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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 <div> <div>2011</div> <div>Open to Public Inspection</div> </div>
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2011 calendar year, or tax year beginning 05-01-2011 and ending 04-30-2012 B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		C Name of organization THE CATHOLIC UNIVERSITY OF AMERICA <hr/> Doing Business As <hr/> Number and street (or P O box if mail is not delivered to street address) Room/suite Accounting and Financial Reporting 620 Michigan Ave NE <hr/> City or town, state or country, and ZIP + 4 Washington, DC 20064		D Employer identification number 53-0196583 E Telephone number (202) 319-5606 G Gross receipts \$ 440,095,084	
		F Name and address of principal officer CATHY R WOOD 260 Leahy Hall 620 Michigan Ave Washington, DC 20064		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀(Insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527					
J Website: ▶ WWW.CUA.EDU					
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1887		M State of legal domicile DC	

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities THE CATHOLIC UNIVERSITY OF AMERICA IS AN INDEPENDENT INSTITUTION OF HIGHER EDUCATION LOCATED IN WASHINGTON DC, OFFERING PROGRAMS OF STUDY LEADING TO BACHELORS', MASTERS', DOCTORATE AND PROFESSIONAL DEGREES IN THE LIBERAL ARTS AND SCIENCES, RELIGIOUS STUDIES AND SEVERAL PROFESSIONAL AREAS INCLUDING ENGINEERING, ARCHITECTURE, SOCIAL SERVICE, NURSING, MUSIC AND LAW THE CURRENT ENROLLMENT OF THE UNIVERSITY IS APPROXIMATELY 6,894, OF WHICH 3,633 ARE UNDERGRADUATE		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	46
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	45
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	4,642
	6 Total number of volunteers (estimate if necessary)	6	1,896
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	920,172
b Net unrelated business taxable income from Form 990-T, line 34	7b	-205,938	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	16,432,581	14,633,662
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	258,199,407	268,391,461
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12,558,680	27,956,813
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	144,638	6,830,106
		287,335,306	317,812,042
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	59,755,849	66,355,446
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	127,023,240	132,279,221
	16a Professional fundraising fees (Part IX, column (A), line 11e)	112,994	157,863
	b Total fundraising expenses (Part IX, column (D), line 25) <u>3,903,587</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	82,480,559	86,606,455
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	269,372,642	285,398,985
	19 Revenue less expenses Subtract line 18 from line 12	17,962,664	32,413,057
	Net Assets or Fund Balances		Beginning of Current Year
20 Total assets (Part X, line 16)		534,915,044	534,257,150
21 Total liabilities (Part X, line 26)		153,496,590	149,631,646
22 Net assets or fund balances Subtract line 21 from line 20		381,418,454	384,625,504

Part II	Signature Block
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	<div> <div></div> <div>Signature of officer</div> </div>			<div> <div></div> <div>2012-12-13</div> </div> <div>Date</div>
	<div> <div></div> <div>CATHY R WOOD VP FOR FINANCE AND TREASURER</div> </div> <div>Type or print name and title</div>			
Paid Preparer's Use Only	<div> <div>Preparer's signature</div> <div> <div></div> <div>Travis L Patton</div> </div> </div>	Date	<div> <div>Check if self-employed</div> <div><input checked="" type="checkbox"/></div> </div>	<div>Preparer's taxpayer identification number (see instructions)</div> <div>P00369623</div>
	<div> <div>Firm's name (or yours if self-employed), address, and ZIP + 4</div> <div> <div></div> <div>PRICEWATERHOUSE COOPERS LLP</div> </div> </div> <div>1301 K STREET NW</div> <div>WASHINGTON, DC 200053333</div>	<div>EIN</div> <div>13-4008324</div>		
		<div>Phone no</div> <div>(202) 414-1000</div>		

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

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

THE CATHOLIC UNIVERSITY OF AMERICA IS AN INDEPENDENT INSTITUTION OF HIGHER EDUCATION LOCATED IN WASHINGTON DC, OFFERING PROGRAMS OF STUDY LEADING TO BACHELORS', MASTERS', DOCTORATE AND PROFESSIONAL DEGREES IN THE LIBERAL ARTS AND SCIENCES, RELIGIOUS STUDIES AND SEVERAL PROFESSIONAL AREAS INCLUDING ENGINEERING, ARCHITECTURE, SOCIAL SERVICE, NURSING, MUSIC AND LAW THE CURRENT ENROLLMENT OF THE UNIVERSITY IS APPROXIMATELY 6,894, OF WHICH 3,633 ARE UNDERGRADUATE THE UNIVERSITY ALSO RECEIVED SPONSORED RESEARCH AWARDS SPANNING ALL DISCIPLINES

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes

No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes

No

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 105,189,584 including grants of \$ 0) (Revenue \$ 203,794,027)

INSTRUCTION AND DEPARTMENTAL RESEARCH THE CATHOLIC UNIVERSITY OF AMERICA IS AN INDEPENDENT INSTITUTION OF HIGHER EDUCATION LOCATED IN WASHINGTON DC, OFFERING PROGRAMS OF STUDY LEADING TO BACHELORS', MASTERS', DOCTORATE AND PROFESSIONAL DEGREES IN THE LIBERAL ARTS AND SCIENCES, RELIGIOUS STUDIES AND SEVERAL PROFESSIONAL AREAS INCLUDING ENGINEERING, ARCHITECTURE, SOCIAL SERVICE, NURSING, MUSIC AND LAW THE CURRENT ENROLLMENT OF THE UNIVERSITY IS APPROXIMATELY 6,894, OF WHICH 3,633 ARE UNDERGRADUATE AND 3,261 ARE GRADUATE STUDENTS (FALL 2011) THE UNIVERSITY OFFERS 66 DOCTORAL PROGRAMS, 113 MASTERS PROGRAMS, 73 BACHELORS PROGRAMS AND 19 JOINT MASTERS PROGRAMS THE FACULTY CONSISTS OF 394 FULL-TIME AND 403 PART-TIME MEMBERS OF THE FULL-TIME FACULTY 97% HOLD DOCTORAL OR PROFESSIONAL DEGREES

4b

(Code) (Expenses \$ 66,355,446 including grants of \$ 66,355,446) (Revenue \$ 0)

SCHOLARSHIP PROGRAMS FINANCIAL AID TO STUDENTS INCLUDES SCHOLARSHIPS, REMITTED TUITION AND STIPENDS FOR BOTH UNDERGRADUATE AND GRADUATE STUDY 6,651 SCHOLARSHIPS WERE AWARDED DURING FISCAL YEAR 2012

4c

(Code) (Expenses \$ 56,900,963 including grants of \$ 0) (Revenue \$ 29,058,761)

OTHER PROGRAM SERVICES - SPONSORED RESEARCH THE UNIVERSITY RECEIVED 207 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 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) (Expenses \$ 32,372,398 including grants of \$ 0) (Revenue \$ 41,296,645)

AUXILIARY SERVICES UNIVERSITY DORMITORIES CONSIST OF 18 RESIDENCE HALLS WHICH PROVIDE LIVING QUARTERS FOR 2,213 STUDENTS OCCUPANCY RATE AS OF FALL 2011 WAS 98 1% THE UNIVERSITY ALSO PROVIDES RECREATIONAL FACILITIES, DINING SERVICES, PARKING, AND OTHER SELF-SUPPORTING FACULTY, STAFF AND STUDENT SERVICES

4d

Other program services (Describe in Schedule O)

(Expenses \$ 32,372,398 including grants of \$ 0) (Revenue \$ 41,296,645)














4e

Total program service expenses

\$ 260,818,391

Part IV

Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i> 	1	Yes
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	2	Yes
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3	No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	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? <i>If "Yes," complete Schedule C, Part III.</i>	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</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? <i>If "Yes," complete Schedule D, Part II.</i>	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i> 	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? <i>If "Yes," complete Schedule D, Part IV.</i>	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "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		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> 	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? <i>If "Yes," complete Schedule D, Part VII.</i> 	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? <i>If "Yes," complete Schedule D, Part VIII.</i>	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? <i>If "Yes," complete Schedule D, Part IX.</i>	11d	No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> 	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)? <i>If "Yes," complete Schedule D, Part X.</i> 	11f	Yes
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	12a	No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i> 	12b	Yes
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i> 	13	Yes
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I.</i> 	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 ? <i>If "Yes," complete Schedule F, Part II and IV.</i>	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 ? <i>If "Yes," complete Schedule F, Part III and IV.</i>	16	No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> 	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? <i>If "Yes," complete Schedule G, Part II.</i> 	18	Yes
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	19	No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H.</i>	20a	No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b	

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance							
Check if Schedule O contains a response to any question in this Part V <input checked="" type="checkbox"/>							
		Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	9,720				
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					
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return. .	2a	4,642				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? .	3a	Yes				
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O. .	3b			No		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)? .	4a	Yes				
b	If "Yes," enter the name of the foreign country: IT See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a					No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			No		
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? .	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? .	6a					No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? .	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? .	7a	Yes				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? .	7b	Yes				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? .	7c			No		
d	If "Yes," indicate the number of Forms 8282 filed during the year. .	7d					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .	7e					No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f					No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? .	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? .	7h					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? .	8					
9	Sponsoring organizations maintaining donor advised funds.						
a	Did the organization make any taxable distributions under section 4966? .	9a					
b	Did the organization make a distribution to a donor, donor advisor, or related person? .	9b					
10	Section 501(c)(7) organizations. Enter						
a	Initiation fees and capital contributions included on Part VIII, line 12. .	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b					
11	Section 501(c)(12) organizations. Enter						
a	Gross income from members or shareholders. .	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). .	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? .	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. .	12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a					
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. .	13b					
c	Enter the aggregate amount of reserves on hand. .	13c					
14a	Did the organization receive any payments for indoor tanning services during the tax year? .	14a					No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. .	14b					

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	46		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	45
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	No
14	Did the organization have a written document retention and destruction policy?	14	No
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?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization. Cathy R Wood 260 Leahy Hall 620 Michigan Ave Washington, DC 20064 (202) 319-5606

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

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

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

[illegible]

Part VIII

Statement of Revenue

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a8,975					
	b	Membership dues	1b					
	c	Fundraising events	1c779,955					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f13,844,732					
	g	Noncash contributions included in lines 1a-1f \$1,427,530						
	h	Total. Add lines 1a-1f						14,633,662
Program Service Revenue			Business Code					
	2a	TUITION AND FEES	611600	203,794,027	203,794,027			
	b	FEDERAL AND PRIVATE GRANTS	541700	25,183,682	25,183,682			
	c	HOUSING	721310	19,354,166	19,354,166			
	d	FOOD SERVICE	722210	13,652,080	13,622,185	29,895		
	e	BOOKSTORE	451211	2,532,427	2,532,427			
	f	All other program service revenue		3,875,079	2,986,942	888,137	0	
	g	Total. Add lines 2a-2f		268,391,461				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)						
				3,239,191		-30,470	3,269,661	
	4	Income from investment of tax-exempt bond proceeds . .						
				194			194	
	5	Royalties						
				590,843			590,843	
			(i) Real	(ii) Personal				
	6a	Gross rents	87,382					
	b	Less rental expenses						
	c	Rental income or (loss)	87,382	0				
	d	Net rental income or (loss)		87,382				
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	146,198,962	153,826				
	b	Less cost or other basis and sales expenses	121,493,331	142,029				
	c	Gain or (loss)	24,705,631	11,797				
	d	Net gain or (loss)		24,717,428				24,717,428
	8a	Gross income from fundraising events (not including \$779,955 of contributions reported on line 1c) See Part IV, line 18						
		a	100,390					
	b	Less direct expenses	b481,275					
	c	Net income or (loss) from fundraising events . .		-380,885				-380,885
	9a	Gross income from gaming activities See Part IV, line 19						
		a						
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . .		0				
	10a	Gross sales of inventory, less returns and allowances						
		a	941,201					
	b	Less cost of goods sold	b166,407					
c	Net income or (loss) from sales of inventory . .		774,794				774,794	
		Miscellaneous Revenue	Business Code					
11a	NONACADEMIC REGISTRATION FEES	900099	257,259	257,259				
b	CHANGE IN ESTIMATE - CARO	900099	2,717,837	2,717,837				
c	GAIN SETTLEMENT CARO	900099	88,756	88,756				
d	All other revenue		2,694,120	2,694,120	0		0	
e	Total. Add lines 11a-11d		5,757,972					
12	Total revenue. See Instructions		317,812,042	273,231,401	920,172		29,026,807	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	66,355,446	66,355,446		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,789,243	555,817	1,233,426	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	106,679,615	97,316,285	7,277,475	2,085,855
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,478,411	6,720,515	654,983	102,913
9	Other employee benefits	9,597,738	8,845,704	605,918	146,116
10	Payroll taxes	6,734,214	6,052,224	551,103	130,887
11	Fees for services (non-employees)				
a	Management	15,487,314	15,479,617	7,697	
b	Legal	725,208	369,235	355,973	
c	Accounting	545,277	9,727	535,550	
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	157,863			157,863
f	Investment management fees	963,118		963,118	
g	Other	2,622,655	1,439,942	1,077,656	105,057
12	Advertising and promotion	562,306	476,174	84,552	1,580
13	Office expenses	14,425,605	13,038,072	695,286	692,247
14	Information technology	2,502,988	2,345,957	73,743	83,288
15	Royalties	654,130	689,470	-35,380	40
16	Occupancy	19,751,580	16,954,868	2,782,089	14,623
17	Travel	4,139,569	3,618,898	381,966	138,705
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	673,517	455,198	203,629	14,690
20	Interest	70,741		70,741	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	11,033,528	11,033,528		
23	Insurance	1,031,984	128,280	903,704	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	TEMPORARY SERVICES	2,274,617	2,266,035	8,582	
b	PELL& SEOG GRANTS	2,452,941	2,452,941		
c	MEMBERSHIPS	1,237,132	953,287	267,589	16,256
d	DOUBTFUL ACCOUNT EXPENSES	1,235,459		1,235,459	
e					
f	All other expenses	4,216,786	3,261,171	742,148	213,467
25	Total functional expenses. Add lines 1 through 24f	285,398,985	260,818,391	20,677,007	3,903,587
26	Joint costs. Check here <input type="checkbox"/> if following 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	0			

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			33,249,819	1	52,606,278
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			9,910,600	3	9,656,063
	4	Accounts receivable, net			6,888,967	4	7,493,185
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net			7,394,523	7	7,300,669
	8	Inventories for sale or use			605,951	8	522,638
	9	Prepaid expenses and deferred charges			3,825,094	9	3,695,451
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	10a	367,940,736			
	b	Less: accumulated depreciation	10b	183,809,196	189,142,909	10c	184,131,540
	11	Investments—publicly traded securities			177,965,133	11	181,443,237
	12	Investments—other securities. See Part IV, line 11			102,777,701	12	84,208,117
	13	Investments—program-related. See Part IV, line 11				13	0
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			3,154,347	15	3,199,972
	16	Total assets. Add lines 1 through 15 (must equal line 34)			534,915,044	16	534,257,150
Liabilities	17	Accounts payable and accrued expenses			18,843,717	17	19,975,469
	18	Grants payable				18	
	19	Deferred revenue			4,161,762	19	4,693,922
	20	Tax-exempt bond liabilities			109,508,224	20	106,784,491
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			2,946,252	23	2,689,466
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			18,036,635	25	15,488,298
	26	Total liabilities. Add lines 17 through 25			153,496,590	26	149,631,646
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			232,262,813	27	241,147,811
	28	Temporarily restricted net assets			65,040,971	28	57,576,655
	29	Permanently restricted net assets			84,114,670	29	85,901,038
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			381,418,454	33	384,625,504
	34	Total liabilities and net assets/fund balances			534,915,044	34	534,257,150

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	317,812,042
2	Total expenses (must equal Part IX, column (A), line 25)	2	285,398,985
3	Revenue less expenses Subtract line 2 from line 1	3	32,413,057
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	381,418,454
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-29,206,007
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	384,625,504

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization THE CATHOLIC UNIVERSITY OF AMERICA	Employer identification number 53-0196583
--	--

Part I

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support							
Calendar year (or fiscal year beginning in)		(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities, etc (See instructions)					12	
13	First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
14	Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	
15	Public Support Percentage for 2010 Schedule A, Part II, line 14	15	
16a	33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 		
b	33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 		
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization 		
b	10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization 		
18	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions 		

Part IIIPart III

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15		
16 Public support percentage from 2010 Schedule A, Part III, line 15	16		

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17		
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18		
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions			

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Supplemental Financial Statements

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA

Employer identification number
53-0196583

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds 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 <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4

Number of states where property subject to conservation easement is located ► _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
► \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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.

1a

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

b

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

► \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

Part III

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

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒ Public exhibition

d

☒ Loan or exchange programs

b

☒ Scholarly research

e

☐ Other

c

☒ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	159,174,647	137,265,671	103,334,829	168,853,968
b	Contributions	1,968,473	3,579,000	3,985,000	1,179,000
c	Investment earnings or losses	-1,200,191	28,617,976	39,476,842	-57,140,139
d	Grants or scholarships	3,400,709	3,951,745	5,610,947	4,813,872
e	Other expenditures for facilities and programs	6,463,277	6,277,255	3,880,053	4,711,128
f	Administrative expenses	85,881	59,000	40,000	33,000
g	End of year balance	149,993,062	159,174,647	137,265,671	103,334,829

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 27 880 %

b

Permanent endowment ▶ 72 120 %

c

Term endowment ▶ 0 %

3a

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

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐ Yes

☐ No

b

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

3b

☐ Yes

☐ No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		23,525,227		23,525,227
b Buildings		267,319,166	114,061,123	153,258,043
c Leasehold improvements				0
d Equipment		41,418,613	35,913,717	5,504,896
e Other		35,677,730	33,834,356	1,843,374
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				184,131,540

Schedule D (Form 990) 2011

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1317,812,042
2	Total expenses (Form 990, Part IX, column (A), line 25)	2285,398,985
3	Excess or (deficit) for the year Subtract line 2 from line 1	332,413,057
4	Net unrealized gains (losses) on investments	4-29,206,007
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	80
9	Total adjustments (net) Add lines 4 - 8	9-29,206,007
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	103,207,050

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1221,863,709
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a	Net unrealized gains on investments2a-29,206,007	
b	Donated services and use of facilities2b	
c	Recoveries of prior year grants2c	
d	Other (Describe in Part XIV)2d647,682	
e	Add lines 2a through 2d	2e-28,558,325
3	Subtract line 2e from line 1	3250,422,034
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a963,118	
b	Other (Describe in Part XIV)4b66,426,890	
c	Add lines 4a and 4b	4c67,390,008
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5317,812,042

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return		
1	Total expenses and losses per audited financial statements	1218,656,659
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
a	Donated services and use of facilities2a	
b	Prior year adjustments2b	
c	Other losses2c	
d	Other (Describe in Part XIV)2d647,682	
e	Add lines 2a through 2d	2e647,682
3	Subtract line 2e from line 1	3218,008,977
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b4a963,118	
b	Other (Describe in Part XIV)4b66,426,890	
c	Add lines 4a and 4b	4c67,390,008
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5285,398,985

Part XIVSupplemental 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.

Identifier	Return Reference	Explanation
Collections of art - financial statement footnote	Schedule D, Part III, Line 1a	THE UNIVERSITY HAS ELECTED NOT TO CAPITALIZE THE COST OR VALUE OF ITS COLLECTION OF WORKS OF ART, HISTORICAL TREASURES, AND SIMILAR ASSETS
Collections of art - description of collections	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 ITEMS. 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 ARTS PIECES CONSISTS OF PAINTINGS, ANTIQUE FURNITURE, ASIAN ARTS, AND SCULPTURES. STUDENTS FROM 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 OBJECTS ARE FREQUENTLY OBTAINED AS A CONDITION OF THE LOAN AT THE BORROWERS' EXPENSE.
Intended uses of endowment funds	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.
FIN 48 (ASC 740) footnote	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 TAX-EXEMPT STATUS AS OF APRIL 30, 2012.
Other revenues in audited financial statements not in form 990	Schedule D, Part XII, Line 2d	CARDINALS DINNER EXPENSES - 466540, CUA PRESS COST OF GOODS SOLD - 166407, ATHLETICS GOLF TOURNAMENT EXPENSES - 14735,
Other revenues in form 990 not in audited financial statements	Schedule D, Part XII, Line 4b	GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS - 66355446, UNITRUST PAYMENTS - 31816, STD T LOAN PRGMS-COLLCTN FEES - 39628,
Other expenses in audited financial statements not in form 990	Schedule D, Part XIII, Line 2d	CARDINALS DINNER EXPENSES - 466540, CUA PRESS COST OF GOODS SOLD - 166407, ATHLETICS GOLF TOURNAMENT EXPENSES - 14735,
Other expenses in form 990 not in audited financial statements	Schedule D, Part XIII, Line 4b	UNITRUST PAYMENTS - 31816, STD T LOAN PRGMS-COLLCTN FEES - 39628, GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS - 66355446,

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA

Employer identification number
53-0196583

Part I		YES	NO
<div>1</div> <div>Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?</div>	1	Yes	
	2	Yes	
	3	Yes	
	4a	Yes	
<div>2</div> <div>Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?</div>	4b	Yes	
	4c	Yes	
	4d	Yes	
	5a		No
<div>3</div> <div>Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II</div>	5b		No
	5c		No
	5d		No
	5e		No
<div>4</div> <div>Does the organization maintain the following?</div> <div>a Records indicating the racial composition of the student body, faculty, and administrative staff?</div> <div>b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?</div> <div>c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?</div> <div>d Copies of all material used by the organization or on its behalf to solicit contributions?</div> <div>If you answered "No" to any of the above, please explain If you need more space, use Part II</div>	5f		No
	5g		No
	5h		No
	6a	Yes	
<div>5</div> <div>Does the organization discriminate by race in any way with respect to</div> <div>a Students' rights or privileges?</div> <div>b Admissions policies?</div> <div>c Employment of faculty or administrative staff?</div> <div>d Scholarships or other financial assistance?</div> <div>e Educational policies?</div> <div>f Use of facilities?</div> <div>g Athletic programs?</div> <div>h Other extracurricular activities?</div> <div>If you answered "Yes" to any of the above, please explain If you need more space, use Part II</div>	6b		No
	7	Yes	

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
Financial aid or assistance from a governmental agency	Schedule E, Line 6a	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 DIRECT LENDING AND FEDERAL SUPPLEMENTAL EDUCATION OPPORTUNITY GRANTS (SEOG).

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA

Employer identification number
53-0196583

Part I

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States
- 3 Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
EUROPE (INCLUDING ICELAND AND GREENLAND)	1	27	PROGRAM SERVICES	GLOBAL EDUCATION PROGRAMS	2,686,709
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	FUNDRAISING		8,622
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	CONDUCTING BOARD MEETINGS		30,319
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	CONFERENCE ATTENDANCE	6,538
SOUTH AMERICA	0	0	FUNDRAISING		1,659
SOUTH AMERICA	0	0	PROGRAM SERVICES	GLOBAL EDUCATION PROGRAMS	1,945
CENTRAL AMERICA AND THE CARIBBEAN	0	0	FUNDRAISING		149
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	STUDENT MISSION TRIP	74,975
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	GLOBAL EDUCATION PROGRAMS	4,330
NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	GLOBAL EDUCATION PROGRAMS	12,823
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	GLOBAL EDUCATION PROGRAMS	10,508
3a Sub-total					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	1	27			2,838,577

[illegible]

3 Enter total number of other organizations or entities ►

Part III

[illegible]

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*

☐

Yes

☒

No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*

☐

Yes

☒

No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*

☐

Yes

☒

No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*

☐

Yes

☒

No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*

☐

Yes

☒

No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*

☐

Yes

☒

No

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA

Employer identification number
53-0196583

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

1

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

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and e-mail solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

2a

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

☒ Yes ☐ No

b

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
TELECOMP 3375 BRIGHTON HENRIETTA TL RD ROCHESTER, NY 14623	PHONE PROGRAM		No	377,721	172,720	205,001
SHARON HENRY AND COMPANY 42889 KIRKLAND STREET ASHBURN, VA 20147	CARDINALS' DINNER		No	852,755	39,072	813,683
GO PRODUCTIONS LLC 1123 ZONOLITE ROAD SUITE 19 ATLANTA, GA 30306	PRODUCTION OF CUA DONOR SOLICITATION VIDEOS		No	0	21,750	21,750
THE STELTER COMPANY 10435 NEW YORK AVENUE DES MOINES, IN 50322	PLANNED GIVING NEWSLETTER		No	0	9,245	9,245
IMPACT COMMUNICATIONS INC 906 PENNSYLVANIA AVENUE SE WASHINGTON, DC 200032140	WROTE 5 HIGH-END SOLICITATION APPEALS		No	0	7,500	7,500
Total ▶				1,230,476	250,287	1,057,179

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, GA, MD, MI, MO, NC

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		CARDINALS' DINNER (event type)	GOLF TOURNAMENT (event type)	(total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts	852,755	27,590	880,345
	2	Less Charitable contributions	779,955	0	779,955
	3	Gross income (line 1 minus line 2)	72,800	27,590	0
Direct Expenses	4	Cash prizes			0
	5	Non-cash prizes			0
	6	Rent/facility costs			0
	7	Food and beverages			0
	8	Entertainment			0
	9	Other direct expenses	466,540	14,735	481,275
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			(481,275)
	11	Net income summary Combine lines 3 and 10 in column (d). ▶			-380,885

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
Direct Expenses	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			()
	8	Net gaming income summary Combine lines 1 and 7 in column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11

Does the organization operate gaming activities with nonmembers?

☐ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☐ No

13

Indicate the percentage of gaming activity operated in

a

The organization's facility

13a

b

An outside facility

13b

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name  _____



Address  _____

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?


☐ Yes ☐ No

b

If "Yes," enter the amount of gaming revenue received by the organization  \$ _____ and the amount of gaming revenue retained by the third party  \$ _____


c


If "Yes," enter name and address


Name  _____

Address  _____

16 Gaming manager information

Name  _____

Gaming manager compensation  \$ _____

Description of services provided  _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17


Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☐ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ _____

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
Professional fundraising services vs expense payments or reimbursements	Schedule G, Part I, Line 2b	TELECOMP-\$149,989 IN FEES AND \$22,731 IN EXPENSE REIMBURSEMENTS THE ANNUAL TELEPHONE FUNDRAISING FEES ARE PAID IN FOUR INSTALLMENTS THE SERVICE PROVIDER PROVIDES A BASIC DESCRIPTION OF ANY OUT-OF-POCKET EXPENSES BILLED ,SHARON HENRY AND COMPANY-PAYMENT OF FEES \$33,328 AND EXPENSES \$5,744 WE PAY BOTH FEES AND EXPENSES TO THIS SERVICE PROVIDER THE FEES ARE PAID ON A RATE PER HOUR BASIS, WITH DETAIL PROVIDED ON THE TASKS PERFORMED THE SERVICE PROVIDER PROVIDES A BASIC DESCRIPTION OF ANY OUT-OF-POCKET EXPENSES BILLED ,

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA

Employer identification number
53-0196583

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

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

2

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

3

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

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

Part IV

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

Identifier	Return Reference	Explanation
Procedures for monitoring use of grant funds	Schedule I, Part I, Line 2	ALL SCHOLARSHIPS ARE OFFERED BASED ON MANUAL AND OR ELECTRONIC VERIFICATION OF ELIGIBILITY CRITERIA 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

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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.

Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA

Employer identification number

53-0196583

Part I

Questions Regarding Compensation

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

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JOHN H GARVEY	(i)	410,532	40,000	34,944	24,500	37,209	547,185	0
	(ii)	0	0	0	0	0	0	0
(2) JAMES F BRENNAN	(i)	289,948	0	0	24,500	30,455	344,903	0
	(ii)	0	0	0	0	0	0	0
(3) CATHY R WOOD	(i)	245,887	0	0	24,500	25,537	295,924	0
	(ii)	0	0	0	0	0	0	0
(4) FRANK G PERSICO	(i)	210,475	0	1,640	21,267	23,245	256,627	0
	(ii)	0	0	0	0	0	0	0
(5) W MICHAEL HENDRICKS	(i)	179,073	0	1,586	18,617	30,859	230,135	0
	(ii)	0	0	0	0	0	0	0
(6) VERYL V MILES	(i)	211,238	0	0	22,174	34,623	268,035	0
	(ii)	0	0	0	0	0	0	0
(7) LAWRENCE R POOS	(i)	163,920	0	0	16,342	17,809	198,071	0
	(ii)	0	0	0	0	0	0	0
(8) IAN L PEGG	(i)	384,528	0	0	24,500	30,928	439,956	0
	(ii)	0	0	0	0	0	0	0
(9) CHARLES C NGUYEN	(i)	241,462	0	0	24,056	26,152	291,670	0
	(ii)	0	0	0	0	0	0	0
(10) GEORGE E GARVEY	(i)	202,542	0	0	20,257	21,995	244,794	0
	(ii)	0	0	0	0	0	0	0
(11) MARSHALL J BREGER	(i)	188,550	0	0	20,455	32,714	241,719	0
	(ii)	0	0	0	0	0	0	0
(12) RETT R LUDWIKOWSKI	(i)	188,142	0	0	19,252	28,433	235,827	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.

Identifier	Return Reference	Explanation
First-class or charter travel	Schedule J, 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.
Travel for companions	Schedule J, Part I, Line 1a	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. THE UNIVERSITY REIMBURSED COMPANION TRAVEL FOR CERTAIN TRIPS MADE BY THE PRESIDENT'S WIFE. THE TOTAL REIMBURSED AMOUNT FOR TAX YEAR 2011 WAS \$5,618. ALL TRIPS WERE INCLUDED IN TAXABLE EARNINGS FOR THE PRESIDENT, MR. JOHN GARVEY, IN THE APPROPRIATE TAX YEAR.
Tax indemnification and gross-up payments	Schedule J, Part I, Line 1a	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.
Housing allowance or residence for personal use	Schedule J, Part I, Line 1a	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.

Schedule K (Form 990)	<div>Supplemental Information on Tax Exempt Bonds</div> <div>▶ 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.</div>	OMB No 1545-0047
		2011
		Open to Public Inspection

Name of the organization THE CATHOLIC UNIVERSITY OF AMERICA	Employer identification number 53-0196583
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Part I

Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	SERIES DISTRICT OF COLUMBIA 2007 REVENUE BONDS	53-6001131	254839R70	06-30-2007	76,317,091	PARTIAL REFUNDING OF SERIES 1999 BONDS, CONSTRUCT NEW RESIDENCE		X		X		X
B	SERIES OF DISTRICT OF COLUMBIA 2010 REVENUE BONDS	53-6001131	25483VAT1	08-12-2010	39,061,164	PARTIAL REFUNDING OF SERIES 1999 BOND, REFINANCING OF 2004 TAXABLE REVEUNE BONDS		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	0		0					
2	Amount of bonds defeased	0		0					
3	Total proceeds of issue	76,317,091		39,061,164					
4	Gross proceeds in reserve funds	0		0					
5	Capitalized interest from proceeds	0		0					
6	Proceeds in refunding escrow	40,208,083		0					
7	Issuance costs from proceeds	1,821,523		805,222					
8	Credit enhancement from proceeds	0		0					
9	Working capital expenditures from proceeds	0		0					
10	Capital expenditures from proceeds	34,819,220		0					
11	Other spent proceeds	0		38,255,942					
12	Other unspent proceeds	1,541,001		0					
13	Year of substantial completion	2009		2010					
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X				
15	Were the bonds issued as part of an advance refunding issue?	X		X					
16	Has the final allocation of proceeds been made?		X	X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X		X				
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %		0 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	2 02 %		0 90 %					
6	Total of lines 4 and 5	2 02 %		0 90 %					
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X					

Part IV

Arbitrage

		A		B		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?		X		X				
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X		X				
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?	X			X				
b	Name of provider	J P MORGAN - EXPIRED							
c	Term of GIC	5 1							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X							
5	Were any gross proceeds invested beyond an available temporary period?		X		X				
6	Did the bond issue qualify for an exception to rebate?		X		X				

Part V

Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations ☐ Yes ☒ No

Part VI

Supplemental Information

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

Identifier	Return Reference	Explanation
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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

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Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA

Employer identification number

53-0196583

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$ _____										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) IAN PEGG	KEY EMPLOYEE	199,000	THE UNIVERSITY RECEIVED REVENUE FROM A CONTRACT WITH ZT3, A COMPANY AT WHICH MR PEGG IS ON THE BOARD OF DIRECTORS		No

Part V

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

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2011

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THE CATHOLIC UNIVERSITY OF AMERICA

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53-0196583

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	24	812,985	MARKET VALUE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential	X	1	519,000	OPINIONS OF EXPERTS
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (PANASONIC PROJECTOR)	X	1	8,200	COST
26 Other ► (PIANO - YAMAHA - BLACK EBONY)	X	1	7,000	OPINIONS OF EXPERTS
27 Other ► (STEINWAY GRAND PIANO)	X	1	45,120	OPINIONS OF EXPERTS
28 Other ► (GOLF OUTING)	X	1	11,214	COST
Other ► (DINNER ON 11/22/12)	X	1	9,915	COST
Other ► (CLOTHING AND PROPS)	X	1	10,180	MARKET VALUE
Other ► (DESK)	X	1	400	COST
Other ► (WINE)	X	1	3,516	COST
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	10		
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a	Yes	No	No
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a		No	No
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part III

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
Explanations of reporting method for number of contributions	Schedule M, Part I	SECURITIES - PUBLICLY TRADED NUMBER OF CONTRIBUTIONS OTHER ITEM OTHER ITEM OTHER ITEM OTHER CONTRIBUTION OTHER CONTRIBUTION OTHER CONTRIBUTION OTHER CONTRIBUTION OTHER CONTRIBUTION OTHER CONTRIBUTION REAL ESTATE - RESIDENTIAL ITEM
Number of contributions or items contributed	Schedule M, part I, column (b), Line 9	NUMBER OF CONTRIBUTIONS
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=PANASONIC PROJECTOR	ITEM
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=PIANO-YAMAHA-BLACK EBONY	ITEM
Number of contributions or items contributed	Schedule M, part I, column (b), Line other=STEINWAY GRAND PIANO	ITEM

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

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Identifier	Return Reference	Explanation
Description of other program services	Form 990, Part III, Line 4d	AUXILIARY SERVICES UNIVERSITY DORMITORIES CONSIST OF 18 RESIDENCE HALLS WHICH PROVIDE LIVING QUARTERS FOR 2,213 STUDENTS OCCUPANCY RATE AS OF FALL 2011 WAS 98 1% THE UNIVERSITY ALSO PROVIDES RECREATIONAL FACILITIES, DINING SERVICES, PARKING, AND OTHER SELF-SUPPORTING FACULTY, STAFF AND STUDENT SERVICES
Reason for not filing Form 990-T	Form 990, Part V, Line 3b	THE FORM 990-T WILL BE FILED BY THE EXTENDED DUE DATE OF FEBRUARY 15, 2013
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	THE FORM 990 WAS SENT TO THE FULL BOARD OF TRUSTEES PRIOR TO FILING WITH AN OPPORTUNITY TO ASK MANAGEMENT QUESTIONS REGARDING THE FORM 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
Conflict of interest policy	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 THE 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 COMPLIANCE OFFICER 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)
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	THE PRESIDENT'S COMPENSATION IS APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, BASED UPON DATA FROM COMPARABLE INSTITUTIONS
Process used to establish compensation of other officers/key employees	Form 990, Part VI, Section B, Line 15b	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
Governing documents, conflict of interest policy and financial statements available to the public	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 WEBSITE
Other changes in net assets or fund balances	Form 990, Part XI, Line 5	NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS - -29206007,

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2011

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Name of the organization
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Employer identification number
53-0196583

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(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	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) THE CATHOLIC UNIVERSITY OF AMERICA FOUNDATION 620 MICHIGAN AVE NE WASHINGTON, DC 20064 52-1284733	SUPPORT CUA'S PROGRAMS	DC	501(C)(3)	11 - Type I	NA		No
(2) ALBERT E FARONE & ANGELA T FARONE FOUNDATION 620 MICHIGAN AVE NE WASHINGTON, DC 20064 16-0911612	TO PROVIDE SCHOLARSHIPS	NY	501(C)(3)	11 - Type I	NA		No
(3) THE WASHINGTON RESEARCH LIBRARY CONSORTIUM 901 COMMERCE DRIVE UPPER MARLBORO, MD 20774 52-1559828	LIBRARY SERVICES	DC	501(C)(3)	11 - Type II	NA		No

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(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	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(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
See Additional Data Table							

Part V

Transactions With Related Organizations

(Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Yes

No

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1a		No
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1b		No
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1c	Yes	
-----------	------------	--

1d		No
-----------	--	-----------

1e		No

1f		No
-----------	--	-----------

1g		No
-----------	--	-----------

1h		No
-----------	--	-----------

1i		No
-----------	--	-----------

1j	No
----	----

1k	Yes	
----	-----	--

11	Yes	
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1m	Yes	
----	-----	--

1n	Yes	
----	-----	--

1o		No
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1p	Yes	
----	-----	--

1q		No
-----------	--	-----------

1r		No
-----------	--	-----------

2

(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	C	561,700	SCHOLARSHIPS AWARDED TO CUA STUDENTS
2) ALBERT E FARONE & ANGELA T FARONE FOUNDATION	P	453,525	REIMBURSEMENT PAYMENT FOR EXPENSES PAID BY CUA
3) THE WASHINGTON RESEARCH LIBRARY CONSORTIUM	L	654,952	ACTUAL PAYMENTS
4) THE CATHOLIC UNIVERSITY OF AMERICA FOUNDATION	P	95,697	REIMBURSEMENT PAYMENT FOR EXPENSES
5)			
6)			

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.

[illegible]

Part VII

Supplemental Information

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

Identifier	Return Reference	Explanation	
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Additional Data

Software ID: 11000230
Software Version: v2011.1.0
EIN: 53-0196583
Name: THE CATHOLIC UNIVERSITY OF AMERICA

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services
(Code) (Expenses \$ 32,372,398 including grants of \$ 0) (Revenue \$ 41,296,645) AUXILIARY SERVICES UNIVERSITY DORMITORIES CONSIST OF 18 RESIDENCE HALLS WHICH PROVIDE LIVING QUARTERS FOR 2,213 STUDENTS OCCUPANCY RATE AS OF FALL 2011 WAS 98 1% THE UNIVERSITY ALSO PROVIDES RECREATIONAL FACILITIES, DINING SERVICES, PARKING, AND OTHER SELF-SUPPORTING FACULTY, STAFF AND STUDENT SERVICES

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN H GARVEY PRESIDENT	40 00	X		X				485,476	0	61,709
ANDREA ROANE BOARD OF TRUSTEE	2 00	X						0	0	0
ANNE E O'DONNELL M D BOARD OF TRUSTEE	2 00	X						0	0	0
ANTHONY A WILLIAMS ESQ BOARD OF TRUSTEE	2 00	X						0	0	0
ANTHONY R TERSIGNI BOARD OF TRUSTEE	2 00	X						0	0	0
ARCHBISHOP ALLEN H VIGNERON BOARD OF TRUSTEE	2 00	X						0	0	0
ARCHBISHOP EDWIN F O'BRIEN BOARD OF TRUSTEE	2 00	X						0	0	0
ARCHBISHOP JOHN C NIENSTEDT BOARD OF TRUSTEE	2 00	X						0	0	0
ARCHBISHOP JOHN J MYERS BOARD OF TRUSTEE ENDED JULY 1 2011	2 00	X						0	0	0
ARCHBISHOP JOSE H GOMEZ BOARD OF TRUSTEE	2 00	X						0	0	0
ARCHBISHOP JOSEPH E KURTZ BOARD OF TRUSTEE	2 00	X						0	0	0
ARCHBISHOP PAUL S COAKLEY BOARD OF TRUSTEE	2 00	X						0	0	0
ARCHBISHOP ROBERT J CARLSON BOARD OF TRUSTEE	2 00	X						0	0	0
ARCHBISHOP THOMAS G WENSKI BOARD OF TRUSTEE	2 00	X						0	0	0
ARCHBISHOP TIMOTHY M DOLAN BOARD OF TRSUTEE	2 00	X						0	0	0
ARCHBISHOP WILTON D GREGORY BOARD OF TRUSTEE	2 00	X						0	0	0
BISHOP EDWARD P CULLEN BOARD OF TRUSTEE ENDED JULY 1 2011	2 00	X						0	0	0
BISHOP GREGORY J MANSOUR BOARD OF TRUSTEE	2 00	X						0	0	0
BISHOP JOSEPH A PEPE BOARD OF TRUSTEE	2 00	X						0	0	0
BISHOP MICHAEL F BURBRIDGE BOARD OF TRUSTEE	2 00	X						0	0	0
BISHOP NICHOLAS A DIMARZIO BOARD OF TRUSTEE	2 00	X						0	0	0
BISHOP PAUL S LOVERDE BOARD OF TRUSTEE	2 00	X						0	0	0
BISHOP ROBERT J MCMANUS BOARD OF TRUSTEE	2 00	X						0	0	0
BISHOP SALVATORE J CORDILEONE BOARD OF TRUSTEE	2 00	X						0	0	0
BISHOP THOMAS G DORAN BOARD OF TRUSTEE ENDED JULY 1 2011	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BISHOP THOMAS J OLMSTED BOARD OF TRUSTEE	2 00	X						0	0	0
BISHOP THOMAS J TOBIN BOARD OF TRUSTEE	2 00	X						0	0	0
CARDINAL DANIEL N DINARDO BOARD OF TRUSTEE	2 00	X						0	0	0
CARDINAL DONALD W WUERL BOARD OF TRUSTEE	2 00	X						0	0	0
CARDINAL FRANCIS E GEORGE OMI BOARD OF TRUSTEE	2 00	X						0	0	0
CARDINAL JUSTIN F FRIGALI BOARD OF TRUSTEE JULY 19 2011	2 00	X						0	0	0
CARDINAL ROGER MAHONEY BOARD OF TRUSTEE ENDED MARCH 1 2011	2 00	X						0	0	0
CARDINAL SEAN P O'MALLEY OFM CAP BOARD OF TRUSTEE	2 00	X						0	0	0
CARDINAL TIMOTHY M DOLAN BOARD OF TRUSTEE	2 00	X						0	0	0
CARL A ANDERSON BOARD OF TRUSTEE	2 00	X						0	0	0
EDWARD W GILLESPIE BOARD OF TRUSTEE	2 00	X						0	0	0
FREDERICK R FAVO BOARD OF TRUSTEE ENDED JULY 1 2011	2 00	X						0	0	0
JAMES MOYE BOARD OF TRUSTEE	2 00	X						0	0	0
JOSEPH L CARLINI BOARD OF TRUSTEE	2 00	X						0	0	0
LEE ANN JOINER BRADY BOARD OF TRUSTEE	2 00	X						0	0	0
LEO A DALY III BOARD OF TRUSTEE	2 00	X						0	0	0
MARK A MURRAY BOARD OF TRUSTEE	2 00	X						0	0	0
MARK H TUOHEY III ESQ BOARD OF TRUSTEE	2 00	X						0	0	0
MONSIGNOR PETER J VAGHI BOARD OF TRUSTEE	2 00	X						0	0	0
MONSIGNOR WALTER R ROSSI BOARD OF TRUSTEE	2 00	X						0	0	0
NEIL J RAUENHORST BOARD OF TRUSTEE	2 00	X						0	0	0
RICHARD D BANZIGER BOARD OF TRUSTEE	2 00	X						0	0	0
ROBERT F COMSTOCK ESQ BOARD OF TRUSTEE	2 00	X						0	0	0
RODGER D SHAY BOARD OF TRUSTEE	2 00	X						0	0	0
SISTER JANET EISNER SND BOARD OF TRUSTEE	2 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SISTER MARGARET MARY FITZPATRICK SC BOARD OF TRUSTEE ENDED JULY 1 2011	2 00	X						0	0	0
STEPHEN J KANE BOARD OF TRUSTEE	2 00	X						0	0	0
TIMOTHY C SCHEVE BOARD OF TRUSTEE	2 00	X						0	0	0
TIMOTHY R BUSCH ESQ BOARD OF TRUSTEE	2 00	X						0	0	0
VICTOR P SMITH ESQ BOARD OF TRUSTEE	2 00	X						0	0	0
WILLIAM G PARRETT BOARD OF TRUSTEE JULY 1 2011	2 00	X						0	0	0
CATHY R WOOD VICE PRESIDENT FOR FINANCE & TREASURER	40 00			X				245,887	0	50,037
FRANK G PERSICO VICE PRESIDENT UNIVERSITY RELATIONS & CHIEF OF STAFF	40 00			X				212,115	0	44,512
JAMES F BRENNAN PROVOST	40 00			X				289,948	0	54,955
W MICHAEL HENDRICKS VICE PRESIDENT FOR ENROLLMENT MANAGEMENT	40 00			X				180,659	0	49,476
LAWRENCE R POOS DEAN, SCHOOL OF ARTS AND SCIENCES	40 00				X			163,920	0	34,151
VERYL V MILES DEAN OF THE COLUMBUS SCHOOL OF LAW	40 00				X			211,238	0	56,797
CHARLES C NGUYEN DEAN SCHOOL OF ENGINEERING	40 00					X		241,462	0	50,208
GEORGE E GARVEY ACTING DEAN AND PROFESSOR OF LAW	40 00					X		202,542	0	42,252
IAN L PEGG PROFESSOR, DEPT OF PHYSICS	40 00					X		384,528	0	55,428
MARSHALL J BREGER PROFESSOR - COLUMBUS SCHOOL OF LAW	40 00					X		188,550	0	53,169
RETT R LUDWIKOWSKI PROFESSOR - COLUMBUS SCHOOL OF LAW	40 00					X		188,142	0	47,685

Software ID: 11000230

Software Version: v2011.1.0

EIN: 53-0196583

Name: THE CATHOLIC UNIVERSITY OF AMERICA

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 recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
ARCHDIOCESAN SCHOLARSHIPS	4	194,533			
BASELIN SCHOLARSHIP FUND	12	211,560			
BOARD OF TRUSTEES SCHOLARSHIP	11	322,860			
CENTENNIAL SCHOLARSHIP	5	69,450			
DOCTORAL SCHOLARSHIP TOTAL	93	2,363,500			
DOL THRU PROVID HLTH FDN-ARRA	92	778,327			
FIRST YEAR EXPERIENCE	58	537,930			
KNIGHTS OF COLUMBUS GRAD SCHOLARSHIPS	7	214,320			
LAW SCHOOL SCHOLARSHIPS	360	3,754,920			
MAGI ENDOWMENT	12	167,860			
MCSHAIN SCHOL FOR SEMINARIANS	35	142,862			
METROPOLITAN COLLEGE	141	665,541			
NATIONAL CATHOLIC SCHOOL OF SOCIAL SERVICES	118	641,231			
OFFICE OF THE PROVOST	16	258,584			
OTHER CATHOLIC UNIVERSITY SCHOLARSHIPS	3410	41,722,294			
SCHOOL OF THEOLOGY AND RELIGIOUS STUDIES	183	2,362,943			
SCHOOL OF ARCHITECTURE & PLANNING	58	292,665			
SCHOOL OF ARTS & SCIENCES	202	3,041,185			
SCHOOL OF CANON LAW	14	217,195			
SCHOOL OF EDUCATION	22	193,120			
SCHOOL OF ENGINEERING	31	393,275			
SCHOOL OF LIBRARY & INFORMATION SCIENCE	103	563,663			
SCHOOL OF MUSIC	56	672,287			
SCHOOL OF NURSING	24	193,300			
SCHOOL OF PHILOSOPHY	84	1,298,162			
SHEEHY SCHOLARSHIP	52	205,202			
STUDENT AID ENDOWED FUNDS	677	1,812,476			
STUDENT AID PRIVATE SOURCES	273	695,961			
UNDERGRADUATE TUITION EXCHANGE SCHOLARSHIP	45	1,296,250			
UNIVERSITY GRADUATE SCHOLRSHIPS	453	1,071,990			

Software ID: 11000230
Software Version: v2011.1.0
EIN: 53-0196583
Name: THE CATHOLIC UNIVERSITY OF AMERICA

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation 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
CHARITABLE REMAINDER TRUSTS (1)	SPLIT INTEREST AGREEMENT	NY	NA	TRUST			
CHARITABLE REMAINDER TRUST (1)	SPLIT INTEREST AGREEMENT	DC	NA	TRUST			
CHARITABLE REMAINDER TRUST (1)	SPLIT INTEREST AGREEMENT	VA	NA	TRUST			
CHARITABLE REMAINDER TRUSTS (2)	SPLIT INTEREST AGREEMENT	MD	THE CATHOLIC UNIVERSITY OF AMERICA	TRUST			
CHARITABLE REMAINDER TRUSTS (3)	SPLIT INTEREST AGREEMENT	DC	THE CATHOLIC UNIVERSITY OF AMERICA	TRUST			
CHARITABLE PERPETUAL TRUST (1)	SPLIT INTEREST AGREEMENT	MD	NA	TRUST			
CHARITABLE PERPETUAL TRUSTS (2)	SPLIT INTEREST AGREEMENT	OH	NA	TRUST			
CHARITABLE PERPETUAL TRUST (1)	SPLIT INTEREST AGREEMENT	SC	NA	TRUST			