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DLN: 93493127004035

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		applicable	endar year, or tax year beginning C Name of organization University of Saint Joseph	g 07-01-2013 , 2013, and ending 06-	30-2014	D Emplo	yer iden	tification number
Add	lress cl	hange	Doing Business As			06-0	646829	
	me cha	_	Doing Business 75					
	ial retu		Number and street (or P O box if m 1678 ASYLUM AVENUE	all is not delivered to street address) Room/s	suite	E Teleph	one numb	er
	mınate		Suite			(860)	232-45	571
		return	City or town, state or province, coun WEST HARTFORD, CT 061172791	ntry, and ZIP or foreign postal code		,		
App	olicatio	n pending				G Gross	receipts \$	81,396,735
			F Name and address of prin PAMELA TROTMAN REID P			s this a group ubordinates?		or □ Yes 🔽 No
			1678 ASYLUM AVENUE			aboramates.		1 1651 110
			WEST HARTFORD,CT 061:	1/2/91		re all subord	ınates	┌ Yes ┌ No
I Ta	x-exen	npt status	✓ 501(c)(3)	nsert no) 4947(a)(1) or 527	_		nalıst (see instructions)
	ebsit	e:► WV	W USJ EDU			Group evemn	tion num	ber ► 0928
				Tou h	1			
	n of or rt I		Corporation Trust Association	of formation 19	925 M S	State of legal domicile CT		
ГС			escribe the organization's missio					
Governance		WOMEN		SLE MAINTAINING A STRONG COM				
	_						1 - 1	
Activities &	l			ing body (Part VI, line 1a)			3 4	28
⋚	l		· -	of the governing body (Part VI, line 1 calendar year 2013 (Part V, line 2a)	-		5	1,389
a ब	l			ecessary)			6	100
			•	art VIII, column (C), line 12			7a	125,275
	Ь	Net unre	lated business taxable income fr	rom Form 990-T, line 34			7b	-144,926
						Prior Year		Current Year
a.	8	Contr	butions and grants (Part VIII, lir	ne 1h)		7,855,011		8,301,842
Ravenue	9	_		ne 2g)		59,955,		65,055,019
H ₂ V	10 11		· · · · · · · · · · · · · · · · · · ·	(A), lines 3, 4, and 7d)	-	890,		1,209,122
	12			lines 5, 6d, 8c, 9c, 10c, and 11e) (must equal Part VIII, column (A), li	ne ——	495,	940	367,146
		12) .		<u> </u>		69,197,		74,933,129
	13			IX, column (A), lines 1-3)		13,625,		13,970,000
	14			X, column (A), line 4)			0	0
\$	15	5-10		e benefits (Part IX, column (A), lines		37,077,	168	39,187,018
Expenses	16a	Profes	sional fundraising fees (Part IX,	column (A), line 11e)		60,	000	137,000
ਡੌ	Ь	Total fu	ındraısıng expenses (Part IX, column (D)	, line 25) 🕨 1,815,645				
_	17			ınes 11a–11d, 11f–24e)		17,481,		18,773,854
	18			st equal Part IX, column (A), line 25)	-	68,244,		72,067,872
- op	19	Reven	ue less expenses. Subtract line :	18 from line 12		953, Ining of Curre		2,865,257
ស៊ី ភូមិ						Year		End of Year
Not Assets or Fund Balances	20	Total	assets (Part X, line 16)			66,025,	480	78,123,304
2 E	21		liabilities (Part X, line 26)			30,496,		38,406,304
	22			line 21 from line 20		35,529,	000	39,717,000
Unde my ki prepa	nowle irer h	alties of dge and as any k	belief, it is true, correct, and com nowledge	nmined this return, including accompa iplete Declaration of preparer (other				
Here	e		VN M HARRINGTON VP FINANCE & ADM	INISTRATION				
		<u> </u>	Print/Type preparer's name	Preparer's signature	Date	Check I If	PTIN	
Paid	ł	1	Mary-Evelyn Antonetti			self-employed	P004318	362
	a pare		Firm's name F KPMG LLP			Firm's EIN 🟲		
Use	•		Firm's address 🕨 One Financial Plaza			Phone no (860)) 232-457	71

Hartford, CT 061032608

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

✓ Yes No

orm	990 (2	(2013)	Page 2
Pari	1111	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	
1	Briefl	fly describe the organization's mission	
RIGO STRO GROV INTE JNIV FRAD ENCO SPIR	ROUS NG CO WTH O GRITY ERSIT OITION OURAC	ERSITY OF SAINT JOSEPH, FOUNDED BY THE SISTERS OF MERCY IN THE ROMAN CATHOLIC TRADITION, SLIBERAL ARTS AND PROFESSIONAL EDUCATION FOR A DIVERSE STUDENT POPULATION WHILE MAINT COMMITMENT TO DEVELOPING THE POTENTIAL OF WOMEN THE UNIVERSITY IS A COMMUNITY WHICH POF THE WHOLE PERSON IN A CARING ENVIRONMENT THAT ENCOURAGES STRONG ETHICAL VALUES, PER Y, AND A SENSE OF RESPONSIBILITY TO THE NEEDS OF SOCIETY CORE VALUES *CATHOLIC IDENTITY TY OF SAINT JOSEPH IS GROUNDED IN ITS HERITAGE AS A CATHOLIC INSTITUTION, EXPRESSING THE OF IN AN ECUMENICAL AND CRITICAL MANNER *COMMITMENT TO WOMEN* THE UNIVERSITY OF SAINT GES, INSPIRES, AND CHALLENGES EACH WOMAN TO DEVELOP EVERY ASPECT OF HER PERSONHOOD, IN L, SOCIAL, EMOTIONAL, AND PHYSICAL *COMPASSIONATE SERVICE* THE UNIVERSITY OF SAINT JOSE S, SUPPORTS, AND FACILITATES CARING SERVICE AS AN INTEGRAL PART O	AINING A ROMOTES THE RSONAL * THE CATHOLIC JOSEPH TELLECTUAL,
2	the pr	he organization undertake any significant program services during the year which were not listed on rior Form 990 or 990-EZ?	′es 🔽 No
3	servic	he organization cease conducting, or make significant changes in how it conducts, any program ces?	fes √ No
4	Descr expen	es, describe these changes on schedule O ribe the organization's program service accomplishments for each of its three largest program services, as measur nses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to otal expenses, and revenue, if any, for each program service reported	
4a	(Code	le) (Expenses \$ 45,364,902 including grants of \$ 13,970,000) (Revenue \$ 54,61	51,885)
	MASTI VALUE CLASS CONF HAS A EDUC DOWN	LEGE AND MASTERS/DOCTORAL PROGRAMS THE UNIVERSITY OF SAINT JOSEPH, WHICH OFFERS OUTSTANDING EDUCATION VALUE IN UNDE FERS, AND DOCTORAL PROGRAMS, IS LOCATED IN WEST HARTFORD, CONNECTICUT ENHANCED BY THE CATHOLIC INTELLECTUAL TRADITION JUST OF THE SISTERS OF MERCY, THE UNIVERSITY ENCOURAGES STUDENTS TO THRIVE IN A CULTURE OF ACHIEVEMENT AND COLLABORATION JUST OF THE SISTERS OF MERCY, THE UNIVERSITY PROVIDES A VALUES-CENTERED EDUCATION IN AN ENVIRONMENT THAT FOSTERS LEAD FIDENCE, AND CREATIVITY IN ADDITION TO THE UNDERGRADUATE WOMEN'S COLLEGE WITH 877 STUDENTS ENROLLED, THE UNIVERSITY OF A CO-EDUCATIONAL GRADUATE AND PROFESSIONAL STUDIES PROGRAM OFFERING MASTER'S DEGREES AND CERTIFICATES TO 1,367 STUDICATIONAL WEEKEND PROGRAM SERVING 173 ADULT LEARNERS PURSUING THEIR BACCALAUREATE DEGREES, AND A SCHOOL OF PHARMACY WITHOWN HARTFORD, CONNECTICUT OFFERING A UNIQUE THREE CALENDAR YEAR CO-EDUCATIONAL DOCTORAL DEGREE (PHARM D) PROC RMACY THE SCHOOL OF PHARMACY'S INAUGURAL CLASS BEGAN IN AUGUST, 2011, WITH 67 STUDENTS, IN 2013 THE SCHOOL HAD 223 STU	ON AND THE ON WITH SMALL ERSHIP, OF SAINT JOSEPH ENTS, A CO- ', LOCATED IN GRAM IN
4b	(Code	le) (Expenses \$ 8,970,000 including grants of \$) (Revenue \$ 10,40	3,134)
	MODE A STA PROG SAINT CENT	EL SCHOOLS THE UNIVERSITY IS HOME TO TWO MODEL SCHOOLS THE GENGRAS CENTER AND THE SCHOOL FOR YOUNG CHILDREN THE GATE-APPROVED PRIVATE SPECIAL EDUCATION FACILITY THAT PROVIDES HIGHLY STRUCTURED, INTENSIVE AND SELF-CONTAINED SPECIAL EGRAMS FOR ELEMENTARY, MIDDLE AND HIGH SCHOOL STUDENTS IN 2013 IT SERVED 122 STUDENTS FROM SURROUNDING COMMUNITIES T JOSEPH STUDENTS FULFILL REQUIRED CLASSES IN THE FIELDS OF SPECIAL EDUCATION, NURSING, SOCIAL WORK, COUNSELING, AND NUTER THE SCHOOL FOR YOUNG CHILDREN IS A NATIONALLY-ACCREDITED PRESCHOOL WHICH HAS BEEN SERVING CHILDREN SINCE 1936, INDUILED 115 STUDENTS IT SERVES AS A TRAINING PROGRAM FOR UNIVERSITY STUDENTS PURSUING CAREERS IN EARLY CHILDHOOD EDUCA	ENGRAS CENTER IS DUCATION UNIVERSITY OF TRITION AT THE N 2013 IT
4 c	(Code	le) (Expenses \$ including grants of \$) (Revenue \$)

(Expenses \$
4e Total program service expenses ▶

4d

Other program services (Describe in Schedule O)

including grants of \$
54,334,902

) (Revenue \$

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
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		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	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	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government 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 or 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 "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	Yes	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, 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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part		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	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	Yes	
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? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

G I	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	•	Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 189		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
ı	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	7c		N
	file Form 8282?	70		IN
	11 Yes, indicate the number of Forms 8282 med during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter	_ 		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	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)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	 		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 7.20 to report these payments? If "No " provide an explanation in Schedule O	14h		

Form 990 (2013) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management **1a** Enter the number of voting members of the governing body at the end of the tax 1a 28 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 Enter the number of voting members included in line 1a, above, who are 27 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any 2 Νo Did the organization delegate control over management duties customarily performed by or under the direct 3 Nο supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was 4 Νo Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 Νo Yes 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or 7a Yes Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Yes Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Yes **b** Each committee with authority to act on behalf of the governing body? 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 Νo Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) No 10a Did the organization have local chapters, branches, or affiliates? 10a Νo **b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a Yes **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Yes 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12c** Yes 13 Yes 14 Did the organization have a written document retention and destruction policy? . 14 Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Yes 15b Νo If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) **16a** Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b

Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed ►AK, CO, DC, KY, ME, MD, MA, MI, NH, NJ, OK, OR, SC, WA, WI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ►WILLIAM HAWKINS CONTROLLER 1678 ASYLUM AVENUE
 WEST HARTFORD,CT 06117 (860) 231-5405

Form 990	(2013)	
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г	а	ч	_	•

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	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

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

	(A) Name and Title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) (D) Reportable compensation from the organization (W- 2/1099-MISC) (E) Reportable compensation from related organization (W- 2/1099-MISC)						/-	(F) Estimated amount of othe compensation from the organization an				
		for related organizations below dotted line)	Individual trustae or director	Former Former Key employee Institutional Trustee) c	organizati relate organiza	ed						
												1		
												_		
												4		
												4		
												-		
												_		
												_		
1b c	Sub-Total	s to Part VII. S	 ection A	٠.	•		_	*						
d	Total (add lines 1b and 1c) .				٠.	٠.		۰		1,468,158		0		258,703
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	an			
													Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>				tee, •	key •	emplo	yee, •	or highes	t compen	sated employee	3		No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.									4	Yes	_			
5		on listed on line 1a receive or accrue compensation from any unrelated organization or individual for lered to the organization? If "Yes," complete Schedule J for such person							5		No			
50	ction B. Independent Co	ntractors												
1	Complete this table for your five	/e highest comp												
	compensation from the organiz		mpens	ation	for	the c	alend	arye	ar ending	with or wi	thin the organizat	ion's	tax year (C	
	(A) (B) Name and business address Description of services											Comper		

(A) Name and business address	(B) Description of services	(C) Compensation
Bon Appetit co Compass Group USA, 2400 Yorkmont Rd Charlotte NC 28217	Food Services	1,548,655
Sodexo Operations LLC, 9801 Washington Blvd Gaithersburg MD 20878	Facilities Mgmt	1,042,475
K-12 Teachers Alliance, 20624 Abbey Woods Ct North Frankfort IL 60423	Marketing & Admin	923,650
JCJ Architecture, 38 Prospect St Hartford CT 06103	Architectural Svcs	362,896
Automatic Data Processing Inc, 1 ADP Blvd Roseland NJ 07068	Payroll Processing	183,490

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►9

Form 99								Page 9
Part V	/++·	Statement o Check if Schedu	o f Revenue ule O contains a respon	se or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
×Ψ	1a	Federated cam	paigns 1a					
ant	ь	Membership du	ies 1b					
Gifts, Grants ilar Amounts	С	Fundraising eve	ents 1c	197,861				
iffs ar /	d	Related organiz	zations 1d					
°,e	е	Government grants	s (contributions) 1e	3,085,518				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	5,018,463				
ntrib d Ot	g	Noncash contribution 1a-1f \$	ons included in lines	169,147				
<u>S</u>	h	Total. Add lines	s 1 a - 1 f	· · · •	8,301,842			
<u> </u>				Business Code				
Ke II	2a	Tuition and fees		611710	49,914,764	49,914,764		
<u>8</u>	Ь	Residence & Dining	g 	721000	4,477,129	4,477,129		
ž.	C	Sales & Services		611710	10,548,310	10,548,310	444.046	
Š	d e	Fitness Center Rev	/enue	713940	114,816		114,816	
Program Serwoe Revenue	f	All other progra	am service revenue					
کّ	g	Total. Add lines	s 2a-2f		65,055,019			
	3		ome (including dividence					165.744
		and other simila	aramounts)	•	465,744			465,744
	4 5	Royalties	stment of tax-exempt bond p	proceeds -	0			
		Royalties :	(ı) Real	(II) Personal				
	6a	Gross rents	141,084	(,				
	ь	Less rental expenses						
	С	Rental income or (loss)	141,084	0				
	d	, ,	me or (loss)		141,084			141,084
		_	(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	7,054,000					
	b	Less cost or other basis and	6,310,622					
	c	sales expenses Gain or (loss)	743,378					
	d		<u> </u>		743,378			743,378
Other Revenue	8a	Ψ	luding 5,861 s reported on line 1c)					
<u>-</u>			a	103,482				
Ě	b		penses b [(loss) from fundraising e	152,984	-49,502			-49,502
•	9a	Gross income f	rom gaming activities ne 19	events p	13,302			13,302
	ь	Less direct ex	a penses b					
	С	Net income or (ا loss) from gamıng actı) -	vities≱-	0			
	10a	Gross sales of returns and allo						
	b	Less cost of a	oods sold b					
			(loss) from sales of inve	entory 🛌	0			
		Miscellaneous	s Revenue	Business Code				
	11a	Commissions		900099	40,915			40,915
	b	Miscellaneous		900099	234,649		10,459	224,190
	c	A.II						
	d	All other revenue Total. Add lines	L					
	e				275,564			
	12	Total revenue.	See Instructions	· · · •	74,933,129	64,940,203	125,275	1,565,809

	Statement of Functional Expenses			laka aaluman (A.)	
section	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All				
D	Check if Schedule O contains a response or note to any line in this		(B)	(c)	<u>l</u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	13,970,000	13,970,000		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	15,57,6,600		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	854,090	218,819	573,297	61,974
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	30,106,265	25,637,999	3,633,074	835,192
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,211,246	1,883,061	266,842	61,343
9	Other employee benefits	3,840,511	3,270,516	463,454	106,541
10	Payroll taxes	2,174,906	1,852,114	262,457	60,335
11	Fees for services (non-employees)				
а	Management	990,347		990,347	
b	Legal	230,592		230,592	
C	Accounting	126,230		126,230	
d	Lobbying	52,000			52,000
e	Professional fundraising services See Part IV, line 17	137,000			137,000
f	Investment management fees	154,872		154,872	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	2,740,613	1,843,615	747,485	149,513
12	Schedule O)	1,009,050	324,438	598,599	86,013
13	Office expenses	573,260	221,585	318,735	32,940
13 14				 	32,940
	Information technology	982,181	17,368	964,813	
15	Royalties	0			
16	Occupancy	2,560,287	1,324,020	1,236,267	
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	282,297	219,792	22,187	40,318
19	Conferences, conventions, and meetings	320,600	301,217	6,655	12,728
20	Interest	743,835	301,217	743,835	12,720
21	Payments to affiliates	0		, 13,033	
 22	Depreciation, depletion, and amortization	3,310,920		3,310,920	
 23	Insurance	335,672		335,672	
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)	333,072		333,072	
а	Food Services	1,407,255	1,407,255		
b	PROGRAM EXPENSES	575,093	575,093		
c	DUES & SUBSCRIPTIONS	555,059	381,282	152,597	21,180
d	SUPPLIES	328,768	298,529	30,239	
е	All other expenses	1,494,923	588,199	748,156	158,568
25	Total functional expenses. Add lines 1 through 24e	72,067,872	54,334,902	15,917,325	1,815,645
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	287,886	1	519,732
	2	Savings and temporary cash investments	21,723	2	64,960
	3	Pledges and grants receivable, net	2,356,657	3	3,265,917
	4	Accounts receivable, net	2,204,000	4	3,353,999
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
s	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		5	0
ŧ.			0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
•	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	536,093	9	635,533
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 79,481,107			
	ь	Less accumulated depreciation 10b 40,680,380	36, 145, 740	10c	38,800,727
	11	Investments—publicly traded securities	22,608,019	11	25,140,683
	12	Investments—other securities See Part IV, line 11	0	12	0
	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	1,865,362	15	6,341,753
	16	Total assets. Add lines 1 through 15 (must equal line 34)	66,025,480	16	78,123,304
	17	Accounts payable and accrued expenses	8,079,831	17	7,613,856
	18	Grants payable	0	18	0
	19	Deferred revenue	3,779,781	19	4,559,235
	20	Tax-exempt bond liabilities	16,766,429	20	24,203,598
φ.	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			
qе		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			/-
		D	1,870,439		2,029,615
	26	Total liabilities. Add lines 17 through 25	30,496,480	26	38,406,304
ري طا		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	15,874,000	27	16,595,000
<u>ଟ</u>	28	Temporarily restricted net assets	6,835,000		9,680,000
<u> </u>	29	Permanently restricted net assets	12,820,000		13,442,000
or Fund Balances	23	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and	12,020,000	23	10,442,000
ō	20	complete lines 30 through 34.		20	
ets	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ą.	32	Retained earnings, endowment, accumulated income, or other funds	25 500 000	32	20 747 000
Ř	33	Total net assets or fund balances	35,529,000		39,717,000
	34	Total liabilities and net assets/fund balances	66,025,480	34	78,123,304

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)				
•	Total revenue (must equal rait viii, column (A), me 12)	1		74,9	33,129
2	Total expenses (must equal Part IX, column (A), line 25)	2		72,0	067,872
3	Revenue less expenses Subtract line 2 from line 1	3			865,257
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
_	<u></u>	4		35,5	29,000
5	Net unrealized gains (losses) on investments	5		2,0	75,743
6	Donated services and use of facilities				
7	Investment expenses	6			
7		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	•			
•	ther changes in nec assets of rana balances (explain in schedule 6)	9		- 7	53,000
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		39,7	717,000
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				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 or	ı		
	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				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	9	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	Yes	

Software ID: **Software Version:**

EIN: 06-0646829

Name: University of Saint Joseph

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

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(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)						(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
PAMELA TROTMAN REID PHD	37 5	х		Х				322,270	0	86,188
PRESIDENT, TRUSTEE LAURA BERRY	1 0									
TRUSTEE		Х						0	0	0
JUDITH A CAREY RSM PHD TRUSTEE	1 0	×						0	0	О
SANDRA BENDER FROMSON PHD TRUSTEE	1 0	х						0	0	0
E CLAYTON GENGRAS JR	1 0	×						0	0	0
TRUSTEE SHEILA W HORAN	1 0									
TRUSTEE		X						0	0	0
ROSEMARY E JEFFRIES RSM PHD TRUSTEE	10	×						0	0	О
WILLIAM T KOSTURKO JD TRUSTEE	1 0	х						0	0	0
PATRICIA LESHANE	1 0	х						0	0	0
TRUSTEE LOIS F LEWIS	1 0	,,								
TRUSTEE MARY A MCCARTHY RSM	1 0	×						0	0	0
TRUSTEE MICHAEL E MCDONOUGH JD	1 0	X				-		0	0	0
TRUSTEE	1.0	×						0	0	0
JEANNE B MEROLA TRUSTEE	1 0	×						0	0	О
LOIS M NESCI	1 0	х						0	0	0
TRUSTEE BREWSTER PERKINS	1 0	х						0	0	0
TRUSTEE PATRICIA J ROONEY RSM	1 0								0	0
TRUSTEE ELAINE M SWEENEY RSM	1 0	X						0	0	0
TRUSTEE		Х						0	0	0
JAMES WAKIM JD TRUSTEE	1 0	×						0	0	0
CONSTANCE K WEAVER TRUSTEE	1 0	х						0	0	0
KATHLEEN D AMATANGELO	1 0	х						0	0	0
TRUSTEE ELIZABETH C BARTON JD	10	Х						0	0	0
TRUSTEE GREGORY A BOYKO JD	1 0	x						0	0	0
TRUSTEE SUZANNE M DELIEE RSM	10	×						0	0	0
TRUSTEE MARTHA S GERVASI	1 0									
TRUSTEE		Х				_		0	0	0
ROBERT KING TRUSTEE	10	x						0	0	0
					•		•		•	

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	ion (dinan on is b dired	ne booth a	ox, u an of 'trus	inless ficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former			related organızatıons
JENNIFER C NIEMANN	1 0	х						0	0	0
TRUSTEE		^						•	ŷ .	•
ELIZABETH RUBINO	1 0	×						0	0	0
TRUSTEE										
JOSEPH J SPALLUTO JD	1 0	х						0	0	0
TRUSTEE										
SHAWN M HARRINGTON VP FINANCE & ADMIN, TREASURER	37 5			х				175,496	0	41,236
MICHELLE KALIS	37 5			х				187,267	0	29,366
PROVOST				^				107,207	O	23,300
JAMES HENKEL ASSOC DEAN, SCHOOL OF PHARM	37 5					х		138,721	0	15,745
DOUGLAS NELSON VP INSTITUTIONAL ADVANCEMENT	37 5					х		161,350	0	18,242
BERTRAM NICHOLAS	37 5					x		131,677	0	16,292
ASST DEAN, SCHOOL OF PHARM										
JOSEPH OFOSU DEAN, SCHOOL OF PHARMACY	37 5					x		227,403	0	25,588
IVAN EDAFIOGHO	37 5							400.0-	_	25.24-
PROFESSOR, SCHOOL OF PHARM						Х		123,974	0	26,046

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DLN: 93493127004035

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name	of	the	organizatio	n
Inivar	ıtv	of Sa	int locanh	

Employer identification number

06-0646829

					1 63	No	163	140	163	140			
015	J-411124			lines 1- 9 above or IRC section (see instructions))	col (i) listed in your governing document? Yes No		suppor	•	in the U			249	P-11
SI) Nam uppor ganiza	ted	(ii) EIN	(iii) Type of organization (described on	(iv) Is organızat col (i) lıs	ion in	(v) Did you the organi in col (i) o	zation	(vi) Is organizat col (i) org	ion in		mon	nount of etary port
h		Provide	the followir	ng information about	the support	ed organızat	tion(s)					•	
			•	lled entity of a perso			above?				11g(i		No
		` '	•	er of a person descri	• •		"				11g(No
				rectly or indirectly og governing body of th	•		•	persons de	scribed in (ii)	11g(Yes	No No
9		followin	g persons?	,	·	, ,		•					T
g			his box Jugust 17, 2	:006, has the organi	zation accei	nted anv diff	or contributi	on from any	of the				Γ
f		section If the o	509(a)(2) rganızatıon	on managers and oth received a written de				-					•
e	Г	the box	that descri Type I I	bes the type of supp Type II cox, I certify that the	orting organ Type II	iization and I - Functior	complete line nally integrate	s 11e throu d d	ugh 11h Type III - N	on-func	tıonal	ly integr	ated
11	Γ			ganized and operated y supported organiza									
10		An orga	nızatıon org	janized and operated	dexclusively	to test for	public safety	See sect io	n 509(a)(4).				
		acquire	d by the org	anızatıon after June	30,1975 S	ee section	509(a)(2). (C	omplete Pa	rt III)				
				oss investment inco	•	-		•	• •				
-	•	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of											
9	<u>'</u>		-				•	-	hutions mem	hershir	fees	and aros	55
7 8	' -	describ	ed ın sect io	it normally receives n 170(b)(1)(A)(vi). described in sectio n	(Complete F	Part II)		J	ental unit or i	rom the	gene	rai public	3
6	_			local government or	=								
	_			A)(iv). (Complete P	•								
5	\sqcap			erated for the benefit	t of a college	e or universi	ty owned or o	perated by	a governmen	tal unıt	descr	ıbed ın	_
4	ı			n organization operat ty, and state	ed in conjun	nction with a	hospital des	cribed in se	ction 170(b)	(1)(A)(iii). Er	nter the	
3				perative hospital se	_								
2	<u> </u>	A scho	ol described	I in section 170(b)(1	.)(A)(ii). (At	ttach Sched	ule E)						
1	<u>'</u>	A Churc	ii, conventi	on of churches, or as	30Clation o	i charches c	icaciibca iii a	ection 170(D)(1)(A)(I).				

Page 2

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning and processes of the part III.)

S	ection A. Public Support	acioni idilo co qui	am, and the		ny prodoc com	<u> </u>	111./	
	endar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	3	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	5,555,503	10,163,000	6,966,937	7,855,011	8,30)1,842	38,842,293
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities							0
3	furnished by a governmental unit to the organization without charge							0
4 5	Total. Add lines 1 through 3 The portion of total contributions	5,555,503	10,163,000	6,966,937	7,855,011	8,30)1,842	38,842,293
5	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							3,868,999
6	(f) Public support. Subtract line 5 from line 4							34,973,294
S	ection B. Total Support	•		,	,			
Cale	endar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201	3	(f) Total
7	A mounts from line 4	5,555,503	10,163,000	6,966,937	7,855,011	8,30	1,842	38,842,293
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	465,799	477,812	639,023	608,400	60	6,828	2,797,862
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	10,081	0	0		0	10,081
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	68,902	104,919	45,902	403,928	26	5,105	888,756
11	Total support (Add lines 7 through 10)							42,538,992
12	Gross receipts from related activiti	es, etc (see insti	ructions)			12		275,391,929
13	First five years. If the Form 990 is this box and stop here	•	, ,	, ,	•		_	, <u> </u>
S	ection C. Computation of Pul							
14	Public support percentage for 2013	3 (line 6, column ((f) divided by line	11, column (f))		14		82 215 %
15	Public support percentage for 2012	2 Schedule A, Par	t II, line 14			15		0 %
16a	33 1/3% support test—2013. If the				ne 14 is 33 1/3% i	or more, ch	eck th	is box ►✓
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	1/3% or mo	re, che	,
	box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization meeorganization	n qualifies as a pu — 2013. If the orga tion meets the "fa	iblicly supported o anization did not c acts-and-circums	organization heck a box on line tances" test, che	e 13, 16a, or 16b ck this box and s i	o, and line 1 t op here. E	.4 xplaın	▶┌
b	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part IV how the organiza	nization meets the	e "facts-and-circu	mstances" test, o	check this box an	d stop her	e.	
18	supported organization Private foundation. If the organizations							' ►⊏ ►⊏

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. 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

Part IV	Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).									
	Facts And Circumstances Test									
Retu	ırn Reference	Explanation								
		Schodulo A / Form 0	000 er 000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493127004035

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

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

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

Na	Section 501(c)(4), (5), or (6) orga me of the organization	·		Employer iden	tification number
Uni	versity of Saint Joseph			06-0646829	
Par	t I-A Complete if the or	ganization is exempt und	er section 501(organization.
1	Provide a description of the ord	ganızatıon's dırect and ındırect po	olitical campaign act	tivities in Part IV	
2	Political expenditures		1 3	▶	\$
3	V olunteer hours				
Dar	t Inc. Complete if the or	ganization is exempt und	or section E01/	v)(3)	
1		e tax incurred by the organization			¢
2	·	e tax incurred by organization ma			\$
3	•	ection 4955 tax, did it file Form	_		↑
4a	Was a correction made?		,, _, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		□ Yes □ No
b	If "Yes," describe in Part IV				,,
Par	<u>'</u>	ganization is exempt und	er section 501(c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2		rganızatıon's funds contributed t	o other organization	s for section 527	
	exempt function activities			•	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter h	ere and on Form 112	20-POL, line 17b	\$
4	Did the filing organization file F	Form 1120-POL for this year?			┌ Yes ┌ No
5	organization made payments f amount of political contribution	nd employer identification numbe For each organization listed, entens rs received that were promptly a political action committee (PAC	r the amount paid frond frond directly delivered	om the filing organization's to a separate political orga	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
			1		i

Sch	hedule C (Form 990 or 990-EZ) 2013					Page 2
P	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		List in Dank IV as			a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		list in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		ol" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from 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 lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
		1.6				
_	Grassroots nontaxable amount (enter 25% of lir	•				
	Subtract line 1g from line 1a If zero or less, ent			_		1
	Subtract line 1f from line 1c If zero or less, ente			L		1
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	have to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

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

Grassroots lobbying expenditures

Pa		zation is exempt under section 501(c)(3) and has lion under section 501(h)).	TOP			1 0	19C &
For e	ach "Yes" response to lines 1a through 1i h	elow, provide in Part IV a detailed description of the lobbying	(6	a)		(b)	
activ		oron, provide in variation a decarate description of the 1822, mg	Yes	No	An	noun	t
1		on attempt to influence foreign, national, state or local luence public opinion on a legislative matter or referendum,					
а	Volunteers?			Νo			
b		pensation in expenses reported on lines 1c through 1i)?		Νo			
C	Media advertisements?			Νo			
d	Mailings to members, legislators, or the	· ·		Νo			
e	Publications, or published or broadcast	-		Νo			
f	Grants to other organizations for lobbyi	- · · · · · · · · · · · · · · · · · · ·	Yes				
g		affs, government officials, or a legislative body?	Yes			5	2,000
h		ventions, speeches, lectures, or any similar means?		No			
i	Other activities?			Νo			
j	Total Add lines 1c through 1i					5	2,000
2a		ganization to be not described in section 501(c)(3)?		Νo			
b	If "Yes," enter the amount of any tax in						
C		curred by organization managers under section 4912		i			
d		tion 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organi 501(c)(6).	zation is exempt under section 501(c)(4), section !	501(C)(5), 0			
				_	-	es	No
1		ues received nondeductible by members?		<u> </u>	1		
2		e lobbying expenditures of \$2,000 or less?		<u> </u>	2		
3		r lobbying and political expenditures from the prior year?	-04/-	\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	3		
Par		zation is exempt under section 501(c)(4), section ! · (a) BOTH Part III-A, lines 1 and 2, are answered " es."					
1	Dues, assessments and similar amount	ts from members	1				
2	Section 162(e) nondeductible lobbying expenses for which the section 527(f)	and political expenditures (do not include amounts of political tax was paid).					
	Current year		2a				
b	Carryover from last year		2b				
C	Total		2c				
3		5033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		line 2c exceeds the amount on line 3, what portion of the excess er to the reasonable estimate of nondeductible lobbying and	4				
5	Taxable amount of lobbying and politica	al expenditures (see instructions)	5				
Pa	art IV Supplemental Informa						
Pro		A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	ıp lıst),	Part II	-A, lın	e 2,	and
	Return Reference	Explanation					
LOB	INDE MAY UNIV GOVE HAVE	JNIVERSITY OF SAINT JOSEPH BELONGS TO THE CONNECTI PENDENT COLLEGES (CCIC) AND OTHER ACADEMIC ASSOCI ENGAGE IN LOBBYING ACTIVITIES DURING THE YEAR ENDE ERSITY PAID AN OUTSIDE LOBBYING FIRM \$52,000 FOR FED ERNMENT RELATIONS AND LOBBYING SERVICES IN ADDITION EDIRECT CONTACT WITH LEGISLATORS, TO PROVIDE INFOR	ATION D JUNI DERAL A DN, TH	NS, WHI E 30, 20 AND ST E UNIV	CH AT D14, T ATE ERSIT	TTIN HE Y M	ΑY

201124416 3 (1 31111 333 31 333 12) 2313		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	
l		

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493127004035

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) Open to Public

emal F	Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .			Inspec	tion
	e of the organi			Emple	oyer ident if ica	tion numb	er
UNIV	ersity of Saint Jose	pn		06-0	646829		
Par		izations Maintaining Donor Adv				. Comple	te if the
	organiz	zation answered "Yes" to Form 990		1 ,			<u> </u>
	T - 4 - 1	h -	(a) Donor advised funds	(b) Funds and o	other accor	unts
	Total number a	·		-			
		tributions to (during year)					
		nts from (during year)					
		e at end of year					
	funds are the o	zation inform all donors and donor advisor rganization's property, subject to the or	ganızatıon's exclusive legal control?		sea	☐ Yes	┌ No
	used only for c	zation inform all grantees, donors, and do haritable purposes and not for the benef ermissible private benefit?			purpose	┌ Yes	┌ No
a r		rvation Easements. Complete if	the organization answered "Yes" to	o Form	990, Part IV	/, line 7.	
	Preservation Protection Preservation Complete lines	conservation easements held by the orga on of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a he last day of the tax year	or education) Preservation of an Preservation of a c	ertified	historic struc	ture	
	easement on th	ne last day of the tax year	Γ		Held at the	End of the	. Year
	Total number o	of conservation easements	-	2a	Tield de elle	Liid Of Cite	
	Total acreage	restricted by conservation easements	F	2b			
	_	servation easements on a certified histo	ric structure included in (a)	2c			
		servation easements included in (c) acq ure listed in the National Register	uired after 8/17/06, and not on a	2d			
	Number of cons	servation easements modified, transferr	ے ed, released, extinguished, or terminate	d by the	e organization	during	
	the tax year 🛌						
	Number of stat	es where property subject to conservati	on easement is located ►				
		nization have a written policy regarding t f the conservation easements it holds?	he periodic monitoring, inspection, hand	lling of v	violations, and	│ │ Yes	┌ No
	Staff and volun	teer hours devoted to monitoring, inspec	cting, and enforcing conservation easem	nents du	uring the year		
	A mount of exp	——— enses incurred in monitoring, inspecting	. and enforcing conservation easements	durina	the vear		
	► \$, 5 5		, =		
	'	uservation easement reported on line 2(c (0(h)(4)(B)(ii)?	l) above satisfy the requirements of sec	tion 17	0(h)(4)(B)(ı)	┌ Yes	┌ No
	balance sheet,	escribe how the organization reports cor and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financial				
	Organ	izations Maintaining Collections ete if the organization answered "Ye	s of Art, Historical Treasures, o	or Oth	er Similar	Assets.	
	If the organizat works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reven ts held for public exhibition, education, o	or resea	arch in furthera		
	works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le the following amounts relating to these	ts held for public exhibition, education, o				lic
	(i) Revenues II	ncluded in Form 990, Part VIII, line 1			► \$		
	(ii) Assets incl	luded in Form 990, Part X			- \$	6	75,585
	If the organizat	tion received or held works of art, histori nts required to be reported under SFAS	•	r financ			
	Revenues incli	ided in Form 990, Part VIII, line 1			▶ - 		
	Revenues IIICIL	adda iii i oiiii 550, Fait VIII, iiile I			- →		

b Assets included in Form 990, Part X

Par	t IIII Organizations Maintaining Co	llections of Art,	Hist	orical Tı	reasui	res, or O	the	r Similar As	ssets (continued)			
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ds, che	eck any of	the follo	wing that a	re a	significant us	e of its				
а	Public exhibition		d	✓ Loan	or exch	ange progr	ams						
b	Scholarly research		e	▽ Othe	r TEAC	HING							
C	Preservation for future generations												
4	Provide a description of the organization's co Part XIII	ollections and explai	n how	they furthe	er the o	rganızatıon	's ex	empt purpose	ın				
5	During the year, did the organization solicit o							ıılar		- ··			
Doo	assets to be sold to raise funds rather than t							os" to Form	Yes	✓ No			
Par	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					answere	u i	es to rottil	990,				
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	dıary f	or contribu	utions o	r other ass	ets i	not	┌ Yes	□ No			
b	If "Yes," explain the arrangement in Part XII	I and complete the	followi	ng table		_							
						-	_	A	mount				
С 	Beginning balance					-	1c						
d	Additions during the year					-	1d						
e	Distributions during the year					-	1e						
f	Ending balance					L	1f						
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						☐ Yes	Г No			
_ь	If "Yes," explain the arrangement in Part XII									<u> </u>			
Pa	Irt V Endowment Funds. Complete									ugara bagir			
1a	Beginning of year balance	(a)Current year 23,079,000	(0)	nor year 21,663,000		21,406,000		Three years back 15,495,000	(e)rour	years back 15,503,000			
b	Contributions	604,000		215,000		1,085,000		3,730,000		82,000			
c	Net investment earnings, gains, and losses			· ·									
_		3,127,000		2,292,000		-51,000	_	2,921,000		1,622,000			
d	Grants or scholarships	562,000		586,000		553,000		450,000		349,000			
е	Other expenditures for facilities and programs	645,000		505,000		224,000		290,000		1,363,000			
f	Administrative expenses	25 (02 000		22.070.000		21.662.000		21 406 000		15 405 000			
g	End of year balance	25,603,000		23,079,000	l	21,663,000		21,406,000		15,495,000			
2	Provide the estimated percentage of the curi	•	e (line	1g, colum	nn (a)) h	eld as							
а	board designated of quasi-endowment	27 000 %											
b	Permanent endowment ► 73 000 %												
С	Temporarily restricted endowment ► C The percentages in lines 2a, 2b, and 2c show	1 % uld equal 100%											
3a	Are there endowment funds not in the posses	ssion of the organiza	ition th	nat are hel	d and a	dministered	d for	the					
	organization by								Ye	—			
	(i) unrelated organizations						•		(i) (ii)	No No			
b	(ii) related organizations			· · · ·			•		b	1 100			
4	Describe in Part XIII the intended uses of th	<u>-</u>											
Par	rt VI Land, Buildings, and Equipme	ent. Complete if t			n answ	ered 'Yes	' to	Form 990, P	art IV,	line			
	11a. See Form 990, Part X, line : Description of property	10.		(a) Cost or basis (invest		(b) Cost or ot basis (othe		(c) Accumulated depreciation	d (d)	Book value			
1 =	Land					2,522	9/11			2,522,941			
	Buildings		<u> </u>			45,523		21,356,9	98	24,166,339			
	Leasehold improvements		·. }			2,447		1,379,8	_	1,068,117			
	Equipment		<u> </u>			21,551		14,309,10		7,242,721			
	Other		<u> </u>			7,434		3,634,3		3,800,609			
	al. Add lines 1a through 1e <i>(Column (d) must e</i>			nn (B), line	10(c).)				+	38,800,727			
	- · · · · ·	·		**					D (Form	990) 2013			

See Form 990, Part X, line 12. (a) Description of security or category			
(including name of security)	(b)Book value	(c) Method of va Cost or end-of-year	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<u> </u>		
Part VIII Investments—Program Related. C	Complete if the organization	on answered 'Yes' to Fo	orm 990, Part IV, line 11c
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	luation
(a) Description of investment	(b) Book value	Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	*		
Part IX Other Assets. Complete if the organizati		90, Part IV, line 11d See F	
(a) Desc	ription		(b) Book value
(1) UNAMORTIZED BOND ISSUANCE COST			420,026
(2) LIFE INSURANCE			10,306
(3) CHEFA ESCROW			5,901,421
(4) SECURITY DEPOSIT			10,000
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15)	<u> </u>	6,341,753
Part X Other Liabilities. Complete if the org		to Form 990 Part IV	
Form 990, Part X, line 25.	junización answered res	to roim 550, raic 14, r	ine Tie or Tir. See
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
CAPITAL LEASE OBLIGATION	173,557	7	
GOVERNMENT GRANTS REFUNDABLE	349,729	7	
SHORT-TERM LINE OF CREDIT	1,506,329	7	
	, , ==	1	
		4	
		1	
		-	
		1	
		-	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)			

ts With	.2a.	line 1 ents	art IV, staten line 12	990, <u> </u> Inancia rt VIII 	Form Idited f 90, Pa	<u>es' to'</u> t per au Form 9	ered 'Y suppor not on	ation answ	Reconcilia the organization of revenue, gain	art XI Total	Pa 1
	2a 2b 2c	ents	staten line 12	inancia rt VIII	idited 1 90, Pa	t per au Form 9	suppor	s, and other	l revenue, gain	Total	
	2b 2c				•			n line 1 but	unts included o		_
	2b 2c								unts merudeu c	A mo	2
	2c						nents	s on investr	unrealızed gaın	Netu	а
							cilities	nd use of fa	ated services a	Dona	b
· · ·	2d 							year grants	overies of prior	Reco	c
								Part XIII)	er (Describe in	l Othe	d
								h 2d .	lines 2a throug	Add I	e
								m line 1 .	ract line 2e fro	Subtr	3
			n line :	ut not	e 12, b	/III, lın	, Part V	n Form 990	unts included o	A mo	4
	4a		lıne 7b	t VIII	90, Pa	Form 9	ded on	es not ınclu	stment expens	Inves	а
	4b							Part XIII)	er (Describe in	Othe	b
									lines 4a and 4b	: Add I	c
		-	-		-		-		lrevenue Add		5
nts With									Reconcilia If the organ	art XII	Par
									l expenses and	Total	1
			e 25	t IX, lı	90, Pa	Form 9	not on	n line 1 but	unts included o	A mou	2
	2a						cilities	nd use of fac	ated services a	Dona	а
	2b							nts	year adjustme	Prior	b
	2c								erlosses	Othe	c
	2d							Part XIII)	er (Describe in	l Othe	d
								h 2d	lines 2a throug	A dd I	e
								m line 1 .	ract line 2e froi	Subtr	3
			lıne 1:	not or	25, but	X, line 2	, Part I	n Form 990	unts included o	A mou	4
	4a		line 7b	t VIII	90, Pai	Form 99	ded on I	es not inclu	stment expens	Inves	а
	4b							Part XIII)	er (Describe in	Othe	b
									lines 4a and 4b	: Add I	c
	e 18)	I, lın	90, Pa	Form	t equa	hıs mus	d 4c. (Tl	d lines 3 and	lexpenses Ad	Total	5
						ion	ormati	ental Info	Supplem	art XIII	Par
· · ·		4a 4b		1 line 1: , line 7b 4a 4b 990, Part I, line 18) .	inot on line 1: t VIII, line 7b 4a 4b	25, but not on line 1 : 90, Part VIII, line 7b 4a	X, line 25, but not on line 1: Form 990, Part VIII, line 7b 4a 4b 4b 4	, Part IX, line 25, but not on line 1: ded on Form 990, Part VIII, line 7b 4a 4b 4b 4c. (This must equal Form 990, Part I, line 18) .	h 2d	ines 2a through 2d	Add lines 2a through 2d

ınformatıon

Return Reference	Explanation
PART III, LINE 4	ORGANIZATION'S COLLECTION OF ART THE ART GALLERY AT THE UNIVERSITY OF SAINT JOSEPH OPENED IN 2001 IN THE UNIVERSITY'S BRUYETTE ATHENAEUM, IT NOW HOUSES A COLLECTION OF MORE THAN 2,000 WORKS OF ART A PAINTINGS COLLECTION WHOSE STRENGTH IS IN AMERICAN ART OF THE TWENTIETH CENTURY, INCLUDING WORKS BY THOMAS HART BENTON, GEORGIA O'KEEFFE AND MILTON AVERY IS COMPLEMENTED BY A COLLECTION OF WORKS OF ART ON PAPER THE LATTER COLLECTION RANGES FROM THE FIFTEENTH CENTURY TO THE PRESENT, INCLUDING NOTEWORTHY EUROPEAN OLD MASTER PRINTS, NINETEENTH-CENTURY JAPANESE WOODBLOCK PRINTS, AND TWENTIETH-CENTURY AND CONTEMPORARY AMERICAN AND EUROPEAN WORKS WITH A SUITE OF EXHIBITION GALLERIES, A PRINT STUDY ROOM, AND UP-TO-DATE STORAGE FACILITIES, THE ART GALLERY HAS MADE THE UNIVERSITY'S COLLECTION MORE ACCESSIBLE AND HAS OPENED MYRIAD OPPORTUNITIES FOR THE STUDY AND ENJOYMENT OF ART THE GALLERY COLLABORATES WITH FACULTY TO PRESENT EDUCATIONAL PROGRAMMING AND HOST CLASS VISITS THROUGHOUT THE YEAR, PROVIDES PROFESSIONAL DEVELOPMENT FOR K-12 TEACHERS, AND OFFERS A VARIETY OF LECTURES, GALLERY TALKS, AND SEMINARS FOR THE GENERAL PUBLIC EACH YEAR THE ART GALLERY PRESENTS SEVERAL SPECIAL EXHIBITIONS IN ADDITION TO CHANGING INSTALLATIONS OF THE PERMANENT COLLECTION
PART V, LINE 4	ENDOWMENT FUNDS THE UNIVERSITY'S ENDOWMENT CONSISTS OF APPROXIMATELY 170 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES, INCLUDING BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE UNIVERSITY TO FUNCTION AS ENDOWMENTS (QUASI - ENDOWMENT) THE UNIVERSITY MANAGES ITS LONGTERM INVESTMENTS IN ACCORDANCE WITH THE TOTAL RETURN CONCEPT AND THE GOAL OF MAXIMIZING LONG-TERM RETURN WITHIN ACCEPTABLE LEVELS OF RISK THE UNIVERSITY'S SPENDING POLICY IS DESIGNED TO PROVIDE A STABLE LEVEL OF FINANCIAL SUPPORT AND TO PRESERVE THE REAL VALUE OF ITS ENDOWMENT THE UNIVERSITY COMPARES THE PERFORMANCE OF ITS INVESTMENTS AGAINST SEVERAL BENCHMARKS
PART X, LINE 2	FIN 48 MEMO THE UNIVERSITY WAS GRANTED AN EXEMPT STATUS UNDER THE INTERNAL REVENUE CODE (IRC) SECTION 501(A), AS AN ORGANIZATION DESCRIBED IN SECTION 501 (C)(3) UNDER IRC SECTION 501(A) THE UNIVERSITY IS GENERALLY EXEMPT FROM INCOME TAXES THE UNIVERSITY BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS
PART XI, LINE 4B	OTHER AMOUNTS INCLUDED ON RETURN BUT NOT BOOKS FINANCIAL AID \$13,970,000 TOTAL \$13,970,000
PART XII, LINE 2D	OTHER EXPENSES INCLUDED ON BOOKS BUT NOT ON RETURN LOSS ON SWAP \$ 378,000 LOSS ON REFINANCING 375,000 TOTAL \$ 753,000
PART XII, LINE 4B	OTHER AMOUNTS INCLUDED ON RETURN BUT NOT BOOKS FINANCIAL AID \$13,970,000TOTAL \$13,970,000

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493127004035

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE E

(Form 990 or 990-EZ)

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

Schools

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization **Employer identification number** University of Saint Joseph 06-0646829 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? <u>5g</u> Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Yes

Part II Supplemental Information. 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)

Return Reference	Explanation
PUBLICIZING NON DISCRIMINATION POLICY	THE UNIVERSITY PUBLISHES ITS NON-DISCRIMINATION POLICY IN THE MAJOR NEWSPAPER IN THE METROPOLITAN REGION FROM WHICH MOST OF ITS STUDENTS COME.
FINANCIAL AID FROM GOVERNMENT AGENCY	THE UNIVERSITY OF SAINT JOSEPH RECEIVES FINANCIAL AID OR ASSISTANCE FROM GOVERNMENTAL AGENCIES FOR THE BENEFIT OF THE UNIVERSITY'S STUDENTS

Schedule E (Form 990 or 990-EZ) 2013

DLN: 93493127004035

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Name of the organization University of Saint Joseph **Employer identification number**

06-0646829

Part I	Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17
	Form 990-EZ filers are not required to complete this part.

- Indicate whether the organization raised funds through any of the following activities. Check all that apply e 🔽 Solicitation of non-government grants
- Mail solicitations
- ✓ Internet and email solicitations
- Phone solicitations
- ▼ In-person solicitations
- Solicitation of government grants
 - ✓ Special fundraising events

- Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

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

(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
1 PAMELA P WEST	CONSULTING		No	33,465	60,000	-26,535
2 KAREN BUCK	CONSULTING		No	5,000	77,000	-72,000
3						
4						
5						
6						
7						
8						
9						
10						
Total			>	38,465	137,000	-98,535

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

AL, AK, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND. OH. OK. OR. PA. RI. SC. SD. TN. TX. UT. VT. VA. WA. WV. WI. WY

Sche	dule	e G (Form 990 or 990-EZ) 2013				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	(a) Event #1 GALA (event type)	(b) Event #2 FUNDRAISER SYC (event type)	(c) O ther events 1 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	263,558	18,659	19,126	301,343
Revenue	2	Less Contributions	194,472	310	3,079	197,861
<u>*</u>	3	Gross income (line 1 minus line 2)	69,086			
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs	8,200			8,200
ă ă	7	Food and beverages .	59,363	2,520	2,960	64,843
Direct	8	Entertainment	2,500			2,500
₫	9	Other direct expenses .	74,083	2,203	1,155	77,441
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	n(d)		(152,984)
	11	Net income summary Subtract li				-49,502
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue		\$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>동</u>	1	Gross revenue				
s ee	2	Cash prizes				
sesued	3	Non-cash prizes				
Д Ç	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteerlabor	│ Yes % \(\backsquare \) No	┌ Yes %	┌ Yes %	
	7	Direct expense summary Add line	s 2 through 5 ın column ((d)		
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		
9 a b	Is	ter the state(s) in which the organiz the organization licensed to operate 'No," explain	gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming	licenses revoked, susper	nded or terminated during		

|--|

Does	s the organization operate gaming a	ctivities with nonmembers?	·	· · 「Yes 「No				
12								
				· · · · Fyes F No				
13	Indicate the percentage of gaming	• •						
a								
ь 14	•		organization's gaming/special events books a					
	Name ▶							
	Address ►							
15a			whom the organization receives gaming					
b	If "Yes," enter the amount of gaming revenue received by the organization * \$ and the amount of gaming revenue retained by the third party * \$							
c	If "Yes," enter name and address							
	Name ▶							
	Address 🟲							
16	Gaming manager information							
	Name 🟲	Name ▶						
	Gaming manager compensation	Gaming manager compensation ► \$						
	Description of services provided	•						
	Director/officer	□ Employee	☐ Independent contractor					
17	Mandatory distributions							
а			ole distributions from the gaming proceeds to					
retain the state gaming license?								
Ь		•		:nt				
Dai	in the organization's own exempt a rt IV Supplemental Inform		ar F \$ Nanations required by Part I, line 2b, co	lumns (III) and (V) and				
), 15b, 15c, 16, and 17b	o, as applicable. Also complete this part					
	Return Reference		Explanation					
PAII	D FUNDRAISERS	WITH THE PLANNING CENTER FOR APPLIE A MULTI-YEAR EFFO ENGAGED KAREN BL	NGAGED PAMELA WEST AS A FUNDRAISIN G AND IMPLEMENTATION OF A CAMPAIG ED RESEARCH AND EDUCATION, A MAJOR PRT REQUIRING SIGNIFICANT ADVANCE I JCK AS A FUNDRAISING CONSULTANT IN ROM CORPORATIONS AND FOUNDATIONS	N TO RAISE FUNDS FOR THE INITIATIVE THE CAMPAIGN IS PLANNING THE UNIVERSITY CONNECTION WITH				

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DLN: 93493127004035

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

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

Open to Public **Inspection**

Name of the organization

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

University of Saint Joseph						06-0646829	
Part I General Informati	on on Grants and	d Assistance				•	
 Does the organization maintain the selection criteria used to a Describe in Part IV the organization 	ward the grants or as	sistance?					▼Yes 「N
				United States. Con ort II can be duplicate			es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grar or assistance
2 Enter total number of section 5	 	 ment organizations list	ed in the line 1 table .			▶	
3 Enter total number of other org						_	

FUNDS

STUDENTS' BALANCES

Ш	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990,	Part IV,	line 22
	Part III can be duplicated if additional space is needed.		

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book FMV, appraisal, other)	(f) Description of non-cash assistance		
(1) COLLEGE SCHOLARSHIPS & GRANT	S 809	13,970,000		FMV	SCHOLARSHIPS		
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							
Return Reference Explai	Reference Explanation						
MONITOR THE USE OF GRANT THE U	THE UNIVERSITY'S GRANTS IN THE US CONSIST OF FINANCIAL AID AWARDS WHICH ARE APPLIED AGAINST STUDENTS' RECEIVABLE						

BALANCES DUE TO THE UNIVERSITY THE UNIVERSITY MONITORS THESE GRANTS BY CONTROLLING THE APPLICATION OF GRANTS TO

Schedule I (Form 990) 2013

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DLN: 93493127004035

OMB No 1545-0047

Open to Public

Employer identification number

Department of the Treasury

Internal Revenue Service

Schedule J (Form 990)

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization University of Saint Joseph

06-0646829 Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee ✓ Written employment contract Independent compensation consultant 굣 Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III Yes Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Nο

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)PAMELA TROTMAN REID PHD PRESIDENT, TRUSTEE	(i) (ii)	284,073	20,000	18,197 0	28,050	58,138 0	408,458	0	
(2)SHAWN M HARRINGTON VP FINANCE & ADMIN, TREASURER	(i) (ii)	175,496 0	0	0	20,320	20,916	216,732 0	0	
(3)MICHELLE KALIS PROVOST	(i) (ii)		0	0	20,901 0	8,465 0	216,633 0	0	
(4)JAMES HENKEL ASSOC DEAN, SCHOOL OF PHARM	(i) (ii)	138,721	0	0	15,340 0	405 0	154,466 0	0 0	
(5)DOUGLAS NELSON VP INSTITUTIONAL ADVANCEMENT	(i) (ii)	161,350 0	0	0	17,752 0	490 0	179,592 0	0	
(6)JOSEPH OFOSU DEAN, SCHOOL OF PHARMACY	(i) (ii)	227,403	0	0	25,095 0	493 0	252,991 0	0	
(7)IVAN EDAFIOGHO PROFESSOR, SCHOOL OF PHARM	(i) (ii)	123,974	0	0	14,443 0	11,603	150,020	0	

Schedule J (Form 990) 2013

Part III Supplemental Information

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

iso complete and pare for any additional information					
Return Reference	Explanation				
	AS A CONDITION OF EMPLOYMENT, THE PRESIDENT IS REQUIRED TO LIVE IN THE PRESIDENTIAL RESIDENCE LOCATED ON THE UNIVERSITY CAMPUS THE FAIR MARKET VALUE OF THE HOUSING IN THE AMOUNT OF \$48,660 HAS BEEN INCLUDED IN THE PRESIDENT'S NONTAXABLE BENEFITS				
	THE UNIVERSITY PAYS MEMBERSHIP DUES AT THE HARTFORD GOLF CLUB AND THE HARTFORD GOLF CLUB FOR THE PRESIDENT OF THE UNIVERSITY THIS MEMBERSHIP ALLOWS THE PRESIDENT TO MEET WITH MEMBERS OF THE COMMUNITY TO PROMOTE THE AIMS OF THE UNIVERSITY NO PERSONAL USE IS PERMITTED, AND THE AMOUNT OF THE DUES IS NOT INCLUDED IN THE PRESIDENT'S W-2				
, , ,	THE PRESIDENT OF THE UNIVERSITY RECEIVED A DISCRETIONARY BONUS DURING CALENDAR YEAR 2013 BASED UPON ACHIEVEMENT OF ESTABLISHED GOALS				

Schedule J (Form 990) 2013

DLN: 93493127004035

Open to Public

Inspection

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service Name of the organization

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

Univ	ersity of Saint Joseph	rsity of Saint Joseph 06-0646829																	
Pa	rt I Bond Issues									I									
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Description of purpose		Description of purpose		Description of purpose		Description of purpose (9		of purpose (g) Defeased				Pool ncing
										Yes	No	Yes	No	Yes	No				
A	CHEFA - EASYLOAN	06-0806186		08-01-2011	5,00	0,000	Equip	pment Finan	cing		Х		х		Х				
В	CHEFA -SERIES C BOND	06-0806186		11-01-2013	10,80	0,000	Land	purchase, re	efundıng		Х		×		X				
С	CHEFA SERIES D BOND	06-0806186		11-01-2013	10,80			construction hase,	on, land		Х		×		X				
Pai	TIII Proceeds				_														
						4		E	3		С			D					
1	A mount of bonds retired					2,142,	,857		168,636		8	4,909							
	A mount of bonds legally defea	ased ————————————————————————————————————					0		0	0									
3	Total proceeds of issue				5,000,000 10,800,000		10,800,000												
4	Gross proceeds in reserve fur						0		0			0							
5	Capitalized interest from proc				0 0		0												
6	Proceeds in refunding escrow				0 0		0												
7	Issuance costs from proceed	S			0 154,747		128,633		8,633										
8	Credit enhancement from pro					0 0		0		0									
9	Working capital expenditures	from proceeds			0 0		0												
10	Capital expenditures from pro	ceeds				4,797,	,224		785,182	784,803									
11	O ther spent proceeds						0		9,808,000		4,24	0,000							
12	O ther unspent proceeds					202,	,776		52,071		5,64	6,564							
13	Year of substantial completio	n			20	14		2014											
					Yes	No		Yes	No	Yes	_ r	No	Yes		No				
14	Were the bonds issued as par	t of a current refundi	ng issue?			Х			Х			х							
15	Were the bonds issued as part of an advance refunding issue?					Х		Х		Х									
16	Has the final allocation of proceeds been made?				Х		-	Х			х								
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?				Х			Х		Х									
Par	t IIII Private Business l	Jse																	
						<u> </u>		E	3		С			D					

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

property financed by tax-exempt bonds?

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

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

No

Χ

Yes

No

Χ

Χ

Yes

No

Χ

Χ

Yes

Yes

No

Schedule K (Form 990) 2013

Part III Private Business Use (Continued)

4:	Private business use (Continueu)								
		4	Α		В	С		1)
		Yes	No	Yes	No	Yes	No	Yes	No
За	Are there any management or service contracts that may result in private business use of bond-financed property?		х		х		х		
ь	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х		Х		Х		
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		0 %		0 %		
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		Х		Х		Х		
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х		х		х		
ь	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 sections 1 141-12 and 1 145-2?	х			×		×		
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	Х		X			Х		

Part IV Arbitrage

		A		В		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х		X		Х		
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?	Х		х		Х			
b	Exception to rebate?								
С	No rebate due?								
	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	Х			X		
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х	Х			X		
b	Name of provider	0		BERKSHIRE I	BANK	0			
С	Term of hedge				10				
d	Was the hedge superintegrated?		Х				Х		
е	Was the hedge terminated?		Х		Х		Х		
							Sc	hedule K (Forn	1 990) 2013

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		x		X		X		
b	Name of provider	0 0		0					
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		x		Х		х		
7	Has the organization established written procedures to monitor the requirements of section 148?		x		X		X		

Part V Procedures To Undertake Corrective Action

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?

	Α		В		С		D		
	Yes	No	Yes	No	Yes	No	Yes	No	
1									
		x		х		x			
-		^		^		,			
١									

Return Reference Explanation THE UNIVERSITY REVIEWS EVERY ACTIVITY PROPOSED FOR ITS BOND-FINANCED FACILITIES, AND DOES NOT ALLOW ANY PRIVATE-USE SCHEDULE K, PART III, LINE 7 ACTIVITY IN THOSE FACILITIES

Return Reference	Explanation
SCHEDULE K, PART IV, LINE 7 AND PART V	THE UNIVERSITY THOROUGHLY REVIEWS ITS BOND ACTIVITY TO ENSURE THAT VIOLATIONS TO FEDERAL TAX REQUIREMENTS ARE IDENTIFIED AND CORRECTED HOWEVER, THE UNIVERSITY DOES NOT MAINTAIN WRITTEN POLICIES FOR THESE REVIEWS

DLN: 93493127004035

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions ▶Complete if the organizations answered "Yes" on Form

990, Part IV, lines 29 or 30. ► Attach to Form 990.

Internal Revenue Service Name of the organization University of Saint Joseph

Department of the Treasury

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

Part I Types of Property			06	-0646829			
Part I Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr		_	nts
1 Art—Works of art	Х	1	0	SEE PART II			
2 Art—Historical treasures .							
3 Art—Fractional interests							
4 Books and publications							
5 Clothing and household goods							
5 Cars and other vehicles							
7 Boats and planes							
3 Intellectual property							
9 Securities—Publicly traded .	X		169,147	AVG OF MARKE	T		
Securities—Closely held stock .			·				
Securities—Partnership, LLC, or trust interests							
2 Securities—Miscellaneous							
3 Qualified conservation contribution—Historic structures							
Qualified conservation contribution—Other							
Real estate—Residential .							
Real estate—Commercial							
Real estate—O ther							
Collectibles							
Food inventory							
Drugs and medical supplies .							
L Taxidermy							
2 Historical artifacts							
3 Scientific specimens							
Archeological artifacts							
other ► (×	241	0	SEE PART II			
JCTION PRIZES)							
5 Other ▶()							
7 Other ►()							
3 Other ▶ ()							
Number of Forms 8283 received by t				a			
for which the organization completed	Form 8283,	Part IV, Donee Acknowled	agement Z		-	. 1	
O- D					_	Yes	N
Oa During the year, did the organization	•	, , , ,	·				
it must hold for at least three years			, and which is not required	to be used			
for exempt purposes for the entire h					30a		No
b If "Yes," describe the arrangement	ın Part II						
L Does the organization have a gift ac	ceptance po	licy that requires the revie	w of any non-standard co	ntributions?	31	Yes	
2a Does the organization hire or use th contributions?	ırd partıes or	related organizations to s	olicit, process, or sell noi	ncash 	32a		No
b If "Yes," describe in Part II							
If the organization did not report an describe in Part II	amount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			

number of items received, or a combination of both. Also complete this part for any additional information.						
Return Reference	Explanation					
	OTHER THAN CONTRIBUTIONS OF STOCK, NON-CASH ITEMS ARE NOT INCLUDED IN THE FINANCIAL STATEMENTS OF THE UNIVERSITY UNLESS THEY ARE SIGNIFICANT IN AMOUNT FOR 2013, THE UNIVERSITY RECEIVED 1 ITEM OF ARTWORK AND 241 AUCTION ITEMS, WHICH WERE RECORDED AT ZERO VALUE					

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the

Schedule M (Form 990) (2013)

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DLN: 93493127004035

Inspection

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

Supplemental Information to Form 990 or 990-EZ

www.irs.gov/form990.

Name of the organization University of Saint Joseph

06-0646829

Employer identification number

	06-0646829
90 Schedule O, Supplemental Inf	ormation
Return Reference	Explanation
FORM 990, PART VI, QUESTION 6	ORGANIZATION'S MEMBERS THE CONFERENCE FOR MERCY HIGHER EDUCATION, INC. ACTS AS A CORPORATE MEMBER OF THE UNIVERSITY OF SAINT JOSEPH
FORM 990, PART VI, QUESTION 7A	ROLE OF SISTERS OF MERCY ELECTION TO THE BOARD OF TRUSTEES IS BY MAJORITY VOTE OF THE UNI CAMERAL BODY, WHICH CONSISTS OF THE BOARD OF TRUSTEES, AND ONE PERSON DESIGNATED BY THE ME MBER OF THE CORPORATION (THE CONFERENCE FOR MERCY HIGHER EDUCATION, INC, A MARY LAND NON-S TOCK, NOT-FOR-PROFIT CORPORATION, ACTING BY AND THROUGH ITS DULY CONSTITUTED AND AUTHORIZE D OFFICERS)
FORM 990, PART VI, QUESTION 7B	ROLE OF SISTERS OF MERCY THE FOLLOWING ACTIONS REQUIRE AN AFFIRMATIVE VOTE BY THE MEMBER OF THE CORPORATION (THE CONFERENCE FOR MERCY HIGHER EDUCATION, INC.) IN ORDER TO BE VALID *DISSOLUTION OF THE CORPORATION, OR CESSATION OF OPERATION AS A UNIVERSITY AND INSTITUTIO N OF HIGHER EDUCATION, *SALE OF LAND, *SALE, LEASE, EXCHANGE, MORTGAGE, PLEDGE, OR ANY OTH ER DISPOSITION OF OTHER ASSETS OR PROPERTY OF THE CORPORATION, IN OTHER THAN THE ORDINARY COURSE OF BUSINESS APPOINTMENT OR REMOVAL OF THE PRESIDENT OF THE UNIVERSITY IS BY MAJORI TY VOTE OF THE UNICAMERAL BODY, WHICH CONSISTS OF THE BOARD OF TRUSTEES AND ONE PERSON DES IGNATED BY THE MEMBER OF THE CORPORATION (THE CONFERENCE FOR MERCY HIGHER EDUCATION, INC.)
FORM 990, PART VI, QUESTION 11A	FORM 990 REVIEW PROCESS THE FORM 990 IS REVIEWED IN DRAFT FORM BY THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES THE FINAL VERSION IS DISTRIBUTED TO THE BOARD OF TRUSTEES IN ADVANC E OF FILING
FORM 990, PART VI, QUESTION 12	CONFLICT OF INTEREST POLICY THE PRESIDENT'S OFFICE SENDS ANNUAL CONFLICT OF INTEREST QUES TIONNAIRES TO MEMBERS OF THE BOARD OF TRUSTEES THE VICE PRESIDENT FOR FINANCE AND ADMINIS TRATION REVIEWS THE COMPLETED QUESTIONNAIRES, AND PRESENTS THE RESULTS TO THE BOARD'S AUDI T COMMITTEE
FORM 990, PART VI, QUESTIONS 15A AND SCHEDULE J PART I, QUESTION 3	COMPENSATION POLICY THE PROCESS FOR DETERMINING THE COMPENSATION FOR THE PRESIDENT MEETS THE THREE REQUIREMENTS OF THE REBUTTABLE PRESUMPTION COMPENSATION FOR THE UNIVERSITY'S PR ESIDENT IS SET BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, WHICH IS COMPOSED OF I NDIVIDUALS WHO DO NOT HAVE A CONFLICT OF INTEREST REGARDING THE TRANSACTION THE PROCESS I NCLUDES THE COMPARISON WITH COMPENSATION OF PRESIDENTS OF COMPARABLE INSTITUTIONS, BY MEAN S OF INDUSTRY SURVEYS AND REVIEW OF FORM 990'S, AND CONTEMPORANEOUS DOCUMENTATION OF DELIB ERATIONS AND DECISIONS REGARDING THE COMPENSATION AGREEMENT THE PRESIDENT'S COMPENSATION AGREEMENT IS A WRITTEN DOCUMENT THIS FULL PROCESS WAS MOST RECENTLY UNDERTAKEN DURING THE YEAR ENDED JUNE 30, 2011
FORM 990, PART VI, LINE 19	PUBLIC DISCLOSURE THE ORGANIZATION'S FORM 990, GOVERNING DOCUMENTS, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST IN ADDITION, THE FORM 990 AND THE AUDITED FINANCIAL STATEMENTS ARE AVAILABLE THROUGH THE UNIVERSITY'S WEBSITE. THE FORM 990 IS ALSO POSTED ON WWW GUIDESTAR ORG
FORM 990, PART X, LINES 20 AND 23	THE BALANCE PAYABLE OF THE CHEFA EASYLOAN HAS BEEN REPORTED ON LINE 20, TAX- EXEMPT BOND LI ABILITIES, FOR CONSISTENCY IN REPORTING WITH SCHEDULE K IN TAX YEAR 2012, THE BALANCE OF THE CHEFA EASYLOAN PAYABLE HAD BEEN REPORTED ON LINE 23, SECURED MORTGAGES AND NOTES PAYAB LE TO UNRELATED THIRD PARTIES FOR COMPARATIVE PURPOSES, THE BEGINNING BALANCE OF THE CHEF A EASYLOAN PAYABLE HAS BEEN MOVED TO LINE 20 FOR TAX YEAR 2013
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS OR FUND BALANCES LOSS ON INTEREST RATE SWAP (\$378,000) LOSS O N REFINANCING (\$375,000) TOTAL OTHER CHANGES IN NET ASSETS (\$753,000)

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DLN: 93493127004035

2013

OMB No 1545-0047

Open to Public Inspection

Employer identification number

06-0646829

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Name of the organization University of Saint Joseph

(Form 990)

Part I Identification of Disregarded Entities Comp (a)	(b)	(c)	(d)	(e)		(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income E	(e) End-of-year assets	Dire	ect controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	nizations Complete if the tax year.				art IV, lı	ne 34 because ıt	had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	on Public charity status (if section 501(c)(3))		(f) Direct controlling entity		g) 512(ontrolle tity?
(1) CONFERENCE FOR MERCY HIGHER EDUCATION	EDUCATION	MD	501(C)(3)	1	N N	IA	Yes	No No
8380 COLESVILLE ROAD SUITE 300			(-/(-/					
SILVER SPRING, MD 20910								
							+	
For Pananyork Paduction Act Notice see the Instructions for Form 99		Cat No 501	1 25V			Schedule P (Form	- 000) 3	

(a) Name, address, and EIN of related organization		(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	x managing partner? 1		(k) Percentag ownersh
					J14)			Yes	No]	Yes	No	
V Identification of Related Org								swere	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	Legal domicile		(e) Type of entit (C corp, S corp, or trust)	y Share of incom	total Share	(g) Share of end of-year assets		(h) ercentage ownership	(i) Section 512 (b)(13) controlled entity?		!
						<u> </u>			_		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 related oi	organızatıons lıs	ted in Parts II-IV?									
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No					
b	Gift, grant, or capital contribution to related organization(s)				1b		No					
C	Gift, grant, or capital contribution from related organization(s)				1c		No					
d	Loans or loan guarantees to or for related organization(s)				1d		No					
е	Loans or loan guarantees by related organization(s)				1e		No					
	f Dividends from related organization(s)											
f	f Dividends from related organization(s)											
g	g Sale of assets to related organization(s)											
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	k Lease of facilities, equipment, or other assets from related organization(s)											
ı	l Performance of services or membership or fundraising solicitations for related organization(s)											
m	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)				1n		No					
0	Sharing of paid employees with related organization(s)				10		No					
р	Reimbursement paid to related organization(s) for expenses				1р		No					
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)				1s		No					
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line		· •									
		(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	unt in	volved						

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

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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 regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships (a) Name, address, and EIN of entity (b) Primary activity Legal Predominant Are all partners Are all partners Share of Share of Share of Disproprtionate Code V?UBI General or Percentage													
(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 sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total Income	(g) Share of end-of-year assets		(h) Disproprtionate allocations?		(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493127004035 OMB No 1545-0172 **Depreciation and Amortization** (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** GENERAL DEPRECIATION Name(s) shown on return University of Saint Joseph 06-0646829 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) \$ 2,600,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 . | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during 14 Property subject to section 168(f)(1) election 15 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2013 · · · · · · 69.588 If you are electing to group any assets placed in service during the tax year into one or more general Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ММ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year MMS/L 40 yrs Summary (see instructions.) Part IV 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 22 72,443 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Cat No 12906N

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	aution	: See t	the in	nstruct	ions for	· limits	for pa	sseng	er au	tomob	iles.)	
24a Do you have evider	nce to support	the business/in	vestment ι	ıse claıme	d? ┌ Yes	√ No		24	b If "Yes,	" is the e	ev idence	written?	, Г үе	ᄝᅜ)	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cost o	i) r other sıs	Basis for (busines us	(f) Recovery period	(g) Metho Conven	d/	(h) Depreciation/ deduction			(i) Elected section 179 cost				
25 Special depreciation allo 50% in a qualified busi			erty placed	in service (during the	tax year	and u	sed more		25						
26 Property used more	e than 50%	ın a qualıfıed	business	use						,						
		% %											_			
27 Property used 50%	orless in a	qualified bus	siness us	е	•											
		%							S/L -				4			
		%							S/L - S/L -				-			
28 Add amounts in co	olumn (h), lır	nes 25 throug	jh 27 En	ter here a	and on lir	ne 21, p	oage		28							
29 Add amounts in co	olumn (ı), lın	e 26 Enterh	ere and o	n line 7,	page 1							29				
			ction B			on U	se o	f Veh	icles							
Complete this section If you provided vehicles to	for vehicles	used by a so	ole propri	etor, parl	tner, or o	ther "m	ore t	han 5%	owner,"	or rela	ted per	son	a uahir	loc		
ii you provided veriicles to	your employee	es, nist answer	ine questio	_	a)	(L		пехсери	(c)		(d)		e)		f)	
30 Total business/inv year (do not include			_		cle 1	Vehi	-	V e	hicle 3		icle 4	Vehi	-			
31 Total commuting r	miles driven	during the ye	ear .													
32 Total other persor	nal(noncomm	nuting) miles	drıven													
33 Total miles driven through 32	during the y		s 30													
34 Was the vehicle as				Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	
during off-duty ho	urs? .															
35 Was the vehicle us owner or related p		by a more the	han 5%													
36 Is another vehicle			se? .													
		stions for														
Answer these question 5% owners or related	persons (se	e instruction:	s)										o are	not mo	re thar	
37 Do you maintain a employees?		y statement											<u> </u>	es	No	
38 Do you maintain a employees? See tl	•	,						, ,		٠,	, ,					
39 Do you treat all us						-		-								
40 Do you provide movehicles, and retain	re than five	vehicles to y	our empl						mployee	s abou	t the us	se of				
41 Do you meet the re				automobi	le demor	nstratio	n use	· · · ·? (See	ınstructı	ons)						
Note: If your answ	•	_						•		,	25					
		, , , , , , , , , , , , , , , , , , , ,		, do 110	e compre		1011 B	101 1110		Venici						
(a)	(b)			(c) A mortizable amount				(d) Code ection	A mor per	(e) tızatıoı ıod or entage				(f) tization for is year		
42 A mortization of co	sts that bed		ur 2013	tax vear	(see inst	truction	ns)			3-	1					
			1	,	, = = =		- ,									
									\dashv		1					
43 A mortization of co	sts that beg	an before yo	ur 2013 t	tax year						43	İ					
44 Total. Add amount	ts ın column	(f) See the i	nstructio	ns for wh	ere to re	port				44						