Form **990**

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2001

Open to Public Inspection

A For the 2001 calendar year, or tax year beginning JUNE 1, 2001, and ending MAY 31, 2002

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return
- ☐ Amended return
- ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: FRANCISCAN UNIVERSITY OF STEUBENVILLE

Number and street (or P O box if mail is not delivered to street address) | Room/suite: 1235 University Boulevard

City or town, state or country, and ZIP + 4: Steubenville OH 43952

D Employer identification number: 34 : 0714818

E Telephone number: (740) 283-6200

F Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 527 organizations.

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates ▶ ....

H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," attach a list See instructions.)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

G Web site: ▶ www.franciscan.edu

J Organization type (check only one) ▶ ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000 The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

I Enter 4-digit GEN ▶

M Check ▶ ☐ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ $ 47,727,793

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

1	Contributions, gifts, grants, and similar amounts received				
a	Direct public support	1a	4,375,328		
b	Indirect public support	1b			
c	Government contributions (grants)	1c	2,257,571		
d	**Total** (add lines 1a through 1c) (cash $ 6,156,972 noncash $ 475,927)			1d	6,632,899
2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	36,776,283
3	Membership dues and assessments			3	
4	Interest on savings and temporary cash investments			4	263,065
5	Dividends and interest from securities			5	393,905
6a	Gross rents	6a			
b	Less rental expenses	6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	
7	Other investment income (describe ▶)			7	

		(A) Securities		(B) Other		
8a	Gross amount from sales of assets other than inventory		8a			
b	Less cost or other basis and sales expenses		8b			
c	Gain or (loss) (attach schedule)	2,732,191	8c	225,367		
d	Net gain or (loss) (combine line 8c, columns (A) and (B))				8d	2,957,558

9	Special events and activities (attach schedule)				
a	Gross revenue (not including $ ________ of contributions reported on line 1a)	9a			
b	Less direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)			9c	
10a	Gross sales of inventory, less returns and allowances	10a			
b	Less cost of goods sold	10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)			10c	
11	Other revenue (from Part VII, line 103)			11	704,083
12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	47,727,793
13	Program services (from line 44, column (B))			13	34,966,112
14	Management and general (from line 44, column (C))			14	5,913,303
15	Fundraising (from line 44, column (D))			15	1,771,010
16	Payments to affiliates (attach schedule)			16	---
17	**Total expenses** (add lines 16 and 44, column (A))			17	42,650,425
18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	5,077,368
19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	65,471,547
20	Other changes in net assets or fund balances (attach explanation)			20	(3,853,556)
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	66,695,359

Revenue / Expenses / Net Assets

RECEIVED JAN 30 2003 OGDEN

FILMED JAN 28 2003

9/13

28

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ 7,810,467 noncash $)	22	7,810,467	7,810,467		
23 Specific assistance to individuals (attach schedule)	23	---	---		
24 Benefits paid to or for members (attach schedule)	24	---	---		
25 Compensation of officers, directors, etc	25	359,445	---	284,445	75,000
26 Other salaries and wages	26	13,810,795	11,056,475	1,970,924	783,396
27 Pension plan contributions	27	802,100	631,286	123,395	47,419
28 Other employee benefits	28	1,967,844	1,548,774	302,733	116,337
29 Payroll taxes	29	969,404	762,961	149,133	57,310
30 Professional fundraising fees	30	67,100	---	---	67,100
31 Accounting fees	31	86,610	8,910	77,700	---
32 Legal fees	32	115,932	---	115,932	---
33 Supplies	33	1,346,553	1,341,454	(70,857)	75,956
34 Telephone	34	367,234	434,984	(97,942)	30,192
35 Postage and shipping	35	337,605	225,434	8,123	104,048
36 Occupancy	36	1,698,563	1,178,287	520,276	---
37 Equipment rental and maintenance	37	969,580	653,773	285,390	30,417
38 Printing and publications	38	291,427	189,418	1,822	100,187
39 Travel	39	839,544	711,442	90,353	37,749
40 Conferences, conventions, and meetings	40	92,644	59,134	27,361	6,149
41 Interest	41	224,628	214,193	10,435	---
42 Depreciation, depletion, etc (attach schedule)	42	3,285,766	2,111,230	1,174,536	---
43 Other expenses not covered above (itemize) a Schedule Attached	43a	7,207,184	6,027,890	939,544	239,750
b	43b				
c	43c				
d	43d				
e	43e				
44 **Total functional expenses** (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13—15	44	42,650,425	34,966,112	5,913,303	1,771,010

Joint Costs. Check ▶ ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs $______, (ii) the amount allocated to Program services $______, (iii) the amount allocated to Management and general $ ______, and (iv) the amount allocated to Fundraising $

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24.)

What is the organization's primary exempt purpose? ▶ Provision of Education & Christian Outreach

All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts but optional for others.)
a Instruction 2253 undergraduate and graduate students enrolled in 41 major academic programs. 393 undergraduate and 123 graduate degrees conferred in the 2001-02 academic year. (Grants and allocations $ 7,810,467)	32,522,853
b Christian Outreach - 11,156 students and other participants in Christian Outreach conferences, seminars, other Catholic training programs and youth outreach programs. (Grants and allocations $)	2,443,259
c (Grants and allocations $)	
d (Grants and allocations $)	
e Other program services (attach schedule) (Grants and allocations $)	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	34,966,112

Part IV **Balance Sheets** (See Specific Instructions on page 24.)

Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only*			**(A)** Beginning of year		**(B)** End of year
Assets 45 Cash—non-interest-bearing			253,715	45	625,337
46 Savings and temporary cash investments			8,583,718	46	10,136,281
47a Accounts receivable	47a	1,112,959			
b Less allowance for doubtful accounts	47b	152,000	606,777	47c	960,959
48a Pledges receivable	48a	2,579,343			
b Less allowance for doubtful accounts	48b	515,868	2,348,160	48c	2,063,475
49 Grants receivable				49	
50 Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
51a Other notes and loans receivable (attach schedule)	51a	3,310,177			
b Less allowance for doubtful accounts	51b	640,880	1,773,819	51c	2,669,297
52 Inventories for sale or use			707,875	52	767,180
53 Prepaid expenses and deferred charges			1,240,481	53	1,324,689
54 Investments—securities (attach schedule) ▶ ☐ Cost ☒ FMV			21,449,174	54	20,416,306
55a Investments—land, buildings, and equipment: basis	55a	95,000			
b Less accumulated depreciation (attach schedule)	55b		95,000	55c	95,000
56 Investments—other (attach schedule)			1,000	56	1,000
57a Land, buildings, and equipment basis	57a	70,387,928			
b Less accumulated depreciation (attach schedule)	57b	28,135,947	42,279,964	57c	42,251,981
58 Other assets (describe ▶)				58	
59 **Total assets** (add lines 45 through 58) (must equal line 74)			79,339,683	59	81,311,505
Liabilities 60 Accounts payable and accrued expenses			3,294,114	60	3,933,908
61 Grants payable			715,000	61	729,675
62 Deferred revenue			2,346,602	62	2,627,733
63 Loans from officers, directors, trustees, and key employees (attach schedule)				63	
64a Tax-exempt bond liabilities (attach schedule)			5,404,000	64a	5,150,000
b Mortgages and other notes payable (attach schedule)			1,394,774	64b	1,718,781
65 Other liabilities (describe ▶ Student Deposits)			713,646	65	456,049
66 **Total liabilities** (add lines 60 through 65)			13,868,136	66	14,616,146
Net Assets or Fund Balances **Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74					
67 Unrestricted			54,963,210	67	55,402,483
68 Temporarily restricted			5,549,975	68	6,057,541
69 Permanently restricted			4,958,362	69	5,235,335
Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74					
70 Capital stock, trust principal, or current funds				70	
71 Paid-in or capital surplus, or land, building, and equipment fund				71	
72 Retained earnings, endowment, accumulated income, or other funds				72	
73 **Total net assets or fund balances** (add lines 67 through 69 OR lines 70 through 72, column (A) **must** equal line 19, column (B) **must** equal line 21)			65,471,547	73	66,695,359
74 **Total liabilities and net assets / fund balances** (add lines 66 and 73)			79,339,683	74	81,311,505

1

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26)

a	Total revenue, gains, and other support per audited financial statements ▶	a	35,844,123
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains (loss) on investments $(3,848,285)		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify) $		
	Add amounts on lines (1) through (4) ▶	b	(3,848,285)
c	Line a minus line b ▶	c	39,692,408
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) Student Activities 224,918; Student Aid Netted with Tuition Rev. $ 7,810,467		
	Add amounts on lines (1) and (2) ▶	d	8,035,385
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	47,727,793

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements ▶	a	34,620,311
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify) $		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	34,620,311
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990. $		
(2)	Other (specify) Student Activities 219,647; Student Aid Netted with Tuition Rev. $7,810,467		
	Add amounts on lines (1) and (2) ▶	d	8,030,114
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	42,650,425

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Schedule Attached				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ▶ ☐ Yes ☒ No
If "Yes," attach schedule—see Specific Instructions on page 27

Part VI Other Information (See Specific Instructions on page 27.)

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		X
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a	X	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b	X	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ ______ and check whether it is ☐ exempt OR ☐ nonexempt			
81a	Enter direct or indirect political expenditures. See line 81 instructions — 81a: NONE			
b	Did the organization file **Form 1120-POL** for this year?	81b	N/	A
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X	
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) — 82b: Not Readily Determinable			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	N/	A
85	*501(c)(4), (5), or (6) organizations.* a Were substantially all dues nondeductible by members?	85a	N/	A
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b	N/	A
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members — 85c: N/A			
d	Section 162(e) lobbying and political expenditures — 85d: N/A			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices — 85e: N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85f: N/A			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/	A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/	A
86	*501(c)(7) orgs.* Enter: a Initiation fees and capital contributions included on line 12 — 86a: N/A			
b	Gross receipts, included on line 12, for public use of club facilities — 86b: N/A			
87	*501(c)(12) orgs.* Enter: a Gross income from members or shareholders — 87a: N/A			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) — 87b: N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X	
89a	*501(c)(3) organizations.* Enter: Amount of tax imposed on the organization during the year under section 4911 ▶ NONE, section 4912 ▶ NONE, section 4955 ▶ NONE			
b	*501(c)(3) and 501(c)(4) orgs.* Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X

c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ NONE

d Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ NONE

90a List the states with which a copy of this return is filed ▶ OHIO

b Number of employees employed in the pay period that includes March 12, 2001 (See instructions.) 90b: 1087

91 The books are in care of ▶ John A. Steitz Telephone no. ▶ (740)283-6200 ext. 1134

Located at ▶ 1235 University Blvd. Steubenville OH ZIP + 4 ▶ 43952

92 *Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of* **Form 1041**—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92: N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32.)

Note: *Enter gross amounts unless otherwise indicated*

		Unrelated business income		Excluded by section 512, 513, or 514		
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	(E) Related or exempt function income
93	Program service revenue					
a	Schedule Attached					36,776,283
b						
c						
d						
e						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies					
94	Membership dues and assessments					
95	Interest on savings and temporary cash investments			14	263,065	
96	Dividends and interest from securities			14	393,905	
97	Net rental income or (loss) from real estate					
a	debt-financed property					
b	not debt-financed property					
98	Net rental income or (loss) from personal property					
99	Other investment income					
100	Gain or (loss) from sales of assets other than inventory			18	2,957,558	
101	Net income or (loss) from special events					
102	Gross profit or (loss) from sales of inventory					
103	Other revenue: a Schedule Attached	611310	308,696	03	395,387	
b						
c						
d						
e						
104	Subtotal (add columns (B), (D), and (E))		308,696		4,009,915	36,776,283

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 41,094,894

Note: *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I*

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	Schedule Attached

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
Good Venture Enterprises, LLC	100 %	Provide Dormitory &	219,210	(1,176,576)
1235 University Boulevard	%	Social Space for		
Steubenville OH 43952	%	Students & Guests		
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to p[redacted]

(b) Did the organization, during the year, pay premiums, directly or [redacted]

Note: *If "Yes" to (b), file Form 8870 and Form 4720 (see instructio*[redacted]

Please Sign Here

Under penalties of perjury I declare that I have examined this return, including [redacted]
and belief, it is true correct, and complete Declaration of preparer (other th[redacted]

▶ Signature of officer

▶ John A. Steitz, Controller

Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Ernst & Young LLP
1400 Key Tower 50 Foundat[redacted]
Buffalo NY 14202

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2001

Name of the organization: FRANCISCAN UNIVERSITY OF STEUBENVILLE

Employer identification number: 34 : 0714818

Part I **Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees** (See page 1 of the instructions. List each one If there are none, enter "None")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Dr. Stephen Militec 131 Crawford Ave Wintersville OH 43953	Dean of Faculty - 50 Hours	82,740	25,016	NONE
Mr. Michael Campbell 291 Belleview Blvd Steubenville OH 43952	Vice president for University Relations - 50 Hours	82,190	24,915	NONE
Mr. Joel Recznik 6181 Mt. Tabor Road Steubenville OH 43952	Dean of Enroll-ment Management - 50 Hours	75,540	26,921	NONE
Dr. Alirio Valbuena 200 Fernwood Road Apt.28 Wintersville OH 43953	Director of Information Technology - 50 Hours	73,040	19,579	NONE
Dr. Michael Healy 1804 Williams Place Steubenville OH 43952	Professor of Philosophy - 50 Hours	70,284	23,312	NONE
Total number of other employees paid over $50,000 ▶	32			

Part II **Compensation of the Five Highest Paid Independent Contractors for Professional Services** (See page 2 of the instructions. List each one (whether individuals or firms) If there are none, enter "None")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
MacLachlan Cornelius & Filoni 200 The Bank Tower Pittsburgh PA 15222	Architects	$356,856
Jefferson Investigators & Security Inc. 2615 Sunset Blvd. Steubenville OH 43952	Security Services	$290,943
Ernst & Young LLP P O Box 640382 Pittsburgh PA 15264-0382	Auditors/Consultants	$153,335
Consulting Group Inc. Salamon ~~Smith Barney~~ 4449 Easton Way Suite 300 Columbus OH 43219	Financial Consultant	$ 64,207
Trinity Health Systems 380 Summit Ave Steubenville OH 43952	Student Health Services	$ 63,427
Total number of others receiving over $50,000 for professional services ▶ 0		

Part III **Statements About Activities** (See page 2 of the instructions)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ ________ **(Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)**	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? *(If the answer to any question is "Yes," attach a detailed statement explaining the transactions)*			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)? See Form 990 Part V	2d	X	
e	Transfer of any part of its income or assets?	2e		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc ? (See **Note** below)	3	X	
4	Do you have a section 403(b) annuity plan for your employees?	4	X	

Note: *Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.*

Part IV **Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box)

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☒ A school Section 170(b)(1)(A)(ii) (Also complete Part V)

7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶ ....

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A.)

11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

11b ☐ A community trust. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)

12 ☐ An organization that normally receives **(1) more than 33⅓%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions—subject to certain exceptions, and **(2) no more than 33⅓%** 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) (Also complete the **Support Schedule** in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above, or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting.*

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting*

Calendar year (or fiscal year beginning in) ▶	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)					
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22					
24 Line 23 minus line 17					
25 Enter 1% of line 23					

26 **Organizations described on lines 10 or 11.** a Enter 2% of amount in column (e), line 24 ▶ 26a

Not Applicable

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ 26c

d Add Amounts from column (e) for lines 18 ______ 19 ______ 22 ______ 26b ______ ▶ 26d

e Public support (line 26c minus line 26d total) ▶ 26e

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f %

27 **Organizations described on line 12:** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" **Do not file this list with your return.** Enter the sum of such amounts for each year

(2000) .... (1999) .... (1998) .... (1997) ....

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year

(2000) .... (1999) .... (1998) .... (1997) ....

c Add Amounts from column (e) for lines 15 ______ 16 ______ 17 ______ 20 ______ 21 ______ ▶ 27c

d Add Line 27a total ______ and line 27b total ______ ▶ 27d

e Public support (line 27c total minus line 27d total) ▶ 27e

f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶ 27f

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)).** ▶ 27h %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return.** Do not include these grants in line 15

Part V **Private School Questionnaire** (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	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?	29	X	
30	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?	30	X	
31	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?	31	X	
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.) The back of the undergraduate application reflects non discriminatory policy. The policy statement is contained in newspaper and radio advertising and published in the University catalogs and documents distributed to high schools and at college information fairs.			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	X	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d	X	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		X
b	Admissions policies?	33b		X
c	Employment of faculty or administrative staff?	33c		X
d	Scholarships or other financial assistance?	33d		X
e	Educational policies?	33e		X
f	Use of facilities?	33f		X
g	Athletic programs?	33g		X
h	Other extracurricular activities?	33h		X
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	X	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		X
35	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," attach an explanation	35	X	

Part VI-A **Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ▶ a ☐ if the organization belongs to an affiliated group Check ▶ b ☐ if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table—			
If the amount on line 40 is— / The lobbying nontaxable amount is—			
Not over $500,000 — 20% of the amount on line 40			
Over $500,000 but not over $1,000,000 — $100,000 plus 15% of the excess over $500,000			
Over $1,000,000 but not over $1,500,000 — $175,000 plus 10% of the excess over $1,000,000	41		
Over $1,500,000 but not over $17,000,000 — $225,000 plus 5% of the excess over $1,500,000			
Over $17,000,000 — $1,000,000			
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B **Lobbying Activity by Nonelecting Public Charities**
(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers		X	
b Paid staff or management (Include compensation in expenses reported on lines c through h.)		X	
c Media advertisements		X	
d Mailings to members, legislators, or the public		X	
e Publications, or published or broadcast statements		X	
f Grants to other organizations for lobbying purposes		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means		X	
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations** (See page 12 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

			Yes	No
a	Transfers from the reporting organization to a noncharitable exempt organization of:			
	(i) Cash	51a(i)		X
	(ii) Other assets	a(ii)		X
b	Other transactions			
	(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
	(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
	(iii) Rental of facilities, equipment, or other assets	b(iii)		X
	(iv) Reimbursement arrangements	b(iv)		X
	(v) Loans or loan guarantees	b(v)		X
	(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d *If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received*

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) *Type of organization*	(c) *Description of relationship*

Franciscan University of Steubenville
EIN 34-0714818
Form 990 Attachments
May 31, 2002

Part I Line 1c - Government Contributions (grants)

Federal Programs				
		192,070		
		1,236,667		
		147,820	1,576,557	
Ohio State Grants				
	Academic Scholarships	56,723		
	Instructional Grants	279,084		
	Part time Grants	21,708		
		293,874	651,389	
			16,950	
			8,300	
			3,375	
			1,000	2,257,571

Part I Line 8c - Gain/Loss sale of assets

Column A
This amount represents gain/loss on investments and mutual funds managed by third party managers and individual equities

		Loss	Gain	
Managers	Commonfund		2,924,064	
	Salomon Smith Barney	(206,191)		
Kaufman Fund			10,684	
Hillenbrand			5,818	
Net Misc Small Stock Gifts		(2,184)		
Column B - Other				
Foreign Exchange Rate		225,367		
	Total 8C	16,992	2,940,566	**2,957,558**

Part I Line 20 - Other Increases in Fund Balances

Unrealized Loss on Investments	($3,848,285)
Reclassification of Income and Expenses from Student Activities	($5,271)
Total	**($3,853,556)**

PART II - Line 22 - Grants and Allocations

DESCRIPTION	PROGRAM SERVICES
FEDERAL AID	1 442,460
STATE AID	687,094
INSTITUTIONAL AID	4 654,365
RESTRICTED SCHOLARSHIPS	1,026,548
TOTALS	**7,810,467**

Additional detail including name and address of the specific grantees is available upon request

No relationship exists between any of the donees and the University

PART II Line 42 - Functional Expenses - Depreciation

Depreciation is computed on the straight-line method over the estimated useful lives of the assets

Franciscan University of Steubenville
EIN 34-0714818
Form 990 Attachments
May 31, 2002

Part II Line 43 - Functional Expenses Other

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANGMNT & GENRL	FUNDRAISING
DUES, MEMBERSHIPS ENTERTAINMENT AND SUBSCRIPTIONS	615,426	422,334	98,427	94,665
ADVERTISING, HONORARIUMS, ROYALTIES, AND RECRUITING	772,916	690,597	11,562	70,757
CONSULTING	618,906	177,623	401,702	39,582
BAD DEBT EXPENSES	511,699	217,091	294,608	0
DISTANCE LEARNING BOOKSTORE & UNIVERSITY PRESS	1,526,713	1,526,713	0	0
FOOD SERVICE	2,553,991	2,553,991	0	0
EQUIPMENT ACQUISITION AND EQUIPMENT REPLACEMENT	355,845	210,076	133,245	12,524
OTHER SUMMER CONFERENCES RESIDENT ASSISTANT WAIVERS	251,688	229,465	0	22,223
TOTALS	**7,207,184**	**6,027,890**	**939,544**	**239,750**

PART IV Balance Sheets Line 51c

Other Notes and Loans Receivable	
Loans to Students	973,263
Loan to Austrian Foundation for Study Abroad Program	1,696,034
Total	**2,669,297**

PART IV Investments - Securities Line 54

Bonds	4,363 678
Equities	13,385,586
US Treasury & Money Market Securities	2,667,042
Totals	**20,416,306**

PART IV Investments Other Line 56

Capital Contribution to Good Venture Enterprises, LLC	**1,000**

PART IV Balance Sheet Line 57a, 57b

Description	
Land and Land Improvements	6,074,989
Buildings	47,158 031
Equipment	16,714,387
Construction in Progress	440,521
Total	70,387,928
Accumulated Depreciation	(28 135,947)
Land, Buildings, and Equipment Net	**42,251,981**

Franciscan University of Steubenville
EIN. 34-0714818
Form 990 Attachments
May 31, 2002

Part IV Line 64a/64b Long Term Debt Fed ID # 34-0714818

Long-term, interest-bearing debt consists of the following

	Interest Rate	Outstanding Balance May 31 2002	Outstanding Balance May 31 2001	Principal Payments
1970 Dormitory and Auxiliary Facilities Construction and Refunding Bonds *				
Series A (matures April 1, 2010)	3- 1/8%	$252,000	$279,000	Ranging from $27,000 in the year ending May 31 2002 to $35 000 at maturity
Series B (matures April 1, 2012)	3-3/8%	$225,000	$244,000	Ranging from $19,000 in the year ending May 31 2002 to $27,000 at maturity
Series C (matures April 1, 2017)	3%	$280 000	$295 000	Ranging from $15,000 in the year ending May 31 2002 to $23 000 at maturity
Series D (matures April 1, 2020)	3%	$553,000	$576 000	Ranging from $23,000 in the year ending May 31 2002 to $40,000 at maturity
*Form 8038 filed				
1996 Ohio Higher Educational Facility Revenue Bonds* (mature December 1 2016)	Variable	$3 840 000	$4 010 000	Ranging from $170 000 in the year ending May 31 2002 to $350,000 at maturity
*Form 8038 filed 12/5/96				
Total Exepmt Bond Liabilities		**$5,150,000**	**$5,404,000**	
Term Loan (matures November 30 2006) National City Bank $1 000 000 Original	6 38%	$913,626	$0	Monthly payments including principal and interest of $19 500
Term Loan (matures December 12 2006) SkyBank Financial $500,000 Original	3 8%	$457 155	$0	Monthly payments, including principal and interest of $9,200
Installment Loan (matures June 26 2003) National City Bank $355 000 Original	7 5%	$0	$278 346	Monthly Payments, including principal and interest of $4 214
Term Loan (matures December 15 2004) Skybank $850 000 Original	7 78%	$0	$768 428	Monthly Payments including principal and interest of $10 367
Provincial Investment		$348,000	$348 000	Non-interest bearing Province start-up investment 1956
MORTGAGES AND NOTE PAYABLE		**$6,868,781**	**$8,798,774**	

Franciscan University of Steubenville
EIN 34-0714818
Form 990 Attachments
May 31, 2002

PART V List of Officers, Directors, Trustees, Key Employees

Name and Address	Title and Avg Hours	Compensation	Fringe Benefits	Expense Acct And Other Allowances
Rev Terence Henry, T O R 1235 University Boulevard Steubenville OH 43952	President Secretary of Board of Trustees - 50 Hours	$105,000 *	$23,376 *	NONE
Rev Michael Scanlan, T O R 1235 University Boulevard Steubenville, OH 43952	Chancellor - 50 hours	$75,000 *	$17,856 *	NONE
Mr Randall Cimer 1235 University Boulevard Steubenville, OH 43952	Executive Vice President - 50 Hours	$91,890	$26,700	NONE
Mr David Skiviat 1235 University Boulevard Steubenville OH 43952	Vice President for Finance 50 Hours	$87,555	$26,440	NONE
Very Rev Edmund Carroll T O R 1235 University Boulevard Steubenville OH 43952	Chairman < 1 hour per week	NONE	NONE	NONE
Mr Paul Michael Pohl 1235 University Boulevard Steubenville, OH 43952	Vice Chairman < 1 hour per week	NONE	NONE	NONE
Mr Robert Mylod 1235 University of Steubenville Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mr Michael Doherty 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Rev Benedict Groeschel C F R 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mrs Barbara Henkels 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Dr Alan Keyes 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mr James Manhardt 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Br Mark P McBride T O R 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE

Franciscan University of Steubenville
EIN 34-0714818
Form 990 Attachments
May 31, 2002

PART V List of Officers, Directors, Trustee, Key Employees Continued

Name and Address	Title and Avg Hours	Compensation	Fringe Benefits	Expense Acct And Other Allowances
Dr Charles Rice 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mrs Barbara Sanders 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mrs Joan Smith 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mr Richard Riederer 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mr William D Callaghan, Jr 1235 University Boulevard Steubenville, OH 43952	Emeritus < 1 hour per week	NONE	NONE	NONE
Dr John H Irvin 1235 University Boulevard Steubenville OH 43952	Emeritus < 1 hour per week	NONE	NONE	NONE
Rev Brian Miller T O R 1235 University Boulevard Steubenville, OH 43952	Emeritus < 1 hour per week	NONE	NONE	NONE
Mr Nicholas Carardi 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mrs Paulette Kardos 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Br James Boyle T O R 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Rev Richard Davis, T O R 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Sr M Regina Pacis, F S G M 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Deacon Ragael de los Reyes 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Fr Nicholas Polichnowski T O R 1235 University Boulevard Steubenville OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
	Total	**359,445**	**94,372**	**NONE**

* Paid to Franciscan Friars (T O R)

PART VII Program Service Revenue Line 93a (E)

Description	Related or Exempt Function Income
Tuition and Fees	24,850,827
Educational Activities	682,694
Auxiliary Activities	8,805,761
Christian Outreach	2,100,495
Student Forfeitures/Assistance	105,770
Student Activities	215,007
Interest on Student Loans	15,729
Total	36,776,283

PART VII Other Revenue Line 103a

Description	Business Code	Amount	Business Code	Amount
Fee Income			03	95,043
Occupancy Charges			03	95,470
Misc Student Services	611310	11,981	03	102,648
Chapel Income			03	33,151
Air Quality Monitoring Grant			03	8,855
Christian Outreach	611310	287,128	03	
Miscellaneous	611310	9,587	03	60,220
Total		308,696		395,387

PART VIII Relationship of Activities Exempt Purposes

Explanation of How each activity for which income is reported in Column (E) of Part VII contributed importantly to the accomplishment of exempt purposes

Fees from students - part of our exempt purpose as a private religious educational institution

Fees from graduate and community oriented sales of educational programming

Lodging and food service for students, sales of educational and religious material and other goods to students, visitors and Christian supporters which is a furtherance of our exempt religious educational purpose

Fees for Christian conferences seminars and pilgrimages providing religious educational programming, sales of religious books, literature, music and tapes containing Catholic educational programming

Interest on Loans to students which is a furtherance of our exempt educational purpose

Schedule A Part III Line 3

Scholarships are issued to students based upon their financial need and academic standards The selection committees are comprised of individuals from Admissions, Enrollment Services, and Vice President for Finance

Form **8868**
(December 2000)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return

OMB No 1545 1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ ☒
- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form)

Note *Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868*

Part I **Automatic 3-Month Extension of Time**—Only submit original (no copies needed)

Note *Form 990-T corporations requesting an automatic 6-month extension—check this box and complete Part I only* ▶ ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

Type or print	Name of Exempt Organization	Employer identification number
File by the due date for filing your return See instructions.	Franciscan University of Steubenville	34 0714818
	Number street, and room or suite no If a P O box, see instructions 1235 University Blvd	
	City, town or post office, state and ZIP code For a foreign address, see instructions Steubenville, OH 43952	

Check type of return to be filed (file a separate application for each return)

☒ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T (sec 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☐ Form 990-PF	☐ Form 1041-A	☐ Form 8870

- If the organization does **not** have an office or place of business in the United States, check this box ▶ ☐
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) ________ If this is for the **whole** group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until January 15 , 2003, to file the exempt organization return for the organization named above The extension is for the organization's return for

▶ ☐ calendar year 20 or

▶ ☒ tax year beginning June 1 , 2001, and ending May 31 , 20 02

2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions $

b If this application is for Form 990-PF or 990-T enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit $

c **Balance Due** Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions $

Signature and Verification

Under penalties of perjury I declare that I have examined this form including accompanying schedules and statements, and to the best of my knowledge and belief, it is true correct, and complete, and that I am authorized to prepare this form

Signature ▶ John A. Steitz Title ▶ Controller Date ▶ 9/3/02