Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2004

Open to Public Inspection

A For the 2004 calendar year, or tax year beginning June 1, 2004, and ending May 31, 2005

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): 1235 University Blvd. Room/suite:

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

D Employer identification number 34 : 0714818

E Telephone number (740) 283-3771

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 Website: ▶ www.franciscan.edu

I Group Exemption Number ▶

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.**

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 ▶ 53,475,995

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received:				
	a	Direct public support	1a	2,414,141		
	b	Indirect public support	1b			
	c	Government contributions (grants)	1c	2,640,404		
	d	Total (add lines 1a through 1c) (cash $ 2,247,396 noncash $ 166,745)			1d	5,054,545
	2	Program service revenue including government fees and contracts (from Part VII, line 93)			2	43,391,171
	3	Membership dues and assessments			3	
	4	Interest on savings and temporary cash investments			4	350,515
	5	Dividends and interest from securities			5	347,545
	6a	Gross rents	6a			
	b	Less: rental expenses	6b			
	c	Net rental income or (loss) (subtract line 6b from line 6a)			6c	-0-
	7	Other investment income (describe ▶)			7	3,162,394

		(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)	577,005	8c	23,414

Revenue	8d	Net gain or (loss) (combine line 8c, columns (A) and (B))			8d	600,419
	9	Special events and activities (attach schedule). If any amount is from gaming, check here ▶ ☐				
	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	-0-
	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	-0-
	11	Other revenue (from Part VII, line 103)			11	553,531
	12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	53,460,120
Expenses	13	Program services (from line 44, column (B))			13	41,358,682
	14	Management and general (from line 44, column (C))			14	5,818,819
	15	Fundraising (from line 44, column (D))			15	1,867,774
	16	Payments to affiliates (attach schedule)			16	-0-
	17	**Total expenses** (add lines 16 and 44, column (A))			17	49,045,275
Net Assets	18	Excess or (deficit) for the year (subtract line 17 from line 12)			18	4,414,845
	19	Net assets or fund balances at beginning of year (from line 73, column (A))			19	73,909,305
	20	Other changes in net assets or fund balances (attach explanation)			20	834,855
	21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			21	79,159,005

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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 page 22 of the instructions.)

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 $ 8,582,780 noncash $ -0-)	22	8,582,780	8,582,780		
23 Specific assistance to individuals (attach schedule)	23	-0-	-0-		
24 Benefits paid to or for members (attach schedule)	24	-0-	-0-		
25 Compensation of officers, directors, etc.	25	393,749	82,033	311,716	-0-
26 Other salaries and wages	26	14,781,796	11,933,536	1,895,956	952,304
27 Pension plan contributions	27	870,967	688,948	119,425	62,594
28 Other employee benefits	28	2,398,050	1,896,894	328,814	172,342
29 Payroll taxes	29	1,053,727	833,514	144,484	75,729
30 Professional fundraising fees	30	38,796	-0-	-0-	38,796
31 Accounting fees	31	115,275	8,700	106,575	-0-
32 Legal fees	32	94,873	-0-	94,873	-0-
33 Supplies	33	1,527,403	1,593,607	(115,898)	49,694
34 Telephone	34	392,601	458,526	(91,733)	25,808
35 Postage and shipping	35	259,367	169,847	7,787	81,733
36 Occupancy	36	2,155,234	1,564,599	590,635	-0-
37 Equipment rental and maintenance	37	953,998	638,408	293,730	21,860
38 Printing and publications	38	201,562	116,950	767	83,845
39 Travel	39	944,493	763,024	112,013	69,456
40 Conferences, conventions, and meetings	40	105,789	78,295	21,650	5,844
41 Interest	41	309,581	309,581	-0-	-0-
42 Depreciation, depletion, etc. (attach schedule)	42	3,183,994	2,204,375	979,619	-0-
43 Other expenses not covered above (itemize): a	43a	10,681,240	9,435,065	1,018,406	227,769
b Schedule Attached	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	49,045,275	41,358,682	5,818,819	1,867,774

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 page 25 of the instructions.)

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 and Auxiliary services as related to student housing-2421 undergraduate and graduate students enrolled in 34 Majors and 34 Minor academic programs, 456 undergraduate and 120 graduate degrees conferred in 2004-05 academic year. (Grants and allocations $ 8,582,780)	39,533,893
b	Christian Outreach 40,920 students and other participants in Christian Outreach Conferences, seminars, other Catholic programs and youth outreach programs. (Grants and allocations $)	1,824,789
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). ▶	41,358,682

Part IV Balance Sheets (See page 25 of the instructions.)

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		228,750	45	140,109
	46	Savings and temporary cash investments		14,827,272	46	17,980,550
	47a	Accounts receivable	47a 1,135,992			
	b	Less: allowance for doubtful accounts	47b 225,000	579,021	47c	910,992
	48a	Pledges receivable	48a 565,341			
	b	Less: allowance for doubtful accounts	48b 113,068	1,126,571	48c	452,273
	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 3,921,949			
	b	Less: allowance for doubtful accounts	51b 1,422,394	2,778,785	51c	2,499,555
	52	Inventories for sale or use		676,311	52	497,756
	53	Prepaid expenses and deferred charges		1,012,317	53	1,518,003
	54	Investments—securities (attach schedule) ▶ ☐ Cost ☐ FMV		23,545,874	54	26,144,070
	55a	Investments—land, buildings, and equipment: basis	55a 95,000			
	b	Less: accumulated depreciation (attach schedule)	55b -0-	95,000	55c	95,000
	56	Investments—other (attach schedule)		1,000	56	1,000
	57a	Land, buildings, and equipment: basis	57a 85,681,475			
	b	Less: accumulated depreciation (attach schedule)	57b 37,511,364	46,830,207	57c	48,170,111
	58	Other assets (describe ▶)			58	
	59	**Total assets** (add lines 45 through 58) (must equal line 74)		91,701,108	59	98,409,419
Liabilities	60	Accounts payable and accrued expenses		6,061,405	60	6,407,688
	61	Grants payable		728,159	61	727,413
	62	Deferred revenue		2,029,035	62	2,494,727
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a	Tax-exempt bond liabilities (attach schedule)		4,605,000	64a	4,314,000
	b	Mortgages and other notes payable (attach schedule)		3,212,973	64b	3,578,333
	65	Other liabilities (describe ▶ Student deposits & JV minority Interest)		1,155,231	65	1,728,253
	66	**Total liabilities** (add lines 60 through 65)		17,791,803	66	19,250,414
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		62,337,044	67	67,449,558
	68	Temporarily restricted		5,291,811	68	5,301,658
	69	Permanently restricted		6,280,450	69	6,407,789
		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)		73,909,305	73	79,159,005
	74	**Total liabilities and net assets / fund balances** (add lines 66 and 73)		91,701,108	74	98,409,419

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 page 27 of the instructions.)

a	Total revenue, gains, and other support per audited financial statements ▶	a	45,465,548
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments $ 833,119		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify): $		
	Add amounts on lines (1) through (4) ▶	b	833,119
c	Line a minus line b ▶	c	44,632,429
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 244,911; Student Aid $8,582,780		
	Add amounts on lines (1) and (2) ▶	d	8,827,691
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	53,460,120

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

a	Total expenses and losses per audited financial statements ▶	a	40,215,848
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	
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 246,647; Student Aid $8,582,780		
	Add amounts on lines (1) and (2) ▶	d	8,829,427
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	49,045,275

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 27 of the instructions.)

(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 page 28 of the instructions.

Part VI Other Information (See page 28 of the instructions.)

					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 and 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 ▶

b Number of employees employed in the pay period that includes March 12, 2004 (See instructions.) 90b 1151

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

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 page 33 of the instructions.)

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					43,391,171
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			03	350,515	
96 Dividends and interest from securities			03	347,545	
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	721110	(210,139)			3,372,533
100 Gain or (loss) from sales of assets other than inventory			03	600,419	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a Schedule Attached	611710	203,509	03	350,022	
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		(6,630)		1,648,501	46,763,704

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 48,421,450

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 page 34 of the instructions.)

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 page 34 of the instructions.)

(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
Schedule Attached	%			
	%			
	%			
	%			

Part X **Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).*

Please Sign Here

Under penalties of perjury, I declare that I have examined [redacted]
and belief, it is true, correct, and complete. Declaration [redacted]

John A. Steitz [redacted]
Signature of officer

John A. Steitz, Controller [redacted]
Type or print name and title.

Paid Preparer's Use Only

Preparer's signature Rosemarie [redacted]

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

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

2004

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
Mr. Frank Glazer 1007 Cherry Hill Drive Presto PA 15142	Vice President for Advancement 50 Hours	$120,238	$29,823	$3,017 Reimburse Business Expenses
Dr. Michael Healy 1804 Williams Place Steubenville OH 43952	Professor 50 Hrs Philosophy Dept &Distance Learning	$ 96,381	$27,135	NONE
Dr. Regis Martin 301 Woodridge Drive Wintersville OH 43953	Professor 50 Hrs Theology Dept., Distance Learning & Program Host	$ 87,416	$28,292	NONE
Dr. Dianne Keenan 2711 Whitehaven Blvd. Steubenville OH 43952	Professor 50 Hours Education Dept.	$ 85,377	$16,915	NONE
Mr. Joel Recznik 6181 Mt. Taber Road Toronto OH 43964	Dean of Enrollment Management 50 Hours	$ 85,360	$33,885	NONE
Total number of other employees paid over $50,000 . . . . ►	75			

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 307 Fourth Avenue Pittsburgh PA 15222	Architects	$342,629
Jefferson Investigators & Security Inc. 2615 Sunset Blvd. Steubenville OH 43952	Security	$279,828
Reed Smith LLP P.O. Box 360074 M Pittsburgh PA 15251-6074	Attorney	$ 97,258
Paskill Stapleton & Lord One Roberts Avenue Glenside PA 19038-3497	Consultants	$ 94,530
Cardiff Consulting Group International 2512 San Elijo Avenue Cardiff-by-the-Sea CA 92007	Consultants	$ 78,840
Total number of others receiving over $50,000 for professional services . . . . ►	3	

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
3a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a	X	
b	Do you have a section 403(b) annuity plan for your employees?	3b	X	
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4a		X
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?	4b		X

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 5 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)** 2003	**(b)** 2002	**(c)** 2001	**(d)** 2000	**(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 Not Applicable ▶ 26a

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 2000 through 2003 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:

(2003) .... (2002) .... (2001) .... (2000) ....

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:

(2003) .... (2002) .... (2001) .... (2000) ....

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 2000 through 2003, 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.)
All undergraduate & graduate applications reflect non-discriminatory policy. The policy statement is contained in newspaper & radio advertising & published in University catalogs & documents distributed to high schools & at college information fairs. The policy is also stated on our website.

			Yes	No
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.)

			Yes	No
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.)

			Yes	No
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) 2004	(b) 2003	(c) 2002	(d) 2001	(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 11 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 11 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

Part I - List of Contributors
Line 1a: EIN 34-0714818

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$235,084.43		5/31/05
	$235,084.43		
	$133,333.00		12/22/04
	$133,333.00		
	$120,000.00		9/9/04
	$120,000.00		
	$100,277.64	Pay-Stock	12/21/04
		36 shares of Berkshire Hathaway, Inc.	
	$100,277.64		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$35,950.00		7/14/04
	$6,015.00		8/27/04
	$48,508.00		12/17/04
	$90,473.00		
	$50,000.00		1/4/05
	$35,000.00		1/4/05
	$85,000.00		

Part I - List of contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$44,040.00		7/8/04
	$37,696.95		7/8/04
	$81,736.95		
	$5,000.00		6/4/04
	$5,000.00		7/6/04
	$5,000.00		8/4/04
	$5,000.00		9/3/04

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$5,000.00		10/6/04
	$5,000.00		11/8/04
	$5,000.00		12/3/04
	$5,000.00		1/10/05
	$5,000.00		2/4/05
	$5,000.00		3/4/05

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$5,000.00		4/6/05
	$5,000.00		5/5/05
	$60,000.00		
	$59,479.84		1/6/05
	$59,479.84		
	$10,000.00		6/7/04
	$9,000.00		7/14/04

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$9,000.00		10/14/04
	$9,000.00		1/14/05
	$9,000.00		4/8/05
	$46,000.00		
	$45,000.00		5/26/05
	$45,000.00		
	$1,000.00		10/20/04
	$10,000.00		10/20/04

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$15,000.00		1/6/05
	$15,000.00		5/31/05
	$41,000.00		
	$2,000.00		12/29/04
	$30,000.00		12/29/04
	$32,000.00		
	$25,000.00		6/28/04
	$25,000.00		
	$25,000.00		4/21/05

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of Contributors
Line 1a: EIN:34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$25,000.00		
	$22,223.00		2/25/05
	$22,223.00		
	$1,000.00		7/28/04
	$10,000.00		9/8/04
	$10,000.00		5/13/05
	$21,000.00		
	$20,031.55	Stock	1/19/05
		385 shares of Henkels & McCoy, Inc.	
	$20,031.55		

Part I - List of Contributors
Line 1a: EIN: 34-0714818
Schedule B
PART I and Part II

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

AMOUNT	GIFT TYPE	DATE
$20,000.00		12/3/04
$20,000.00		
$20,000.00		12/28/04
$20,000.00		
$20,000.00		1/20/05
$20,000.00		
$1,000.00		7/29/04
$2,000.00		8/25/04
$2,000.00		9/3/04

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$2,000.00		10/6/04
	$2,000.00		11/8/04
	$2,000.00		2/4/05
	$2,000.00		3/4/05
	$2,000.00		4/6/05
	$2,000.00		5/5/05
	$17,000.00		
	$16,000.00		6/28/04
	$16,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$15,231.19	Stock	5/16/05
		500 shares of Exxon Mobil	
	$15,231.19		
	$6,000.00		6/17/04
	$9,000.00		12/20/04
	$15,000.00		
	$5,000.00		6/18/04
	$5,000.00		6/18/04
	$5,000.00		1/6/05
	$15,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$15,000 00		9/7/04
	$15,000.00		
	$9,354.40	Stock	1/12/05
		110 shares of Progressive Corp OH	
	$2,500.00		4/6/05
	$11,854.40		
	$10,000.00		3/16/05
	$1,000.00		3/16/05
	$11,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$5,000.00		6/14/04
	$5,000.00		2/21/05
	$10,000.00		
	$10,000.00		6/18/04
	$10,000.00		
	$10,000.00		7/2/04
	$10,000.00		
	$10,000.00		7/26/04
	$10,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$10,000.00		8/11/04
	$10,000.00		
	$5,000.00		8/19/04
	$5,000.00		11/11/04
	$10,000.00		
	$10,000.00		9/8/04
	$10,000.00		
	$10,000.00		9/13/04
	$10,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I -List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$10,000.00		10/8/04
	$10,000.00		
	$6,300.00		10/28/04
	$3,700.00		11/8/04
	$10,000.00		
	$10,000.00		11/8/04
	$10,000.00		
	$10,000.00		12/20/04
	$10,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$10,000.00		12/28/04
	$10,000.00		
	$10,000.00		12/29/04
	$10,000.00		
	$10,000.00		1/4/05
	$10,000.00		
	$10,000.00		1/28/05
	$10,000.00		
	$10,000.00		3/29/05
	$10,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$10,000.00		3/30/05
	$10,000.00		
	$10,000.00		4/15/05
	$10,000.00		
	$8,008.28	Pay-Stock	12/29/04
		165 shares Medtronic, Inc.	
	$8,008.28		
	$7,500.00		5/13/05
	$7,500.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$7,225.20	Stock	7/8/04
		80 shares IBM bequest	
	$7,225.20		
	$7,000.00		1/5/05
	$7,000.00		
	$7,000.00		4/13/05
	$7,000.00		
	$5,000.00		12/15/04
	$1,500.00		3/18/05
	$6,500.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$1,596.00		7/1/04
	$1,596.00		10/1/04
	$1,596.00		1/5/05
	$1,641.00		4/5/05
	$6,429.00		
	$1,536.33	Stock	10/21/04
		198 shares Qwest Communications Intern'l, Inc.	
	$1,470.00		11/4/04
	$3,000.00		5/31/05
	$6,006.33		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$5,000.00		8/18/04
	$1,000.00		11/19/04
	$6,000.00		
	$1,000.00		1/5/05
	$5,000.00		2/16/05
	$6,000.00		
	$6,000.00		1/12/05
	$6,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$1,250.00		7/20/04
	$1,509.30		10/18/04
	$1,500.00		2/10/05
	$1,250.00		2/10/05
	$5,509.30		
	$2,500.00		8/16/04
	$1,000.00		11/16/04

Part I - List of Contributors
Line 1a: EIN 34-0714818

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$1,000.00		4/5/05
	$1,000.00		5/13/05
	$5,500.00		
	$5,100.00		4/15/05
	$5,100.00		
	$5,080.08	Stock	1/12/05
		91 shares of Hillenbrand Industries, Inc.	
	$5,080.08		
	$1,000.00		6/17/04

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$1,000.00		10/12/04
	$3,000.00		1/4/05
	$5,000.00		
	$1,000.00		6/29/04
	$2,000.00		12/9/04
	$1,000.00		12/29/04
	$1,000.00		5/25/05
	$5,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$5,000.00		7/7/04
	$5,000.00		
	$5,000.00		11/4/04
	$5,000.00		
	$5,000.00		11/22/04
	$5,000.00		
	$5,000.00		12/13/04
	$5,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

NAME	AMOUNT	GIFT TYPE	DATE
	$5,000.00		12/17/04
	$5,000.00		
	$5,000.00		12/29/04
	$5,000.00		
	$5,000.00		1/6/05
	$5,000.00		
	$5,000.00		1/18/05
	$5,000.00		
	$5,000.00		2/18/05
	$5,000.00		

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$5,000.00		2/21/05
	$5,000.00		
	$5,000.00		2/22/05
	$5,000.00		
	$5,000.00		3/3/05
	$5,000.00		
	$5,000.00		4/18/05
	$5,000.00		
	$5,000.00		4/19/05

$1,000+ GIFTS WITH $5,000+ TOTAL

6/1/2004 to 5/31/2005

Part I - List of Contributors
Line 1a: EIN 34-0714818

Schedule B
Part I and Part II

NAME	AMOUNT	GIFT TYPE	DATE
	$5,000.00		

Sub Total	$1,783,583
Gifts Less than $5,000	630,558
GRAND TOTAL	$2,414,141

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Part I Line 1c - Government Contributions (grants)

132,341		
1,480,166		
142,058	1,754,565	
15,435		
33,000		
341,487		
29,477		
333,165		
60,000		
15,000	827,564	
	21,350	
	13,925	
	3,500	
	19,500	2,640,404

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	Smith Barney		524,300	
	US Bank Trust Dept		15,112	
	Advest		3,497	
Avemaria Growth			18,694	
The Timothy Plan			5,687	
Federated Kaufmann			9,657	
Misc Stock Gifts			57	
Column B - Other				
Foreign Exchange Rate			23,414	
	Total 8C	0	600,419	**600,419**

Part I Line 20 - Other Increases in Fund Balances

Unrealized Gain on Investments	$833,119
Reclassification of Income and Expenses from Student Activities	$1,736
Total	**$834,855**

PART II - Line 22 - Grants and Allocations

DESCRIPTION	PROGRAM SERVICES
FEDERAL AID	1,621,019
STATE AID	802,704
INSTITUTIONAL AID	5,552,526
RESTRICTED SCHOLARSHIPS	606,530
TOTALS	**8,582,780**

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

Part II Line 43 - Functional Expenses Other

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANGMNT & GENRL	FUNDRAISING
DUES, MEMBERSHIPS,ENTERTAINMENT AND SUBSCRIPTIONS	529,556	322,877	110,780	95,900
ADVERTISING, HONORARIUMS, ROYALTIES, AND RECRUITING	597,916	451,239	21,053	125,625
CONSULTING	676,764	325,973	349,791	1,000
BAD DEBT EXPENSES	248,056	173,377	74,678	0
AMORTIZATION FROM RECEIVABLE FROM FOUNDATION MARIA THRON	266,388	266,388	0	0
DISTANCE LEARNING, BOOKSTORE AND JOINT VENTURE	4,562,705	4,562,705	0	0
FOOD SERVICE	3,024,865	3,024,865	0	0
EQUIPMENT ACQUISITION AND EQUIPMENT REPLACEMENT	539,320	71,971	462,104	5,245
OTHER, SUMMER CONFERENCES RESIDENT ASSISTANT WAIVERS	235,670	235,670	0	0
TOTALS	**10,681,240**	**9,435,065**	**1,018,406**	**227,769**

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PART IV Balance Sheets Line 51c

Other Notes and Loans Receivable	
Loans to Students	901,226
Loan to Austrian Foundation for Study Abroad Program	1,598,329
Total	**2,499,555**

PART IV Investments - Securities Line 54

Bonds	9,620,945
Equities	15,198,711
US Treasury & Money Market Securities	1,324,414
Totals	**26,144,070**

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	6,981,593
Buildings	57,405,059
Equipment	20,582,717
Construction in Progress	712,106
Total	85,681,475
Accumulated Depreciation	(37,511,364)
Land, Buildings, and Equipment Net	**48,170,111**

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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 2005	May 31 2004	Principal Payments
1970 Dormitory and Auxiliary Facilities Construction and Refunding Bonds *				
Series A (matures April 1, 2010)	3- 1/8%	$164,000	$194,000	Ranging from $30,000 in the year ending May 31, 2005 to $35,000 at maturity
Series B (matures April 1, 2012)	3-3/8%	$166,000	$186,000	Ranging from $20,000 in the year ending May 31, 2005 to $27,000 at maturity
Series C (matures April 1, 2017)	3%	$234,000	$250,000	Ranging from $16,000 in the year ending May 31, 2005 to $23,000 at maturity
Series D (matures April 1, 2020)	3%	$480,000	$505,000	Ranging from $25,000 in the year ending May 31, 2005 to $40,000 at maturity
*Form 8038 filed				
1996 Ohio Higher Educational Facility Revenue Bonds* (mature December 1, 2016)	Variable	$3,270,000	$3,470,000	Ranging from $200,000 in the year ending May 31, 2005 to $350,000 at maturity
*Form 8038 filed 12/5/96				
Total Exepmt Bond Liabilities		**$4,314,000**	**$4,605,000**	
Term Loan (matures November 30, 2006) National City Bank $1,000,000 Original	6 38%	$334,537	$540,330	Monthly payments, including principal and interest of $19,500
Term Loan (matures December 12, 2006) SkyBank Financial $500,000 Original	2 93%	$155,610	$259,281	Monthly payments, including principal and interest of $9,200
Provincial Investment		$348,000	$348,000	Non-interest bearing Province start-up investment 1956
Subtotal Long Term FUS Debt		$5,152,147	$5,752,611	
HIH LLC Term Loan (Balloon Payment of $2,362,000 due August 2009) National City Bank $2,200,000 Original	5 35%	$2,740,186	$2,065,362	Non-interest bearing until Sept 2004 Monthly payments, including principal and interst of $19,145
MORTGAGES AND NOTE PAYABLE		**$7,892,333**	**$7,817,973**	

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

Name and Address	Title and Avg Hours	Compensation	Fringe Benefits	Expense Acct Allowances
Rev Terence Henry, T O R 1235 University Boulevard Steubenville, OH 43952	President, Secretary of Board of Trustees - 50 Hours	$112,300 *	$25,460 *	NONE
Dr Robert G Filby 1235 University Boulevard Steubenville, OH 43952	Executive Vice President - 50 Hours	$102,560	$16,000	$3,380 Reimb Business Expenses
Mr David Skiviat 1235 University Boulevard Steubenville, OH 43952	Vice President for Finance - 50 Hours	$96,856	$31,376	$1,016 Reimb Business Expenses
Dr Maxwell Bonilla** 1235 University Boulevard Steubenville, OH 43952	Vice President for Academic Affairs - 50 Hours	$82,033	$21,294	$3,186 Reimb Business Expenses
Very Rev Christian Oravec, T O R 1235 University Boulevard Steubenville, OH 43952	Chairman < 1 hour per week	NONE	NONE	NONE
Mrs Diane Brown 1235 University Boulevard Steubenville, OH 43952	Trustee < 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
Dr Charles Bentz 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Rev Michael Ciski, T O 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
Mr Ed Johnson 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mrs Jamie McAleer 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mrs Patricia Lynch 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Rev Joseph Lehman, T O R 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Dr Charles Rice 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE

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

Name and Address	Title and Avg Hours	Compensation	Fringe Benefits	Expense Acct Allowances
Mr Paul Nigro 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mrs Robert 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
Dcn Rafael de los Reyes 1235 University Boulevard Steubenville, OH 43952	Trustee < 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 Cafardi 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	$3,163 Reimb Business Expenses
Fr Daniel Sinisi, T O R 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Rev Cletus Watson, T O R 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
Mother M Regina Pacis Coury, F S G M 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
Fr Nicholas Polichnowski, T O R 1235 University Boulevard Steubenville, OH 43952	Trustee < 1 hour per week	NONE	NONE	NONE
	Total	**393,749**	**94,130**	**10,746**

* Paid to Franciscan Friars (T O R)
**Responsibility limited to Faculty Employment

Franciscan University of Steubenville
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PART VII Analysis of Income-Producing Activities
Program Service Revenue Line 93a (E)

Description		Related or Exempt Function Income
Tuition and Fees		31,025,655
Educational Activities		784,976
Auxiliary Activities		9,149,840
Christian Outreach		2,022,216
Student Forfeitures/Assistance		145,675
Student Activities		258,998
Interest on Student Loans		3,811
	Total	43,391,171

PART VII Analysis of Income-Producing Activities
Other Investment Income Line 99

Pass through Income from activites with joint venture			
Good Venture HIH LLC EIN#20-0498150			
	Business Code 721110	(210,139)	3,372,533

PART VII Other Revenue Line 103a

Description	Business Code	Amount	Business Code	Amount	
Fee Income			03	104,897	
Occupancy Charges			03	51,126	
Misc Student Services	611710	5,412	03	10,634	
Chapel Income			03	47,358	
Christian Outreach	611710	194,714	03		
Miscellaneous	611710	3,383	03	136,007	**Total Line 103a**
Total		203,509		350,022	553,531

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
Income from Joint Venture activity for purpose of providing housing to students

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PartI IX Information Regarding Taxable Subsidiaries and Disregarded Entities

Name	EIN	% Ownrshp Interest	Nature of Activities	Total Income	End of Year Assets
Good Venture Enterprises, LLC 1235 University Blvd Steubenville, OH 43952		100%	Provide Dormitory & Social Space for Students and Guests	219,210	1,186,692
Good Venture HIH, LLC 1401 University Blvd Steubenville, OH 43952	20-0498150	60%	Investment Activity used to Provide Dormitory Space for Students and Guests	3,277,394	3,462,365

Schedule A Part III Line 3a

Scholarships are issued to students based upon their financial need and academic standards. The selection committees are comprised of individuals from Admissions, Enrollment Services, Student Life, Franciscan Friars, and various faculty members

• If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** and check this box . . . . ▶ [x]

Note: Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II Additional (not automatic) 3-Month Extension of Time - Must File Original and One Copy.

Type or print		
	Name of Exempt Organization: Franciscan University of Steubenville	Employer identification number: 34-0714818
File by the extended due date for filing the return. See instructions	Number, street, and room or suite no. If a P.O box, see instructions.: 1235 University Boulevard	For IRS use only
	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):

[x] Form 990	[ ] Form 990-T(sec. 401(a) or 408(a) trust)	[ ] Form 5227
[ ] Form 990-BL	[ ] Form 990-T (trust other than above)	[ ] Form 6069
[ ] Form 990-EZ	[ ] Form 1041-A	[ ] Form 8870
[ ] Form 990-PF	[ ] Form 4720	

STOP: Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of ▶ John A. Steitz

Telephone No. ▶ (740) 283-6200 FAX No. ▶ (740) 283-6472

• 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 is for.

4 I request an additional 3-month extension of time until April 17, 2006 .

5 For calendar year ______ , or other tax year beginning June 1, 2004 and ending May 31, 2005 .

6 If this tax year is for less than 12 months, check reason: [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension Additional time is needed to gather all of the information necessary to file a complete and accurate return.

8a 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 . . . . $ NONE

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 . . . . $

c **Balance Due.** Subtract line 8b from line 8a. 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 . . . . $ NONE

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 ▶ Rosemarie Steeb Title ▶ CPA AS AGENT Date ▶ 12/27/05

Notice to Applicant - To Be Completed by the IRS

[✓] We have approved this application. Please attach this form to the organization's return.

[ ] We have not approved this application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of the organization's return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to the organization's return.

[ ] We have not approved this application. After considering the reasons stated in item 7, we cannot grant your request for an extension of time to file. We are not granting a 10-day grace period.

[ ] We cannot consider this application because it was filed after the extended due date of the return for which an extension was requested.

[ ] Other ______

Director ______ By ______ JAN 02 Date

Alternate Mailing Address - Enter the address if you want the copy of this application for an additional 3-month extension returned to an address different than the one entered above.

Type or print	
	Name: Ernst & Young LLP Attn. R. Steeb
	Number and street (include suite, room, or apt. no.) or a P.O. box number: 1400 Key Tower, 50 Fountain Plaza
	City or town, province or state, and country (including postal or ZIP code): Buffalo, NY 14202

003567886