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DLN: 93493348000361

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2010

Open to Public Inspection

A Fo	r the	2010 ca	alendar year, or tax year begi	inning 05-01-2010 and ending 04-3	30-2011				
		pplicable	C Name of organization CATHOLIC UNIVERSITY OF AME	RICA			D Empl	loyer i	dentification number
	dress cl	_	Doing Business As				53-0	0196	583
	me cha	_					E Telep	hone	number
_	ıal retu		Number and street (or P O box Controller Office	of mail is not delivered to street address)	Ro	oom/suite	(202	2)319	9-5606
	mınate		620 Michigan Ave NE				C Cross	rocour	uts \$ 362,279,230
_	ended		City or town, state or country, a Washington, DC 20064	and ZIP + 4			G GIOSS	iecei _l	115 \$ 302,279,230
Mpp	olication	n pending	,						
			F Name and address of Cathy R Wood	principal officer	H	(a) Isthisag	group return	for affil	ates? Yes No
			V P for Finance 260 Leal	hy Hall	Н.	(b) Are all a	ffiliates in	cluded	? Fyes F No
			620 Michigan Ave Washington, DC 20064		'''				t (see instructions)
	y-eyen	npt status		◀ (insert no)	, H	(c) Group			
			w cua edu	4 (IIISEIT IIO) 4547(a)(1) (I 327	'				
		an pization	Corporation Trust Assoc	ontion Cithor No.	<u> </u>	L Year of form	antion 10	,,, T	M State of legal domicile DC
_	rt I		imary	Liation Other		L fear or rolli	iation 10	007	M State of legal doffliche DC
			<u> </u>	ssion or most significant activities					
Activities & Governance		of study several p	leading to bachelors', maste professional areas including	s an independent institution of highe rs', doctorate and professional degre engineering, architecture, social ser f which 3,573 are undergraduate	ees in the l	ıberal arts	and scie	ences	, religious studies and
্য 	2	Check th	his box দ if the organizatio	n discontinued its operations or disp	posed of mo	ore than 25	% of its	neta	assets
တ္ဆ	3	Number	of voting members of the gov	verning body (Part VI, line 1a)				3	49
Ě	4	Number	of independent voting member	ıne 1b) .			4	48	
₽₽			mber of individuals employed		5	4,734			
-			mber of volunteers (estimate					6	1,476
				m Part VIII, column (C), line 12 . ne from Form 990-T, line 34	•			7a 7b	647,022
	В	ivet unite	erated business taxable incor	me nom romn 990-1, me 34		Prior	Year	_ / B	-792,322 Current Year
	8	Contri	ibutions and grants (Part VII	I, line 1h)			16,728,	711	16,432,581
뢀	9		,	I, line 2g)			10,989,		258,199,407
Revenue	10	Invest	tment income (Part VIII, col	umn (A), lines 3, 4, and 7d)	🗀	-2,469,377			12,558,680
ά	11	Other	revenue (Part VIII, column ((A), lines 5, 6d, 8c, 9c, 10c, and 11	e)		1,229,909		144,638
	12			11 (must equal Part VIII, column (2.5	256,479,017		287,335,306
	13			Part IX, column (A), lines 1–3)		51,643,768		-	59,755,849
	14			art IX, column (A), line 4)	_	0			0
2 6	15	Saları	es, other compensation, emp	loyee benefits (Part IX, column (A),	lines 5-				
Expenses		10)	16 1 6 6	TV 1 (1) 1 (1)		12	121,735,944		127,023,240
<u></u>	16a			IX, column (A), line 11e)	•		45,	214	112,994
五	17		indraising expenses (Part IX, column	n (D), line 25) * 4,241,372 A), lines 11a-11d, 11f-24f)			30,694,	41E	92 490 550
	17 18			A),	_		54,119,	-	82,480,559 269,372,642
	19			ine 18 from line 12			2,359,	-	17,962,664
Not Assets or Fund Balances			,			Beginning (of Curre		End of Year
Set afae	20	Totala	assets (Part X. line 16)				98,173,	900	534,915,044
A AS	21				.		57,529,	-	153,496,590
ŽΪ	22			act line 21 from line 20	🕇		10,644,		381,418,454
Pai	rt II	Sign	ature Block					'	
know	ledge ledge.	and belie		mined this return, including accompar ete. Declaration of preparer (other than		based on al	l informa		
Here		Cath	v Wood VP for Finance & Treasurer						
_			y Wood VP for Finance & Treasurer or print name and title						
_		Type Print/Type	e or print name and title	Preparer's signature	Date		heck if se		PTIN
_		Туре	e or print name and title e s name	1	Date		heck if se		PTIN Firm's EIN

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

┌Yes ┌No

Form	990 (2010)					Page 2
Par				rvice Accomp	lishments Jestion in this Part II	п	
1	Briefly des	cribe the o	rganızatıon's mıss	ion			
leadı area	ng to bachel s including e	lors', maste ingineering,	rs', doctorate and architecture, soc	professional deg ial service, nursin	rees in the liberal art g, music and law Th		
2	the prior Fo	orm 990 or	990-EZ?		rvices during the ye	ar which were not listed on	┌ Yes ┌ No
	If "Yes," de	scribe thes	e new services oi	n Schedule O			
3	-		ease conducting,	•	nt changes in how it o	onducts, any program	┌ Yes ┌ No
	If "Yes," de	scribe thes	e changes on Sch	nedule O			
4	Section 50	1(c)(3) and	501(c)(4) organ	zations and secti	_	e largest program services are required to report the a n service reported	• •
4a	(Code) (Expenses \$	99,902,673	ıncludıng grants of \$	0) (Revenue	\$ 194,595,151)
	programs of engineering, graduate sti	f study leading , architecture, udents (Fall 20	to bachelors', maste nursing, music and la 010) The University (rs', and professional d w The current enrollr offers 66 Doctoral prog	egrees in the liberal arts a nent of the University is a grams, 113 Masters progra	and sciences, réligious studies and	
4b	(Code) (Expenses \$	59,755,849	including grants of \$	59,755,849) (Revenue	\$ 0)
							graduate study 6,241 scholarships ees were awarded for academic year
4c	(Code) (Expenses \$	31,414,373	including grants of \$	0) (Revenue	\$ 35,015,574)
						rters of 2,240 students Occupanc porting faculty, staff and student s	y rate as of Fall 2010 was 98 7% services
	Other pro	gram servic	es (Describe in S	Schedule O) See :	also Additional Data	for Description	
	(Expense	_	-	including grants o		O) (Revenue \$	27,393,719)

245,566,119

4e

Total program service expenses►\$

Part IV	Checklist	of Require	d 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 instruction)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
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? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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, 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 term, permanent,or quasi- endowments? <i>If</i> " <i>Yes," complete Schedule D, Part V</i>	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, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	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 hospitals? If "Yes," complete Schedule H	20a		Νο
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	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		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	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 \Box Yes \Box No			
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 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2010)

Da 1/	Chalamanta Danaudin	ng Other IRS Filings and Tax Compliance
	Statements Renarnin	na Utner IRS Filinas ana Tay Compliance
	Statements Regarding	ig other tho rinings and rax compliance

	Check if Schedule O contains a response to any question in this Part V		. [고	
			Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 8,668			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
b	return	•	,	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2Ь	Yes	
а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		Νo
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b		N o
		5c		N1 -
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νο
	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	
	file Form 8282?	7c		Νo
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	\vdash		110
h	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.			
а	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 10b			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand			
	13c	145		NI ~
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No

VP for Finance 260 Leahy Hall

620 Michigan Ave NE Washington, DC 20064 (202) 319-5606

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

<u>Se</u>	ction A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No			
6	Does the organization have members or stockholders?	6		Νο			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? \cdot \cdot	7b		Νo			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
b	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο			
	ction B. Policies (This Section B requests information about policies not required by the Internal venue Code.)						
	venue couci,		Yes	No			
10a	Does the organization have local chapters, branches, or affiliates?	10a		No			
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,						
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b					
11a	.1a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form						
h	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a		No			
	Describe in Schedule of the process, if any, used by the organization to review this Form 990						
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes				
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	124	Vaa				
10	describe in Schedule O how this is done	12c	Yes Yes				
13 14	Does the organization have a written document retention and destruction policy?	14	Yes				
14 15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	14	1 45				
а	The organization's CEO, Executive Director, or top management official	15a	Yes				
	Other officers or key employees of the organization	15a	Yes				
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νo			
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the						
	organization's exempt status with respect to such arrangements?	16b					
	List the States with which a copy of this Form 990 is required to be filed.						
17	List the States with which a copy of this Form 990 is required to be filed						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the Cathy R Wood	ie orga	nızatıor	n -			

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees 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, and 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 organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	Posi	(C) Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										
-										
			<u> </u>							

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

(A) Name and Title		(B) A verage hours		tion that a			ıII		compens	Reportable compensation		,	(F) Estimated amount of other		
		per week (describe hours for related organizations in	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensat employee	Former	from the organization of the control	n (W-	1 7 1		compensation from the organization and related organizations		
		Schedule O)	ጥ	E E			ted_								
See A	ddıtıonal Data Table														
1b	Sub-Total							Þ							
c	Total from continuation sheets	<u> </u>						-	3.0.	33,885		0		380,757	
	Total (add lines 1b and 1c) . Total number of individuals (incl	udına but not lir										<u>" </u>		300,737	
	\$100,000 in reportable compen							, ,,,,,,,							
_													Yes	No	
3	Did the organization list any for i on line 1a? <i>If</i> "Yes," complete Sch					еу е •	mploy •	ee, o	rhighest co	mpensa	ated employee	3		No	
4	For any individual listed on line : organization and related organiz		han \$15	0,00											
_	Individual				•	•		•		• •		4	Yes		
5	Did any person listed on line 1a services rendered to the organiz								_		r individual for	5		l No	
Se	ection B. Independent Con Complete this table for your five		nsatadi	ndan	and	ont a	ontro.		that recove	ad mare	. +han				
	\$100,000 of compensation from			пиер	enu	ent	Jonitra		tilat receiv	eu more	: Liidii				
	Nan	(A) ne and business ad	dress							Descri	(B) ption of services		(C Comper		
	LLP x 7247-8001 lelphia, PA 191708001								Acco	ounting Se	ervices			254,365	
Baker Tilly Virchow Krause LLP 8219 Leesburg Pike Suite 800 Vienna, VA 22182 Internal Audit Services							221,841								
Truly Fine Painting & Decorating 7301 S Osborne Rd Upper Marlboro, MD 20772 Painting Services							191,825								
Capita 3321	al Construction Group LLC 12th Street NE Ington, DC 20017								Con	struction	Services		171,435		
Wilson Elser Moskowiz Edelman & Dickert LLP 150 East 42nd St NY, NY 100175639 Legal Services								109,322							
	Total number of independent cont \$100,000 in compensation from t	•	-	ot lır	nıte	d to	those	liste	d above) who	o receiv	ed more than				

Ран	<u> </u>	Statement of Reven	ue		(A) Total revenue	(B) Related or		
							business revenue	excluded from tax under sections 512, 513, or
40 00	1a	Federated campaigns	1 a	690				514
ant		Membership dues						
ıg. ⊞o		·		656,055				
its ≅ a		Fundraising events						
s, g ⊞		Related organizations						
ion I si	_	Government grants (contributions)						
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, grants similar amounts not included above		15,775,836				
nt o	g	Noncash contributions included in l	ines 1a-1f \$	1,163,721				
ပ္ပမ	h	Total. Add lines 1a-1f	or a real of the second		16,432,581			
- ei				Business Code				
ven.	2a	Tuition and Fees		611600	104 505 151	194,595,151	0	О
æ	ь	Federal and Private Grants		541700		25,399,654	0	0
ace ace	С	Housing		721310		18,892,389	0	0
Ser	d	Board		722210		13,169,962	45,519	0
Program Serwce Revenue		Bookstore All other program service re	Wanua	451211	2,907,705		0	- 1
i Do		All other program service re			3,189,027	2,504,729	684,298	0
<u>*</u>		Total. Add lines 2a-2f			258,199,407			
	3	Investment income (including			3,806,964	0	-92,774	3,899,738
	4	and other similar amounts) Income from investment of tax-ex			533		-92,774	
	5		▶		611,152		0	
			(ı) Real	(II) Personal				
	6a	Gross Rents	51,405	0				
	ь	Less rental expenses	0	0				
	С	Rental income or (loss)	51,405	0				
	d	Net rental income or (loss)		_ L	51,405	0	9,979	41,426
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	83,058,386	312,522				
		assets other than inventory						
	ь	Less cost or other basis and	74,332,976	286,749				
		sales expenses Gaın or (loss)	8,725,410	25,773				
		Net gain or (loss)		25,775	8,751,183	0	0	8,751,183
Other Revenue		Gross income from fundraisi (not including \$656,055 of contributions reported on See Part IV, line 18	ng events line 1c)					
Ā		, ,	a a	88,034				
₹		Less direct expenses .	_	86,510				
		Net income or (loss) from fu			1,524		0	1,524
			activities See Part IV, line 19 . a	b				
		Net income or (loss) from ga						
		Gross sales of inventory, les						
			a	913,208				
	ь	Less cost of goods sold .	. b	237,689				
	С	Net income or (loss) from sa	eles of inventory 🟲		675,519	0	0	675,519
		Miscellaneous Revenue		Business Code	70.466	73.466	_	
		NonA cademic Registration F		900099	72,166			
		Loss on Disposal of Equipme	ent	900099	-2,036,216			_
		Gain Settlement CARO		900099	769,088	·	0	0
		All other revenue				0	0	"
		· Iotal. Add lines 11a-11d			-1,194,962			
	12	Total revenue. See Instructi	ons		287,335,306	256 274 620	647,022	12 001 075
	<u> </u>					256,274,628 For	m 990 (20)	13,981,075 10)
							-	

Part IX Statement of Functional Expenses

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

A	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).										
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0	0								
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	59,755,849	59,755,849								
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0								
4	Benefits paid to or for members	0	0								
5	Compensation of current officers, directors, trustees, and key employees	1,905,022	546,969	1,185,770	172,283						
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	0	0	0						
7	Other salaries and wages	102,534,557	93,617,351	6,605,885	2,311,321						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,284,556	6,459,916	683,161	141,479						
9	Other employee benefits	8,762,091	8,228,109	363,768	170,214						
10	Payroll taxes	6,537,014	5,820,140	560,863	156,011						
а	Fees for services (non-employees) Management	16,465,856	15,257,721	1,208,135	0						
b	Legal	727,966	414,576	313,390	0						
c	Accounting	492,531	0	492,531	0						
d	Lobbying	0	0	0	0						
е	Professional fundraising services See Part IV, line 17	112,994			112,994						
f	Investment management fees	1,112,863	0	1,112,863	0						
g	Other	1,095,129	931,804	163,325	0						
12	Advertising and promotion	627,372	587,730	22,196	17,446						
13	Office expenses	14,034,721	12,403,280	986,380	645,061						
14	Information technology	2,454,053	1,966,200	420,220	67,633						
15	Royalties	911,410	903,808	6,149	1,453						
16	Occupancy	19,566,788	17,186,727	2,367,967	12,094						
17	Travel	3,809,974	3,459,849	191,907	158,218						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0						
19	Conferences, conventions, and meetings	419,866	371,756	47,524	586						
20	Interest	181	0	181	0						
21	Payments to affiliates	0	0	0	0						
22	Depreciation, depletion, and amortization	11,039,612	10,396,199	643,413	0						
23 24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of	939,141	0	939,141	0						
а	line 25, column (A) amount, list line 24f expenses on Schedule O) Temporary Services	1,306,698	1,301,998	4,700	0						
a b	Pell & SEO G Grants	2,373,338	2,373,338	4,700	0						
c	Memberships	927,651	840,594	70,043	17,014						
d	Doubtful Account Expenses	1,354,601	3,224	1,351,377	0						
u e	Entertainment	2,644,269	1,914,330	472,771	257,168						
f	All other expenses	176,539	824,651	-648,509	397						
25	Total functional expenses. Add lines 1 through 24f	269,372,642	245,566,119	19,565,151							
26	Joint costs. Check here ► if following	203,372,042	243,300,119	19,303,131	4,241,372						
20	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a										
	combined educational campaign and fundraising solicitation				000 (2010)						

Da	rt X	Balance Sheet					, age ==
		balance once:			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			29,294,318	1	33,249,819
	2	Savings and temporary cash investments		2			
	3	Pledges and grants receivable, net			10,348,634	3	9,910,600
	4	Accounts receivable, net			6,672,255	4	6,888,967
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B), and contributing esponsoring organizations of section 501(c)(9) voluntary emploorganizations (see instructions)	mplo	yers, and			
- 5 2		Schedule L				6	
Assets	7	Notes and loans receivable, net			8,497,002	7	7,394,523
∢	8	Inventories for sale or use			589,045	8	605,951
	9	Prepaid expenses and deferred charges			3,455,816	9	3,825,094
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	364,234,054			
	ь	Less accumulated depreciation	10b	175,091,145	197,550,904	10c	189,142,909
	11	Investments—publicly traded securities	153,181,019	11	177,965,133		
	12	Investments—other securities See Part IV , line 11 \cdot . \cdot			85,731,708	12	102,777,701
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			2,853,199	15	3,154,347
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			498,173,900	16	534,915,044
	17	Accounts payable and accrued expenses .			18,088,174	17	18,843,717
	18	Grants payable				18	
	19	Deferred revenue	4,528,045	19	4,161,762		
	20	Tax-exempt bond liabilities	89,686,922	20	109,508,224		
<u>a</u>	21	Escrow or custodial account liability Complete Part IV of Schedu		21			
abilities	22	Payables to current and former officers, directors, trustees, keepnloyees, highest compensated employees, and disqualified					
<u>Lia</u>		persons Complete Part II of Schedule L	•			22	
	23	Secured mortgages and notes payable to unrelated third partie	s.		26,821,759	23	2,946,252
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D		18,404,101	25	18,036,635	
	26	Total liabilities. Add lines 17 through 25			157,529,001	26	153,496,590
S do S		Organizations that follow SFAS 117, check here ▶ and come through 29, and lines 33 and 34.	plet e	lines 27			
e E	27	Unrestricted net assets			208,043,170	27	232,262,813
Ba	28	Temporarily restricted net assets		50,123,626	28	65,040,971	
Fund Balance	29	Permanently restricted net assets		82,478,103	29	84,114,670	
F		Organizations that do not follow SFAS 117, check here 🕨 🦵 a	nd co	mplete			
5		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other f	unds			32	
ĕ	33	Total net assets or fund balances			340,644,899	33	381,418,454
_	34	Total liabilities and net assets/fund balances			498,173,900	34	534,915,044

Ра	Check if Schedule O contains a response to any question in this Part XI	•				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		287,3	335,306	
2	\-\frac{1}{2}					
3	Revenue less expenses Subtract line 2 from line 1	3		17,9	962,664	
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4					
5	Other changes in net assets or fund balances (explain in Schedule O)	5		22,8	310,891	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		381,4	118,454	
Pai	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII			୮	•	
				Yes	No	
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo	
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes		
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		2c	Yes		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ıssued				
	Separate basis Consolidated basis Both consolidated and separated basis					
3а	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?	ne	3a	Yes		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b	Yes		

Employer identification number

- DO NOT FROCESS

SCHEDULE A (Form 990 or 990EZ)

Name of the organization

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.

OMB No 1545-0047

2010

Open to Public Inspection

CATHOLIC UNIVERSITY OF AMERICA 53-0196583 Reason for Public Charity Status (All organizations must complete this part.) See instructions organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) 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 its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	Type of rganization escribed on s 1- 9 above IRC section (see		(v) Did you not organizati col (i) of suppor	on in your t?	(vi) Is the organizati col (i) orga in the U	(vii) A mount of support	
	instructions))	Yes	No	Yes	No	Yes	No		
Total									

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.)

	dider rate III. If the	organización i	ans to quanty t	maci the tests	iisted below, pie	case complet	c raic III.
S	ection A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from						
Ü	line 4						
S	ection B. Total Support	1				I	
	endar year (or fiscal year beginning						
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
-	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activities	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,
	check this box and stop here	_	r		•	. , . , -	▶ ┌॔
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14	
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15	
							
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec	
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor	. -
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶
r/a	10%-facts-and-circumstances test-						ın.
	is 10% or more, and if the organization made			•			
	in Part IV how the organization mee	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1
ט	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat			•		<u>-</u>	clv
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	LIY ▶
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 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 Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or 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 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts 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 Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a 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 c 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 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15					
16 Public support percentage from 2009 Schedule A, Part III, line 15		16					
Section D. Computation of Investment Income Percentage							
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17					
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18					

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

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As Filed Data -

DLN: 93493348000361

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, 11, or 12.

Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization CATHOLIC UNIVERSITY OF AMERICA 53-0196583 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located 🛌 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 🛊 🔛 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X

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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

0

0

Part	III Organizations Maintaining Co	llections of Art,	His	toric	al Trea	sures, or (Othe	r Similar	Ass	ets (ca	ntınued)
	Using the organization's accession and other items (check all that apply)	r records, check any	of th	ne follo	wing that	are a signific	ant ı	ıse of its co	llectio	n	
а	Public exhibition		d	~	Loan or e	xchange prog	rams	;			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIV	ollections and explain	n hov	w they	further th	ne organizatio	n's e	xempt purpo	se in		
	During the year, did the organization solicit cassets to be sold to raise funds rather than t							nılar	Г	Yes	√ No
Pari	Part IV, line 9, or reported an an						ed "\	es" to For	m 99	0,	
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ıntermed	diary	for co	ntrıbutıor	ns or other as	sets	not	Г	Yes	┌ No
Ь	If "Yes," explain the arrangement in Part XIV	/ and complete the fo	ollow	ıng tal	ble	1		1			
									A mo	unt	
с	Beginning balance						1c				
d	Additions during the year						1d				
e	Distributions during the year						1e				
f	Ending balance						1f				
	Did the organization include an amount on Fo	, ,	21?							Yes	┌ No
	If "Yes," explain the arrangement in Part XIV				-1 113711 1	- F 000	D-		10		
Par	t V Endowment Funds. Complete	(a)Current Year)Prior Y		co Form 990 (c)Two Years Ba		rt IV, IINE (d)Three Yea Back	orc	e) Four Y	ears Back
1a	Beginning of year balance	131,959,052		87,8	867,248	155,879,	254				
b	Contributions	3,579,678		3,9	985,000	1,179,	000				
c	Investment earnings or losses	19,783,877		49,3	353,007	-59,933	876				
d	Grants or scholarships	8,706,141		8,	426,164	8,411,	239				
e	Other expenditures for facilities and programs	1,129,527		;	834,736	845,	891				
f	Administrative expenses	-13,944			-14,697		0				
g	End of year balance	145,500,883		131,	959,052	87,867	248				
2	Provide the estimated percentage of the yea	r end balance held as	5								
а	Board designated or quasi-endowment 🕨	29 4 %									
ь	Permanent endowment ► 70 6 %										
c	Term endowment ► 0 %										
	Are there endowment funds not in the posses	ssion of the organiza	tion	that ar	e held an	d administer	d for	the		F	
	organization by (i) unrelated organizations							Γ	3a(i)	Yes	No No
	(ii) related organizations			•			•		3a(ii)		No
	If "Yes" to 3a(II), are the related organization						٠.	· . · .	3b	1	
	Describe in Part XIV the intended uses of th	·						· [
Part	VI Investments—Land, Buildings	s, and Equipmen	ı t. S	ee Fo	rm 990,	Part X, line	10.				
	Description of investment				ost or other investment			(c) Accumula depreciation		(d) Boo	ok value
1 a L	and					0 23,52	5,227			2	3,525,227
b B	uildings				(0 263,05	3,725	106,16	3,376	15	6,890,349
c L	easehold improvements					0	0		0		0
d E	quipment					0 41,03	3,950	34,19	1,361		6,842,589
e 0	ther					0 36,62	1,152	34,73	5,408		1,884,744

189,142,909

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)	(2)21011111111	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)O ther	16 600 600	_
(A) Money market funds and temporary investments	16,689,680	<u> </u>
(B) Venture capital	4,502,584	F
	, ,	
(C) Limited Partnership and other	44,249,067	F
(D) Real Estate	37,336,370	F_
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	102,777,701	
Part VIII Investments—Program Related. See		3
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		,
Total. (Column (h) should equal Form 990, Part X, col (B) line 13.)		
Total (Column (2) Should equal (Column 350) (all N) cor (2) mile 13)		
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
(a) Descrip	LIOII	(D) Book value
Total (Column (b) should sound Forms 2000 D. 1.V. 1.(D)	E)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
Refundable advances from the U S government	7,311,043	
Split-interest agreements	1,412,862	
Asset Retirement O bligations	9,312,730	
•	- 1 1 3	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	18,036,635	

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	287,335,306
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	269,372,642
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	17,962,664
4	Net unrealized gains (losses) on investments	4	22,810,891
5	Donated services and use of facilities	5	C
6	Investment expenses	6	C
7	Prior period adjustments	7	C
8	Other (Describe in Part XIV)	8	(
9	Total adjustments (net) Add lines 4 - 8	9	22,810,891
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	40,773,555
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
1	Total revenue, gains, and other support per audited financial statements	1	249,608,426
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 0		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-36,938,216
3	Subtract line 2e from line 1	3	286,546,642
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 1,112,863		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	788,664
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	287,335,306
Par		per	
1	Total expenses and losses per audited financial statements	1	208,834,870
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	324,198
3	Subtract line 2e from line 1	3	208,510,672
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,112,863		
Ь	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	60,861,970
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	269,372,642

Part XIV Supplemental Information

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

Ident if ier	Return Reference	Explanation
SchD_P03_S00_L01	Schedule D, Part III, Line 1	The University has elected not to capitalize the cost or value of its collection of works of art, historical treasures, and similar assets
SchD_P03_S00_L04	Schedule D, Part III, Line 4	The University Archives manages a large museum collection, which contains a range of art, historical pieces and other such item Certain pieces, along with relevant collections of field notes from the Archives, have been used by the Anthropology Department to supplement class discussions. Our fine art pieces consist of paintings, antique furniture, Asian arts, and sculptures. Students from the Media Studies Department and the School of Library and Information Sciences routinely view our fine art collection to gain first hand experience of how fine art is preserved, managed, and used. In addition to being given regular tours and presentations on our museum collections, students encounter pieces from the collection on a daily basis because the best items are hung in classrooms, offices, and in prominent hallways and meeting spaces around campus. In addition to books and manuscripts, the Oliveira Lima Library has extensive holdings of art works of significant value for study of Brazilian, Portuguese, Spanish and Latin American history, art history and culture from the 16th to the 20th century. The Library's art has been loaned for exhibition in the U.S., Portugal and Brazil and are in frequent demand for re-production in scholarly publications. In conjunction with the external exhibitions and loans in which the library participates, significant preservation treatment of the loaned object are frequently obtained as a condition of the loan at the borrowers' expense.
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The university's endowment funds are used to fund scholarships, faculty positions, library support and other expenses that are in accordance with the donor's requests and the university's mission as a comprehensive Catholic and American institution of higher learning
SchD_P10_S00_L02	Schedule D, Part X, Line 2	In consideration of accounting standards related to income taxes, the University concluded there were no open positions that result in material unrecognized tax benefits or which may have any effect on its ta-exempt status as of April 30, 2011
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Grants and other assistance to Individuals \$59,755,849 - Form 990 Part IX Line 2 Other Investment Related Expenses - \$6,742 - Form 990 Part IX Line 24f
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Cardinals' Dinner \$73,984 and Golf Tournament Expenses \$12,526 - Form 990 Part VIII Line 8b CUA Press Cost of Goods Sold \$237,689 - Form 990 Part VIII Line 10b
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	Cardinals' Dinner \$73,984 and Golf Tournament Expenses \$12,525 - Form 990 Part VIII Line 8b CUA Press Cost of Goods Sold \$237,689 - Form 990 Part VIII Line 10b
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	Grants and other assistance to Individuals \$59,755,849 - Form 990 Part IX Line 2 Other Investment Related Expenses - \$6,742 - Form 990 Part IX Line 24f

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DLN: 93493348000361

OMB No 1545-0047

SCHEDULE E (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

▶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

Name of the organization CATHOLIC UNIVERSITY OF AMERICA **Employer identification number**

	53-0196583			
Pai	t I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II		V	
	please explain 11 you need more space use Part 11	3	Yes	
	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	42	Vas	
	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4a 4b	Yes Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
	Educational policies?	5e		Νο
	Use of facilities?	5f		Νο
g	Athletic programs?	5g		Νo
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		Νo
		-		
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	V 6.5	
	C. Ret. 1.100 75 55, 1575 2 0 5 507, covering radial hondiscrimination. If No. explain on 1 are 11	7	Yes	

Part II Supplemental Information

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

ldentifier	Return Reference	Explanation
SchE_P01_S00_L03	Schedule E, Part I, Line 3	The University includes its racially nondiscriminatory policy in the Admissions View-book, application, in the packet of information received after admission and in the Financial Aid Guide
SchE_P01_S00_L06	Schedule E, Part I, Line 6	The University receives federal financial aid for students through its participation in the following programs. Federal Work Study, Pell Grants, Academic Competitiveness Grants, National Science and Math Access to Retain Talent (SMART), Perkins Loan Program, Federal Family Education Loans (FFELP) and Federal Supplemental Education Opportunity Grants (SEOG)

Schedule E (Form 990 or 990-EZ) 2010

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DLN: 93493348000361

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

to Part I

c Totals (add lines 3a and 3b)

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

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Emmlerren identifiesti

	e of the organization HOLIC UNIVERSITY OF AMERI	C 4				Employer identii	rication number
ΑI	HOLIC UNIVERSITY OF AMERI	CA				53-0196583	
Pa	rt I General Informatio "Yes" to Form 990, Pa			he United States. C	omplete	e if the organiza	ntion answered
ı	For grantmakers. Does the			ds to substantiate the	amount	of the grants o	r
	assistance, the grantees' elig	gibility for the	grants or assı	stance, and the select	ion crite	rıa used to awaı	rd
	the grants or assistance?						│ Yes │ N
2	For grant makers. Describe in Pa United States	art V the organiz	zation's procedu	res for monitoring the us	e of grant	t funds outside the	e
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region of independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	program spe	vity listed in (d) is a i service, describe ecific type of ce(s) in region	(f) Total expenditures for region/investments in region
	Europe (including Iceland and Greenland)	1	20	Program Services	Study A	broad Education	2,512,14
	Europe (including Iceland and Greenland)	0	0	Fundraising			1,12
	Europe (including Iceland and Greenland)	0	0	Program Services	Athletic	Tournament	2,76
	Europe (including Iceland and Greenland)	0		Speaking at Seminars or Conferences			9,66
	Central America and the Caribbean	0		Program Services		Mission trip	59,51
	Central America and the Caribbean	0		Program Services		broad Education	4,47
	Middle East and North Africa	0		Program Services		broad Education	45,38
	East Asia and the Pacific	0	0	Program Services	Stuy Ab	road Education	87,72
							
	Sub-total Total from continuation sheets						

2,722,777

Part	Part IV, lı	ne 15, for any					plete if the organizate received more than		
	a) Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nun tax-exempt by	hber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are i e or counsel has pro	ecognized as chari ovided a section 50:	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	 as . ▶	
3	Enter total nun	nber of other o	organizations or en	tities					(Form 990) 2010

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete	ıf the organızatıon a	nswered "Yes" to Form 9	990, Part IV, line 16.
	Use Part V if ad	ditional space is ne-	eded.					

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

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	⊽	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	r	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	V	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

information. Identifier	ReturnReference	Explanation
racitimer	Returniterence	Explanation

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

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.

OMB No 1545-0047

2010

Open to Public Inspection

Internal Revenue Service	Attach to Form 990 or Form 990-EZ. F See separate instructions.	Inspection
Name of the organization		Employer identification number
CATHOLIC UNIVERSIT	Y OF AMERICA	
		53-0196583

Part I	Fundraising	Activities.	Complete if	f the organization	answered "Yes" to	Form 990	, Part IV	, line 17.
		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	OUTINDICE II	i die organizacion	41101101 C4 1 C5 C		, ,	, ,

- Internet and e-mail solicitations f Solicitation of government grants
- g 🔽 Phone solicitations
- d In-person solicitations
- Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

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

(i) Name and address of individual 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				
Sharon Henry and Company 42889 Kırkland Street	Cardinals Dinner		No	722,055	44,579	677,476	
Ashburn, VA 20147							
Total			•	722,055	44,579	677,476	

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

DC, FL, MD

Pa	rt II	Fundraising Events. Commore than \$15,000 on Form				
			(a) Event #1 Cardinal's Dinner (event type)	(b) Event #2 Golf Tournament (event type)	(c) O ther Events 0 (total number)	(d) Total Events (Add col (a) through col (c))
E CE	1	Gross receipts	722,055	22,034		744,089
Revenue	2	Less Charitable contributions	656,055	0		656,055
	3	Gross income (line 1 minus line 2)	66,000	22,034		88,034
	4	Cash prizes	С	0		0
မှာ	5	Non-cash prizes	С	0		0
Expenses	6	Rent/facility costs	C	0		0
	7	Food and beverages	C	0		0
<u>D</u> reg	8	Entertainment	C	0		0
Δ	9	Other direct expenses .	73,984	12,526		86,510
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		86,510
	11	Net income summary Combine li				1,524
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	Γ Yes % Γ No	Γ Yes % Γ No	┌ Yes %	
	7	Direct expense summary Add line	s 2 through 5 ın column (d)	•	
	8	Net gaming income summary Com	ibine lines 1 and 7 in colu	ımn (d)	<u> </u>	
9 a b	Is t	er the state(s) in which the organiza the organization licensed to operate No," Explain	gaming activities in each			· Fyes Fno
10a b		re any of the organization's gaming Yes," Explain			the tax year?	·· Fyes Fno

11	Does the organization operate ga	aming activities with nonmembers?		Г үе	s Γ_{No}
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mer	nber of a partnership or other entity		
	formed to administer charitable (jaming?		Г _{Yе}	s Γ_{No}
13	Indicate the percentage of gamin	ng activity operated in			
а	The organization's facility			1	
b	An outside facility			,	
14	Provide the name and address or records	f the person who prepares the organız	ation's gaming/special events books and	d	
	Name 🟲				
	Address 🟲				
15a		ntract with a third party from whom th		_	_
					s No
ь		ning revenue received by the organizated by the third party 🟲 \$	ation > \$ and the		
c	If "Yes," enter name and address	5			
	Name 🟲				
	Address 🟲				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation l	* \$			
	Description of services provided	>			
	Director/officer	Employee	Independent contractor		
17	Mandatory distributions				
а		er state law to make charitable distrib		_	_
p.				· Ye	s No
D		required under state law distributed activities during the tax year - \$	to other exempt organizations or spent		
Par		<u>-</u>	r responses to question on Schedul	e G (see	
	Identifier	ReturnReference	Explanation		

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

DLN: 93493348000361 OMB No 1545-0047

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

Inspection

Name of the organization						Employer identification	on number
CATHOLIC UNIVERSITY OF AMERI	CA					53-0196583	
Part I General Information	n on Grants and	l Assistance					
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization 	vard the grants or ass	sistance?					F Yes □
Part II Grants and Other A Form 990, Part IV, lin duplicated if additional	e 21 for any recipi	ient that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
Enter total number of section 5Enter total number of other orga		_				<u>*</u>	
For Privacy Act and Paperwork Reduction				Cat No 50055P	<u> </u>		le I (Form 990) 2010

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

(a)Type of grant or assistance	(b) Number of recipients	(c)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
See Additional Data Table					

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

Ident if ier	Return Reference	Explanation
SchI_P01_S00_L02	, ,	All scholarships are offered based on manual and or electronic verification of eligibility criteria. If the system disbursement of the scholarships to the student's account occurs only after global and itemtype specific disbursement eligibility rules are met. Upon disbursement, payment allocation rules in the system allocate the scholarships to appropriate predefined charges. After disbursement audits are done at various time intervals to determine continued eligibility.

(f)Description of non-cash assistance

Software ID: 10000077

Software Version: v1.00

EIN: 53-0196583

(c)A mount of

Name: CATHOLIC UNIVERSITY OF AMERICA

(d)A mount of

(e)Method of valuation (book,

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States (a) Type of grant or assistance

(b)Number of

(a) Type of grant of assistance	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	(1)Description of non-cash assistance
Archdiocesan Scholarships	4	185,188	0		
Basselin Scholarship Fund	9	302,220	0		
Catholic School Scholarship	23	84,598	0		
Catholic University Scholarships	5447	55,377,917	0		
Centennial Scholarship	4	50,370	0		
Knights of Columbus Graduate Scholarship	5	136,950	0		
Magı Endowment	8	70,259	0		
McShain Scholarship for Seminarians	36	195,250	0		
Sheehy Scholarship	51	203,682	0		
Student Aıd Endowed Funds	278	1,681,278	0		
Student Aid Private Sources	376	1,468,137	0		
,	•		-	•	

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DLN: 93493348000361

OMB No 1545-0047

Compensation Information

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

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization CATHOLIC UNIVERSITY OF AMERICA

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

53-0196583

Pa	rt I Questions Regarding Compensatio	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	▼ Travel for companions	Γ	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			İ
b	If any of the boxes in line 1a are checked, did the o reimbursement orprovision of all the expenses desc			1b	Yes	
2	Did the organization require substantiation prior to					
	officers, directors, trustees, and the CEO/Executive	e Directo	or, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the organization's CEO/Executive Director Check all t					
	Compensation committee		Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	<u> - </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t from the organization or a related organization?	4a	Yes	
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, lıne 1a,	did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, lıne 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,					
	subject to the initial contract exception described in Part III	n Regs s	section 53 4958-4(a)(3)? If "Yes," describe			1
				8		No
9	If "Yes" to line 8, did the organization also follow th section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns		
		(i) Base (ii) Bonus & Incentive compensation		(iii) Other other deferred reportable compensation		benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) David M O'Connell	(1) (11)	222,133 0	20,000 0	0	0	45,877 0	288,010	0	
(2) John H Garvey President	(1) (11)	198,169 0	50,000 0	17,732 0	0	25,527 0	291,428 0	0	
(3) James F Brennan	(1) (11)	265,395 0	0 0	0	0	,	294,728 0	0	
(4) Cathy R Wood	(1) (11)	216,945 0	0 0	0	0	,_	239,455	0	
(5) Frank G Persico	(ı) (ıı)	190,458 0	3,454 0	1,483 0	0	,	216,397 0	0	
(6) Susan D Pervi	(1) (11)	175,750 0	0 0	0	0		197,958 0	0	
(7) Robert M Sullivan	(1) (11)	170,886 0	0 0	1,397 0	0	· · · · · · · · · · · · · · · · · · ·	194,789 0	0	
(8) W Michael Hendricks	(1) (11)	164,408 0	00	1,586 0	0	· · · · · · · · · · · · · · · · · · ·	194,342 0	0	
(9) Veryl V Miles	(1) (11)	205,225	00	0	0	,	238,179	0	
(10) Ian L Pegg	(1) (11)	345,658 0	0 0	0	0	/	376,307 0	0	
(11) Charles C Nguyen	(1) (11)	211,940 0	0	0	0	22,853	234,793	0	
(12) George E Garvey	(1) (11)	198,117 0	0	0	0	, -	219,605	0	
(13) Rett R Ludwikowski	(1) (11)	188,781 0	0	0	0	,	216,625	0	
(14) Ralph J Rohner	(1) (11)	184,368 0	0	0	0	·	212,026	0	
(15)									
(16)									

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
	Part I, Line 1a	Travel at one class above coach class is occasionally used, primarily for international travel, and the class is usually business class. Reimbursement of companion travel is rare and requires. Vice President or President approval. The reimbursement is taxable to the employee unless the employee can demonstrate the companion provided a significant and non-clerical/non-incidental role. Only two reimbursed companion trips occurred in the year reported and both were included in the employee's taxable compensation. Tax indemnification or gross-up payments are only made for occasional bonus payments and require the approval of the President. These payments are made in accordance with general university compensation policies. We do not provide a housing allowance but do provide a house for the President, and the annual value of the residence portion of the house is disclosed in his compensation and benefits. Membership in any social clubs requires approval by the President and are rare. The University pays dues for presidential membership in a local university club for networking purposes.
	Schedule J, Part I, Line 4	Robert M Sullivan - \$89,688 00

Schedule J (Form 990) 2010

DLN: 93493348000361

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 Schedule O (Form 990).

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service Name of the organization

CATHOLIC UNIVERSITY OF AMERICA

Employer identification number

53-0196583

P	art I Bond Issues									'						
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rıce	(f)	Description	of Purpose	(g) Defeased		Beh	On alf of suer		Pool ncing	
										Yes	No	Yes	No	Yes	No	
A	Series District of Columbia 2007 Revenue Bonds	53-6001131	254839R70	06-30-2007	76,317	7,091 :		il refunding o Bonds , Con ence			X		X		х	
В	Series of District of Columbia 2010 Revenue Bonds	53-6001131	25483VAT1	08-12-2010	39,061	: 1,164	1999	il refunding o Bond, Refina Taxable Rev			X		Х		х	
_																
_																
P	art III Proceeds														<u> </u>	
						1		E	3		С			D		
1	A mount of bonds retired						0		0							
2	A mount of bonds legally defe	ased					0 0									
3	Total proceeds of issue					76,317,091 39,061,164										
4	Gross proceeds in reserve fu	nds				0 0										
5	Capitalized interest from proc	eeds				0 0										
6	Proceeds in refunding escrow					40,208,083										
7	Issuance costs from proceed					1,821	,523		805,222	05,222						
8	Credit enhancement from pro					0 0										
9	Working capital expenditures	·				0 0			0							
10	Capital expenditures from pro	oceeds				34,344,641 0		0								
11	Other spent proceeds						0	:	38,255,942							
12	Other unspent proceeds					1,622	,317	,317 0								
13	Year of substantial completio	n			20	09		2010								
					Yes	No		Yes	No	Yes		No	Yes	<u> </u>	No	
14	Were the bonds issued as par					Х			Х							
15	15 Were the bonds issued as part of an advance refunding issue?		Х			Х										
16	16 Has the final allocation of proceeds been made?			Х		Х										
17	Does the organization mainta allocation of proceeds?		and records to supp	oort the final	×			Х								
Pa	rt IIII Private Business l	Jse			1 -								_			
					A	١		В	•		Ç			D		

property financed by tax-exempt bonds?

financed property?

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

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

No

Χ

Χ

Yes

Yes

No

Χ

Χ

Yes

Yes

No

No

Part III Private Business Use (Continued)

		Δ.	L	ı	В		2	ı)
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		Х		×				
b	Are there any research agreements that may result in private business use of bond-financed property?		X		×				
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	х		х					
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								
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		19%		0 85 %				
6	Total of lines 4 and 5		19%		0 85 %				
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х					

Part IV Arbitrage

		A		В		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X				
			^		^				
2	Is the bond issue a variable rate issue?		×		×				
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?								
			X		X				
ь	Name of provider		ı		1		ı		l
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?	×			Х				
ь	Name of provider	J P Morgan							
С	Term of GIC		5 05						
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	Х							
5	Were any gross proceeds invested beyond an available temporary period?		х		х				
6	Did the bond issue qualify for an exception to rebate?		×		х				

Part V Supplemental Information

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

Ident if ier	Return Reference	Explanat ion

NonCash Contributions

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization CATHOLIC UNIVERSITY OF AMERICA

SCHEDULE M

Department of the Treasury

Internal Revenue Service

(Form 990)

Employer identification number

Pa	rt I Types of Property				53-0196583			
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of determining of amounts		ontribut	юn
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
	Clothing and household							
good								
_	Cars and other vehicles .							
	Boats and planes							
	Intellectual property		10	1 155 244	EM1/			
	Securities—Publicly traded	X	19	1,155,244	FMV			
	Securities—Closely held stock							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles	Х	1	4,000	A pprais al			
19	Food inventory	Х	30	562	Cost			
20	Drugs and medical supplies							
21	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts .							
25	Music	x	2	2.750	A ppraisal			
25	Other ► (Instruments) Classroom			2,730	Appraisar			
26	Other (Furniture)	x	1	1,034	Cost			
	A udio							
27	Other ► (Equipment)	Х	1	131	Cost			
28	O ther ► ()							
29	Number of Forms 8283 received by				29			1
	for which the organization complete	ed Form 8	3283, Part IV, Donee Ackn	owledgement	29	ı	I	
20-	Duman the warm did the arrangestion			who was a subard on Daub T. Johan	1 20 16-1 1		Yes	No
30a	During the year, did the organization							
	must hold for at least three years for exempt purposes for the entire l			on, and which is not require	a to be used	30a		No
b	If "Yes," describe the arrangement	ın Part I	I					
31	Does the organization have a gift a	cceptano	e policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use the contributions?	·	es or related organizations	to solicit, process, or sell	non-cash	32a		Νο
ь	If "Yes," describe in Part II							
	If the organization did not report re describe in Part II	venuesı	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2010

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DLN: 93493348000361

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Name of the organization CATHOLIC UNIVERSITY OF AMERICA **Employer identification number**

53-0196583

	ldentifier	Return Reference	Explanation
F	990_P05_S00_L03b	Form 990, Part V, Line 3b	Catholic University will file Form 990T within the approved extended deadline of February 15, 2012

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11a	Form 990, Part VI, Section B, Line 11a	The Form 990 was sent to the full Board of Trustees prior to filing with an opportunity to ask management questions regarding the form. Donor names were removed from Schedule B due to an anonymity agreement with a donor. The Audit Committee reviewed the details of the Form 990 with management in a committee meeting and reported to the Board of Trustees their review and approval of the form's submission prior to filing.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	The University's Secretary of the Board of Trustees reviews the conflict of interest statements submitted by the Trustees to determine whether any material financial interests have been disclosed. Any such interests are investigated by the Audit Committee and then by the full Board of Trustees, if the Audit Committee believes there is a conflict of interest. If the full Board of Trustees determines the financial interest is a conflict of interest and a University transaction or agreement arises involving that financial interest, the Board may permit the interested Trustee to make a presentation regarding the matter, but the interested Trustee shall be required to leave the meeting prior to the discussion of, and the vote on the proposed transaction or arrangement. Faculty and staff forms are reviewed by the Provost and Vice President of Finance, respectively. They ensure that all forms have been submitted. They review any noted conflicts and discuss them with the individual, as needed, and determine proper disposition. Any potential issues and the disposition of the issue are reviewed by the Vice President of Finance (or the President, for potential conflicts involving a Vice President).

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15		The President's compensation is approved by the Executive Committee of the Board of Trustees, based upon data from comparable institutions. Other officer and key employee compensation is approved by the President based upon performance evaluations and market data. These processes and decisions are contemporaneously documented.

ldentifier	Return Reference	Explanation
1	Form 990, Part VI, Section C, Line 19	The University's governing documents, conflict of interest policy and consolidated audited financial statements are posted on the University's wiebsite

ldentifier	Return Reference	Explanation
F990_P11_S00_L05	Form 990, Part XI, Line 5	The net assets changed by \$22,810,891 in unrealized gain

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

DLN: 93493348000361

Schedule R (Form 990) 2010

2010

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Name of the organization

CATHOLIC UNIVERSITY OF AMERICA

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Employer identification number

Cat No 50135Y

				53-0196583			
Part I Identification of Disregarded Entities (Com	plete if the organization	n answered "Yes'	' on Form 990, Pa	rt IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)		(e) End-of-year assets	(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during		f the organization	n answered "Yes" (on Form 990, Part	I : IV, line 34 becau		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	organı	rolled iization
(1) The Catholic University of America Foundation						Yes	No
Cardinal Station 620 Michigan Ave Washington, DC 20064 52-1284733	Support CUA's programs of study (mission)	DC	501 (c) (3)	Туре І	N/A		No
(2) Albert E Farone & Angela T Farone Foundation							
Cardinal Station 620 Michigan Ave Washington, DC 20064 16-0911612	To support scholarships for CUA students	NY	501 (c) (3)	Туре І	N/A		No
(3) The Washington Research Library Consortium							
901 Commerce Drive Upper Marlboro, MD 20774 52-1559828	Library Services	DC	501 (c) (3)	Туре І	N/A		No
						1	
						1	
						1	
						+	

				ble as a Partner created as a partne					answe	ered "\	es" on Fo	rm 990,	Part	IV, lu	ne 34
(a) Name, address, and EIN of related organization	ne, address, and EIN of Primary activity domicile Direct contr		(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Share of t	(f) total income		(g) f end-of-year assets	nd-of-year allocat		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		(j) General or managing partner?		(k) Percentage ownership
									Yes	No			Yes	No	
				ble as a Corpora ations treated as a							nswered "\	'es" on	Form	990,	Part IV,
	(a) Id EIN of related organiz		(b) Primary activity	(c) Legal domicile (state or foreign country)	·	(d) Direct cor enti) ntrolling	(e) Type of er (C corp, S or trust	ntity corp,		(f) f total income	Shai end-o	y) e of f-year ets		(h) Percentage ownership
See Additional Data Table				,,											
														-	

chedule R (Form 990) 2010		P	age 3
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 30	5.)		
Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	ı	No
b Gift, grant, or capital contribution to other organization(s)	1b		No
c Gift, grant, or capital contribution from other organization(s)	1 c	Yes	
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e	:	No
• Sale of accets to other organization/s)	1f		No
	1g		No
	1h		No
	1i		No
Lease of facilities, equipment, of other assets to other organization(s)	-		+
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
I Performance of services or membership or fundraising solicitations by other organization(s)	11		No
Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36 Note. Complete line 1 if any entity is listed in Parts II, III or IV 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity b Gift, grant, or capital contribution to other organization(s) c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) f Sale of assets to other organization(s) g Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s) k Performance of services or membership or fundraising solicitations for other organization(s)		n Yes	
n Sharing of paid employees	1 n	Yes	
o Reimbursement paid to other organization for expenses	10	,	No
Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 3! Note. Complete line 1 if any entity is listed in Parts II, III or IV turing the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity Gift, grant, or capital contribution to other organization(s) Gift, grant, or capital contribution from other organization(s) Loans or loan guarantees to or for other organization(s) Loans or loan guarantees by other organization(s) Purchase of assets to other organization(s) Exchange of assets Lease of facilities, equipment, or other assets from other organization(s) Performance of services or membership or fundraising solicitations for other organization(s) Performance of services or membership or fundraising solicitations by other organization(s) Sharing of facilities, equipment, mailing lists, or other assets Reimbursement paid to other organization for expenses Reimbursement paid to other organization for expenses Other transfer of cash or property to other organization(s)		Yes	
q Other transfer of cash or property to other organization(s)	1 q	ı	No
r Other transfer of cash or property from other organization(s)	1r		No

2	If the answer to any of the above is "Yes," se	ee the instructions for information on	who must complete this line,	including covered relati	onships and transaction	on thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Albert E Farone & Angela T Farone Foundation	С	452,775	Scholarships awarded to CUA students
(2) The Catholic University of America Foundation	n	38,127	Payroll expenses
(3) The Washington Research Library Consortium	I	644,572	Actual Payments
(4)			
(5)			
(6)			

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) neral or naging irtner?	
			Yes	No		Yes	No		Yes	N	
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Part VII Supplemental Information

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

Identifier I Return Reference I	er Return Reference Explanation
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Schedule R (Form 990) 2010

Software ID: 10000077
Software Version: v1.00

EIN: 53-0196583

Name: CATHOLIC UNIVERSITY OF AMERICA

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

Form 990, Schedule R, Part IV - Ide	entification of	Related Organi	zations raxable	as a Corporatio	on or Trust		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income (\$)	(g) Share of end-of-year assets (\$)	(h) Percentage ownership
Trust #1 N/A New York, NY10001 52-6036955	Charitable Remainder Trust	NY	N/A	Т	665,501	5,765,198	33 %
Trust #2 N/A Washington, DC20001 25-6728054	Charitable Remainder Trust	DC	N/A	Т	17,141	218,343	1 00 %
Trust #3 N/A Baltımore, MD21201 52-6073332	Charitable Remainder Trust	MD	N/A	Т	155,298	1,565,555	7 %
Trust #4 N/A Dayton, OH45402 31-6236156	Charitable Remainder Trust	ОН	N/A	Т	19,674	357,684	10 %
Trust #5 N/A Dayton, OH45402 31-6169026	Charitable Remainder Trust	ОН	N/A	Т	3,089	76,322	10 %
Trust #6 N/A Greenville, SC29601 57-6102081	Charitable Remainder Trust	sc	N/A	Т	15,647	179,505	1 00 %
Trust #7 N/A Bethesda, MD20810 52-1465308	Charitable Remainder Trust	MD	The Catholic University of America	Т	1,756	64,441	1 00 %
Trust #8 N/A Bethesda, MD20810 52-1525513	Charitable Remainder Trust	MD	The Catholic University of America	Т	3,464	215,475	1 00 %
Trust #9 N/A Washington, DC20001 91-2052559	Charitable Remainder Trust	DC	The Catholic University of America	Т	1,710	79,736	1 00 %
Trust #10 N/A Washington, DC20001 05-7128512	Charitable Remainder Trust	DC	The Catholic University of America	Т	42,041	236,260	1 00 %
Trust #11 N/A Washington, DC20001 42-6654646	Charitable Remainder Trust	DC	The Catholic University of America	Т	8,381	375,662	1 00 %

Software ID: 10000077
Software Version: v1.00

EIN: 53-0196583

Name: CATHOLIC UNIVERSITY OF AMERICA

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per		(C tion (hat a	che	')			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
Sister Margaret Mary Fitzpatrick SC Board of Trustee	2	х						0	0	0	
Cardinal Francis E George OMI Board of Trustee	2	х						0	0	0	
Archbishop Jose H Gomez Board of Trustee	2	х						0	0	0	
Archbishop Wilton D Gregory Board of Trustee	2	х						0	0	0	
Cardinal Roger Mahony Board of Trustee	2	х						0	0	0	
Archbishop John J Myers Board of Trustee	2	х						0	0	0	
Cardinal Sean P O'Malley OFM Cap Board of Trustee	2	Х						0	0	0	
William G Parrett Board of Trustee	2	Х						0	0	0	
Bishop Joseph A Pepe Board of Trustee	2	х						0	0	0	
Neɪl J Rauenhorst Board of Trustee	2	х						0	0	0	
Cardinal Justin F Rigali Board of Trustee	2	х						0	0	0	
Andrea Roane Board of Trustee	2	х						0	0	0	
Monsignor Walter R Rossi Board of Trustee	2	х						0	0	0	
Timothy C Scheve Board of Trustee	2	х						0	0	0	
Rodger D Shay Board of Trustee	2	х						0	0	0	
Victor P Smith Esq Board of Trustee	2	х						0	0	0	
Anthony R Tersigni Board of Trustee	2	х						0	0	0	
Archbishop Allen H Vigneron Board of Trustee-Chairman	2	х						0	0	0	
Cardinal Donald W Wuerl Board of Trustee	2	х						0	0	0	
Bishop Michael F Burbidge Board of Trustee	2	х						0	0	0	
Edward W Gillespie Board of Trustee	2	х						0	0	0	
Bishop Paul S Loverde Board of Trustee	2	х						0	0	0	
Bishop Gregory J Mansour Board of Trustee	2	Х						0	0	0	
Bishop Robert J McManus Board of Trustee	2	х						0	0	0	
Archbishop Edwin F O'Brien Board of Trustee	2	х						0	0	0	

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours	Posi t	tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
Anne E O'Donnell M D Board of Trustee	2	Х						0	0	0	
Archbishop Thomas G Wenski Board of Trustee	2	Х						0	0	0	
Anthony A Williams Esq Board of Trustee	2	Х						0	0	0	
Frank G Persico University Relations VP & Chief of Staff	40	X		х				195,395	0	21,002	
Lee Ann Joiner Brady Board of Trustee	2	X						0	0	0	
Joseph L Carlini Board of Trustee	2	X						0	0	0	
Archbishop Robert J Carlson Board of Trustee	2	Х						0	0	0	
John H Garvey President Board of Trustee/President started July 2011	40	Х		х				265,901	0	25,527	
Stephen J Kaneb Board of Trustee	2	Х						0	0	0	
James Moye Board of Trustee	2	Х						0	0	0	
Mark A Murray Board of Trustee	2	Х						0	0	0	
Archbishop John C Nienstedt Board of Trustee	2	Х						0	0	0	
Bishop Thomas J Olmsted Board of Trustee	2	Х						0	0	0	
David M O'Connell President ended 06/30/2011-Comp paid to Cong Mission	40	Х		х				242,133	0	45,877	
Carl A Anderson Board of Trustee	2	Х						0	0	0	
Rıchard D Banzıger Board of Trustee	2	Х						0	0	0	
Mark H Tuohey III Esq Board of Trustee	2	Х						0	0	0	
Timothy R Busch Esq Board of Trustee	2	Х						0	0	0	
Robert F Comstock Esq Board of Trustee	2	Х						0	0	0	
Bıshop Edward P Cullen Board of Trustee	2	Х						0	0	0	
Leo A Daly III Board of Trustee	2	Х						0	0	0	
Cardinal Daniel N DiNardo Board of Trustee	2	Х						0	0	0	
Archbishop Timothy M Dolan Board of Trustee	2	Х						0	0	0	
Bishop Thomas G Doran Board of Trustee	2	Х						0	0	0	
Frederick R Favo Board of Trustee	2	Х						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		(C tion (hat a	che		I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
Archbishop Joseph E Kurtz Board of Trustee	2	Х						0	0	0
James F Brennan Provost	40			х				265,395	0	29,333
Robert M Sullivan VP Development	40			x				172,283	0	22,506
Cathy R Wood VP Finance & Treasurer	40			х				216,945	0	22,510
Susan D Pervi VP Student Life	40			х				175,750	0	22,208
W Michael Hendricks VP Enrollment Management	40			х				165,994	0	28,348
Veryl V Miles Dean Law School & Ordinary Professor	40				х			205,225	0	32,954
Ian L Pegg Director VSL & Ordinary Professor	40					х		345,658	0	30,649
Charles C Nguyen Dean & Ordinary Professor	40					х		211,940	0	22,853
George E Garvey Law School - Professor	40					х		198,117	0	21,488
Rett R Ludwikowski Law School - Ordinary Professor	40					х		188,781	0	27,844
Ralph J Rohner Law School - Ordinary Professor	40					х		184,368	0	27,658

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

) (Expenses \$

4d. Other program services

Other Program Services - Sponsored Research The University received 236 sponsored research awards spanning all disciplines Library Programs There are 1 64 million volumes in the General Library System and in the Law Library CUA Press publishes about 30-35 books each year in theology, philosophy, literature, history and political theory Student Services Program. A number of offices exist to provide

54,493,224 including grants of \$

0) (Revenue \$

27,393,719)

services to students, both for academic and personal needs. These offices include, among others, the Administration Office, Enrollment Services, Career Services, Student Activities, and Campus Ministry. International study is available in Africa, Asia, Australia and Europe Campus Ministry provides many opportunities for community service in the Washington D.C. area and in other parts of the United States

and abroad

(Code