII reconciliations on schedule D tie back to Gallaudet's financial information in the audited financial statements and not to the consolidated numbers.
Reconciliation of Revenue	Schedule D, Part XI	Line 2D Cost of Goods Sold (\$1,592,901) Line 2D Change in value of split interest agreements \$61,140 total (\$1,531,761) Line 4b Scholarships and fellowships \$7,240,906
Reconciliation of Expenses	Schedule D, Part XII	Line 2D Cost of Goods Sold (\$1,592,901) Line 4b Scholarships and Fellowships \$7,240,906
FIN 48	SCHEDULE D, PART X	Gallaudet has been recognized by the Internal Revenue Service ("IRS") as exempt from federal income taxes except on activities unrelated to its exempt purpose, under provisions of Section 501 (c)(3) of the internal revenue code of 1986 as amended The IRS has determined that Gallaudet is a publicly supported educational institution and not a private foundation The income taxes topic number 740, "income Taxes" of the FASB Accounting Standards Codification ("Codification") establishes criterion that an individual tax position has to meet for some or all the benefits of that position to be recognized in an entity's financial statements upon initial application, this criterion is applied to all tax positions for which the statute of limitations remains open. Only tax positions that meet the "more-likely-than-not" recognition threshold at the adoption date will be recognized or continue to be recognized. This criterion was adopted by the University on October 1, 2009, and had no impact on the University on October 1, 2009, and had no impact on the University financial statements. The tax years ended 2011, 2012 and 2013 are still open to audit for both federal and District of Columbia purposes. The University has processes presently in place to ensure the maintenance of its tax-exempt status, to identify and report unrelated income, determine its filing and tax obligations in jurisdictions for which it has nexus, and to review other matters that may be considered tax positions.

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As Filed Data -

DLN: 93493038015014

OMB No 1545-0047

2012

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

2012

Employer identification number

Galla	idet University				
		53-0199507		T	
Pa	rt I			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in i other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student addrograms, and scholarships?		2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broads the period of solicitation for students, or during the registration period if it has no solicitation pro that makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain If you need more space use Part II	gram, ın a way			
	please explain 11 you need more space use Part 11		<u>3</u>	Yes	
4	Does the organization maintain the following?		4-	V	
	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	nondia ariminatani	4a	Yes	\vdash
	basis?	·	4b	Yes	
•	Copies of all catalogues, brochures, announcements, and other written communications to the pu with student admissions, programs, and scholarships?	blic dealing	4c	Yes	
C	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes	<u> </u>
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?				No
ŀ	Admissions policies?		5b		No
	: Employment of faculty or administrative staff?		5c		No
	Scholarships or other financial assistance?		<u>5d</u>		No
	Educational policies?		5e		No
	Use of facilities?		5f		No.
	Athletic programs?		5g 		No
ľ	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		<u> 5h</u> -		No.
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?		6a	Yes	NI -
	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	6b		No
-	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No." explain on Pa		,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	1

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
Nondiscriminatory Policy	Line 3	ADVERTISEMENTS IN THE UNIVERSITY'S CATALOGUES, WEBSITE, AND BROCHURES DISCLOSE PROGRAMS OFFERED INCLUDING A SUMMARY OF STATEMENT ON THE NON-DISCRIMINATORY POLICY EMPLOYMENT ADVERTISEMENTS ALSO PUBLICIZE The SCHOOL'S NON-DISCRIMINATORY POLICY
Financial Aid from Government Agencies	Line 6a	GALLAUDET UNIVERSITY RECEIVES STUDENT FINANCIAL ASSISTANCE FROM THE U.S. DEPARTMENT OF EDUCATION, OFFICE OF POST-SECONDARY EDUCATION ASSISTANCE PROGRAMS ARE AS FOLLOWS FEDERAL PELL GRANT PROGRAM FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT PROGRAM FEDERAL WORK STUDY PROGRAM PERKINS LOAN PROGRAM FEDERAL MORK STUDY PROGRAM PERKINS LOAN PROGRAM FEDERAL MORK STUDY PROGRAM PERKINS LOAN PROGRAM FEDERAL WORK STUDY PROGRAM PERKINS LOAN PROGRAM FEDERAL MORK STUDY PROGRAM PERKINS LOAN

Schedule E (Form 990 or 990-EZ) 2012

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As Filed Data -

DLN: 93493038015014

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

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

Open to Public

Internal Revenue Service				. 10 . 0	Inspection		
	e of the organization udet University					Employer iden	tification number
	,					53-0199507	
Pai			n on Activition of IV, line 14b.		ne United States. Co	omplete if the organi	zation answered
1					s to substantiate the a		
		_	•	=	stance, and the selecte		
2	For grantmakers. the United States.	Describe ir	n Part V the or	ganızatıon's p	rocedures for monitori	ng the use of grant f	unds outside
3	Activites per Region	(The follow	ing Part I, line 3	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	
	Central America and Caribbean	the			Investments		41,497,23
	Sub-total Total from continuat	uon shoots					41,497,231
	to Part I Totals (add lines 3a						41,497,23

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)
							appraisal, other)

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)	<u> ~</u>	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	▽	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)	굣	Yes	Г	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)	굣	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	▽	Yes	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	✓	No

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		Evaluation
Identifier	ReturnReference	Explanation
Schedule F, Part IV , Line 1		The University invests in domestic and foreign limited partnerships that may own an interest in a foreign corporation, passive foreign investment company, or foreign partnership. To the extent that those investments resulted in transfers of property that exceeded the applicable filing thresholds, the Forms 926, 5471, 8621 and 8865 accompanied the filing of the University's Form 990-T

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Schedule I

(Form 990)

DLN: 93493038015014

2012

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service	Соттріє		Open to Public Inspection				
Name of the organization Gallaudet University						Employer identificat	ion number
<u> </u>						53-0199507	
Part I General Information							
Does the organization maintain the selection criteria used to a							✓ Yes ✓
2 Describe in Part IV the organiz							
				United States. Com ort II can be duplicated			Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	• •
		_					
Enter total number of section 5Enter total number of other org							

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 23
	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) Scholarships and Awards	1478	8,372,920			
Part IV Sunniemental Informa	tion				

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
SCHEDULE I		THE UNIVERSITY OFFERS A WIDE VARIETY OF MERIT AND NEED-BASED SCHOLA'SHIPS MERIT AWARDS ARE GIVEN IN RECOGNITION OF VARIOUS ACHIEVEMENTS AS SPECIFIED IN DONORS' CORRESPONDENCE AND DOCUMENTS NEED-BASED AWARDS ARE PROVIDED BASED ON THE INCOME LEVEL AVAILABILITY OF AWARDS OFFERED ELSEWHERE AND OTHER SIMILAR STANDARDS THE UNIVERSITY ONLY MAKES SCHOLARSHIP GRANTS THAT HELP OFFSET THE TUITION OF THE STUDENTS THE GRANTS ARE DIRECTLY CREDITED AGAINST THE APPLICABLE STUDENT ACCOUNT WHICH ASSURES PROPER USE OF THE GRANT THE AMOUNT OF THE GRANT IS ADJUSTED, AS NECESSARY, BASED ON ANY SUBSEQUENT CHANGES AFFECTING THE STUDENT'S ORIGINAL ELIGIBILITY

DLN: 93493038015014

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► 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	οt	the	orga	nıza	tion
Gallaud	et l	Jnive	ersity		

Employer identification number

53-0199507

Pa	TTI Questions Regarding Compensation						
					Yes	No	
1a	Check the appropriate box(es) if the organization provi 990, Part VII, Section A, line 1a Complete Part III to						
	First-class or charter travel		Housing allowance or residence for personal use				
	Travel for companions	Ė	Payments for business use of personal residence				
	Tax idemnification and gross-up payments	Ţ.					
	Discretionary spending account		Personal services (e g , maid, chauffeur, chef)				
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain						
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,						
	directors, trustees, and the CEO/Executive Director,	regard	ding the items checked in line 1a?	2	Yes		
3	Indicate which, if any, of the following the filing organizorganization's CEO/Executive Director Check all that used by a related organization to establish compensation	t appl	y Do not check any boxes for methods				
	Compensation committee		Written employment contract				
	✓ Independent compensation consultant	<u>'</u>					
	Form 990 of other organizations		Approval by the board or compensation committee				
		·					
4	During the year, did any person listed in Form 990, Pa or a related organization	rt VII	I, Section A, line 1a with respect to the filing organization				
а	Receive a severance payment or change-of-control payment?						
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?						
С	c Participate in, or receive payment from, an equity-based compensation arrangement?						
	If "Yes" to any of lines 4a-c, list the persons and prov	ıde th	ne 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, li compensation contingent on the revenues of	ne 1a	, did the organization pay or accrue any				
а	The organization?			5a		Νo	
b	b Any related organization?						
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in Form 990, Part VII, Section A, li compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue any				
а	The organization?			6a		Νo	
b	b Any related organization?						
	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						
8	Were any amounts reported in Form 990, Part VII, pa						
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III						
						Νo	
9	If "Yes" to line 8, did the organization also follow the r section 53 $4958-6(c)$?	ebutt	able presumption procedure described in Regulations	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	f W-2 and/or 1099-MI:	SC 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

Also complete this part for any addition	· · · · · · · · · · · · · · · · · · ·	
Identifier	Return Reference	Explanation
Form 990, Schedule J		Part I, Line 1B The benefits summarized in part I, Line 1A, including health or social club dues are only available for the President. Amounts that are considered taxable are included as reportable compensation on his W-2 since these benefits are limited to the President, a written policy for these benefits is not considered necessary as these benefits are defined in the president's contract. However, Gallaudet has written policies specific to general travel including procedures for prior approval and payment/reimbursement of travel expenses. form 990, schedule J, part I, line 7 THE PRESIDENT WAS AWARDED bonuses IN CALENDAR YEAR 2012 BASED ON HIS PERFORMANCE AND PURSUANT TO HIS CONTRACT. THE BONUSes were DETERMINED BY THE BOARD OF TRUSTEES IN CONSULTATION WITH LEGAL COUNSEL AND AN INDEPENDENT EXPERT ON executive compensation form 990, schedule J, part II Column B(ii) for T. Alan Hurwitz includes \$80,000 paid to the President relating to a bonus and incentive compensation. Column D for T. Alan Hurwitz. The President is required to live on campus as part of his employment contract. This column includes \$60,000 representing the estimated rental value of the campus residence. This column also includes certain business membership dues and employer paid health benefits for Edward Bosso. As a condition of his employment, Edward Bosso, VP - Clerc Center, is required to live on campus. This column includes \$24,000 representing the estimated rental value of the residence as well as employer paid health benefits form 990, schedule J, part II, line 8 Mr. Weiner receives compensation from Gallaudet University for services rendered to the Gallaudet University Foundation. While the University has allocated a portion of Mr. Weiner's salary to the Foundation, those costs were incurred in fiscal 2013. For Part VII compensation disclosure purposes, wages are reported on a calendar year basis (Form W-2). No wages were allocated to Mr. Weiner in the short period 12/18/2012 to 12/31/2012 calendar year.

Schedule J (Form 990) 2012

Software ID: Software Version:

EIN: 53-0199507

Name: Gallaudet University

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

Form 990, Schedule J, Pari	<u>. 11 - Officers, D</u>	irectors, irustees, k	ey employees, and	<u>a nignest compen</u>	sated Employees		
(A) Name	(B) Breakdo	own of W-2 and/or 1099-MI	ISC 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
	(I) 372, II)	,929 80,000	٥ ا	63,196	81,296	5 597,421 0	
	(ı) 352, ıı)	,930	851	25,332	20,083	399,196 0	
	(ı) 259, ıı)	019		45,828	23,881	. 328,728 0	
	(ı) 207, ıı)	471		35,567	32,862	275,900	
	(ı) 190, ıı)	,336	1,109	34,927	27,854	254,226 0	
	(ı) 194, ıı)	,739 0	43,691	13,682	1,403	253,515 0	
	(ı) 197, ıı)	194		25,635	2,275	5 225,104 0	
	(ı) 195, ıı)	054		29,556	27,092	2 251,702	
	(ı) 174, ıı)	263	113	22,770	7,762	2 204,908	
	(ı) 170, ıı)	,639		29,763	23,388	3 223,790 0	
	(ı) 218, ıı)	,706 0		37,423	8,632	2 264,761	
	(ı) 195, ıı)	,049		34,646	21,760	251,455 0	
I .	(I) 215, II)	,198 0		35,181	32,756	283,135 0	
	(ı) 192, ıı)	,846 0		14,020	16,245	223,111	
Lynne Murray (((ı) 199,	,252		33,799	1,797	234,848	

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(Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

OMB No 1545-0047

DLN: 93493038015014

Open to Public

► 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.

Inspection

Name	of the organization									Emp	loyer id	lentifica	ation nun	nber	
Galla	udet University									53-	01995	07			
Pai	rt I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	f) Descriptio	n of purpose	(g) Def	eased	beh	On alf of uer		Pool ncing
										Yes	No	Yes	No Yes		No
A	District of Columbia	53-6001131	25484JBZ2	05-25-2011	39,42	0,421	Camı	pus Improve	ments		X		x		Х
Par	t III Proceeds			•					•						
					<u> </u>	4		E	3		С			D	
1	A mount of bonds retired					705,									
	A mount of bonds legally defea	ised ————————————————————————————————————					0								
3	Total proceeds of issue Gross proceeds in reserve funds					39,425,									
4	Capitalized interest from proceeds					0									
5	· · · · · · · · · · · · · · · · · · ·			2,730,012											
6	Proceeds in refunding escrows					0									
7	Issuance costs from proceeds						0								
8	Credit enhancement from prod						0								
9	Working capital expenditures				0										
10	Capital expenditures from pro	ceeds			30,775,522										
11	Other spent proceeds				200,000										
12	O ther unspent proceeds					5,719,	,594								
13	Year of substantial completion	n 			_	1	i	Ī							
	Ware that have decreased as a second				Yes	No		Yes	No	Yes	N	lo	Yes	_	No
14	Were the bonds issued as par					Х									
15	Were the bonds issued as par		nding issue?			Х									
16	Has the final allocation of pro	ceeds been made?				Х									
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?			ort the final	×										
Par	Private Business U	Jse													
						A		E			С			D	
	Was the organization a partne	r in a narthership o	ra member of an II	IC which owned	Yes	No		Yes	No	Yes	l N	lo	Yes	+	No
1	property financed by tax-exer		i a member of all Li	LC, Willell OWITED		Х									

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

Χ

Sche	dule K (Form 990) 2012									Page 2
Par	Private Business Use (Continued)		,							
				A		3		C		D No.
3a	Are there any management or service contracts that may result in private of bond-financed property?	business use	Yes	No	Yes	No	Yes	No	Yes	No
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?		х							
С	Are there any research agreements that may result in private business us financed property?	e of bond-	Х							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper		Х							
4	Enter the percentage of financed property used in a private business use be other than a section $501(c)(3)$ organization or a state or local government			0 %		%		9/0		%
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe (c)(3) organization, or a state or local government			%		%		%		%
6	Total of lines 4 and 5			%		%		%		%
7	Does the bond issue meet the private security or payment test?		Х							
8a	Has there been a sale or disposition of any of the bond financed property to nongovernmental person other than a 501(c)(3) organization since the bor issued?			х						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?			Х						
9	Has the organization established written procedures to ensure that all non- bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		×							
Dar	t IV Arbitrage									
ren	Aibitage	Α			В		С		D	
		Yes	No	Yes	No	Yes		No	Yes	No
1	Has the issuer filed Form 8038-T?		Х							
2	If "No" to line 1, did the following apply?				.	· · · · · · · · · · · · · · · · · · ·				
а	Rebate not due yet?	×								
b	Exception to rebate?		Х							
С	No rebate due?	Х								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed			•	•	•	•	•		
3	Is the bond issue a variable rate issue?		Х							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х							
b	Name of provider	0								
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was a hedge terminated?									
		•		•	•					

Pai	rt IV Arbitrage (Continued)									
			А	i	В	}	С		D	
			Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in contract (GIC)?	n a guaranteed investment		Х						
b	Name of provider		0							
С	Term of GIC									
d	Was the regulatory safe harbor for value of the GIC satisfied?	or establishing the fair market								
6	Were any gross proceeds invest period?	ed beyond an available temporary		X						
7	Has the organization established the requirements of section 148		Х							
Pa	rt V Procedures To Unde	rtake Corrective Action								
			Α		В	3	c		D	
			Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established that violations of federal tax requ and corrected through the volunt self-remediation is not available	urements are timely identified tary closing agreement program if	X							
P	art VI Supplemental Info	ormation. Complete this part to	provide additior	nal informati	on for respo	nses to ques	tions on Sch	edule K (see	: instructions)	
	Ident if ier	Return Reference				Explan	ation			
form	1990, schedule k, part Iv, line 2a		THE UNIVERSIT			AN ARBITRAC	GE CALCULAT	ION AS THE	BOND HAS NO	OT REACHED

Part VI Supplemental Info	ormation. Complete this part to	provide additional information for responses to questions on Schedule K (see instructions).
Identifier	Return Reference	Explanation
form 990, schedule k, part Iv, line 2a		THE UNIVERSITY HAS NOT UNDERGONE AN ARBITRAGE CALCULATION AS THE BOND HAS NOT REACHED ITS FIFTH YEAR ANNIVERSARY DATE
form 990, schedule k, part ıv, lıne 3	0	
Form 990, schedule K, Part I		The District of Columbia issued \$40,000,000 series 2011 tax-exempt revenue bonds on behalf of Gallaudet University The bonds were sold to finance the building of new residence halls, to renovate and improve heating and lighting systems and controls on campus buildings, to upgrade technology infrastructure, and to renovate resident halls, classroom buildings and other campus facilities

Schedule K (Form 990) 2012

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OMB No 1545-0047

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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 Gallaudet University

Employer identification number

5-	Tanana (Dana)			L	53-0199507			
Pa	rt I Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(Method of c noncash contrib	letermi	_	ts
				1g				
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
_	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	3	248,569	Fair Market Value			
	Securities—Closely held stock .							
.1	Securities—Partnership, LLC, or trust interests							
2	Securities—Miscellaneous							
	Qualified conservation							
	contribution—Historic structures							
4	Qualified conservation contribution—Other							
5	Real estate—Residential .							
6	Real estate—Commercial							
7	Real estate—O ther							
8	Collectibles							
9	Food inventory							
0	Drugs and medical supplies .							
1	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
4	Archeological artifacts							
5	O ther ► ()							
6	O ther ► ()							
7	O ther ►()							
8	O ther ► ()			<u> </u>				
9	Number of Forms 8283 received for which the organization comple				29			
							Yes	No
30a	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	d to be used			
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangem	ent in Part 1	II					
1	Does the organization have a gi	ft acceptand	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	e third parti	ies or related organizations	to solicit, process, or sell i	noncash			
	contributions?					32a	Yes	
b	If "Yes," describe in Part II							
33	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.

number of items received, of a combination of both. Also complete this part for any additional informa-									
Identifier	Return Reference	Explanation							
Schedule M		The number reported as items received for securities contributions represents the total number of contributions received (not the total number of securities sold)							
Schedule M, Line 32a		To the extent that the University receives donations of securities, its investment broker/manager is tasked with selling those securities							

Schedule M (Form 990) (2012)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Name of the organization Gallaudet University

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Employer identification number

53-0199507

ldentifier	Return Reference	Explanation
Policies	Part VI, Section B	Line 11- Process used to review form 990. The Form 990 was prepared by an independent accounting firm in conjunction with the organization's financial department. The University's Board of Trustees charges the audit committee with the responsibility for overseeing the IRS Form 990 and its supplemental schedules prior to filing. A copy of the draft Form 990 was circulated to the full Audit Committee for discussion and comment. The Final signed Form 990 is distributed to the full Board of Trustees before the return is ultimately filed with the IRS. Line 12- Enforcement of conflict of interest policy. Gallaudet University's conflict of interest policy applies to all members of the Board of Trustees and all administrators, faculty, teachers, and staff of the University. All Board members must disclose, at the earliest practicable time, any possible conflict of interest to the Secretary of the Board and the chairman of the audit committee, information about possible conflicts of interest affecting Gallaudet University, including interests of immediate family members and organizations in which the Board member has a significant management function or a significant ownership interest if a Board member is uncertain whether a conflict of interest exists, the matter is presented to the audit committee and then a determination is requested by the Board. These matters will be resolved by majority vote the Board member whose conflict of interest is under consideration is excluded from participation. The disclosure of the conflict and the related deliberation and voting results are documented in the mnutes of the meeting. Administrators, faculty, teachers, and staff also sign a "Conflict of Interest Policy Compliance Statement" annually indicating that they understand their fuduciary responsibility to the University and reaffirming their commitment to fully disclose any potential conflict of interest which may exist. Disclosures of any potential conflict of interest are made promity in writing to the President of the Univers
	Section C	website, www gallaudet edu Board of Trustees, Audited Financial Statements, IRS Form 990, Conflict of Interest Policy, Whistleblower Policy, Document Retention Policy and Current Bylaws. This information is also available upon request to Paul Kelly, VP-Administration & Finance.
Other Program Services	Part III, Line 4D	Gallaudet University's research, development and outreach agenda is aimed at advancing knowledge and practice for deaf and hard of hearing people and all humanity. Research areas of major importance include visual language and learning, hearing and speech science, technology access, genetics, American Sign. Language/English bilingualism, and deaf life. Integrating research and practice to benefit deaf and hard of hearing pre-kindergarten-12th grade students with special attention to diversity, equity, and traditionally underrepresented group achievement is a critically important focus. Gallaudet University's public service activities provide educational opportunities to adults who are deaf. Services include professional trainings, a variety of on-campus summer programs, and extension programs at other schools. In addition to revenue reported in Part III as being sourced to specifically identifiable programs, the University receives significant amounts of federal funding in the form of appropriations, grants, and contracts. These revenues have been reported as program service revenue in Part VIII on the Form 990 but the appropriations and some of the grants have not been allocated in Part III since these revenues not attributable to any specific program undertaken by the University.
Form 990, Part V, Line 7A & 7B		The University doesn't traditionally hold special events where a donor receives goods or services in exchange for his or her donation, however, the University does operate small clubs open to the public through contributions and membership fees where a donor may receive de minimis benefits. Accordingly, the University is responding yes to questions 7A & 7B in Part V of the Form 990.
Reconciliation of Net Assets	Form 990, Part XI, Line 9	Change in value of split interest agreements (\$61,140)

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DLN: 93493038015014

OMB No 1545-0047

Employer identification number

53-0199507

2012

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service

Gallaudet University

Name of the organization

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Part I Identification of Disregarded Entities (Comp	lete if the organizatio	n answered "Yes" t		t IV, line 33.)			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income E	(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	izations (Complete in the tax year.)	_		to Form 990, Pai	rt IV, line 34 because it	had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) n Public charity sta (if section 501(c)(tus (f) Direct controlling entity	Section (13) co	ntrolle ity?
(1) GALLAUDET UNIVERSITY FOUNDATION	SUPPORT ORG	DC	501(C)(3)	11A	GALLAUDET	Yes	No
800 FLORIDA AVENUE NE							
WASHINGTON, DC 200023695 46-1643010							
For Paperwork Reduction Act Notice, see the Instructions for Form 99	0.	Cat No 501	35Y		Schedule R (Forn	n 990) 2	012

(a) Name, address, and EIN o related organization	f	(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant Income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo	ration is a cor	or Trust (poration or	Complete if trust during	the organı the tax ye	zatıon ar ar.)	iswere	d "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
											Yes		No

Yes No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule									
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more r	elated organizations lis	sted in Parts II-IV?						
а	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity								
b	Gift, grant, or capital contribution to related organization(s)								
C	c Gift, grant, or capital contribution from related organization(s)								
d									
e	Loans or loan guarantees by related organization(s)				1e		No		
f	Dividends from related organization(s)				1 f		No		
g	Sale of assets to related organization(s)				1g		No		
h	h Purchase of assets from related organization(s)								
i	i Exchange of assets with related organization(s)								
j	j Lease of facilities, equipment, or other assets to related organization(s)								
k	Lease of facilities, equipment, or other assets from related organization(s)				1k 1l		No		
l Performance of services or membership or fundraising solicitations for related organization(s)									
m Performance of services or membership or fundraising solicitations by related organization(s)									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
• Sharing of paid employees with related organization(s)									
р	Reimbursement paid to related organization(s) for expenses				1p	Yes			
q	Reimbursement paid by related organization(s) for expenses				1q		No		
r	Other transfer of cash or property to related organization(s)				1r		No		
s Other transfer of cash or property from related organization(s)							No		
_	o the standard or property from terated organization (e)								
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	e this line, including co	vered relationships	and transaction thresholds					
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount i	nvolved	d		
1) ga	allaudet foundation	d d	163,573	cost					
2) ga	illaudet foundation	p	126,760	cost					

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization See instructions re	garding exclu	sion for ce		nent	partnerships				`	,		-	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

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Software Version:

EIN: 53-0199507

Name: Gallaudet University

Schedule R (Form 990) 2012

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Part VII Supplemental Information

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