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Part III

Statement of Program Service Accomplishments

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

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1 Briefly describe the organization’s mission

THE CATHOLIC UNIVERSITY OF AMERICA IS THE NATIONAL UNIVERSITY OF THE CATHOLIC CHURCH IN THE UNITED STATES IT WAS FOUNDED AND SPONSORED BY THE BISHOPS OF THE COUNTRY WITH THE APPROVAL OF THE HOLY SEE THE CATHOLIC UNIVERSITY OF AMERICA IS COMMITTED TO BEING A COMPREHENSIVE CATHOLIC AND (continued on Schedule O)

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 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 \$ 98,197,463 including grants of \$ 0) (Revenue \$ 214,939,848)
INSTRUCTION AND DEPARTMENTAL RESEARCH THE CATHOLIC UNIVERSITY OF AMERICA IS AN INDEPENDENT CATHOLIC 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, SEVERAL PROFESSIONAL AREAS INCLUDING ENGINEERING, ARCHITECTURE, SOCIAL SERVICE, NURSING, MUSIC AND LAW THE CURRENT ENROLLMENT OF THE UNIVERSITY IS APPROXIMATELY 6,521 OF WHICH 3,480 ARE UNDERGRADUATE AND 3,041 ARE GRADUATE STUDENTS (FALL 2015) THE UNIVERSITY OFFERS 66 DOCTORAL PROGRAMS, 103 MASTERS PROGRAMS AND 74 BACHELORS PROGRAMS THE FACULTY CONSISTS OF 399 FULL-TIME AND 367 PART-TIME MEMBERS OF THE FULL-TIME FACULTY 88% HOLD DOCTORAL OR PROFESSIONAL DEGREES	

4b	(Code) (Expenses \$ 84,367,791 including grants of \$ 84,367,791) (Revenue \$ 0)
SCHOLARSHIP PROGRAMS FINANCIAL AID TO STUDENTS INCLUDES SCHOLARSHIPS, REMITTED TUITION AND STIPENDS FOR BOTH UNDERGRADUATE AND GRADUATE STUDY 6,589 SCHOLARSHIPS WERE AWARDED DURING FISCAL YEAR 2016	














4c	(Code) (Expenses \$ 59,469,380 including grants of \$ 0) (Revenue \$ 29,176,717)
OTHER PROGRAM SERVICES - SPONSORED RESEARCH THE UNIVERSITY RECEIVED 236 SPONSORED RESEARCH AWARDS SPANNING ALL DISCIPLINES LIBRARY PROGRAMS THERE ARE 1 4 MILLION VOLUMES IN THE GENERAL LIBRARY SYSTEM AND IN THE LAW LIBRARY CUA PRESS PUBLISHES ABOUT 35-40 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, CENTRAL AND SOUTH AMERICA, 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	

See Additional Data







4d	Other program services (Describe in Schedule O)
(Expenses \$ 29,581,122 including grants of \$ 0) (Revenue \$ 31,163,440)	

4e	Total program service expenses ▶ 271,615,756
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	13 Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a 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? If "Yes," complete Schedule F, Parts I and IV 	14b Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17 Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government 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 or other assistance to or for domestic individuals 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, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> 	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</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), 501(c)(4), and 501(c)(29) 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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
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 direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
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, Part II, III, or IV, and Part V, line 1</i> 	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <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 11b 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 or note to any line in this Part V

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			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	8,801	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	4,436	
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" to line 3b, 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, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶ IT See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
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 as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring 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. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b		
c	Enter the 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 or note to any line 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	1a 47		
b Enter the number of voting members included in line 1a, above, who are independent	1b 46		
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 this Form 990		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
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	Yes
14 Did the organization have a written document retention and destruction policy?	14	Yes
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
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.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
 ► ROBERT M SPECTER 620 Michigan Ave NE Leahy Hall 260 Washington, DC 20064 (202) 319-5606

Check if Schedule O contains a response or note to any line 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 all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

[illegible]

Part VII

[illegible]

1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	4,637,433	0	536,443

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 179

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
Deltak EDU LLC 1415 WEST 22ND ST SUITE 400 OAK BROOK, IL 60523	ONLINE COURSE MANAGEMENT	3,153,451
MONROE STREET BLOCK A-1 RETAIL LLC 625 MONROE STREET NE WASHINGTON, DC 20017	LEASING AGENT	647,707
INSTITUTE FOR THE INTERNATIONAL EDUCATION OF STUDENTS 33 W MONROE STREET SUITE 2300 CHICAGO, IL 60603	STUDY ABROAD PROGRAM SVCS	520,355
PRICE WATERHOUSE COOPERS LLP 495 POST ROAD EAST WESTPORT, CT 06880	AUDIT SERVICES	328,000
TRULY FINE PAINTING AND DECORATING 7301 SOUTH OSBORNE ROAD UPPER MARLBORO, MD 20772	PAINTING CONTRACTORS	272,575

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 23

Part VIII

Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a	21,901			
	b	Membership dues	1b	0			
	c	Fundraising events	1c	1,834			
	d	Related organizations	1d	0			
	e	Government grants (contributions)	1e	0			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	33,468,576			
	g	Noncash contributions included in lines 1a-1f \$		487,145			
	h	Total. Add lines 1a-1f		33,492,311			
Program Service Revenue	2a	TUITION	Business Code				
			611600	214,939,848	214,939,848	0	0
	b	FEDERAL AND PRIVATE GRANTS	541700	25,387,660	25,387,660	0	0
	c	HOUSING	721310	17,862,102	17,862,102	0	0
	d	FOOD SERVICE	722210	12,355,942	12,355,942	0	0
	e	BOOKSTORE	451211	307,279	307,279	0	0
	f	All other program service revenue		5,276,175	3,789,057	1,487,118	0
	g	Total. Add lines 2a-2f		276,129,006			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		3,034,458	0	169,693	2,864,765
	4	Income from investment of tax-exempt bond proceeds . . .		131	0	0	131
	5	Royalties		204,422	0	0	204,422
	6a	Gross rents	(i) Real (ii) Personal				
			144,853 0				
	b	Less rental expenses	0 0				
	c	Rental income or (loss)	144,853 0				
	d	Net rental income or (loss)		144,853	0	70,922	73,931
	7a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
			59,874,357 5,050				
	b	Less cost or other basis and sales expenses	52,422,667 0				
	c	Gain or (loss)	7,451,690 5,050				
	d	Net gain or (loss)		7,456,740	0	0	7,456,740
	8a	Gross income from fundraising events (not including \$ 1,834 of contributions reported on line 1c) See Part IV, line 18 . . .					
			a 21,875				
	b	Less direct expenses	b 16,158				
	c	Net income or (loss) from fundraising events . . .		5,717		0	5,717
	9a	Gross income from gaming activities See Part IV, line 19					
			a 0				
	b	Less direct expenses	b 0				
	c	Net income or (loss) from gaming activities . . .		0	0	0	0
	10a	Gross sales of inventory, less returns and allowances .					
			a 897,378				
	b	Less cost of goods sold	b 273,673				
	c	Net income or (loss) from sales of inventory . . .		623,705	0	0	623,705
		Miscellaneous Revenue	Business Code				
	11a	NONACADEMIC REGISTRATION FEES	900099	57,500	57,500	0	0
	b	INTEREST INCOME-STUDENTS	900099	580,617	580,617	0	0
	c						
	d	All other revenue		0	0	0	0
	e	Total. Add lines 11a-11d		638,117			
	12	Total revenue. See Instructions		321,729,460	275,280,005	1,727,733	11,229,411

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line 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 domestic organizations and domestic governments. See Part IV, line 21.	0	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22.	84,367,791	84,367,791		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0	0		
4	Benefits paid to or for members.	0	0		
5	Compensation of current officers, directors, trustees, and key employees.	4,060,581	1,478,907	2,581,674	0
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.	105,184,279	93,599,281	8,625,724	2,959,274
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	7,396,611	6,333,882	880,716	182,013
9	Other employee benefits.	10,255,748	9,376,268	664,988	214,492
10	Payroll taxes.	6,770,819	5,856,797	732,534	181,488
11	Fees for services (non-employees):				
a	Management.	12,701,035	12,701,035	0	0
b	Legal.	1,338,129	431,030	907,099	0
c	Accounting.	653,099	35,094	618,005	0
d	Lobbying.	0	0	0	0
e	Professional fundraising services. See Part IV, line 17.	204,341			204,341
f	Investment management fees.	1,203,405	0	1,203,405	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	11,136,845	8,507,754	2,445,059	184,032
12	Advertising and promotion.	617,024	511,453	95,938	9,633
13	Office expenses.	12,267,707	10,362,177	1,350,939	554,591
14	Information technology.	2,096,882	662,272	1,364,123	70,487
15	Royalties.	669,869	298,906	370,963	0
16	Occupancy.	17,947,804	14,235,078	3,712,268	458
17	Travel.	3,293,817	2,958,638	177,127	158,052
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0	0	0	0
19	Conferences, conventions, and meetings.	489,236	335,064	135,372	18,800
20	Interest.	0	0	0	0
21	Payments to affiliates.	0	0	0	0
22	Depreciation, depletion, and amortization.	11,826,497	11,826,497	0	0
23	Insurance.	1,258,212	146,873	1,111,339	0
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	HONORARIA/EDITORIAL/FREELANCE SERVICES	2,624,978	2,600,759	20,699	3,520
b	ENTERTAINMENT/CATERING/GUEST MEALS	3,268,348	2,591,114	270,815	406,419
c	MEMBERSHIPS	635,420	358,963	271,431	5,026
d	DOUBTFUL ACCOUNT EXPENSES	2,626,507	219	2,626,288	0
e	All other expenses	3,018,157	2,039,904	957,661	20,592
25	Total functional expenses. Add lines 1 through 24e.	307,913,141	271,615,756	31,124,167	5,173,218
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		36,442,714	1	25,914,548	
	2	Savings and temporary cash investments		0	2	0	
	3	Pledges and grants receivable, net		14,401,867	3	27,722,966	
	4	Accounts receivable, net		8,871,722	4	9,761,608	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		0	6	0	
	7	Notes and loans receivable, net		7,304,882	7	7,574,121	
	8	Inventories for sale or use		781,854	8	759,062	
	9	Prepaid expenses and deferred charges		5,624,746	9	4,704,942	
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	414,711,654			
	b	Less: accumulated depreciation	10b	225,450,186	187,985,605	10c	189,261,468
	11	Investments—publicly traded securities		79,451,032	11	82,291,641	
	12	Investments—other securities. See Part IV, line 11		263,256,410	12	252,680,912	
	13	Investments—program-related. See Part IV, line 11		0	13	0	
	14	Intangible assets		0	14		
	15	Other assets. See Part IV, line 11		3,700,823	15	4,463,726	
16	Total assets. Add lines 1 through 15 (must equal line 34)		607,821,655	16	605,134,994		
Liabilities	17	Accounts payable and accrued expenses		27,142,867	17	24,889,873	
	18	Grants payable		0	18	0	
	19	Deferred revenue		6,614,497	19	8,893,361	
	20	Tax-exempt bond liabilities		97,973,293	20	94,548,427	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		0	22	0	
	23	Secured mortgages and notes payable to unrelated third parties		1,852,506	23	1,549,593	
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		16,575,165	25	16,638,583	
	26	Total liabilities. Add lines 17 through 25		150,158,328	26	146,519,837	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets		272,387,545	27	268,626,356	
	28	Temporarily restricted net assets		92,101,922	28	94,985,147	
	29	Permanently restricted net assets		93,173,860	29	95,003,654	
	Organizations that do not follow SFAS 117 (ASC 958), 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		457,663,327	33	458,615,157	
	34	Total liabilities and net assets/fund balances		607,821,655	34	605,134,994	

Part XI **Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	321,729,460
2	Total expenses (must equal Part IX, column (A), line 25)	2	307,913,141
3	Revenue less expenses Subtract line 2 from line 1	3	13,816,319
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	457,663,327
5	Net unrealized gains (losses) on investments	5	-13,537,624
6	Donated services and use of facilities	6	673,135
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	458,615,157

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited 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 separate basis	Yes	
c	If "Yes," to line 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	
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	

Additional Data

Software ID: 15000352

Software Version: v1.00

EIN: 53-0196583

Name: THE CATHOLIC UNIVERSITY OF AMERICA

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

(Code) (Expenses \$	29,581,122	including grants of \$	0) (Revenue \$	31,163,440)
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AUXILIARY SERVICES UNIVERSITY DORMITORIES CONSIST OF 17 RESIDENCE HALLS WHICH PROVIDE LIVING QUARTERS FOR 2,065 STUDENTS OCCUPANCY RATE AS OF FALL 2015 WAS 100 7% 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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-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 0	X		X				456,139	0	39,170
CARL A ANDERSON BOARD OF TRUSTEE	2 0	X						0	0	0
ARCHBISHOP SAMUEL J AQUILA BOARD OF TRUSTEE	2 0	X						0	0	0
LEE ANN JOINER BRADY BOARD OF TRUSTEE	2 0	X						0	0	0
BISHOP MICHAEL F BURBIDGE BOARD OF TRUSTEE	2 0	X						0	0	0
TIMOTHY R BUSCH ESQ BOARD OF TRUSTEE	2 0	X						0	0	0
JOSEPH L CARLINI BOARD OF TRUSTEE	2 0	X						0	0	0
ARCHBISHOP CHARLES J CHAPUT BOARD OF TRUSTEE EFF 6/1/2015	2 0	X						0	0	0
BISHOP OCTAVIO CISNEROS BOARD OF TRUSTEE EFF 6/1/2015	2 0	X						0	0	0
LEO A DALY III BOARD OF TRUSTEE	2 0	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-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			
CARDINAL DANIEL N DINARDO BOARD OF TRUSTEE	2 0	X						0	0	0
CARDINAL TIMOTHY M DOLAN BOARD OF TRUSTEE	2 0	X						0	0	0
SISTER JANET EISNER SND BOARD OF TRUSTEE	2 0	X						0	0	0
BISHOP KEVIN J FARRELL BOARD OF TRUSTEE	2 0	X						0	0	0
BISHOP DANIEL E FLORES BOARD OF TRUSTEE EFF 6/1/2015	2 0	X						0	0	0
ARCHBISHOP JOSE H GOMEZ BOARD OF TRUSTEE	2 0	X						0	0	0
ARCHBISHOP WILTON D GREGORY BOARD OF TRUSTEE	2 0	X						0	0	0
STEPHEN J KANEB BOARD OF TRUSTEE	2 0	X						0	0	0
ARCHBISHOP JOSEPH E KURTZ BOARD OF TRUSTEE	2 0	X						0	0	0
ARCHBISHOP JEROME E LISTECKI BOARD OF TRUSTEE	2 0	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-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			
ARCHBISHOP WILLIAM E LORI BOARD OF TRUSTEE EFF 6/1/2015	2 0	X						0	0	0
BISHOP PAUL S LOVERDE BOARD OF TRUSTEE	2 0	X						0	0	0
BISHOP GREGORY J MANSOUR BOARD OF TRUSTEE	2 0	X						0	0	0
BISHOP ROBERT J MCMANUS BOARD OF TRUSTEE	2 0	X						0	0	0
MICHAEL J MILLETTE BOARD OF TRUSTEE EFF 12/1/2014	2 0	X						0	0	0
JAMES MOYE BOARD OF TRUSTEE	2 0	X						0	0	0
MARK A MURRAY BOARD OF TRUSTEE	2 0	X						0	0	0
ARCHBISHOP JOHN C NIENSTEDT BOARD OF TRUSTEE	2 0	X						0	0	0
ANNE E O'DONNELL MD BOARD OF TRUSTEE	2 0	X						0	0	0
BISHOP THOMAS J OLMSTED BOARD OF TRUSTEE	2 0	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-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			
CARDINAL SEAN P O'MALLEY OFM CAP CHAIRMAN BOARD OF TRUSTEE	2 0	X						0	0	0
BISHOP JOSEPH A PEPE BOARD OF TRUSTEE	2 0	X						0	0	0
NEIL J RAUENHORST BOARD OF TRUSTEE EFF 6/1/2015	2 0	X						0	0	0
E JEFFREY ROSSI ESQ BOARD OF TRUSTEE EFF 6/1/2015	2 0	X						0	0	0
MONSIGNOR WALTER R ROSSI BOARD OF TRUSTEE	2 0	X						0	0	0
CATHARINE MURRAY RYAN BOARD OF TRUSTEE	2 0	X						0	0	0
TIMOTHY C SHEVE BOARD OF TRUSTEE	2 0	X						0	0	0
ENRIQUE SEGURA BOARD OF TRUSTEE	2 0	X						0	0	0
VICTOR P SMITH ESQ BOARD OF TRUSTEE	2 0	X						0	0	0
ANTHONY R TERSIGNI BOARD OF TRUSTEE	2 0	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-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 TOBIN BOARD OF TRUSTEE	2 0	X						0	0	0
MONSIGNOR PETER J VAGHI BOARD OF TRUSTEE	2 0	X						0	0	0
MICHAEL P WARSAW BOARD OF TRUSTEE	2 0	X						0	0	0
ARCHBISHOP THOMAS G WENSKI BOARD OF TRUSTEE	2 0	X						0	0	0
ANTHONY A WILLIAMS ESQ BOARD OF TRUSTEE	2 0	X						0	0	0
CAROLYN Y WOO BOARD OF TRUSTEE	2 0	X						0	0	0
CARDINAL DONALD W WUERL BOARD OF TRUSTEE CHANCELLOR	2 0	X						0	0	0
BISHOP SALVATORE J CORDILEONE BOARD OF TRUSTEE RESIGNED 6/1/2015	2 0	X						0	0	0
BISHOP NICHOLAS A DIMARZIO BOARD OF TRUSTEE RESIGNED 6/1/2015	2 0	X						0	0	0
ARCHBISHOP ALLEN H VIGNERON BOARD OF TRUSTEE RESIGNED 6/1/2015	2 0	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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-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			
ANDREW V ABELA PROVOST EFF 6/3/2015	40 0			X				391,476	0	41,817
REV MARK M MOROZOWICH FORMER PROVOST 9/24/14-6/2/15	40 0			X				110,268	0	21,464
ROBERT M SPECTER VP FOR FINANCE/TREASURER EFF 8/17/2015	40 0			X				110,827	0	3,806
CATHY R WOOD VP FOR FINANCE/TREAS RESIGNED 8/15/15	40 0			X				204,982	0	22,335
CHRISTOPHER P LYDON VP FOR ENROLLMENT MGT EFF 6/22/2015	40 0			X				164,017	0	13,032
W MICHAEL HENDRICKS VP FOR ENROLLMENT MGT RESIGNED 6/5/2015	40 0			X				108,955	0	18,452
SCOTT P REMBOLD VP INSTITUTIONAL ADVANCMENT EFF 6/24/2015	40 0			X				247,109	0	26,618
MICHAEL S ALLEN VP OF STUDENT AFFAIRS	40 0			X				208,648	0	36,128
FRANK G PERSICO VP UNIVERSITY RELATIONS & CHIEF OF STAFF	40 0			X				319,175	0	29,338
DANIEL ATTRIDGE DEAN AND PROFESSOR OF LAW	40 0				X			291,013	0	37,546

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 (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-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			
IAN L PEGG PHYSICS DIRECTOR VSL AND PROFESSOR	40 0					X		403,327	0	34,220
CHARLES C NGUYEN DEAN SCHOOL OF ENGINEERING	40 0					X		245,528	0	40,245
MARTIN R SCORDATO LAW SCHOOL ORDINARY PROFESSOR	40 0					X		215,058	0	23,691
GEORGE P SMITH LAW SCHOOL ORDINARY PROFESSOR	40 0					X		208,670	0	26,856
LAWRENCE J MORRIS GENERAL COUNSEL	40 0					X		208,475	0	22,719
JAMES F BRENNAN FORMER PROVOST RESIGNED 9/23/14	40 0						X	261,763	0	32,511
LAWRENCE R POOS FormerDEAN ARTS/SCIENCES RESIGNED 9/1/14	40 0						X	118,004	0	12,902
GEORGE GARVEY ORDINARY PROFESSOR LAW SCHOOL	40 0						X	200,682	0	21,897
VERYL V MILES LAW SCHOOL ORDINARY PROFESSOR	40 0						X	163,317	0	31,696

TY 2015 Reasonable Cause Explanation

Name: THE CATHOLIC UNIVERSITY OF AMERICA

EIN: 53-0196583

Software ID: 15000352

Software Version: v1.00

Explanation: THE CATHOLIC UNIVERSITY OF AMERICA RECEIVED AN EXTENSION FROM THE IRS UNTIL DECEMBER 15, 2016 TO FILE THE 990 RETURN.

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2015

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

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 described in **section 170(b)(1)(A)(i).**

2

☒

A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))

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 See **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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations

g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	14,633,662	14,725,209	22,249,386	23,372,349	33,492,311	108,472,917
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4 Total. Add lines 1 through 3	14,633,662	14,725,209	22,249,386	23,372,349	33,492,311	108,472,917
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)						4,450,524
6 Public support. Subtract line 5 from line 4						104,022,393

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4	14,633,662	14,725,209	22,249,386	23,372,349	33,492,311	108,472,917
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,917,610	2,688,081	3,150,367	3,115,472	3,383,864	16,255,394
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)	6,799,563	1,300,017	1,721,500	1,736,891	1,557,370	13,115,341
11 Total support. Add lines 7 through 10						137,843,652
12 Gross receipts from related activities, etc. (see instructions)					12	1,367,748,975
13 First five years.If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here					<input type="checkbox"/>	

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	75.464 %
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	75.81 %
16a 33 1/3% support test—2015.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	<input checked="" type="checkbox"/>	
b 33 1/3% support test—2014.If the organization did not check a 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	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test—2015.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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10%-facts-and-circumstances test—2014.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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
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	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 VI.)						
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 section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2015. 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—2014. 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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	
c Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b	
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c	
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a	
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b	
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c	

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

☐

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) <input type="checkbox"/>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
Schedule A, Part II, Line 10	Other Income Total = 13,115,341 Nature and source of each amount contained within this Total of Other income is as follows Non-Academic Registration Fees = 529,072, Interest Income-Students = 1,870,850, Change in Estimates-CARO = 2,779,941, Gain Settlement-CARO = 88,756, Income from GATE Loan Program = 267, Recovery from a Prior Period = 2,714,988, Gross Income from Fundraising Events = 567,897, Gross Sales of Inventory = 4,563,570

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

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" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of 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 can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" on 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 education)
☐ Protection of natural habitat
☐ Preservation of open space

☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2

Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
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, and not on a historic structure listed in the National Register

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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, handling of violations, and enforcing conservation easements during the year
►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, 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 section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

Revenue included on 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 (ASC 958) relating to these items

a

Revenue included on Form 990, Part VIII, line 1
► \$ 0

b

Assets included in Form 990, Part X
► \$ 0

Part III

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

(continued)

3

Using the organization's acquisition, 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 XIII

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" on 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 XIII and complete the following table

	Amount
c	Beginning balance
d	Additions during the year
e	Distributions during the year
f	Ending balance

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance	198,653,900	188,129,162	174,917,701	149,993,062
b	Contributions	1,990,533	1,888,209	2,512,774	3,586,887
c	Net investment earnings, gains, and losses	-3,381,480	20,477,478	21,524,524	31,296,463
d	Grants or scholarships	8,678,878	9,330,201	8,334,383	8,070,660
e	Other expenditures for facilities and programs	2,911,895	2,398,910	2,380,521	1,798,447
f	Administrative expenses	103,576	111,838	110,933	89,604
g	End of year balance	185,568,604	198,653,900	188,129,162	174,917,701

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

25 87 %

b

Permanent endowment

74 13 %

c

Temporarily restricted endowment

0 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

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

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

b

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

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c) depreciation	(d)Book value
1a Land	0	23,525,227		23,525,227
b Buildings	0	302,038,358	147,968,142	154,070,216
c Leasehold improvements	0	5,674,242	526,135	5,148,107
d Equipment	0	45,699,029	40,571,953	5,127,076
e Other	0	37,774,798	36,383,956	1,390,842
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				189,261,468

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	222,205,460
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-13,537,624
b	Donated services and use of facilities	2b	673,135
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIII)	2d	-84,077,960
e	Add lines 2a through 2d	2e	-96,942,449
3	Subtract line 2e from line 1	3	319,147,909
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 7b	4a	1,203,405
b	Other (Describe in Part XIII)	4b	1,378,146
c	Add lines 4a and 4b	4c	2,581,551
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	321,729,460

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	221,253,630
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	0
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIII)	2d	289,831
e	Add lines 2a through 2d	2e	289,831
3	Subtract line 2e from line 1	3	220,963,799
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 7b	4a	1,203,405
b	Other (Describe in Part XIII)	4b	85,745,937
c	Add lines 4a and 4b	4c	86,949,342
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	307,913,141

Part XIII Supplemental Information

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

Return Reference	Explanation
Schedule D, Part III, Line 1	Collections-The University has elected not to capitalize the cost or value of its collection of works of art, historical treasures, and similar assets. There were no deaccessions during the year.

Part XIII Supplemental Information (continued)

Return Reference	Explanation
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
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, 2016
Schedule D, Part XI, Line 2d	COST OF GOODS SOLD=\$273,673 + GOLF OUTING EXPENSES=\$16,158- GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS = \$84,367,791 TOTAL LINE 2d (\$84,077,960)
Schedule D, Part XI, Line 4b	UNITRUST PAYMENTS=\$48,646+STUDENT LOAN PROGRAM COLLECTION FEES=\$12,345+LOSS ON DISPOSAL OF EQUIPMENT=\$365,130+LOSS ON BOND DEFEASANCE=\$952,025
Schedule D, Part XII, Line 2d	COST OF GOODS SOLD=\$273,673 + GOLF OUTING EXPENSES=\$16,158
Schedule D, Part XII, Line 4b	GRANTS AND OTHER ASSISTANCE TO INDIVIDUALS=\$84,367,791 + UNITRUST PAYMENTS=\$48,646+STUDENT LOAN PROGRAM COLLECTION FEES=\$12,345+LOSS ON DISPOSAL OF EQUIPMENT=\$365,130+LOSS ON BOND DEFEASANCE=\$952,025

SCHEDULE E
(Form 990 or
990-EZ)

Department of the
Treasury
Internal Revenue
Service

Schools

►Complete if the organization answered "Yes" on Form 990,
Part IV, line 13, or Form 990-EZ, Part VI, line 48.
► Attach to Form 990 or Form 990-EZ.
► Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public
Inspection

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

Part I

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

Part II Supplemental Information.

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

Return Reference	Explanation
Schedule E, Part I, Line 3	THE UNIVERSITY INCLUDES ITS RACIALLY NONDISCRIMINATORY POLICY IN THE ADMISSIONS VIEW-BOOK, APPLICATION, IN THE PACKET OF INFORMATION RECEIVED AFTER ADMISSION AND IN THE FINANCIAL AID GUIDE
Schedule E, Part I, Line 6	THE UNIVERSITY RECEIVES FEDERAL FINANCIAL AID FOR STUDENTS THROUGH ITS PARTICIPATION IN THE FOLLOWING PROGRAMS: FEDERAL WORK STUDY, PELL GRANTS, ACADEMIC COMPETITIVENESS GRANTS, 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.
▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

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 its grants and other 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 its grants and other assistance outside the United States
- 3

Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	1	36			4,018,670

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									

2

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

3

Enter total number of other organizations or entities ▶

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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, Return by a U S Transferor of Property to a Foreign Corporation (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, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)*

☐ 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, Information 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, do not file with Form 990)*

☐ Yes ☒ No

Part V **Supplemental Information**

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 3	METHOD TO ACCOUNT FOR EXPENDITURES ON ORGANIZATION'S FINANCIAL STATEMENTS CENTRAL AMERICA AND THE CARIBBEAN ACCRUAL, EUROPE (INCLUDING ICELAND AND GREENLAND) ACCRUAL, EAST ASIA AND PACIFIC ACCRUAL, NORTH AMERICA (CANADA & MEXICO ONLY) ACCRUAL, SOUTH AMERICA ACCRUA L

Additional Data

Software ID: 15000352

Software Version: v1.00

EIN: 53-0196583

Name: THE CATHOLIC UNIVERSITY OF AMERICA

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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
Europe (including Iceland and Greenland)	1	30	Program Services	GLOBAL EDUCATION PROGRAMS	3,252,782
Europe (including Iceland and Greenland)	0	0	Conducting Board Meetings	SITE VISIT FOR FUTURE BOARD OF TRUSTEE MEETING	24,659
Europe (including Iceland and Greenland)	0	0	Speaking at Seminars or Conferences	CAMPUS DEDICATION OF AUSTRALIAN CATHOLIC UNIVERSITY IN ROME	5,067

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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
South America	0	1	Program Services	GLOBAL EDUCATION PROGRAMS	8,064
Central America and the Caribbean	0	2	Program Services	GLOBAL EDUCATION PROGRAMS	90,574
North America (including Canada and Mexico, but not the United States)	0	2	Program Services	GLOBAL EDUCATION PROGRAMS	97,547

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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
East Asia and the Pacific	0	1	Program Services	GLOBAL EDUCATION PROGRAMS	52,026
Europe (including Iceland and Greenland)	0	0	Investments		487,951

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" on 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

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

OMB No 1545-0047

2015

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" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 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 email 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.

(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			
1 RUFFALO NOEL LEVITZ LLC 1025 KIRKWOOD PARKWAY SW CEDAR RAPIDS, IA 52404	PHONE PROGRAM		No	206,090	193,142	12,948
2 TELECOMP INC 3375 BRIGHTON HENRIETTA TLRD ROCHESTER, NY 14623	PHONE PROGRAM		No	26,886	11,200	15,686
3 THE STELTER COMPANY 10435 NEW YORK AVE DES MOINES, IA 50322	PLANNED GIVING NEWSLETTER		No	0	16,534	-16,534
4 THE STELTER COMPANY 10435 NEW YORK AVE DES MOINES, IA 50322	DIGITAL MARKETING PLATFORM		No	0	5,408	-5,408
5						
6						
7						
8						
9						
10						
Total				232,976	226,284	6,692

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

DC, FL, MD

Part II Fundraising Events.

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a)Event #1 GOLF OUTING (event type)	(b)Event #2 (event type)	(c)Other events (total number)	(d) Total events (add col (a) through col (c))
	1 Gross receipts	23,709			23,709
	2 Less Contributions	1,834			1,834
	3 Gross income (line 1 minus line 2)	21,875			21,875
Direct Expenses	4 Cash prizes	0			0
	5 Noncash prizes	212			212
	6 Rent/facility costs	12,722			12,722
	7 Food and beverages	0		0	0
	8 Entertainment	3,224		0	3,224
	9 Other direct expenses	0			0
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				16,158
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				5,717

Part III Gaming.

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

Revenue		(a)Bingo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash 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 Subtract line 7 from line 1, column (d) ▶				

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

a Is the organization licensed to conduct 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 conduct 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 conducted in

a

The organization's facility

13a

%

b

An outside facility

13b

%

14

Enter 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 of the third party

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

Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
Schedule G, Part I, Line 2b	TELECOMP, INC - DESCRIPTION PAYMENT OF FEES \$2,500 AND EXPENSE REIMBURSEMENTS \$8,700 THE ANNUAL TELEPHONE FUNDRAISING FEES ARE PAID IN INSTALLMENTS THE SERVICE PROVIDER PROVIDES A BASIC DESCRIPTION OF ANY OUT-OF-POCKET EXPENSES BILLED RUFFALO NOEL LEVITZ, LLC- DESCRIPTION PAYMENT OF FEES \$157,542 AND EXPENSES \$35,600 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-POCKETS EXPENSES BILLED

Open to Public Inspection

53-0196583

Schedule I (Form 990) 2015

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)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. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
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 ITEM TYPE 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.

Additional Data

Software ID: 15000352
Software Version: v1.00
EIN: 53-0196583
Name: THE CATHOLIC UNIVERSITY OF AMERICA

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(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
BASELIN SCHOLARSHIP	14	472,950	0	N/A	N/A
BOARD OF TRUSTEES SCHOLARSHIP	12	231,750	0	N/A	N/A
CENTENNIAL SCHOLARSHIP	49	772,201	0	N/A	N/A
DOCTORAL SCHOLARSHIP	128	2,589,183	0	N/A	N/A
DOL	10	10,759	0	N/A	N/A
FIRST YEAR EXPERIENCE SCHOLARSHIP	65	422,700	0	N/A	N/A
KNIGHTS OF COLUMBUS GRADUATE SCHOLARSHIP	6	167,480	0	N/A	N/A
KNIGHTS OF COLUMBUS UNDERGRADUATE SCHOLARSHIP	17	25,500	0	N/A	N/A
KOCH PHASE II SCHOLARSHIP	1	43,400	0	N/A	N/A
LAW SCHOOL SCHOLARSHIP	279	5,097,684	0	N/A	N/A
MAGI ENDOWMENT SCHOLARSHIP	6	110,490	0	N/A	N/A
MCSHAIN SCHOLARSHIP FOR SEMINARIANS	22	187,475	0	N/A	N/A
METROPOLITAN COLLEGE SCHOLARSHIP	121	821,402	0	N/A	N/A
MS IN BUSINESS ANALYSIS AWARD	1	9,180	0	N/A	N/A
NATIONAL CATHOLIC SCHOOL OF SOCIAL SERVICE SCHOLARSHIP	69	314,480	0	N/A	N/A

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(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
OTHER CATHOLIC UNIVERSITY SCHOLARSHIPS	3055	52,956,225	0	N/A	N/A
PELL GRANTS 2014/15	17	30,568	0	N/A	N/A
PELL GRANT 2015/16	472	1,901,454	0	N/A	N/A
SCHOOL OF ARCHITECTURE & PLANNING SCHOLARSHIP	69	817,967	0	N/A	N/A
SCHOOL OF ARTS & SCIENCES SCHOLARSHIP	232	3,449,093	0	N/A	N/A
SCHOOL OF CANON LAW SCHOLARSHIP	16	251,625	0	N/A	N/A
SCHOOL OF EDUCATION SCHOLARSHIPS	11	3,360	0	N/A	N/A
SCHOOL OF ENGINEERING SCHOLARSHIPS	37	671,540	0	N/A	N/A
SCHOOL OF LIBRARY & INFO SCIENCE SCHOLARSHIPS	6	6,750	0	N/A	N/A
SCHOOL OF MUSIC SCHOLARSHIPS	52	848,925	0	N/A	N/A
SCHOOL OF PHILOSOPHY SCHOLARSHIPS	118	2,194,275	0	N/A	N/A
SCHOOL OF THEOLOGY AND RELIGIOUS STUDIES	199	3,331,100	0	N/A	N/A
SEOG GRANT 2015/16	259	488,608	0	N/A	N/A
SESTILI FD-EXPERIENTIAL LEARNING SCHOLARSHIP	7	2,000	0	N/A	N/A
SHEEHY SCHOLARSHIP	43	203,538	0	N/A	N/A

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(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
STUDENT AID ENDOWED FUNDS	300	2,014,017	0	N/A	N/A
STUDENT AID PRIVATE SOURCES	209	1,631,082	0	N/A	N/A
UNDERGRADUATE TUITION EXCHANGE	51	1,666,500	0	N/A	N/A
UNIVERSITY GRADUATE SCHOLARSHIPS	645	672,532	0	N/A	N/A

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

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 on 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><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Tax indemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</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 of the expenses described above? If "No," complete Part III to explain	1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</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 on 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? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on 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? If "Yes," on line 5a or 5b, describe in Part III	5b	No
6 For persons listed on 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? If "Yes," on line 6a or 6b, describe in Part III	6b	No
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7 Yes	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

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

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

(A) Name and Title	(B) Breakdown of 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 in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
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. HOUSING ALLOWANCE WAS PROVIDED TO THE FORMER PROVOST, THE REVEREND MARK MOROZOWICH, AND THE VALUE IS DISCLOSED IN HIS COMPENSATION AND BENEFITS. THE UNIVERSITY PROVIDES A HOUSE FOR THE PRESIDENT, WHICH IS A WORKING FRINGE BENEFIT SINCE HIS CONTRACT REQUIRES HIM TO RESIDE IN THE HOUSE ON THE UNIVERSITY CAMPUS. 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. 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 2015 WAS \$1144. ALL TRIPS WERE INCLUDED IN TAXABLE EARNINGS FOR THE PRESIDENT, MR. JOHN GARVEY, IN THE APPROPRIATE TAX YEAR.
Schedule J, Part I, Line 7	NON-FIXED PAYMENTS WERE MADE TO THE PROVOST, THE VP OF INSTITUTIONAL ADVANCEMENT, AND THE VP OF ENROLLMENT MANAGEMENT. THESE BONUS PAYMENTS WERE BASED ON SATISFACTION OF PERFORMANCE TARGETS OF THE EXECUTIVE STAFF.

Additional Data

Software ID: 15000352

Software Version: v1.00

EIN: 53-0196583

Name: THE CATHOLIC UNIVERSITY OF AMERICA

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

(A) Name and Title		(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 in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1JOHN H GARVEYPRESIDENT	(i)	447,795	0	8,344	26,500	12,670	495,309	0
	(ii)	0	0	0	0	-0	-0	0
1ANDREW V ABELA PROVOST EFF 6/3/2015	(i)	376,476	15,000	0	26,500	15,317	433,293	0
	(ii)	0	0	0	0	-0	-0	0
2JAMES F BRENNAN FORMER PROVOST RESIGNED 9/23/14	(i)	261,763	0	0	26,000	6,511	294,274	0
	(ii)	0	0	0	0	-0	-0	0
3REV MARK M MOROZOWICH FORMER INTERIM PROVOST 9/24/14-6/2/15	(i)	65,868	0	44,400	15,769	5,695	131,732	0
	(ii)	0	0	0	0	-0	-0	0
4ROBERT M SPECTER VP FOR FINANCE/TREASURER EFF 8/17/2015	(i)	110,827	0	0	0	3,806	114,633	0
	(ii)	0	0	0	0	-0	-0	0
5CATHY R WOOD VP FOR FINANCE/TREAS RESIGNED 8/15/15	(i)	204,982	0	0	20,441	1,894	227,317	0
	(ii)	0	0	0	0	-0	-0	0
6CHRISTOPHER P LYDON VP FOR ENROLLMENT MGT EFF 6/22/2015	(i)	126,348	34,069	3,600	12,000	1,032	177,049	0
	(ii)	0	0	0	0	-0	-0	0
7W MICHAEL HENDRICKS VP FOR ENROLLMENT MGT RESIGNED 6/5/2015	(i)	105,355	0	3,600	10,890	7,562	127,407	0
	(ii)	0	0	0	0	-0	-0	0
8FRANK G PERSICO VP UNIVERSITY RELATIONS & CHIEF OF STAFF	(i)	317,922	0	1,253	26,500	2,838	348,513	0
	(ii)	0	0	0	0	-0	-0	0
9SCOTT P REMBOLD VP INSTITUTIONAL ADVANCEMT EFF 6/24/2015	(i)	192,139	51,370	3,600	18,750	7,868	273,727	0
	(ii)	0	0	0	0	-0	-0	0
10MICHAEL S ALLEN VP OF STUDENT AFFAIRS	(i)	208,648	0	0	21,542	14,586	244,776	0
	(ii)	0	0	0	0	-0	-0	0
11DANIEL ATTRIDGE DEAN AND PROFESSOR OF LAW	(i)	291,013	0	0	26,500	11,046	328,559	0
	(ii)	0	0	0	0	-0	-0	0
12LAWRENCE R POOS FormerDEAN ARTS/SCIENCES RESIGNED 9/1/14	(i)	118,004	0	0	11,740	1,162	130,906	0
	(ii)	0	0	0	0	-0	-0	0
13GEORGE GARVEY ORDINARY PROFESSOR LAW SCHOOL	(i)	200,682	0	0	20,121	1,776	222,579	0
	(ii)	0	0	0	0	-0	-0	0
14VERYL V MILES LAW SCHOOL ORDINARY PROFESSOR	(i)	163,317	0	0	17,261	14,435	195,013	0
	(ii)	0	0	0	0	-0	-0	0
15IAN L PEGG PHYSICS DIRECTOR VSL AND PROFESSOR	(i)	403,327	0	0	26,500	7,720	437,547	0
	(ii)	0	0	0	0	-0	-0	0
16CHARLES C NGUYEN DEAN SCHOOL OF ENGINEERING	(i)	245,528	0	0	25,212	15,033	285,773	0
	(ii)	0	0	0	0	-0	-0	0
17MARTIN R SCORDATO LAW SCHOOL ORDINARY PROFESSOR	(i)	215,058	0	0	21,723	1,969	238,750	0
	(ii)	0	0	0	0	-0	-0	0
18GEORGE P SMITH LAW SCHOOL ORDINARY PROFESSOR	(i)	208,670	0	0	20,954	5,903	235,527	0
	(ii)	0	0	0	0	-0	-0	0
19LAWRENCE J MORRIS GENERAL COUNSEL	(i)	208,475	0	0	20,808	1,910	231,193	0
	(ii)	0	0	0	0	-0	-0	0

Schedule K
(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

THE CATHOLIC UNIVERSITY OF AMERICA

Supplemental Information on Tax Exempt Bonds

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

▶ Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public Inspection

Employer identification number

53-0196583

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 REVENUE BONDS		X		X		X
C District of Columbia Refunding Revenue Bonds Series 2015	53-6001131	000000000	12-09-2015	36,403,123	PARTIAL REFUNDING OF SERIES 2007 BOND		X		X		X

Part II		Proceeds							
		A		B		C		D	
1	Amount of bonds retired	0		0		0			
2	Amount of bonds legally defeased	33,380,000		0		0			
3	Total proceeds of issue	76,317,091		39,061,164		36,403,123			
4	Gross proceeds in reserve funds	0		0		0			
5	Capitalized interest from proceeds	0		0		0			
6	Proceeds in refunding escrows	40,208,083		0		34,741,350			
7	Issuance costs from proceeds	1,821,523		805,222		682,220			
8	Credit enhancement from proceeds	0		0		0			
9	Working capital expenditures from proceeds	0		0		0			
10	Capital expenditures from proceeds	35,223,179		0		0			
11	Other spent proceeds	1,137,516		38,255,942		779,577			
12	Other unspent proceeds	0		0		200,607			
13	Year of substantial completion	2009		2010		2009			
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X		X		
15	Were the bonds issued as part of an advance refunding issue?	X		X		X			
16	Has the final allocation of proceeds been made?	X		X			X		
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		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		X		
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		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 of bond-financed property?	X			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?	X				X			
c	Are there any research agreements that may result in private business use of bond-financed property?		X		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 %		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 ▶	1 3 %		1 3 %		1 5 %			
6	Total of lines 4 and 5	1 3 %		1 3 %		1 5 %			
7	Does the bond issue meet the private security or payment test?	X		X		X			
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?.		X		X		X		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?.								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?.	X		X		X			

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X		X		
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X	X			
b	Exception to rebate?		X	X		X			
c	No rebate due?	X			X		X		
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X		X		X		
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	X			X		X		
b	Name of provider	JP Morgan Expired							
c	Term of GIC	510 %							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X							
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X		X			

Part V Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X		X			

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Return Reference	Explanation
Schedule K, Part II, Line 3-06/30/2007 76,317,091 SERIES DISTRICT OF COLUMBIA 2007 REVENUE BONDS	PART II LINES 6-12 SUMMATION EXCEEDS PART II LINE 3- DISTRICT OF COLUMBIA SERIES 2007 REVENUE BOND PROCEEDS DUE TO INVESTMENT EARNED OF \$2,073,210

Return Reference	Explanation
<p>Schedule K, Part II, Line 3 - 12/09/2015 36,403,123 District of Columbia Refunding Revenue Bonds Serie</p>	<p>PART II LINES 6-12 SUMMATION EXCEEDS PART II LINE 3 - DISTRICT OF COLUMBIA SERIES 2007 REVENUE BOND PROCEEDS DUE TO INVESTMENT EARNED OF \$631</p>

Return Reference	Explanation
Schedule K, Part IV, Line 2c- 06/30/2007 76,317,091 SERIES DISTRICT OF COLUMBIA 2007 REVENUE BONDS	Date of rebate computation performed - 04/30/2016

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

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

► Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA

Employer identification number
53-0196583

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		167	MARKET VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	46	478,378	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				
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 ► (ELECTRONIC EQUIPMENT)	X	1	3,384	SELLING COST
26 Other ► (EVENT DONATION)	X	2	516	COST
27 Other ► (MUSICAL INSTRUMENTS)	X	1	4,700	OPINIONS OF EXPERTS
28 Other ► ()				

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

291

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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

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

No

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

No

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

33

Yes

No

Part II

Supplemental Information.

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
Schedule M, Part I	THE AMOUNTS IN THIS COLUMN IDENTIFY THE NUMBER OF CONTRIBUTIONS MADE FOR EACH CATEGORY OF NON-CASH CONTRIBUTIONS

**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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.**2015****Open to Public
Inspection**Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA**Employer identification number**

53-0196583

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part I, Line 1	SPONSORED BY THE BISHOPS OF THE COUNTRY WITH THE APPROVAL OF THE HOLY SEE THE CATHOLIC UNIVERSITY OF AMERICA IS COMMITTED TO BEING A COMPREHENSIVE CATHOLIC AND AMERICAN 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 6,521 , OF WHICH 3,480 ARE UNDERGRADUATE
Form 990, Part III (Cont 1)	AMERICAN INDEPENDENT INSTITUTION OF HIGHER EDUCATION LOCATED IN WASHINGTON DC, OFFERING PR OGRAMS OF STUDY LEADING TO BACHELORS', MASTERS', DOCTORATE AND PROFESSIONAL DEGREES IN THE LIBERAL ARTS AND SCIENCES, RELIGIOUS STUDIES AND SEVERAL PROFESSIONAL AREAS INCLUDING ENG INEERING, ARCHITECTURE, SOCIAL SERVICE, NURSING, MUSIC AND LAW THE CURRENT ENROLLMENT OF THE UNIVERSITY IS APPROXIMATELY 6,521 OF WHICH 3,480 ARE UNDERGRADUATE

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part V, Line 3b	THE IRS HAS GRANTED AN EXTENSION TO FILE THE 2015 FORM 990T TO THE CATHOLIC UNIVERSITY OF AMERICA THE FORM 990-T WILL BE FILED BY THE EXTENDED DUE DATE OF MARCH 15, 2017
Form 990, Part VI, Section B, Line 11b	THE FORM 990 WAS SENT TO THE FULL BOARD OF TRUSTEES 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

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	THE UNIVERSITY'S SECRETARY OF THE BOARD OF TRUSTEES, IN COORDINATION WITH THE COMPLIANCE OFFICER AND THE GENERAL COUNSEL, 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 TO LEAVE THE MEETING PRIOR TO THE DISCUSSION OF, AND THE VOTE ON THE PROPOSED TRANSACTION OR ARRANGEMENT FACULTY AND STAFF CONFLICT OF INTEREST STATEMENTS ARE REVIEWED BY THE COMPLIANCE OFFICER IN COORDINATION WITH THE VICE PRESIDENT FOR FINANCE AND TREASURER THEY ENSURE THAT ALL FORMS HAVE BEEN SUBMITTED, REVIEW ANY CONFLICTS DISCLOSED, DISCUSS THEM WITH THE INDIVIDUAL AND COGNIZANT SUPERVISOR AS NEEDED, AND DETERMINE PROPER MANAGEMENT ACTION
Form 990, Part VI, Section B, Line 15	THE PRESIDENT'S COMPENSATION IS APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, BASED UPON DATA FROM COMPARABLE INSTITUTIONS OTHER OFFICER AND KEY EMPLOYEE COMPENSATION IS APPROVED BY THE PRESIDENT BASED UPON PERFORMANCE EVALUATIONS AND MARKET DATA THESE PROCESSES AND DECISIONS ARE CONTEMPORANEOUSLY DOCUMENTED

990 Schedule O, Supplemental Information

Return Reference	Explanation
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

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization
THE CATHOLIC UNIVERSITY OF AMERICA

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 (if applicable) 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 entity?	
						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	N/A	Yes	
(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	N/A	Yes	
(3)WASHINGTON RESEARCH LIBRARY CONSORTIUM 901 COMMERCE DRIVE UPPER MARLBORO, MD 20774	RESEARCH RESOURCES	MD	501 (C)(3)	11 TYPE I	N/A		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	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
See Additional Data Table									

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)
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m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l	Yes	
1m	Yes	
1n	Yes	
1o	Yes	
1p		No
1q	Yes	
1r		No
1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)ALBERT E FARONE & ANGELA T FARONE FOUNDATION	c	598,000	SCHOLARSHIPS AWARDED TO CUA STUDENTS
(2)ALBERT E FARONE & ANGELA T FARONE FOUNDATION	q	580,575	REIMBURSEMENT PAYMENT FOR EXPENSE
(3)THE CATHOLIC UNIVERSITY OF AMERICA FOUNDATION	p	40,539	REIMBURSEMENT PAYMENT FOR EXPENSE
(4)WASHINGTON RESEARCH LIBRARY CONSORTIUM	m	705,608	PAYMENT FOR PERFORMANCE OF SERVICES

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**

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

Return Reference	Explanation
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Additional Data

Software ID: 15000352
Software Version: v1.00
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	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUSTS (1) SPLIT INTEREST AGREEMENT NEW YORK, NY 10001	SPLIT INTEREST AGREEMENT	NY	N/A	T					No
(1) CHARITABLE REMAINDER TRUST (1) SPLIT INTEREST AGREEMENT WASHINGTON, DC 20001	SPLIT INTEREST AGREEMENT	DC	N/A	T					No
(2) CHARITABLE REMAINDER TRUST (1) SPLIT INTEREST AGREEMENT FAIRFAX, VA 22030	SPLIT INTEREST AGREEMENT	VA	N/A	T					No
(3) CHARITABLE REMAINDER TRUST (2) SPLIT INTEREST AGREEMENT BETHESDA, MD 20810	SPLIT INTEREST AGREEMENT	MD	THE CATHOLIC UNIVERSITY OF AMERICA	T				Yes	
(4) CHARITABLE REMAINDER TRUST (3) SPLIT INTEREST AGREEMENT WASHINGTON, DC 20001	SPLIT INTEREST AGREEMENT	DC	THE CATHOLIC UNIVERSITY OF AMERICA	T				Yes	
(5) CHARITABLE PERPETUAL TRUST (1) SPLIT INTEREST AGREEMENT BALTIMORE, MD 21201	SPLIT INTEREST AGREEMENT	MD	N/A	T					No
(6) CHARITABLE PERPETUAL TRUST (2) SPLIT INTEREST AGREEMENT DAYTON, OH 45402	SPLIT INTEREST AGREEMENT	OH	N/A	T					No
(7) CHARITABLE PERPETUAL TRUST (1) SPLIT INTEREST AGREEMENT GREENVILLE, SC 29601	SPLIT INTEREST AGREEMENT	SC	N/A	T					No