

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
2006
 Open to Public Inspection

A For the 2006 calendar year, or tax year beginning 06-01-2006 and ending 05-31-2007

- Address change
- Name change
- Initial return
- Final return
- Amended return
- Application pending

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) 283-3771

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).

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 is not a 509(a)(3) supporting organization and its gross receipts are normally not more than 25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 63,565,443

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

I Group Exemption Number _____

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

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

Revenue					
1	Contributions, gifts, grants, and similar amounts received				
a	Contributions to donor advised funds	1a			
b	Direct public support (not included on line 1a)	1b	4,879,840		
c	Indirect public support (not included on line 1a)	1c			
d	Government contributions (grants) (not included on line 1a)	1d	2,521,200		
e	Total (add lines 1a through 1d) (cash \$ 5,992,237 noncash \$ 1,408,803)	1e		7,401,040	
2	Program service revenue including government fees and contracts (from Part VII, line 93)	2		48,664,309	
3	Membership dues and assessments	3			
4	Interest on savings and temporary cash investments	4		691,378	
5	Dividends and interest from securities	5		1,339,802	
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		3,512,857	
8a	Gross amount from sales of assets other than inventory	(A) Securities	1,319,318	8a	
b	Less cost or other basis and sales expenses			8b	
c	Gain or (loss) (attach schedule)	1,319,318	8c		
d	Net gain or (loss) Combine line 8c, columns (A) and (B)			8d	1,319,318
9	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>				
a	Gross revenue (not including \$ _____ of contributions reported on line 1b)	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		636,739	
12	Total revenue Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		63,565,443	
Expenses					
13	Program services (from line 44, column (B))	13		48,367,183	
14	Management and general (from line 44, column (C))	14		7,210,777	
15	Fundraising (from line 44, column (D))	15		2,318,212	
16	Payments to affiliates (attach schedule)	16			
17	Total expenses Add lines 16 and 44, column (A)	17		57,896,172	
Net Assets					
18	Excess or (deficit) for the year Subtract line 17 from line 12	18		5,669,271	
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		90,593,713	
20	Other changes in net assets or fund balances (attach explanation) _____	20		3,954,554	
21	Net assets or fund balances at end of year Combine lines 18, 19, and 20	21		100,217,538	

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 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
22a	Grants paid from donor advised funds (attach Schedule) (cash \$ ⁰ noncash \$ ⁰) If this amount includes foreign grants, check here <input type="checkbox"/>	22a			
22b	Other grants and allocations (attach schedule) <input checked="" type="checkbox"/> (cash \$9,910,462 noncash \$ ⁰) If this amount includes foreign grants, check here <input type="checkbox"/>	22b	9,910,462	9,910,462	
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25a	Compensation of current officers, directors, key employees etc. Listed in Part V-A (attach schedule)	25a	1,252,929	444,043	219,764
b	Compensation of former officers, directors, key employees etc. listed in Part V-B (attach schedule)	25b	84,873	84,873	
c	Compensation and other distributions not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)	25c			
26	Salaries and wages of employees not included on lines 25a, b and c	26	16,655,783	13,544,113	985,828
27	Pension plan contributions not included on lines 25a, b and c	27	886,718	740,160	43,984
28	Employee benefits not included on lines 25a - 27	28	2,657,761	2,130,193	152,208
29	Payroll taxes	29	1,145,965	934,847	63,071
30	Professional fundraising fees	30	96,816		96,816
31	Accounting fees	31	143,556	8,574	134,982
32	Legal fees	32	210,976		210,976
33	Supplies	33	2,161,105	2,002,184	56,062
34	Telephone	34	545,300	517,150	28,150
35	Postage and shipping	35	256,829	157,671	88,409
36	Occupancy	36	2,343,397	1,805,466	537,931
37	Equipment rental and maintenance	37	421,797	313,255	8,240
38	Printing and publications	38	323,348	143,693	179,510
39	Travel	39	1,067,885	919,300	84,547
40	Conferences, conventions, and meetings	40	130,373	93,526	15,280
41	Interest	41	1,251,177	1,251,177	
42	Depreciation, depletion, etc. (attach schedule)	42	4,230,285	3,093,685	1,136,600
43	Other expenses not covered above (itemize)				
a	See Additional Data Table	43a			
b		43b			
c		43c			
d		43d			
e		43e			
f		43f			
g		43g			
44	Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	57,896,172	48,367,183	2,318,212

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 \$⁰, (ii) the amount allocated to Program services \$⁰, (iii) the amount allocated to Management and general \$⁰, and (iv) the amount allocated to Fundraising \$⁰

Part III Statement of Program Service Accomplishments (See the instructions.)

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.

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 - 2387 undergraduate and graduate students enrolled in 36 Majors and 33 Minor academic programs, 518 undergraduate and 129 graduate degrees conferred in 2006-2007 academic year (Grants and allocations \$ 9,910,462) If this amount includes foreign grants, check here ► <input type="checkbox"/>	46,338,912
b Christian Outreach 37,430 students and other participants in Christian Outreach Conferences seminars, other Catholic programs and youth outreach programs (Grants and allocations \$ 0) If this amount includes foreign grants, check here ► <input type="checkbox"/>	2,028,271
c _____ _____ (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
d _____ _____ (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule) (Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	48,367,183

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A)		(B)		
		Beginning of year		End of year		
Assets	45 Cash—non-interest-bearing		65,472	45	76,269	
	46 Savings and temporary cash investments		9,105,022	46	13,320,115	
	47a Accounts receivable	47a	1,221,595			
	b Less allowance for doubtful accounts	47b	125,000	969,228	47c	1,096,595
	48a Pledges receivable	48a	3,572,294			
	b Less allowance for doubtful accounts	48b	714,459	2,661,559	48c	2,857,835
	49 Grants receivable				49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)				50a	
	b Receivables from other disqualified persons (as defined under section 4958(c)(3)(B) (attach schedule)				50b	
	51a Other notes and loans receivable (attach schedule)	51a	4,494,061			
	b Less allowance for doubtful accounts	51b	1,968,813	2,417,511	51c	2,525,248
	52 Inventories for sale or use		496,289		52	745,444
	53 Prepaid expenses and deferred charges		894,905		53	1,460,413
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV		38,356,036		54a	53,617,579
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV				54b	
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	109,525,442				
b Less accumulated depreciation (attach schedule)	57b	45,518,874	53,715,745	57c	64,006,568	
58 Other assets, including program-related investments (describe <input type="checkbox"/> _____)				58		
59 Total assets (must equal line 74) Add lines 45 through 58			108,777,767	59	139,802,066	
Liabilities	60 Accounts payable and accrued expenses		7,036,090	60	8,440,184	
	61 Grants payable		717,777	61	705,742	
	62 Deferred revenue		1,846,504	62	1,908,507	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a Tax-exempt bond liabilities (attach schedule)		4,010,000		64a	21,099,503
	b Mortgages and other notes payable (attach schedule)		3,166,512		64b	6,034,871
	65 Other liabilities (describe <input type="checkbox"/> _____)		1,407,171		65	1,395,721
66 Total liabilities Add lines 60 through 65			18,184,054	66	39,584,528	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74					
	67 Unrestricted		73,341,168	67	81,420,808	
	68 Temporarily restricted		8,241,457	68	9,156,562	
	69 Permanently restricted		9,011,088	69	9,640,168	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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 and column (B) must equal line 21)			90,593,713	73	100,217,538
	74 Total liabilities and net assets / fund balances Add lines 66 and 73			108,777,767	74	139,802,066

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	57,609,535
b	Amounts included on line a but not on Part I, line 12		
1	Net unrealized gains on investments	b1	3,954,554
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify) _____	b4	
	Add lines b1 through b4	b	3,954,554
c	Subtract line b from line a	c	53,654,981
d	Amounts included on Part I, line 12, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify) <input checked="" type="checkbox"/> _____	d2	9,910,462
	Add lines d1 and d2	d	3,954,554
e	Total revenue (Part I, line 12) Add lines c and d	e	63,565,443

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

a	Total expenses and losses per audited financial statements	a	47,985,710
b	Amounts included on line a but not on Part I, line 17		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify) _____	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	47,985,710
d	Amounts included on Part I, line 17, but not on line a :		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify) _____	d2	9,910,462
	Add lines d1 and d2	d	9,910,462
e	Total expenses (Part I, line 17) Add lines c and d	e	57,896,172

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See 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 plans	(E) Expense account and other allowances
See Additional Data Table				

Part VI Other Information (continued)

		Yes	No
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?	Yes	
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 0		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	Yes	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	Yes	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85a	501(c)(4), (5), or (6) organizations. Were substantially all dues nondeductible by members?		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? 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 the prior year		
c	Dues assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
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	
86a	501(c)(7) orgs. Enter Initiation fees and capital contributions included on line 12	86a	0
b	Gross receipts, included on line 12, for public use of club facilities	86b	0
87a	501(c)(12) orgs. Enter Gross income from members or shareholders	87a	0
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	0
88a	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	Yes	
b	At any time during the year, did the organization directly or indirectly own a controlled entity within the meaning of section 512(b)(13)? If yes complete Part XI		No
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>0</u> , section 4912 <u>0</u> , section 4955 <u>0</u>		
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	No
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		
e	All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?	89e	No
f	All organizations. Did the organization acquire direct or indirect interest in any applicable insurance contract?	89f	No
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	
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, 2006 (See instructions)	90b	1,021
91a	The books are in care of <u>JOHN A STEITZ</u> Telephone no <u>(740) 284-5177</u> <u>1235 UNIVERSITY BOULEVARD</u> Located at <u>Stebenville, OH</u> ZIP + 4 <u>43952</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <u>AU</u> See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts	91b	Yes
			No

Part VI Other Information (continued)

Yes **No**

c At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** Yes No

If "Yes," enter the name of the foreign country **AU**

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**

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a See Additional Data Table					
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	691,378	
96 Dividends and interest from securities			03	1,339,802	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b non debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					3,512,857
100 Gain or (loss) from sales of assets other than inventory			03	1,319,318	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a See Additional Data Table					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		27,351		3,959,886	52,177,166
105 Total (add line 104, columns (B), (D), and (E))					56,164,403

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

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See 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)
	See Additional Data Table

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See 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
GOOD VENTURE ENTERPRISE LLC 1235 UNIVERSITY BLVD STUEBENVILLE, OH43952 34-0714818	10000 %	STUDENT DORM	219,210	4,094,286
GOOD VENTURE HIH LLC 1401 UNIVERSITY BLVD STUEBENVILLE, OH43952 26-1329844	10000 %	HOLDING CO	3,482,533	3,577,300
GOOD VENTURE PROPERTIES 1235 UNIVERSITY BLVD STUEBENVILLE, OH43952 34-0714818	10000 %	FUTRUE DEV & CAMPUS EXP	0	705,000
GOOD VENTURE BELLEVIEW 1235 UNIVERSITY BLVD STUEBENVILLE, OH43952 34-0714818	10000 %	FUTURE DEV & CAMPUS EXP	0	2,009,000

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See 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).

Part XI Information Regarding Transfers To and From Controlled Entities *Complete only if the organization is a controlling organization as defined in section 512(b)(13)*

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
		No

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity	Yes	No
		No

	(A) Name and address of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006 covering the interests, rents, royalties and annuities described in question 107 above?	Yes	No
		No

Please Sign Here

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

_____	2008-03-24 Date
John Steitz, Controller Type or print name and title	

Paid Preparer's Use Only	Preparer's signature Rosemarie Steeb	Date
	Firm's name (or yours if self-employed), address, and ZIP + 4 ERNST & YOUNG US LLP 1500 KEY TOWER 50 FOUNTAIN PLAZA BUFFALO, NY 14202	

**SCHEDULE A
(Form 990 or 990EZ)**

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 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

2006

Department of the Treasury
Internal Revenue Service

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 2 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 MICHAEL HEALY 1804 WILLIAMS PLACE STEUBENVILLE, OH 43952	PROFESSOR 50 0	120,632	27,937	0
DR REGIS MARTIN 301 WOODRIDGE DRIVE WINTERSVILLE, OH 43953	PROFESSOR 50 0	97,453	28,045	0
DR REGINA BOERIO 10420 BABCOCK BLVD GIBSONIA, PA 15044	PROFESSOR 50 0	96,104	24,816	46
MR KEVIN SEBOLT 5937 MURRAY AVVE BETHEL PARK, PA 15102	DIRECTOR INFO TECH 50 0	91,340	29,866	0
DR STEPHEN MILETIC 131 CRAWFORD AVE WINTERSVILLE, OH 43953	PROFESSOR 50 0	89,667	24,853	0
Total number of other employees paid over \$50,000 ▶	96			

Part II-A 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 CORNEILUS AND FILONI 200 THE BANK TOWER 307 4 Ave PITTSBURGH, PA 15222	ARCHITECT	834,952
ERNST AND YOUNG LLP PO BOX 640382 PITTSBURGH, PA 152640382	AUDITORS	137,274
Citigroup Consulting 4449 EASTON WAY SUITE 300 COLUMBUS, OH 43219	INVESTMENT CONSULTAN	89,060
Cardiff Consulting 2512 San Eljo Ave CARDIFFBYTHESEA, CA 92007	Fundraising Consult	84,280
Jenzaber PO Box 845939 BOSTON, MA 022845939	Computer Instruction	175,629
Total number of others receiving over \$50,000 for professional services ▶	7	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None". See page 2 for instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
MASSARO CORPORATION 120 DELTA DRIVE PITTSBURGH, PA 15238	CONSTRUCTION	8,893,735
SODEXHO INC 1235 University Blvd STEUBENVILLE, OH 43952	FOOD SERVICE	3,326,495
JEFFERSON INVESTIGATORS AND SECURIT 1439 SUNSET BLVD STEUBENVILLE, OH 43952	CAMPUS SECURITY	331,798
KNEPPER PRESS 1120 ROBB HILL RD OAKDALE, PA 150719106	PRINTING	239,563
Siemens Business Technologies 600 Brusca Drive BRIDGEVILLE, PA 15017	Phone System	731,551
Total number of other contractors receiving over \$50,000 for other services ▶	5	

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

Yes No

<p>1 During the year, has the organization attempted to influence national, state, or local legislation, include 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 1 of Part VI-B)</p> <p>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</p>	1		No
<p>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.) </p> <p>a Sale, exchange, or leasing property?</p>	2a		No
<p>b Lending of money or other extension of credit?</p>	2b		No
<p>c Furnishing of goods, services, or facilities?</p>	2c		No
<p>d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?</p>	2d	Yes	
<p>e Transfer of any part of its income or assets?</p>	2e		No
<p>3a Did the organization make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments) </p>	3a	Yes	
<p>b Did the organization have a section 403(b) annuity plan for its employees?</p>	3b	Yes	
<p>c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment , historic land areas or structures? If "Yes" attach a detailed statement</p>	3c		No
<p>d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?</p>	3d		No
<p>4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g</p>	4a	Yes	
<p>b Did the organization make any taxable distributions under section 4966?</p>	4b		No
<p>c Did the organization make a distribution to a donor, donor advisor, or related person?</p>	4c		No
<p>d Enter the total number of donor advised funds owned at the end of the tax year ► 0 _____</p>			
<p>e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► 0 _____</p>			
<p>f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► 0 _____</p>			
<p>g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► 0 _____</p>			

Part IV Reason for Non-Private Foundation Status (See pages 4 through 7 of the instructions.)

I certify that 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 33 1/3%** 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 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (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 otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization

Type I Type II Type III - Functionally Integrated Type III - Other

Provide the following information about the supported organizations. (see page 7 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support?
			Yes	No	
Total					

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 7 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) 2005	(b) 2004	(c) 2003	(d) 2002	(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	
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 2002 through 2005 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 (2005) _____ (2004) _____ (2003) _____ (2002) _____		
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 11b, 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 (2005) _____ (2004) _____ (2003) _____ (2002) _____			
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 2002 through 2005, 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 Yes	
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 Yes	
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? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) ALL UNDERGRADUATE & GRADUATE APPLICATIONS REFLECT NON-DISCRIMINATORY POLICIES THE POLICY STATEMENT IS CONTAINED IN NEWSPAPER & RADIO ADVERTISING & PUBLISHED IN UNIVERSITY CATALOGS & DOCUMENTS DISTRIBUTED TO HIGH SCHOOLS AND AT COLLEGE INFORMATION FAIRS THE POLICY IS ALSO STATED ON OUR WEBSITE	31 Yes	
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a Yes	
b Records documenting that scholarships and other financial assistance are awarded on racially nondiscriminatory basis?	32b Yes	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c Yes	
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) _____ _____	32d Yes	
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	No
b Admissions policies?	33b	No
c Employment of faculty or administrative staff?	33c	No
d Scholarships or other financial assistance?	33d	No
e Educational policies?	33e	No
f Use of facilities?	33f	No
g Athletic programs?	33g	No
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) _____ _____	33h	No
34a Does the organization receive any financial aid or assistance from a governmental agency? <input checked="" type="checkbox"/>	34a Yes	
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	No
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 Yes	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 10 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 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	41		
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		0
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		0

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 13 of the instructions)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(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 13 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

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines **c** through **h**.)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (Add lines **c** through **h**.)

Yes	No	Amount
	No	

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

Additional Data

Software ID:
Software Version:
EIN: 34-0714818
Name: Franciscan University of Steubenville

Form 990, Part II, Line 43 - Other expenses not covered above (itemize):

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</i>		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
a DUES, MEMBERSHIPS, ENTERTAINMENT	43a	857,165	600,923	116,371	139,871
b ADVERTISING, ROYALTIES, RECRUITING	43b	566,452	457,910	18,724	89,818
c CONSULTING	43c	1,078,314	675,799	374,748	27,767
d BAD DEBT EXPENSES	43d	667,329	128,399	538,930	
e AMORTIZATION FROM FUNDAMENTAL THRON	43e	262,533	262,533		
f DISTANCE LEARNING, BOOKSTORE, JV	43f	4,219,619	4,219,619		
g FOOD SERVICE	43g	3,240,651	3,240,651		
h EQUIPMENT ACQUISITION	43h	1,013,270	473,473	500,910	38,887
i OTHER-SUMMER CONFERENCES	43i	213,504	213,504		

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(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 plans	(E) Expense account and other allowances
Rev Terence Henry TOR 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	President Secretary of Board 50 0	130,250	28,762	16,102
Dr Robert G Filby 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Executive Vice President 50 0	112,640	34,153	13,797
Mr David Skiviat 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Vice President of Finance 50 0	109,435	33,195	494
Dr Maxwell Bonilla 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Vice President for Academic Af 50 0	105,425	32,916	17,233
Mr Frank Glazer 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Vice President for Advancement 50 0	130,995	37,530	4,601
Mr Joel Recznik 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Dean of Enrollment Management 50 0	95,800	36,140	0
Mrs Cheryl Morelli 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Vice President for Human Resou 50 0	91,366	16,948	416
Mr David Schmiesing 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Vice President of Student Life 50 0	72,397	27,652	64
Fr Richard Davis 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Vice President of Community Re 50 0	43,635	12,781	0
Rev Michael Scanlan TOR 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Chancellor 50 0	34,985	11,153	500

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(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 plans	(E) Expense account and other allowances
Very Rev Christian Oravec TOR 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Chairman 1 0	0	0	0
Dr Charles Bentz 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mrs Diane Brown 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Dr Nicholas Cafardi 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mr Paul Carapellotti 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Rev Michael Ciski TOR 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mrs Theresa Collins 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mother M Regina Pacis Coury FSG 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Dr Derrick M DeSilva 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Most Rev Roger J Foys 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(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 plans	(E) Expense account and other allowances
Mr Ed Johnson 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mrs Paulette Kardos 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	1,564
Mrs Patricia Lynch 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mrs Jamie McAleer 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mr Robert Mylod 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mr Paul Nigro 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Rev Nicholas Polichnowski TOR 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Dr Charles Rice 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mr Richard Reiderer 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mr David Robertson 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0

Form 990, Part V-A - Current Officers, Directors, Trustees, and Key Employees:

(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 plans	(E) Expense account and other allowances
Rev Daniel Sinisi TOR 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Mr Robert Smith 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Rev Malachi Van Tassell TOR 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Rev Cletus Watson TOR 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Trustee 1 0	0	0	0
Dr John H Irvin 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Emeritus 1 0	0	0	0
Rev Brian Miller TOR 1235 UNIVERSITY BOULEVARD STEUBENVILLE, OH 43952	Emeritus 1 0	0	0	0

Form 990, Part VII, Line 93 - Program service revenue:

Note: Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
a TUITION AND FEES					35,414,300
b EDUCATIONAL ACTIVI					667,417
c AUXILIARY ACTIVITY					9,823,461
d CHRISTIAN OUTREACH					2,143,619
e STUDENT FORF/ASSIS					178,903
f STUDENT ACTIVITIES					433,022
g STUDENT LOAN INTEREST					3,587

Form 990, Part VII, Line 103 - Other revenue:

Note: Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
a FEE INCOME			03	110,941	
b OCCUPANCY CHARGES			03	67,468	
c MISC STUDENT SERV	611710	31,758	03	4,129	
d CHAPEL INCOME			03	49,450	
e CHRISTIAN OUTREACH	611710	188,301			
f MISCELLANEOUS	611710	5,573	03	377,400	
g GOOD VENTURE HIH	721110	-198,281			

Form 990, Part VIII - Relationship of Activities to the Accomplishment of Exempt Purposes:

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).
1	FEES FROM STUDENTS - PART OF OUR EXEMPT PURPOSE AS A PRIVATE
0	RELIGIOUS EDUCATIONAL INSTITUTION
2	FEES FROM GRADUATE AND COMMUNITY ORIENTED SALES OF
0	EDUCATIONAL PROGRAMMING
3	LODGING AND FOOD SERVICE FOR STUDENTS, SALES OF EDUCATIONAL
0	AND RELIGIOUS MATERIAL AND OTHER GOODS TO STUDENTS,
0	VISITORS AND CHRISTIAN SUPPORTERS WHICH IS A FURTHERANCE
0	OF OUR EXEMPT RELIGIOUS EDUCATIONAL PURPOSE
4	FEES FOR CHRISTIAN CONFERENCES, SEMINARS AND PILGRIMAGES
0	PROVIDING RELIGIOUS EDUCATIONAL PROGRAMMING, SALES OF
0	RELIGIOUS BOOKS, LITERATURE, MUSIC AND TAPES CONTAINING
0	CATHOLIC EDUCATIONAL PROGRAMMING
5	INTEREST ON LOANS TO STUDENTS WHICH IS A FUTHERANCE OF OUR
0	EXEMPT EDUCATIONAL PURPOSE
6	INCOME FROM JOINT VENTURE ACTIVITY FOR PURPOSE OF
0	PROVIDING HOUSING TO STUDENTS

TY 2006 Cash Grants Paid Schedule

Name: Franciscan University of Steubenville

EIN: 34-0714818

Class of Activity	Recipient's name	Address	Amount	Relationship
	See attached statement 4	Surrounding Ohio community Steubenville, OH 43952	9,910,462	None

TY 2006 General Explanation Attachment

Name: Franciscan University of Steubenville

EIN: 34-0714818

Identifier	Return Reference	Explanation
STATEMENT ON PROPERTY, PLANT & EQUIP	PART II, LINE 42 AND PART IV, LINE 57A & B	Art 96,017 Land & Land Improvements 9,732,405 Buildings 67,758,366 Equipment 24,970,640 Construction in progress 6,967,014 GROSS LAND, BUILDINGS, & EQUIPMENT 109,524,442 LESS ACCUMULATED DEPRECIATION (45,518,874) NET LAND, BUILDINGS, & EQUIPMENT 64,005,568 LINE 42 - CURRENT-YEAR DEPRECIATION EXPENSE OF \$45,518,874 WAS CALCULATED USING THE STRAIGHT-LINE METHOD OVER THE ESTIMATED USEFUL LIVES OF THE ASSETS

Identifier	Return Reference	Explanation
GAIN/LOSS SALE OF ASSETS	PART 1, LINE 8C	This amount represents gain/loss on investments and mutual funds managed by third party managers and individual equities Loss Gain Smith Barney 1,014,357 US Bank Trust Dept 17,975 PNC 2,513 Croghan Bancshares 2,269 AveMaria Growth 20,417 Vanguard Growth 7,536 Federated Kaufmann 27,191 Timothy Fund 17,803 AveMaria Catholic Values 897 Legg Mason 95 Matthews Alsan Tiger Fund 2,790 Berkshire Hathaway 855 Hillenbrand (11,851) United Guardian (12,008) Progressive (1,548) Exxon Mobile (867) Krispy Kreme (886) Misc Stock Gifts Sale of donated stock 1,719 Foreign Exchange Gain 230,062 Subtotal (27,160) 1,346,478 Total Lines 8C & 8d 1,319,318

Identifier	Return Reference	Explanation
GRANTS MADE FOR SCHOLARSHIPS, FELLOWSHIPS, ETC	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.

Identifier	Return Reference	Explanation
GRANTS AND ALLOCATIONS	PART II, LINE 22	DESCRIPTION PROGRAM SERVICES FEDERAL AID 1,592,525 STATE AID 723,804 INSTITUTIONAL AID 6,833,055 RESTRICTED SCHOLARSHIPS 761,078 TOTALS 9,910,462 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

TY 2006 Investments - Land Schedule

Name: Franciscan University of Steubenville

EIN: 34-0714818

Category/Item	Cost/Other Basis	Accumulated Depreciation	Book Value
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TY 2006 Investments - Other Schedule

Name: Franciscan University of Steubenville

EIN: 34-0714818

Description	Book Value	Cost/FMV
CAPITAL CONT TO GOOD VENTURE	1,000	

TY 2006 Mortgages and Notes Payable Schedule

Name: Franciscan University of Steubenville

EIN: 34-0714818

Total Mortgage Amount: 6034871

Item No.	1
Lender's Name	NATIONAL CITY BANK
Lender's Title	
Relationship to Insider	
Original Amount of Loan	1000000
Balance Due	0
Date of Note	
Maturity Date	2006-11
Repayment Terms	19,500 PER MONTH
Interest Rate	6.38
Security Provided by Borrower	NONE
Purpose of Loan	WORKING CAPITAL LOAN
Description of Lender Consideration	CASH
Consideration FMV	

Item No.	2
Lender's Name	SKYBANK FINANCIAL
Lender's Title	
Relationship to Insider	
Original Amount of Loan	500000
Balance Due	0
Date of Note	
Maturity Date	2006-12
Repayment Terms	9,200 PER MONTH
Interest Rate	2.93
Security Provided by Borrower	NONE
Purpose of Loan	WORKING CAPITAL LOAN
Description of Lender Consideration	CASH
Consideration FMV	

Item No.	3
Lender's Name	PROVINCIAL INVESTMENT
Lender's Title	
Relationship to Insider	
Original Amount of Loan	348000
Balance Due	348000
Date of Note	
Maturity Date	
Repayment Terms	ON DEMAND
Interest Rate	
Security Provided by Borrower	NONE
Purpose of Loan	START UP INVESTMENT
Description of Lender Consideration	CASH
Consideration FMV	

Item No.	4
Lender's Name	NATIONAL CITY BANK
Lender's Title	
Relationship to Insider	
Original Amount of Loan	2200000
Balance Due	2566871
Date of Note	
Maturity Date	2009-08
Repayment Terms	19,145 PER MONTH
Interest Rate	5.35
Security Provided by Borrower	NONE
Purpose of Loan	INVESTMENT IN HIH LLC
Description of Lender Consideration	CASH
Consideration FMV	

Item No.	5
Lender's Name	OHIO HIGHER EDUCATION FACILITY BOND
Lender's Title	
Relationship to Insider	
Original Amount of Loan	3400000
Balance Due	3120000
Date of Note	
Maturity Date	2016-05
Repayment Terms	295,000 PER YEAR
Interest Rate	5.94
Security Provided by Borrower	NONE
Purpose of Loan	REIMBURSEMENT OF DORMITORY RENOVATIONS
Description of Lender Consideration	CASH
Consideration FMV	

TY 2006 Other Changes in Net Assets Schedule

Name: Franciscan University of Steubenville

EIN: 34-0714818

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	3,954,554

**TY 2006 Other Expenses
Not Included Schedule**

Name: Franciscan University of Steubenville

EIN: 34-0714818

Description	Amount
RECLASS STUDENT AID FROM REV	9,910,462

TY 2006 Other Investment Income Schedule**Name:** Franciscan University of Steubenville**EIN:** 34-0714818

Description	Amount
Passthru inc from Good Venture HIH LLC 26-1329844	3,512,857

TY 2006 Other Liabilities Schedule

Name: Franciscan University of Steubenville

EIN: 34-0714818

Description	Beginning of Year Amount	End of Year Amount
STUDENT & OTHER DEPOSITS	1,407,171	1,395,721

**TY 2006 Other Notes/Loans
Receivable Short Schedule****Name:** Franciscan University of Steubenville**EIN:** 34-0714818

Category/Name	Amount
VARIOUS STUDENTS	1,082,582
MARIA THRON PRIVASTIFUND	625,062
MARIA THRON PRIVASTIFUND	687,604
MARIA THRON FOUNDATION	130,000

**TY 2006 Other Revenues
Not Included Schedule**

Name: Franciscan University of Steubenville

EIN: 34-0714818

Description	Amount
RECLASS STUDENT AID TO EXPENSE	9,910,462

TY 2006 Tax-Exempt Bond Liabilities Schedule

Name: Franciscan University of Steubenville

EIN: 34-0714818

Item No.	1
Name of Issue	
Purpose	1970 Dorm & Aux Bonds Series A
Amount Outstanding	102000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	2010-04
Repayment Terms	31,000 per year
Interest Rate	312.5 %
Security	Dormitory & other facilities

Item No.	2
Name of Issue	
Purpose	1970 Dorm & Aux Bonds Series B
Amount Outstanding	123000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	2012-04
Repayment Terms	21,000 per year
Interest Rate	337.5 %
Security	Dormitory & other facilities

Item No.	3
Name of Issue	
Purpose	1970 Dorm & Aux Bonds Series C
Amount Outstanding	201000
Unexpeded Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	2017-04
Repayment Terms	16,000 per year
Interest Rate	300 %
Security	Dormitory & other facilities

Item No.	4
Name of Issue	
Purpose	1970 Dorm & Aux Bonds Series D
Amount Outstanding	427000
Unexpended Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	2020-04
Repayment Terms	26,000 per year
Interest Rate	300 %
Security	Dormitory & other facilities

Item No.	5
Name of Issue	
Purpose	1996 Ohio Higher Education Bnd
Amount Outstanding	0
Unexpended Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	2016-12
Repayment Terms	210,000 per year
Interest Rate	
Security	Educational facility

Item No.	6
Name of Issue	
Purpose	2006 Ohio Higher Educat Faacility Bond Series A
Amount Outstanding	20246503
Unexpended Bond Proceeds	
Third Party Use	
Space Percentage	
Maturity Date	2036-05
Repayment Terms	435,000 per year
Interest Rate	476 %
Security	NONE

**TY 2006 Explanation of Receipt or
Revocation of Government Financial Aid**

Name: Franciscan University of Steubenville

EIN: 34-0714818

Statement:

TY 2006 Scholarship Award Statement

Name: Franciscan University of Steubenville

EIN: 34-0714818

Statement: 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.

TY 2006 Self Dealing Statement

Name: Franciscan University of Steubenville

EIN: 34-0714818

Line Number	Explanation
2d	SEE FORM 990 PART V-A

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2006, or tax year beginning 06/01, 2006, and ending 05/31, 2007

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

See instructions on back

Department of the Treasury Internal Revenue Service

Name of exempt organization

Employer identification number

FRANCISCAN UNIVERSITY OF STEUBENVILLE

34-0714818

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount from the return if any...

Table with 2 columns: Form type (1a-5a) and Amount (b). Includes rows for Form 990, Form 990-EZ, Form 1120-POL, Form 990-PF, and Form 8868.

Part II Declaration of Officer

I authorize the US Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software...

If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return...

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2006 electronic return and accompanying schedules and statements...

Sign Here: Signature of officer, Date 03/24/2008, Title CONTROLLER

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return, and that the entries on Form 8453-EO are complete and correct to the best of my knowledge...

ERO's Use Only: ERO's signature, Date, Check if also paid preparer, Check if self-employed, ERO's SSN or PFIN, Firm's name, address, and ZIP code, EIN, Phone no.

Paid Preparer's Use Only: Preparer's signature, Date, Check if self-employed, Preparer's SSN or PFIN, Firm's name, address, and ZIP code, EIN, Phone no.