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Form **990** 

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047 2008

| A Fo                        | rthe 2   | 2008 calendar y   | ear, or tax year beginning 07                              | 7-01-2008 and ending 06-3  | 0-2009              | D Employer ide                       | ntification number         |  |  |  |  |  |  |  |  |
|-----------------------------|----------|---|--|--|---------------------|--------------------------------------|----------------------------|--|--|--|--|--|--|--|--|
| _                           |          | pplicable <b>Please</b>   | C Name of organization<br>DREW UNIVERSITY                  |  |                     | D Employer Ider                      | itilication number         |  |  |  |  |  |  |  |  |
|                             | ress ch  | label or  | Doing Business As  |  |                     | 22-1487164<br>E Telephone nu         |                            |  |  |  |  |  |  |  |  |
| Nan                         | ne char  | nge <b>print or</b><br>type. Se   |  |  |                     | ·                                    |                            |  |  |  |  |  |  |  |  |
| Initi                       | al retur |   | Number and street (or P.O.                                 | box if mail is not delivered to street                                     | address) Room/suite | (973) 408-3<br>G Gross receipts      |                            |  |  |  |  |  |  |  |  |
| Ten                         | mınatıo  |   | 36 MADISON AVENUE  |  |                     | d dross receipts                     | \$ \$ 273,000,307          |  |  |  |  |  |  |  |  |
| -<br>Ame                    | ended r  | return  | City or town, state or countr                              | y, and ZIP + 4   |                     |                                      |                            |  |  |  |  |  |  |  |  |
| -<br>App                    | lication | pending   | MADISON, NJ 07940  |  |                     |                                      |                            |  |  |  |  |  |  |  |  |
|                             |          | F N   | ame and address of Principa                                | al Officer   | W-> - 11            | ·                                    | ,                          |  |  |  |  |  |  |  |  |
|                             |          |   | rt Weisbuch President                                      |  | affilia             | s a group return<br>tes?             | ror<br>□Yes ▼No            |  |  |  |  |  |  |  |  |
|                             |          |   | adıson Avenue<br>son, NJ 07940                             |  |                     |                                      |                            |  |  |  |  |  |  |  |  |
| Tax                         | -exem    |   | (c) ( 3 ) <b>◄</b> (insert no )                            | 7(a)(1) or   |                     | l affiliates include                 |                            |  |  |  |  |  |  |  |  |
|                             |          |   |  | (4)(4) (4)   |                     | o," attach a list<br>p Exemption Nur | See instructions )         |  |  |  |  |  |  |  |  |
| VV                          | ed site  | e: 🕨 www drew ed  | ıu   |  |                     | p Exemption Nu                       |                            |  |  |  |  |  |  |  |  |
| Туре                        | e of org | anızatıon 🔽 Corpo   | ration trust association c                                 | other <b>-</b>   | <b>L</b> Year of Fo | rmation 1868 M s                     | State of legal domicile NJ |  |  |  |  |  |  |  |  |
| Par                         | rt I     | Summary   |  |  |                     |                                      |                            |  |  |  |  |  |  |  |  |
|                             |          |   | the organization's mission o                               | r most significant activities  |                     |                                      |                            |  |  |  |  |  |  |  |  |
| ζ.                          |          |   |  | ID UNDERGRADUATE STUD  |                     |                                      |                            |  |  |  |  |  |  |  |  |
|                             |          | LIBERAL ARTS, THE THEOLOGICAL SCHOOL, AND THE CASPERSEN SCHOOL OF GRADUATE STUDIES                          |  |  |                     |                                      |                            |  |  |  |  |  |  |  |  |
|                             | ,        | Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets |  |  |                     |                                      |                            |  |  |  |  |  |  |  |  |
| <u>;</u>                    |          | •   |  | body (Part VI, line 1a)  |                     |                                      | 40                         |  |  |  |  |  |  |  |  |
|                             |          |   |  |  |                     |                                      | 38                         |  |  |  |  |  |  |  |  |
|                             |          |   | _  | ne governing body (Part VI, I  | ne 1b)              | _                                    | 1,853                      |  |  |  |  |  |  |  |  |
|                             |          |   | employees (Part V, line 2a)                                |  |                     | _                                    | _                          |  |  |  |  |  |  |  |  |
|                             |          |   | volunteers (estimate if nece                               |  | <b>C</b> \          | _                                    |                            |  |  |  |  |  |  |  |  |
|                             |          | -   | lated business revenue fron<br>Isiness taxable income from | c)   | 7a _<br>7b          | 73,486<br>-342,694                   |                            |  |  |  |  |  |  |  |  |
|                             | ь        | Net unrelated be  | isiness taxable income nom                                 | 1101111 9 90 - 1 , IIIIe 3 4   | Drie                | or Year                              | Current Year               |  |  |  |  |  |  |  |  |
|                             | 8        | Contributions a   | and grants (Part VIII, line 1                              | h)   |                     | 11,081,518                           | 8,275,02:                  |  |  |  |  |  |  |  |  |
| Ē.                          | 9        |   |  | g)   |                     | 82,420,850                           | 83,557,088                 |  |  |  |  |  |  |  |  |
| neveriue                    | 10       | -   | · · ·  | , lines 3, 4, and 7d)  |                     | -8,403,488                           | -37,333,00                 |  |  |  |  |  |  |  |  |
| ř                           | 11       |   | (Part VIII, column (A), lines                              |  | 1,021,120           | 1,016,91                             |                            |  |  |  |  |  |  |  |  |
|                             | 12       |   | -add lines 8 through 11 (mu                                | •  |                     |                                      |                            |  |  |  |  |  |  |  |  |
|                             |          | 12)   |  |  | 86,120,000          | 55,516,022                           |                            |  |  |  |  |  |  |  |  |
|                             | 13       |   | ıılar amounts paıd (Part IX, o                             |  |                     | 27,290,000                           | 27,839,818                 |  |  |  |  |  |  |  |  |
|                             | 14       | ·   | o or for members (Part IX, co                              |  |                     |                                      |                            |  |  |  |  |  |  |  |  |
| sý.                         | 15       | Salaries, other 10)   | compensation, employee be                                  | ines 5-  | 42,061,344          | 45,181,00                            |                            |  |  |  |  |  |  |  |  |
| EXP enses                   | 16a      | •   | ndraising fees (Part IX, colu                              | mn (A.) line 11e)  |                     | ,,                                   | ,                          |  |  |  |  |  |  |  |  |
| e di                        | b        |   | expenses, Part IX, column (D), lin                         |  |                     |                                      |                            |  |  |  |  |  |  |  |  |
| ם                           | 17       |   | s (Part IX, column (D), lines                              | ·  |                     | 38,690,656                           | 37,419,570                 |  |  |  |  |  |  |  |  |
|                             | 18       | -   |  | qual Part IX, line 25, column  | (4.))               | 108,042,000                          | 110,440,388                |  |  |  |  |  |  |  |  |
|                             | 19       |   | expenses Subtract line 18 fi                               |  | -21,922,000         | -54,924,366                          |                            |  |  |  |  |  |  |  |  |
| . e                         |          |   | Aponded Dubtidet lille 10 ll                               | om mic 12  |                     | ng of Year                           | End of Year                |  |  |  |  |  |  |  |  |
| 980                         | 20       | Total assets (P   | Part X line 16\  |  |                     | 402,501,000                          | 331,596,000                |  |  |  |  |  |  |  |  |
| 8.5                         |          |   |  |  |                     | , ,                                  |                            |  |  |  |  |  |  |  |  |
| nechoseo o<br>Fund Balances | 21       |   | (Part X, line 26)  | 31 from line 30  |                     | 102,503,000                          | 102,691,000                |  |  |  |  |  |  |  |  |
|                             | 22       |   | und balances Subtract line                                 | 299,998,000  | 228,905,000         |                                      |                            |  |  |  |  |  |  |  |  |
| Par                         | t II     | Signature I   |  |  |                     |                                      |                            |  |  |  |  |  |  |  |  |
|                             |          |   |  | mined this return, including accomp<br>on of preparer (other than officer) |                     |                                      |                            |  |  |  |  |  |  |  |  |
| lea                         |          | *****   | •  | ,  | 1                   | -05-13                               | -                          |  |  |  |  |  |  |  |  |
| ign                         |          | Signature of off  | ficer  |  | Date                |                                      |                            |  |  |  |  |  |  |  |  |
| lere                        | •        | HOWARD BUXB   | AUM VP FINANCE & BUSINESS AFF                              | FAIRS  |                     |                                      |                            |  |  |  |  |  |  |  |  |
|                             |          | Type or print na  |  |  |                     |                                      |                            |  |  |  |  |  |  |  |  |
|                             |          | Preparer's <b>L</b>   |  | Date   | Check if            | Preparer's PTIN (                    | See Gen Inst )             |  |  |  |  |  |  |  |  |
| aid                         |          | signature KPM   | 1G LLP   |  | self-<br>empolyed ▶ | Ì                                    |                            |  |  |  |  |  |  |  |  |
|                             | rer's    | Firm's name (or yo  | urs k KPMG LLP   |  | 5poi, ed +          |                                      |                            |  |  |  |  |  |  |  |  |
|                             | Only     | ıf self-employed),  | P  |  |                     | EIN 🕨                                |                            |  |  |  |  |  |  |  |  |
| 3C (                        |          | address, and ZIP +  | 4 345 Park Avenue  | Dhana na h (242) 752 2722  |                     |                                      |                            |  |  |  |  |  |  |  |  |
| 36 (                        |          |   |  |  |                     | Phone no 🕨 (21                       | 2) 758-9700                |  |  |  |  |  |  |  |  |

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

| 1  | Briefly describe the organization's mission  DREW UNIVERSITY'S PRIMARY EXEMPT PURPOSE IS EDUCATION THE UNIVERSITY OFFERS GRADUATE AND UNDERGRADUATE STUDIES AND IS COMPRISED OF THE COLLEGE OF LIBERAL ARTS, THE THEOLOGICAL SCHOOL, AND THE CASPERSEN SCHOOL OF GRADUATE STUDIES  |
|----|--|
|    |  |
| 2  | Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?   |
| 3  | Did the organization cease conducting or make significant changes in how it conducts any program services?   |
| 4  | If "Yes," describe these changes on Schedule O   |
| •  | Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported   |
| 4a | (Code ) (Expenses \$ 52,046,222 including grants of \$ 23,381,000) (Revenue \$ 59,556,000)  The Drew University College of Liberal Arts affirms a commitment to its founding vision to offer its students a liberal arts education of the highest quality. Through a rigorous course of study, the College challenges students to explore the arts, natural sciences, social sciences, humanities, and interdisciplinary fields in depth and to develop their capacities for critical though, problem solving, effective communication, creativity, self discipline and empathy. As the College prepares students for academic and professional achievement, it provides them with essential skills for living and continuing to learn and to grow in an increasingly diverse and complex world.   |
| 4b | (Code ) (Expenses \$ 9,616,231 including grants of \$ 3,501,000) (Revenue \$ 4,966,000)  Drew Theological School empowers leadership for a global Christianity of justice, ecumenism, and the integrity of creation. Its pastoral, spiritual, and conceptual disciplines grow within an intimate liturgical and communal context, one that sustains multiple relations of difference. Through its particular historical commitments to African, Asian, African-American, Hispanic and women's ministries, the Theological School remains faithfully rooted in its Methodist heritage. Drew nurtures Christian practices through vital partnership with local churches and international networks of education. Trans-disciplinary interpretation of text, tradition, and experience energizes its scholarly rigor. Drew engenders theologies responsible to the complex social realities of an interconnected world. Into that world Drew sends pastors, preachers and prophets, deacons, activists, and teachers.   |
| 4c | (Code ) (Expenses \$ 3,803,030 including grants of \$ 957,000) (Revenue \$ 2,953,000)  The Caspersen School of Graduate Studies was founded on the principle of the importance of interdisciplinary study in the Humanities. The goal of the School's founders was to foster broadly educated people who have expertise in a field of thought but who are also familiar with and articulate in a range of humanistic studies. This mission continues to distinguish The Caspersen School among institutions with doctoral programs in the Humanities. Our intent is to train persons who are properly prepared not only in specific recognized fields but also in interdisciplinary dialogue. We celebrate the joy of learning as we prepare able, well informed graduates who pursue careers in higher education, in the religious and medical communities, and in the broader intellectual world. As such, we are well positioned to meet the increasing call for interdisciplinary approaches both in the academy and in the wider world. Integral to our mission is encouraging our faculity and students alike to pursue creative research in the Humanities and to make the results of their work available through teaching, participation in scholarly meetings, various forms of publication and intellectual discourse. To that end we continue to explore new possibilities of enhancing interdisciplinary studies in the humanities. |
| 4d | Other program services (Describe in Schedule O ) (Expenses \$ 29,867,950 including grants of \$ ) (Revenue \$ )  |
| 4e | Total program service expenses \$ 95,333,433 Must equal Part IX, Line 25, column (B).  |

| Part IV | Chec | klist of | f Required | Schedules |
|---------|------|----------|------------|-----------|
|         |      |          |            |           |

|     |   |     | Yes | No  |
|-----|---|-----|-----|-----|
| 1   | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A   | 1   | Yes |     |
| 2   | Is the organization required to complete Schedule B, Schedule of Contributors? 🕏  | 2   | Yes |     |
| 3   | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I  | 3   |     | N o |
| 4   | Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II  | 4   | Yes |     |
| 5   | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III  | 5   |     | No  |
| 6   | Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.  | 6   |     | Νο  |
| 7   | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II   | 7   |     | Νο  |
| 8   | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III   | 8   |     | No  |
| 9   | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV                           | 9   |     | No  |
| 10  | Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V  | 10  | Yes |     |
| 11  | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  | 11  | Yes |     |
| 12  | Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .   | 12  |     | Νο  |
| 13  | Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  | 13  | Yes |     |
| 14a | Did the organization maintain an office, employees, or agents outside of the U.S.?  | 14a |     | N o |
| Ь   | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part $I$  | 14b |     | N o |
| 15  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>  | 15  |     | N o |
| 16  | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III  | 16  |     | N o |
| 17  | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I  | 17  |     | N o |
| 18  | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  | 18  | Yes |     |
| 19  | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III   | 19  |     | Νο  |
| 20  | Did the organization operate one or more hospitals? If "Yes," complete Schedule H   | 20  |     | Νο  |
| 21  | Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II   | 21  |     | No  |
| 22  | Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  | 22  | Yes |     |
| 23  | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule  J  | 23  | Yes |     |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25 | 24a | Yes |     |
| b   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?   | 24b |     | Νο  |
| c   | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  | 24c |     | No  |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?   | 24d |     | Νο  |
| 25a | Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  | 25a |     | No  |
| b   | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I  | 25b |     | No  |
| 26  | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  | 26  |     | No  |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III  | 27  |     | No  |

## Part IV Checklist of Required Schedules (Continued)

|    |  |     | 163 | 110 |
|----|--|-----|-----|-----|
| 28 | During the tax year, did any person who is a current or former officer, director, trustee, or key employee   |     |     |     |
| а  | Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part |     |     |     |
|    | IV   | 28a | Yes |     |
| b  | Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV  | 28b | Yes |     |
| С  | Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.   | 28c | Yes |     |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏   | 29  | Yes |     |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M   | 30  |     | Νο  |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I   | 31  |     | Νo  |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>  | 32  |     | Νo  |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I  | 33  |     | Νo  |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  | 34  | Yes |     |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  | 35  |     | Νο  |
| 36 | 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  | 36  |     | Νο  |
| 37 | Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,   | 37  |     | Νο  |
|    | Part VI 📆  |     |     |     |

| Pai | t V Statements Regarding Other IRS Filings and Tax Compliance   | :e        |                           |     |     |     |
|-----|---|-----------|---------------------------|-----|-----|-----|
|     |   |           |                           |     | Yes | No  |
| 1a  | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal   |           |                           |     |     |     |
|     | of U.S. Information Returns. Enter -0- if not applicable  |           |                           |     |     |     |
|     |   | 1a        | 384                       |     |     |     |
| b   | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  | 1b        | 0                         |     |     |     |
| _   | Did the organization comply with backup withholding rules for reportable payments t   |           | dors and reportable       |     |     |     |
|     | gaming (gambling) winnings to prize winners?  |           | · · · · · ·               | 1c  | Yes |     |
| 2a  | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax   |           |                           |     |     |     |
|     | Statements filed for the calendar year ending with or within the year covered by this return  | 2a        | 1,853                     |     |     |     |
| h   | If at least one is reported in 2a, did the organization file all required federal employs   |           |                           |     |     |     |
| _   | <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file thi   |           |                           | 2b  | Yes |     |
| 3a  | Did the organization have unrelated business gross income of \$1,000 or more during   | g the     | year covered by this      |     |     |     |
| _   | return?   |           |                           | 3a  | Yes |     |
|     | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Sch   |           |                           | 3b  | Yes |     |
| 4a  | At any time during the calendar year, did the organization have an interest in, or a sover, a financial account in a foreign country (such as a bank account, securities ac   |           |                           | 4-  |     |     |
|     | account)?   |           |                           | 4a  | Yes |     |
| Ь   | If "Yes," enter the name of the foreign country CJ, UK, ER  |           |                           |     |     |     |
|     | See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , <i>Re Financial Accounts</i> .   | eport o   | f Foreign Bank and        |     |     |     |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time duri   | ng the    | tax year?                 | 5a  |     | Νο  |
| Ь   | Did any taxable party notify the organization that it was or is a party to a prohibited   | tax sh    | nelter transaction?       | 5b  |     | Νο  |
| c   | If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exemp   | t Entit   | ry Regarding Prohibited   |     |     | Νο  |
|     | Tax Shelter Transaction?  | •         |                           | 5с  |     |     |
| 6a  | Did the organization solicit any contributions that were not tax deductible?  |           |                           | 6a  |     | Νο  |
| b   | If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?  | hat su    | ch contributions or gifts | 6b  |     |     |
| 7   | Organizations that may receive deductible contributions under section 170(c).   |           |                           |     |     |     |
| а   | Did the organization provide goods or services in exchange for any quid pro quo cormore?  | ntrıbutı  | on of \$75 or             | 7a  | Yes |     |
| ь   | If "Yes," did the organization notify the donor of the value of the goods or services p   | rovide    | d?                        | 7b  | Yes |     |
| c   | Did the organization sell, exchange, or otherwise dispose of tangible personal prope  | rty for   | which it was required to  |     |     |     |
|     | file Form 8282?   |           |                           | 7c  |     | Νο  |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year   | 7d        |                           |     |     |     |
| _   | Did the organization, during the year, receive any funds, directly or indirectly, to pa   | , nram    | uume on a nareonal        |     |     |     |
| _   | benefit contract?   | , prem    |                           | 7e  |     | Νo  |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a pers  | onal b    | enefit contract?          | 7f  |     | Νο  |
| g   | For all contributions of qualified intellectual property, did the organization file Form  | 8899      | as required?              | 7g  |     | Νο  |
| h   | For contributions of cars, boats, airplanes, and other vehicles, did the organization to  | file a F  | orm 1098-C as             |     |     |     |
|     | required?   | • •       |                           | 7h  |     | No  |
| 8   | Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds a supporting organizations. Did the supporting organization, or a fund maintained by a |           |                           |     |     |     |
|     | excess business holdings at any time during the   |           |                           | 8   |     | Νο  |
|     | year?   |           |                           |     | l   |     |
| 9   | Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.   |           |                           | _   |     |     |
|     | Did the organization make any taxable distributions under section 4966?   |           |                           | 9a  |     | No_ |
|     | Did the organization make a distribution to a donor, donor advisor, or related person   | ٠, ١      |                           | 9b  |     | N o |
| 10  | Section 501(c)(7) organizations. Enter  | ۔ م       | I                         |     |     |     |
|     | Initiation fees and capital contributions included on Part VIII, line 12  | 10a       |                           |     |     |     |
| D   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   | 10b       |                           |     |     |     |
| 11  | Section 501(c)(12) organizations Enter  |           |                           |     |     |     |
| а   | Gross income from members or shareholders   | <br>  11a |                           |     |     |     |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources  |           |                           |     |     |     |
|     | against amounts due or received from them )   | 11b       |                           |     |     |     |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 ii   | n lieu d  | of Form 1041?             | 12a |     |     |
|     | If "Yes," enter the amount of tax-exempt interest received or accrued during the  |           |                           |     |     |     |
| _   | year  | 12b       |                           |     |     |     |

8

10

Section A. Governing Body and Management

No

Νo

Νo

Νo

Νo

Νo

Νo

Νo

Yes

2

3

4

5

6

7a

7Ь

#### Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

| For each "Yes" response to lines 2-7 below, and for a "No" response to l | lines 8 or 9b below, desci | ribe the circumstances, |
|--|----------------------------|-------------------------|
| processes, or changes in Schedule O. See instructions.                   |                            |                         |
| Enter the number of voting members of the governing body                 | 1a                         | 40                      |

| 1a | Enter the number of voting members of the governing body                               | 1a | 40  |
|----|--|----|-----|
| Ь  | Enter the number of voting members that are independent                                | 1b | 38  |
| 2  | Did any officer, director, trustee, or key employee have a family relationship or a bu |    | ' ' |

| 3 | Did the organization delegate control over management duties customarily performed by or under the direct |
|---|---|
|   | supervision of officers, directors or trustees, or key employees to a management company or other person? |

| supervision of officers, directors of trustees, or key employees to a management company of other person?  | •   |
|--|-----|
| Did the organization make any significant changes to its organizational documents since the prior Form 990 | was |
| filed?   |     |

| Did the organization become aware during the year of a material diversion of the organization's | assets? | , - |  |
|---|---------|-----|--|
| Does the organization have members or stockholders?   |         |     |  |

| Boes the organiza |      | iiu v c | III CIII DCI | , 0, 5 | COCKII | oluci | ٠.    |     |     | •    | •   | •   |      | •     | •  | •    | •    | •    |      | , , | • |
|-------------------|------|---------|--------------|--------|--------|-------|-------|-----|-----|------|-----|-----|------|-------|----|------|------|------|------|-----|---|
| Does the organiza | tıon | have    | members      | s, sto | ckhol  | ders, | or ot | her | per | sons | who | may | elec | t one | or | more | e me | ∍mbe | rs o | fth | e |
| governing body?   |      |         |              |        |        |       |       |     |     |      |     |     |      |       | •  |      |      |      |      |     |   |

| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons?   |    |
|---|---|----|
|   | Did the organization contemporaneously document the meetings held or written actions undertaken during th | ıе |

| Did the organization contemporaneously document the meetings held or written actions undertaken during the |  |
|--|--|
| year by the following  |  |
| the governing hody?  |  |

| 3 | the governing body? | •   | •     | •     | •   | •    | •    | •    | •    | •    | •    | •     | •    | •   | • | • | • | • | • | • | • | • | • |  |
|---|---------------------|-----|-------|-------|-----|------|------|------|------|------|------|-------|------|-----|---|---|---|---|---|---|---|---|---|--|
| Ь | each committee with | aut | horit | ty to | оас | t or | n be | half | of t | he ç | jove | ernii | ng b | ody | 7 |   |   |   |   |   |   |   |   |  |

|   | Does the organization have local chapters, branches, or affiliates?   |  |
|---|---|--|
| ь | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, |  |
|   | affiliates, and branches to ensure their operations are consistent with those of the organization?              |  |

| Was a copy of the Form 990 provided to the organization's governing body before it was filed? All org | janıza | tıor | าร |
|---|--------|------|----|
| must describe in Schedule O the process, if any, the organization uses to review the Form 990 .       |        |      |    |

| 11 | Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who can | not | be i | reac | hed | at |
|----|---|-----|------|------|-----|----|
|    | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O       | •   |      |      | •   |    |

| 8a | Yes |    |
|----|-----|----|
| 8b | Yes |    |
| 9a |     | Νo |
| 9b |     |    |
| 10 | Yes |    |
| 11 |     | No |
|    |     |    |

#### Section B. Policies

|  |  | Yes   | No  |
|--|--|---|---|
| Does the organization have a written conflict of interest policy? If "No", go to line 13 $\cdot$ .   | 12a  | Yes   |   |
| Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12b  | Yes   |   |
| Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done   | 12c  | Yes   |   |
| Does the organization have a written whistleblower policy?   | 13   | Yes   |   |
| Does the organization have a written document retention and destruction policy?  | 14   | Yes   |   |
| Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision  |  |   |   |
| The organization's CEO, Executive Director, or top management official?  | 15a  | Yes   |   |
| Other officers or key employees of the organization?   | 15b  | Yes   |   |
| Describe the process in Schedule O   |  |   |   |
| Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  | 16a  |   | Νο  |
| If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? | 16b  |   |   |
|  | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | Does the organization have a written conflict of interest policy? If "No", go to line 13 .  Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? |

#### Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed NJ
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website another's website upon request
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization

HOWARD BUXBAUM 36 MADISON AVENUE MADISON, NJ 07940 (973) 408-3501

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

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

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

| The check this box in the organization and i | ·                                      | Posit                             | (C                    | )<br>chec | :k al        |   |   |   | (E)  | (F)  |
|--|--|-----------------------------------|-----------------------|-----------|--------------|---|---|---|--|--|
| (A)<br>Name and Title                        | (B)<br>Average<br>hours<br>per<br>week | Individual Trustee<br>or Chrector | Institutional Trustee | Officei   | Key employee | Rei<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika<br>Politika |   | (D) Reportable compensation from the organization (W- 2/1099MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   | _ |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |
|  |  |                                   |                       |           |              |   |   |   |  |  |

## Part VII Continued

|                       |  |                                   | tion<br>that a        |      |              | all                          |          |   | (E)   | (F)  |
|-----------------------|--|-----------------------------------|-----------------------|------|--------------|------------------------------|----------|---|---|--|
| (A)<br>Name and Title | (B)<br>Average<br>hours<br>per<br>week | Individual Trustee<br>or Director | Institutional Trustee | Оппо | Key employee | Highest compensated employee | Former   | (D) Reportable compensation from the organization (W- 2/1099MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W- 2/1099-<br>MISC) | Estimated amount of other compensation from the organization and related organizations |
|                       |  |                                   |                       |      |              |                              |          |   |   |  |
|                       |  |                                   |                       |      |              |                              |          |   |   |  |
|                       |  |                                   | -                     |      |              |                              |          |   |   |  |
|                       |  |                                   |                       |      |              |                              |          |   |   |  |
|                       |  |                                   |                       |      |              |                              |          |   |   |  |
|                       |  |                                   |                       |      |              |                              |          |   |   |  |
|                       |  |                                   |                       |      |              |                              | <u> </u> |   |   |  |
|                       |  | -                                 | +                     |      |              |                              | $\vdash$ |   |   |  |
|                       |  |                                   |                       |      |              |                              |          |   |   |  |
|                       |  |                                   |                       |      |              |                              |          |   |   |  |
|                       |  |                                   |                       |      |              |                              |          |   |   |  |
|                       |  | -                                 | -                     |      |              |                              | $\vdash$ |   |   |  |
|                       |  |                                   | 1                     |      |              |                              |          |   |   |  |
| 1b Total              |  |                                   |                       |      |              |                              | ►        | 3,170,428   | C   | 707,228  |

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►51

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

### **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

| ( <b>A</b> )<br>Name and business address   | (B) Description of services | (C)<br>Compensation |
|---|-----------------------------|---------------------|
| Haverstick-Borthwick<br>300 Stenton Avenue<br>PLYMOUTH MEETING, PA 19462                    | Construction                | 10,584,439          |
| Leegis Group Inc<br>2333 US Highway 22<br>UNION, NJ 07083                                   | Construction                | 6,723,062           |
| Aramark Facilities 135 New Road MADISON, CT 06443   | Maintenance                 | 4,482,440           |
| Sodexo<br>9801 Washington Blvd<br>GAITHERSBURG, MD 20287                                    | Food Service                | 3,795,085           |
| Renewal by Anderson 70 Jackson Street Ste A CRANFORD, NJ 07016                              | Construction                | 350,022             |
| Total number of independent contractors (including those in 1) who re from the organization | . ,                         | <b>▶</b> 21         |

Part Statement of Revenue VIII

|  |        |  |             |                  | (A)           | (B)   | (C)                              | (D)   |
|--|--------|--|-------------|------------------|---------------|---|----------------------------------|---|
|  |        |  |             |                  | Total Revenue | Related or<br>Exempt<br>Function<br>Revenue | Unrelated<br>Business<br>Revenue | Revenue<br>Excluded from<br>Tax under IRC<br>512, 513, or 514 |
|  | 1a     | Federated campaigns .  | . 1a        |                  |               | Kevende                                     |                                  | 312, 313, 61 311  |
| nts<br>nts   | ь      | Membership dues  |             |                  |               |   |                                  |   |
| gra<br>iou∥  | с      | Fundraising events .   | 1b          | 39,021           |               |   |                                  |   |
| Contributions, gifts, grants and other similar amounts |        | i unuraising events .  | 1c          | •                |               |   |                                  |   |
| <u>ਕੂੰ</u> ਬ   | d      | Related organizations  |             |                  |               |   |                                  |   |
| ins,<br>sim  | e      | Government grants (contribu                                  |             | 1,840,000        |               |   |                                  |   |
| ibutio<br>Ther   | f      | All other contributions, gifts, similar amounts not included |             | 6,396,000        |               |   |                                  |   |
| nt.<br>do  | g      | Noncash contributions  |             |                  |               |   |                                  |   |
| ဂ<br>ဂ်  | h      | lines 1a-1f \$<br>Total (Add lines 1a-1f)                    |             |                  | 8,275,021     |   |                                  |   |
|  |        |  |             | Business Code    |               |   |                                  |   |
| nue  | 2a     | TUITION & FEES   |             | 900,099          | 67,485,000    | 67,485,000                                  |                                  |   |
| e ve   | ь      | AUXILIARY INCOME   |             | 531,110          | 16,040,338    | 15,966,852                                  | 73,486                           |   |
| e F  | С      | SUMMER APPLICATION & LAB                                     | FEES        | 900,099          | 31,750        | 31,750                                      |                                  |   |
| 3F VI (  | d      |  |             |                  |               |   |                                  |   |
| Š  | e      |  |             |                  |               |   |                                  |   |
| Program Serwce Revenue                                 | f      | All other program servic                                     | e revenue   |                  |               |   |                                  |   |
| <u>~</u>   | g      | <b>\$</b> 83,557,088   |             |                  |               |   |                                  |   |
|  | 3      | Investment income (incother similar amounts)                 | -           | · ·              | 14,644,000    |   |                                  | 14,644,000  |
|  | 4      | Income from investment of t                                  |             | ▶                | 0             |   |                                  |   |
|  |        |  | ax exempt b | • In proceeds    |               |   |                                  |   |
|  | 5      | Royalties  |             |                  | 0             |   |                                  |   |
|  | 6a     | Gross Rents (1) F  | Real        | (11) Personal    |               |   |                                  |   |
|  | ь      | Less rental  |             |                  |               |   |                                  |   |
|  | c      | expenses Rental income                                       |             |                  |               |   |                                  |   |
|  | d      | or (loss)  Net rental income or (lo                          | ss)         | · · · · <u>·</u> |               |   |                                  |   |
|  |        | (ı) Sec  | urities     | (II) O ther      |               |   |                                  |   |
|  | 7a     | Gross amount from sales of assets other                      | 66,155,000  |                  |               |   |                                  |   |
|  | b      | than inventory Less cost or 2                                | 218,132,000 |                  |               |   |                                  |   |
|  |        | other basis and sales expenses                               | <u></u>     |                  |               |   |                                  |   |
|  | c<br>d | Net gain or (loss)   | 51,977,000  | ▶                | -51,977,000   |   |                                  | -51,977,000   |
|  | 8a     | Gross income from fund events (not including                 |             | · •              |               |   |                                  |   |
| an   |        | \$ 16,095 of contributions reporte                           |             |                  |               |   |                                  |   |
| ven  |        | 1c) See Part IV, line 1:<br>Attach Schedule G if total       | l exceeds   |                  |               |   |                                  |   |
| Ä.   |        | \$15,000   |             | 39,021           |               |   |                                  |   |
| Other Revenue  | b<br>c | Less direct expenses<br>Net income or (loss) fro             |             | · · · · · ·      | -144,470      |   |                                  | -144,470  |
| •  | 9a     | Gross income from gam activities. See part IV,               | lıne 19     |                  |               |   |                                  |   |
|  |        | Complete Schedule G If to<br>exceeds \$15,000                | a .         |                  |               |   |                                  |   |
|  | ь      | Less direct expenses   |             |                  |               |   |                                  |   |
|  | С      | Net income or (loss) fro                                     |             | activities<br>•  | 0             |   |                                  |   |
|  | 10a    | Gross sales of inventor returns and allowances               |             |                  |               |   |                                  |   |
|  | _      |  | . a         |                  |               |   |                                  |   |
|  | b<br>c | Less cost of goods solo<br>Net income or (loss) fro          |             | inventory        | 0             |   |                                  |   |
|  |        | Mıscellaneous Revenu   |             | Business Code    | 420.000       |   |                                  | 100.000   |
|  | 11a    | VEHICLE REGISTRATI   | ON FEES     |                  | 136,606       |   |                                  | 136,606   |
|  | b      | SHAKESPEARE INCOM  | 1 E         |                  | 116,020       |   |                                  | 116,020   |
|  | С      | METHODIST REVENUE  | <u> </u>    |                  | 151,549       |   |                                  | 151,549   |
|  | d      | All other revenue  |             |                  | 757,208       |   |                                  | 757,208   |
|  | e      | Total. Add lines 11a-11d                                     | d           | \$ 1,161,383     |               |   |                                  |   |
|  | 12     | Total Revenue. Add line                                      | s 1h, 2g, 3 |                  | 55,516,022    | 83,483,602                                  | 73,486                           | -36,316,087   |
|  |        | 8c,<br>9c, 10c, and 11e                                      |             |                  |               |   |                                  |   |

## Part IX Statement of Functional Expenses

| A    | Section 501(c)(3) and 501(c)(4) org<br>Il other organizations must complete column (A) but are not r  |                       |   |                                     |                                       |
|------|---|-----------------------|---|-------------------------------------|---------------------------------------|
| Do ı | not include amounts reported on lines 6b, 7b,<br>8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses | <b>(B)</b><br>Program service<br>expenses | (C) Management and general expenses | <b>(D)</b><br>Fundraising<br>expenses |
| 1    | Grants and other assistance to governments and organizations in the U S See Part IV, line 21  | 0                     | ·   |                                     | ·                                     |
| 2    | Grants and other assistance to individuals in the U.S. See Part IV, line 22   | 27,839,818            | 27,839,818                                |                                     |                                       |
| 3    | Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16   | 0                     | , ,                                       |                                     |                                       |
| 4    | Benefits paid to or for members   | 0                     |   |                                     |                                       |
| 5    | Compensation of current officers, directors, trustees, and key employees  | 2,548,274             | 950,493                                   | 1,233,152                           | 364,629                               |
| 6    | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$  | 0                     |   |                                     |                                       |
| 7    | Other salaries and wages  | 33,579,726            | 28,251,044                                |                                     | 1,265,535                             |
| 8    | Pension plan contributions (include section 401(k) and section 403(b) employer contributions)   | 2,836,395             | 2,285,907                                 | 420,836                             | 129,652                               |
| 9    | Other employee benefits   | 3,793,883             | 2,546,035                                 | 1,195,744                           | 52,104                                |
| 10   | Payroll taxes   | 2,422,722             | 1,952,702                                 | 359,071                             | 110,949                               |
| 11   | Fees for services (non-employees)   |                       |   |                                     |                                       |
| а    | Management  | 0                     |   |                                     |                                       |
| b    | Legal   | 331,044               | 19  | 331,025                             |                                       |
| c    | Accounting  | 119,921               | 421                                       | 119,500                             |                                       |
| d    | Lobbying  | 0                     |   |                                     |                                       |
| e    | Professional fundraising See Part IV, line 17   | 0                     |   |                                     |                                       |
| f    | Investment management fees  | 0                     |   |                                     |                                       |
| g    | Other   | 1,292,501             | 248,516                                   | 916,821                             | 127,164                               |
| 12   | Advertising and promotion   | 0                     |   |                                     |                                       |
| 13   | Office expenses   | 0                     |   |                                     |                                       |
| 14   | Information technology  | 1,607,119             | 1,371,626                                 | 187,402                             | 48,091                                |
| 15   | Royalties   | 0                     |   |                                     |                                       |
| 16   | Occupancy   | 9,527,737             | 8,950,737                                 | 491,000                             | 86,000                                |
| 17   | Travel  | 1,301,458             | 1,225,478                                 | 52,139                              | 23,841                                |
| 18   | Payments of travel or entertainment expenses for any Federal, state or local public officials   | 0                     |   |                                     |                                       |
| 19   | Conferences, conventions and meetings   | 857,461               | 618,103                                   | 64,286                              | 175,072                               |
| 20   | Interest  | 2,150,093             | 2,150,093                                 |                                     |                                       |
| 21   | Payments to affiliates  | 0                     |   |                                     |                                       |
| 22   | Depreciation, depletion, and amortization   | 6,634,420             | 6,255,190                                 | 322,045                             | 57,185                                |
| 23   | Insurance   | 536,816               | 536,816                                   |                                     |                                       |
| 24   | Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)                          |                       |   |                                     |                                       |
| а    | EQUIPMENT   | 583,000               | 491,000                                   | 57,000                              | 35,000                                |
|      | FOOD EXPENSE  | 2,357,000             | 2,355,000                                 | 2,000                               | <u> </u>                              |
| c    | IMPAIRMENT  | 228,000               | 228,000                                   |                                     |                                       |
| d    | LIBRARY MATERIALS   | 1,337,000             | 1,337,000                                 |                                     |                                       |
| e    | MISCELLANEOUS   | 3,694,000             | 2,733,602                                 | 852,424                             | 107,974                               |
|      | All other expenses  | 4,862,000             | 3,005,833                                 | 1,568,227                           | 287,940                               |
| 25   | Total functional expenses. Add lines 1 through 24f  | 110,440,388           | 95,333,433                                | 12,235,819                          | 2,871,136                             |
| 26   | Joint Costs. Check T if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation |                       | ,   |                                     | _,                                    |

| Part X | Balance | Shoot |
|--------|---------|-------|
|        | Balance | Sneer |

|             |       |   |          |              |             | (A)<br>Beginning of year |     | (B)<br>End of year |
|-------------|-------|---|----------|--------------|-------------|--------------------------|-----|--------------------|
|             | 1     | Cash—non-interest-bearing   |          |              |             | 1,836,000                | 1   | 5,252,000          |
|             | 2     | Savings and temporary cash investments  | _        |              |             | 9,916,000                |     | 4,354,000          |
|             | 3     | Pledges and grants receivable, net  | -        |              |             | 3,178,000                |     | 3,563,000          |
|             | 4     | Accounts receivable, net  | •        | • •          |             | 3,032,000                | 4   | 3,617,000          |
|             | 5     | Receivables from current and former officers, directors, trustee other related parties Complete Part II of Schedule L         |          |              | oyees or    | 5,552,555                | 5   | 2,211,1222         |
|             | 6     | Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B) Complete Part II of |          |              | 6           |                          |     |                    |
|             | 7     | Notes and loans receivable, net   |          | 3,340,000    |             | 3,778,000                |     |                    |
|             | 8     | Inventories for sale or use   |          | 267,000      | 8           | 354,000                  |     |                    |
| 90          | 9     | Prepaid expenses and deferred charges   |          |              |             | 2,312,000                | 9   | 1,678,000          |
| ssets       | 10a   |   |          |              |             |                          |     |                    |
| As          | _     | Land, buildings, and equipment cost basis   | 10a      |              | 236,348,000 |                          |     |                    |
|             | Ь     | Less accumulated depreciation Complete Part VI of Schedule D  | 10ь      |              | 91,084,000  | 130,469,000              | 10c | 145,264,000        |
|             | 11    | Investments—publicly traded securities  |          |              | -           | 185,661,000              |     | 108,970,000        |
|             | 12    | Investments—other securities See Part IV, line 11 Complete F Schedule D   | •        | 61,106,000   | 12          | 54,201,000               |     |                    |
|             | 13    | Investments—program-related See Part IV, line 11 Complete of Schedule D.  |          |              | 13          |                          |     |                    |
|             | 14    | Intangible assets   |          |              | 14          |                          |     |                    |
|             | 15    | Other assets See Part IV, line 11 Complete Part IX of Schedule  |          | 1,384,000    |             | 565,000                  |     |                    |
|             |       | D   |          | .,,55 .,,555 | 15          | 333,333                  |     |                    |
|             | 16    | Total assets. Add lines 1 through 15 (must equal line 34)   |          |              |             | 402,501,000              | 16  | 331,596,000        |
|             | 17    | Accounts payable and accrued expenses .   |          | 9,073,000    | 17          | 6,784,000                |     |                    |
|             | 18    | Grants payable  |          |              | 18          |                          |     |                    |
|             | 19    | Deferred revenue  |          |              |             | 7,465,000                | 19  | 6,660,000          |
|             | 20    | Tax-exempt bond liabilities   | •        |              |             | 64,885,000               | 20  | 66,934,000         |
| <u>, o</u>  | 21    | Escrow account liability Complete Part IV of Schedule D   |          |              |             |                          | 21  |                    |
| Liabilities | 22    | Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified   |          |              |             |                          |     |                    |
| ï           |       | persons Complete Part II of Schedule L  |          |              | 22          |                          |     |                    |
|             | 23    | Secured mortgages and notes payable to unrelated third parties  | s .      |              |             |                          | 23  |                    |
|             | 24    | Unsecured notes and loans payable   |          |              |             |                          | 24  |                    |
|             | 25    | Other liabilities   |          | 21,080,000   | 25          | 22,313,000               |     |                    |
|             | 26    | Total liabilities. Add lines 17 through 25  |          |              |             | 102,503,000              | 26  | 102,691,000        |
| es          |       | Organizations that follow SFAS 117, check here ► ✓ and comply through 29, and lines 33 and 34.                                | plete l  | lines 2      | 27          |                          |     |                    |
| anc         | 27    | Unrestricted net assets   |          |              |             | 200,098,000              | 27  | 75,156,000         |
| Balance     | 28    | Temporarily restricted net assets   |          |              |             | 17,334,000               | 28  | 74,305,000         |
| Ē           | 29    | Permanently restricted net assets   |          |              |             | 82,566,000               | 29  | 79,444,000         |
| r Fund      |       | Organizations that do not follow SFAS 117, check here ► ☐ allines 30 through 34.  | <b>.</b> |              |             |                          |     |                    |
| s or        | 30    | Capital stock or trust principal, or current funds  |          |              |             |                          | 30  |                    |
| ě.          | 31    | Paid-in or capital surplus, or land, building or equipment fund   |          |              | 31          |                          |     |                    |
| Assets      | 32    | Retained earnings, endowment, accumulated income, or other fi   | =        |              | 32          |                          |     |                    |
| Net /       | 33    | Total net assets or fund balances   |          |              |             | 299,998,000              | 33  | 228,905,000        |
| Ź           | 34    | Total liabilities and net assets/fund balances  |          |              |             | 402,501,000              |     | 331,596,000        |
|             |       |   |          |              |             |                          |     |                    |
| Pa          | rt XI | Financial Statements and Reporting  |          |              |             |                          |     |                    |

| Dowl VI | Financial   | Ctatamanta | and Reporting |
|---------|-------------|------------|---------------|
| 7.11.5  | l Financiai | Statements | and Reporting |

|    |   |    | Yes | No |
|----|---|----|-----|----|
| 1  | Accounting method used to prepare the Form 990  |    |     |    |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant?   | 2a |     | Νο |
| b  | Were the organization's financial statements audited by an independent accountant?  | 2b | Yes |    |
| С  | If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | Yes |    |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  | 3a | Yes |    |
| ь  | If "Yes," did the organization undergo the required audit or audits?  | 3b | Yes |    |

Employer identification number

## OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)
nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

2008

Open to Public
Inspection

| DREW | / UNIVE  | RSITY  |                          |  |               |                       |                   |  |                   |                 |           |                 |  |
|------|----------|--|--------------------------|--|---------------|-----------------------|-------------------|--|-------------------|-----------------|-----------|-----------------|--|
|      |          |  |                          |  |               |                       |                   |  | -148716           |                 |           |                 |  |
|      | rt I     |  |                          | harity Status (to be co                  |               |                       |                   |  | Instruct          | ions)           |           |                 |  |
|      | organi.  |  |                          | ation because it is (Please              |               |                       |                   |  | (A \ /:\          |                 |           |                 |  |
| 1    | <u> </u> | •  |                          | urches, or association of ch             |               |                       | Section .         | T/O(D)(T)  | (A)(I).           |                 |           |                 |  |
| 2    | <u> </u> |  |                          | ion 170(b)(1)(A)(ii). (Attac             |               |                       |                   |  |                   |                 |           |                 |  |
| 3    | <u> </u> | -  | ·                        | e hospital service organizati            |               |                       | -                 |  |                   |                 |           |                 |  |
| 4    | ļ        |  | -                        | zation operated in conjuncti             | on with a     | hospital d            | escribed i        | n <b>Section</b>                                 | 170(Ь)(1)         | (A)(iii). E     | nter the  | !               |  |
|      | _        | •  | name, city, and          |  |               |                       |                   |  |                   |                 |           |                 |  |
| 5    | ļ        | An organiza                                  | ation operated f         | or the benefit of a college or           | universit     | y owned o             | r operated        | d by a gove                                      | ernmental         | unit desc       | rıbed ın  |                 |  |
|      | _        | Section 170(b)(1)(A)(iv). (Complete Part II) |                          |  |               |                       |                   |  |                   |                 |           |                 |  |
| 6    | <u> </u> | A federal, s                                 | tate, or local go        | overnment or governmental                | unit desci    | rıbed ın <b>Se</b>    | ction 170         | (b)(1)(A)  | (v).              |                 |           |                 |  |
| 7    |          | An organiza                                  | ation that norma         | ally receives a substantial p            | art of its    | support fro           | om a gove         | rnmental u                                       | ınıt or fror      | n the gene      | eral publ | IC              |  |
|      |          | described i                                  | n <b>Sect ion 170(</b> E | <b>o)(1)(A)(vi)</b> (Complete Par        | tII)          |                       |                   |  |                   |                 |           |                 |  |
| 8    |          | A commun                                     | ty trust describ         | ed in <b>Section 170(b)(1)(A)</b>        | (vi) (Con     | nplete Par            | tII)              |  |                   |                 |           |                 |  |
| 9    | Γ        | An organiza                                  | ation that norma         | ally receives (1) more than              | 331/3%        | of its supp           | ort from c        | ontributior                                      | ns, membe         | rship fees      | s, and gr | oss             |  |
|      |          | receipts fro                                 | m activities rel         | ated to its exempt functions             | s—subject     | to certair            | n exceptio        | ns, and (2                                       | ) no more         | than 331,       | /3% of    |                 |  |
|      |          | ıts support                                  | from gross inve          | estment income and unrelate              | ed busine:    | ss taxable            | ıncome (          | less sectio                                      | on 511 ta:        | x) from bu      | sınesse   | S               |  |
|      |          | acquired by                                  | the organization         | on after June 30, 1975 See               | Section 5     | 509(a)(2).            | (Complet          | e Part III                                       | )                 |                 |           |                 |  |
| 10   | Г        | An organiz                                   | atıon organızed          | and operated exclusively to              | test for p    | ublic safe            | ty See <b>S</b> e | ection 509                                       | <b>(a)(4).</b> (S | ee instruc      | tions )   |                 |  |
| 11   | Γ        | _  | =                        | and operated exclusively fo              |               |                       |                   |  | •                 | •               |           |                 |  |
|      |          |  |                          | orted organizations describe             |               |                       |                   |  |                   | Section 5       | 09(a)(3   | <b>).</b> Check |  |
|      |          |  |                          | type of supporting organiza  Type II c   |               | Functioi -            |                   |  | .⊓<br>d           | Гтуре           | . III - O | ther            |  |
| e    | Г        | •  |                          | rtify that the organization is           |               |                       |                   | _  |                   |                 |           |                 |  |
| _    | '        | •  |                          | agers and other than one or              |               |                       | •                 |  |                   |                 | •         |                 |  |
|      |          | section 50                                   |                          | -  |               |                       | _                 |  |                   |                 | •         | ,               |  |
| f    |          | _  |                          | d a written determination fro            | m the IRS     | S that it is          | a Type I,         | Type II o  | r Type III        | supporti        | ng organ  | ızatıon,        |  |
|      |          | check this                                   |                          | as the organization accepted             | d any ouft    | or contrib            | ution from        | any of the                                       | ,                 |                 |           | ı               |  |
| g    |          | following pe                                 |                          | as the organization accepted             | u any gni     | or contrib            | ution non         | i ally of the                                    | =                 |                 |           |                 |  |
|      |          |  |                          | r indirectly controls, either a          | alone or to   | ogether wi            | th person:        | s describe                                       | d ın (ıı)         |                 | Yes       | No              |  |
|      |          | and (III) be                                 | ow, the governi          | ng body of the the supported             | d organiza    | ition?                |                   |  |                   | 11g             | (i)       | Νο              |  |
|      |          | (ii) a family                                | / member of a p          | erson described in (i) above             | ?             |                       |                   |  |                   | 11g(            | (ii)      | No              |  |
|      |          | (iii) a 35%                                  | controlled enti          | ty of a person described in (            | (i) or (ii) a | bove?                 |                   |  |                   | 11g(            | iii)      | Νο              |  |
| h    |          | Provide the                                  | following inform         | nation about the organizatio             | ns the or     | ganızatıon            | supports          |  |                   |                 |           |                 |  |
|      |          |  |                          |  |               |                       |                   |  |                   |                 |           |                 |  |
|      | (i) Na   | ame of                                       | (ii) EIN                 | (iii) Type of organization               | (iv) 1        | [s the                | (v) Did y         | ou notify  | (vi) I            | s the           | (vii) A   | mount of        |  |
|      |          | orted  |                          | (described on lines 1 - 9                |               | ation in              | _                 | anization  |                   | ation in .      | sup       | port?           |  |
|      | Organ    | nization                                     |                          | above or IRC section (See Instructions)) |               | listed in<br>overning |                   | <b>i)</b> of your<br>port?                       |                   | rganized<br>US? |           |                 |  |
|      |          |  |                          | (See Histractions)                       |               | ment?                 | sup <sub>l</sub>  | porti  | 111 the           | 03.             |           |                 |  |
|      |          |  |                          |  | Yes           | No                    | Yes               | No   | Yes               | No              | 1         |                 |  |
|      |          |  |                          |  |               |                       |                   |  |                   |                 |           |                 |  |
|      |          |  |                          |  |               |                       |                   |  |                   |                 |           |                 |  |
|      |          |  |                          |  |               |                       |                   |  |                   | 1               |           |                 |  |
|      |          |  |                          |  |               |                       |                   |  |                   |                 |           |                 |  |
|      |          |  |                          |  | <b></b>       | <b></b>               | Ļ                 | <del>                                     </del> | <b>-</b>          | <b></b>         |           |                 |  |

Total

| Part II | Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) |
|---------|---|
|         | (Complete only if you checked the box on line 5, 7, or 8 of Part I.)                      |

| Pι   | ıblic Support   |                    | , ,               | ,                 |                  |              |          |            |
|------|---|--------------------|-------------------|-------------------|------------------|--------------|----------|------------|
| Cale | endar year (or fiscal year beginning in)                        | (a) 2004           | <b>(b)</b> 2005   | (c) 2006          | (d) 2007         | (e)          | 2008     | (f) Total  |
| 1    | Gifts, grants, contributions, and                               |                    |                   |                   |                  |              |          |            |
|      | membership fees received (Do not                                |                    |                   |                   |                  |              |          |            |
|      | include any "unusual grants ")                                  |                    |                   |                   |                  |              |          |            |
| 2    | Tax revenues levied for the organization's                      |                    |                   |                   |                  |              |          |            |
|      | benefit and either paid to or expended on                       |                    |                   |                   |                  |              |          |            |
| _    | its behalf<br>The value of services or facilities               |                    |                   |                   |                  | <del> </del> |          |            |
| 3    | furnished by a governmental unit to the                         |                    |                   |                   |                  |              |          |            |
|      | organization without charge                                     |                    |                   |                   |                  |              |          |            |
| 4    | Total. Add line 1-3   |                    |                   |                   |                  | 1            |          |            |
| 5    | The portion of total contribution by each                       |                    |                   |                   |                  |              |          |            |
| 5    | person (other than a government unit or                         |                    |                   |                   |                  |              |          |            |
|      | publicly supported organization) included                       |                    |                   |                   |                  |              |          |            |
|      | on line 1 that exceed 2% of the amount                          |                    |                   |                   |                  |              |          |            |
|      | shown on line 11, column  |                    |                   |                   |                  |              |          |            |
|      | · (f)   |                    |                   |                   |                  |              |          |            |
| 6    | Public Support subtract line 5 from line                        |                    |                   |                   |                  |              |          |            |
|      | 4   |                    |                   |                   |                  |              |          |            |
|      | otal Support  |                    | 1                 |                   | T                |              |          |            |
|      | endar year (or fiscal year beginning in)                        | (a) 2004           | <b>(b)</b> 2005   | (c) 2006          | (d) 2007         | (e) :        | 2008     | (f) Total  |
| 7    | A mounts from line 4  |                    |                   |                   |                  |              |          |            |
| 8    | Gross income from interest, dividends,                          |                    |                   |                   |                  |              |          |            |
|      | payments received on securities loans,                          |                    |                   |                   |                  |              |          |            |
|      | rents, royalties and income from similar                        |                    |                   |                   |                  |              |          |            |
| _    | sources   |                    |                   |                   |                  |              |          |            |
| 9    | Net income from unrelated business                              |                    |                   |                   |                  |              |          |            |
|      | activities, whether or not the business is regularly carried on |                    |                   |                   |                  |              |          |            |
| 10   | Other income Do not include gain or loss                        |                    |                   |                   |                  |              |          |            |
| 10   | from the sale of capital assets (Explain in                     |                    |                   |                   |                  |              |          |            |
|      | Part IV )   |                    |                   |                   |                  |              |          |            |
| 11   | Total Support (Add lines 7 through 10)                          |                    |                   |                   |                  |              |          |            |
| 12   | Gross receipts from related activities, etc                     | (See instructio    | ns )              |                   | •                | 12           |          |            |
| 13   | First Five Years. If the Form 990 is for the                    | organization's f   | irst second thu   | d fourth or fifth | ntay vearas a F  |              | 3)       |            |
|      | organization, check this box and <b>stop here</b>               |                    | mat, second, tim  | u, rouren, or mer | rtax year as a s | /O1(C)(C     | • •      | <b>▶</b> □ |
|      |   |                    |                   |                   |                  |              |          | •          |
| Co   | omputation of Public Support Perc                               | entage             |                   |                   |                  |              |          |            |
| 14   | Public Support Percentage for 2008 (line 6                      | 5 column (f) dıvı  | ded by line 11 c  | olumn (f))        |                  | 14           |          |            |
| 15   | Public Support Percentage for 2007 School                       | dule A , Part IV - | A, line 26f       |                   |                  | 15           |          |            |
| 16a  | 33 1/3% Test - 2008. If the organization di                     | d not check the    | box on line 13.   | and line 14 is 3  | 3 1/3% or more.  |              | this box |            |
|      | and <b>stop here.</b> The organization qualifies a              |                    |                   |                   | ,                |              |          | <b>▶</b> □ |
| b    | 33 1/3% Test - 2007. If the organization d                      |                    |                   |                   | 15 is 33 1/3% d  | r more,      | check th |            |
|      | box and stop here. The organization qualifi                     | es as a publicly   | supported orga    | nızatıon          |                  |              |          | <b>▶</b> □ |
| 17a  | 10% Facts and Circumstances Test - 2008.                        |                    |                   |                   |                  |              |          |            |
|      | more, and if the organization meets the "fa                     |                    | •                 |                   |                  |              |          | · —        |
|      | organization meets the "facts and circums                       |                    |                   |                   |                  |              |          | <b>►</b> □ |
| Ь    | 10% Facts and Circumstances Test - 2007.                        |                    |                   |                   |                  |              |          |            |
|      | more, and if the organization meets the "fa                     |                    | •                 |                   |                  |              |          | _          |
| 4.0  | the organization meets the "facts and circu                     |                    |                   |                   |                  |              |          | n ▶        |
| 18   | <b>Private Foundation.</b> If the organization did              | not check the b    | oux on line 13, 1 | oa, 160, 1/a or   | 1/D, check this  | oox an       | u see    | <b>▶</b> □ |
|      | ınstructions  |                    |                   |                   |                  |              |          | F-1        |

| Pa   | Support Schedule for On<br>(Complete only if you ched                            |                    |                   |                     | (2)              |                 |            |
|------|--|--------------------|-------------------|---------------------|------------------|-----------------|------------|
|      | ction A. Public Support  |                    | _                 | ,                   |                  |                 |            |
| Cale | ndar year (or fiscal year beginning in)  | (a) 2004           | <b>(b)</b> 2005   | (c) 2006            | (d) 2007         | (e) 2008        | (f) Total  |
| 1    | Gifts, grants, contributions, and  |                    |                   |                     |                  |                 |            |
|      | membership fees received (Do not   |                    |                   |                     |                  |                 |            |
| 2    | include any "unusual grants ")<br>Gross receipts from admissions,                |                    |                   |                     |                  |                 |            |
| 2    | merchandise sold or services performed,  |                    |                   |                     |                  |                 |            |
|      | or facilities furnished in any activity that                                     |                    |                   |                     |                  |                 |            |
|      | is related to the organization's tax-  |                    |                   |                     |                  |                 |            |
|      | exempt purpose   |                    |                   |                     |                  |                 |            |
| 3    | Gross receipts from activities that are  |                    |                   |                     |                  |                 |            |
|      | not an unrelated trade or business under   |                    |                   |                     |                  |                 |            |
|      | section 513  |                    |                   |                     |                  |                 |            |
| 4    | Tax revenues levied for the  |                    |                   |                     |                  |                 |            |
|      | organization's benefit and either paid to  |                    |                   |                     |                  |                 |            |
|      | or expended on its behalf  |                    |                   |                     |                  |                 |            |
| 5    | The value of services or facilities  |                    |                   |                     |                  |                 |            |
|      | furnished by a governmental unit to the  |                    |                   |                     |                  |                 |            |
| _    | organization without charge  |                    |                   |                     |                  |                 |            |
| 6    | Total Add lines 1-5  |                    |                   |                     |                  |                 |            |
| 7a   | A mounts included on lines 1, 2, and 3   |                    |                   |                     |                  |                 |            |
|      | received from disqualified persons<br>Amounts included on lines 2 and 3          |                    |                   |                     |                  |                 |            |
| D    | received from other than disqualified  |                    |                   |                     |                  |                 |            |
|      | persons that exceed the greater of 1% of   |                    |                   |                     |                  |                 |            |
|      | the total of lines 9, 10c, 11, and 12 for  |                    |                   |                     |                  |                 |            |
|      | the year or \$5,000  |                    |                   |                     |                  |                 |            |
| С    | Total of lines 7a and 7b   |                    |                   |                     |                  |                 |            |
| 8    | Public Support (Substract line 7c from   |                    |                   |                     |                  |                 |            |
| _    | line 6)  |                    |                   |                     |                  |                 |            |
| То   | tal Support  |                    |                   |                     |                  |                 |            |
| Cale | ndar year (or fiscal year beginning in)  | (a) 2004           | <b>(b)</b> 2005   | (c) 2006            | (d) 2007         | (e) 2008        | (f) Total  |
| 9    | A mounts from line 6   |                    |                   |                     |                  |                 |            |
| 10a  | Gross income from interest, dividends,   |                    |                   |                     |                  |                 |            |
|      | payments received on securities loans,   |                    |                   |                     |                  |                 |            |
|      | rents, royalties and income from similar   |                    |                   |                     |                  |                 |            |
|      | sources  |                    |                   |                     |                  |                 |            |
| b    | Unrelated business taxable income (less  |                    |                   |                     |                  |                 |            |
|      | section 511 taxes) from businesses   |                    |                   |                     |                  |                 |            |
|      | acquired after 30 June, 1975   |                    | +                 |                     |                  |                 |            |
| С    | Add lines 10a and 10b  |                    |                   |                     |                  |                 |            |
| 11   | Net income from unrelated business   |                    |                   |                     |                  |                 |            |
|      | activities not included in line 10b,<br>whether or not the business is regularly |                    |                   |                     |                  |                 |            |
|      | carried on   |                    |                   |                     |                  |                 |            |
| 12   | Other income Do not include gain or loss   |                    |                   |                     |                  |                 |            |
|      | from the sale of capital assets  |                    |                   |                     |                  |                 |            |
|      | (Explain in Part IV )  |                    |                   |                     |                  |                 |            |
| 13   | Total Support (Add lines 9, 10c, 11 and  |                    |                   |                     |                  |                 |            |
|      | 12)  |                    |                   |                     |                  |                 |            |
| 14   | First Five Years If the Form 990 is for the                                      | organızatıon's fı  | rst, second, thir | d, fourth, or fifth | ntax year as a 5 | 01(c)(3) organı | zation,    |
|      | check this box and <b>stop here</b>  |                    |                   |                     |                  |                 | <b>▶</b> □ |
|      | manufaction of Dublic Compact Days   |                    |                   |                     |                  |                 |            |
| 15   | mputation of Public Support Perc<br>Public Support Percentage for 2008 (line     |                    | dod by line 12 o  | olumn (fl)          |                  | T 4= T          |            |
|      |  |                    | •                 | .orumin (1))        |                  | 15              |            |
| 16   | Public Support Percentage for 2007 Sche  | dule A , Part IV - | A, line 27g       |                     |                  | 16              |            |
|      |  | D                  |                   |                     |                  |                 |            |
| Co   | mputation of Investment Income Investment Income Percentage for 2008 (           |                    |                   | ne 13 column /f     | <u> </u>         | 17              |            |
|      |  |                    |                   | -                   | "                | 17              |            |
| ΤQ   | Investment Income Percentage from 2007   | ocnequie A , Pa    | TLIV-A, IINE 2/   | H                   |                  | 18              |            |

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

**▶**□

| Part IV | <b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions) |  |  |  |  |  |  |  |
|---------|---|--|--|--|--|--|--|--|
|         |   |  |  |  |  |  |  |  |
|         | Facts and Circumstances Test  |  |  |  |  |  |  |  |
|         |   |  |  |  |  |  |  |  |

Schedule A (Form 990 or 990-EZ) 2008

Software ID: Software Version:

**EIN:** 22-1487164

Name: DREW UNIVERSITY

#### Form 990, Part VII - Section Aaa

| Form 990, Part VII - Section Aaa        |  |   |                       |          |              |                              |        |   |  |  |
|---|--|---|-----------------------|----------|--------------|------------------------------|--------|---|--|--|
|   |  | (C)<br>Position (check all<br>that apply) |                       |          |              |                              |        |   | (5)  | (F)  |
| <b>(A)</b><br>Name and Title            | (B)<br>Average<br>hours<br>per<br>week | Individual Trustee<br>or Errector         | Institutional Trustee | Officei  | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations |
| JUDITH E CAMPBELL , TRUSTEE             | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| BARBARA MORRIS CASPERSEN ,<br>TRUSTEE   | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| WILLIAM E CLARK , TRUSTEE               | 1 0                                    | X   |                       |          |              |                              |        | 0   | 0  | 0  |
| RORY C CORRIGAN , TRUSTEE               | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| JOHN H CRAWFORD III , CHAIR             | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| DEAN T CRIARES , TRUSTEE                | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| HUGH A D ANDRADE ,<br>SECRETARY/TRUSTEE | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| SUDARSHANA DEVADHAR, TRUSTEE            | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| DONALD L DRAKEMAN , TRUSTEE             | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| STUART D DUNNAN , TRUSTEE               | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| ROBERT EDGAR , TRUSTEE                  | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| JOHN A EHINGER , TRUSTEE                | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| KATHRYN FABER , TRUSTEE                 | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| MICHELE E FABRIZIO , TRUSTEE            | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| WILLIAM M FREEMAN , VICE CHAIR          | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| FREDRICK FUEST , TRUSTEE                | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| JORDAN M GLATT , TRUSTEE                | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| GATES H HAWN , TRUSTEE                  | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| EDWARD R HINTZ , TRUSTEE                | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| WILLIAM R HUFF , TRUSTEE                | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| PEGGY A JOHNSON , TRUSTEE               | 1 0                                    | Χ   |                       |          |              |                              |        | 0   | 0  | 0  |
| WILLIAM T KNOX, TRUSTEE                 | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| WILLIAM T LANDIS III , TRUSTEE          | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| KEVIN H MARINO , TRUSTEE                | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| ELIZABETH H MARSH , TRUSTEE             | 1 0                                    | X   |                       |          |              |                              |        | 0   | 0  | 0  |
| CHAMP MEYERCORD , TRUSTEE               | 1 0                                    | Х   | <u> </u>              |          |              |                              |        | 0   | 0  | 0  |
| BETSY S MICHEL , TRUSTEE                | 1 0                                    | Х   |                       |          |              |                              |        | 0   | 0  | 0  |
| CHRISTOPHER A MICKEL , TRUSTEE          | 1 0                                    | Х   | L                     |          |              |                              |        | 0   | 0  | 0  |
| PAMELA J MOED , TRUSTEE                 | 10                                     | Х   |                       |          |              |                              |        | 0   |  | 0  |
| CATHERINE R MORROW, TRUSTEE             | 1 0                                    | Х   |                       | <u> </u> |              |                              |        | 0   | 0  | 0  |

Form 990, Part VII - Section Aaa

| Form 990, Part VII - Section Aaa          |  |                                   |                       |         |              |                              |        |   |   |  |
|---|--|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|---|---|--|
|   |  |                                   | (C<br>non (           | ched    | heck all     |                              | _      |   | (E)   | (F)  |
| <b>(A)</b><br>Name and Title              | (B)<br>Average<br>hours<br>per<br>week | Individual Trustee<br>or Director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | Reportable<br>compensation<br>from related<br>organizations<br>(W- 2/1099-<br>MISC) | Estimated amount of other compensation from the organization and related organizations |
| JEFFREY B NOSS , TRUSTEE                  | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| RANDOLPH W NUGENT , TRUSTEE               | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| LAURA OVERDECK, TRUSTEE                   | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| JEREMIAH J PARK , TRUSTEE                 | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| GARY S STEIN , TRUSTEE                    | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| CHARLES H STRAUT , TRUSTEE                | 1 0                                    | X                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| MARY A STRINGFIELD , TRUSTEE              | 1 0                                    | X                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| MARVIN J SUOMI , TRUSTEE                  | 1 0                                    | X                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| STEVEN A TASHER , TRUSTEE                 | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| ARTURO A VALENZUELA , TRUSTEE             | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| ROBERT WEISBUCH , PRESIDENT               | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| LEWIS D ANDREWS , Trustee Emeriti         | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| CW CARSON JR , TRUSTEE Emeriti            | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| RAYMOND G CHAMBERS , TRUSTEE<br>Emeriti   | 1 0                                    | x                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| JOHN H EVANS , TRUSTEE Emeriti            | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| ROBERT B GOODWIN , TRUSTEE<br>Emeriti     | 1 0                                    | X                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| PHILIP H HASELTON SR , TRUSTEE<br>Emeriti | 1 0                                    | ×                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| BARBARA T HOWELL , TRUSTEE<br>Emeriti     | 1 0                                    | ×                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| ERNEST S LYGHT , TRUSTEE Emeriti          | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| HEATH B MCLENDON , TRUSTEE<br>Emeriti     | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| EUGENE I MEYERS , TRUSTEE Emeriti         | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| HENRY G PARKER III , TRUSTEE<br>Emeriti   | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| NANCY W PRIEST , TRUSTEE Emeriti          | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| DONALD E PROCKNOW , TRUSTEE<br>Emeriti    | 1 0                                    | х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| B P RUSSELL , TRUSTEE Emeriti             | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| NANCY S SCHAENEN , TRUSTEE<br>Emeriti     | 1 0                                    | х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| ROBERT D SIMPSON , TRUSTEE<br>Emeriti     | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| SHIRLEY SUGERMAN , TRUSTEE<br>Emeriti     | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| ROSS E TRAPHAGEN JR , TRUSTEE<br>Emeriti  | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |
| EDWARD J WYNNE JR , TRUSTEE<br>Emeriti    | 1 0                                    | Х                                 |                       |         |              |                              |        | 0   | 0   | 0  |

Form 990, Part VII - Section Aaa

| Form 990, Part VII - Section Aaa                    |  |  |                       |         |              |                              |        |   |  | 1  |  |
|---|--|--|-----------------------|---------|--------------|------------------------------|--------|---|--|--|--|
|   |  | <b>(C)</b><br>Position (check all<br>that apply) |                       |         |              |                              |        |   | <b>(E)</b>   | (F)  |  |
| <b>(A)</b><br>Name and Title                        | (B)<br>Average<br>hours<br>per<br>week | Individual Trustee<br>or Director                | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | (D) Reportable compensation from the organization (W- 2/1099MISC) | (E) Reportable compensation from related organizations (W- 2/1099- MISC) | Estimated amount of other compensation from the organization and related organizations |  |
| JEANNE T ZENKER , TRUSTEE Emeriti                   | 1 0                                    | Х  |                       |         |              |                              |        | 0   | 0  | 0  |  |
| ROBERT WEISBUCH , PRESIDENT                         | 35 0                                   |  |                       | Х       |              |                              |        | 357,433   | 0  | 117,514  |  |
| PAMELA GUNTER SMITH , PROVOST                       | 35 0                                   |  |                       | Х       |              |                              |        | 191,391   | 0  | 84,099   |  |
| HOWARD BUXBAUM , VP FINANCE                         | 35 0                                   |  |                       | Х       |              |                              |        | 199,958   | 0  | 37,999   |  |
| MARGARET HOWARD , VP<br>ADMINISTRATION              | 35 0                                   |  |                       | х       |              |                              |        | 221,952   | 0  | 47,044   |  |
| RONALD ROSS, DEAN of CONTINUING EDUCATION           | 35 0                                   |  |                       | х       |              |                              |        | 157,492   | 0  | 28,600   |  |
| JONATHAN LEVIN , DEAN COLLEGE OF LIBERAL ARTS       | 35 0                                   |  |                       | х       |              |                              |        | 82,603  | 0  | 43,763   |  |
| MAXINE BEACH , DEAN THEOLOGICAL SCHOOL              | 35 0                                   |  |                       | х       |              |                              |        | 193,342   | 0  | 30,714   |  |
| MARY BETH CAREY , DEAN COLLEGE<br>ADMISSIONS & FIN  | 35 0                                   |  |                       | х       |              |                              |        | 207,304   | 0  | 23,271   |  |
| ANDREW SCRIMGEOUR , DEAN<br>LIBRARIES               | 35 0                                   |  |                       | х       |              |                              |        | 123,250   | 0  | 28,313   |  |
| DAVID MUHA , CHIEF<br>COMMUNICATIONS OFFICER        | 35 0                                   |  |                       | х       |              |                              |        | 112,394   | 0  | 17,583   |  |
| CARLOS YORDAN , SPECIAL<br>ASSISTANT TO THE PRES    | 35 0                                   |  |                       | х       |              |                              |        | 72,856  | 0  | 18,928   |  |
| VIRGINIA SAMUEL CETUK , INTERIM<br>DEAN OF STUDENTS | 35 0                                   |  |                       | х       |              |                              |        | 111,761   | 0  | 9,390  |  |
| RICHARD GREENWALD , DEAN GRADUATE SCHOOL            | 35 0                                   |  |                       | х       |              |                              |        | 119,524   | 0  | 11,823   |  |
| DONNA FRITHSEN , VP DEVELOPMENT                     | 35 0                                   |  |                       | Х       |              |                              |        | 222,779   | 0  | 26,590   |  |
| PAOLO CUCCHI, Professor and Dir of Program          | 35 0                                   |  |                       |         |              | Х                            |        | 196,507   | 0  | 42,088   |  |
| CHRISTOPHR VAN WYK , ASSOCIATE<br>VP FINANCE        | 35 0                                   |  |                       |         |              | Х                            |        | 154,122   | 0  | 45,672   |  |
| JOSEPH KELLY , ASSOC VP<br>FINANCE/Treasurer        | 35 0                                   |  |                       |         |              | Х                            |        | 154,022   | 0  | 43,600   |  |
| CHRISTINE KINEALY , Professor of Arts and Letters   | 35 0                                   |  |                       |         |              | х                            |        | 151,253   | 0  | 26,364   |  |
| ALAN CANDIOTTI , ASST VP<br>TECHNOLO GY/professor   | 35 0                                   |  |                       |         |              | Х                            |        | 140,485   | 0  | 23,873   |  |

# **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

- ◆ Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

| lf th   | ` ,` ,  | es," to Form 990, Part IV, Line 5 (                                 |                     | ( , , , , , , , , , , , , , , , , , , ,  |   |  |
|---|---|---|---------------------|--|---|--|
| N a   | ection 30 1(c)(4), (3), of (6) organ<br>ame of the organization<br>REW UNIVERSITY | izations complete Part III  |                     |  | ntıfıcatıon number  |  |
| Pai   |   | by all organizations exemp  |                     | 22-1487164<br>  1 <b>501(c) and section</b>  |   |  |
| 1   | Provide a description of the o  | rganization's direct and indirect pol                               | ıtıcal campaıgn act | ivities in Part IV   |   |  |
| 2   | Political expenditures  |   |                     |  | \$  |  |
| 3   | Volunteer hours   |   |                     |  |   |  |
| Pa  | rt I-B To be completed for Schedule C for c                                       | by all organizations exemp<br>letails.)                             | t under section     | <b>1 501(c)(3).</b> (See the   | instructions  |  |
| 1   | Enter the amount of any excis   | e tax incurred by the organization (                                | under section 4955  |  | \$  |  |
| 2   | Enter the amount of any excis   | e tax incurred by organization man                                  | agers under section | n 4955   | \$  |  |
| 3   | If the organization incurred in   | a section 4955 tax, did it file Form                                | 4720 for this year  | ?  | ┌ Yes   |  |
| 4a  | Was a correction made?  |   |                     |  | ┌ Yes ┌ No  |  |
| ь   | If "Yes," describe in Part IV   |   |                     |  |   |  |
| Pa  |   | <b>by all organizations exemp</b><br>s for Schedule C for details.) | t under section     | ı 501(c), except sec   | tion 501(c)(3).   |  |
| 1   | Enter the amount directly exp   | ended by the filing organization for                                | section 527 exemp   | ot function activities   | \$  |  |
| 2   | Enter the amount of the filing 527 exempt funtion activities                      | organization's internal funds contri                                | buted to other orga | nizations for section  | \$  |  |
| 3   | Total of direct and indirect ex<br>1120-POL, line 17b                             | empt function expenditures Add Iir                                  | nes 1 and 2 and ent | er here and on Form  | \$  |  |
| 4   | Did the filing organization file  | Form 1120-POL for this year?  |                     |  | ☐ Yes ☐ No  |  |
| State the names, addresses and Employer Identification Number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's own internal funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. |   |   |                     |  |   |  |
| (a) Name  |   | ( <b>b)</b> Address   | (c) EIN             | (d) A mount paid from<br>filing organization's<br>internal funds If none,<br>enter - 0 - | (e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |  |
|   |   |   |                     |  |   |  |
|   |   |   |                     |  |   |  |
|   |   | +   |                     | +  |   |  |
|   |   |   |                     | +  |   |  |

For Paperwork Reduction Act Notice, see the instructions for Form 990.

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2008

| P  | To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). (See the instructions for Schedule C for details.) |  |  |  |  |  |  |  |
|----|--|--|--|--|--|--|--|--|
|    | Check   If the filing organization belongs to an affiliated group  Check   If the filing organization checked box A and "limited control" provisions apply               |  |  |  |  |  |  |  |
|    | Limits on Lo   | bbying Expenditures— s" means amounts paid or incurred.)     | (a) Filing<br>Organization's<br>Totals | <b>(b)</b> Affiliated<br>Group<br>Totals |  |  |  |  |
| 1a | Total lobbying expenditures to influe  | nce public opinion (grass roots lobbying)                    |  |  |  |  |  |  |
| b  | Total lobbying expenditures to influe  | nce a legislative body (direct lobbying)                     |  |  |  |  |  |  |
| c  | Total lobbying expenditures (add line  | es 1a and 1b)  |  |  |  |  |  |  |
| d  | Other exempt purpose expenditures  |  |  |  |  |  |  |  |
| е  | Total exempt purpose expenditures  | (add lines 1c and 1d)  |  |  |  |  |  |  |
| f  | Lobbying nontaxable amount Enter to columns—   |  |  |  |  |  |  |  |
|    | If the amount on line 1e, column (a) or (b) is:  | The lobbying nontaxable amount is:                           |  |  |  |  |  |  |
|    | Not over \$500,000   | 20% of the amount on line 1e                                 |  |  |  |  |  |  |
|    | 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  |  |  |  |  |  |  |
|    | Grassroots nontaxable amount (ente   | r 25% of line 1f)  |  |  |  |  |  |  |
| h  | Subtract line 1g from line 1a Enter -  |  |  |  |  |  |  |  |
| į  | Subtract line 1f from line 1c Enter -  |  |  |  |  |  |  |  |
| j  | If there is an amount other than zero  | on either line 1h or line 1i, did the organization file Forn | n 4720 reporting                       | ┌ Yes                                    |  |  |  |  |

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 1a through 1f of the instructions.)

|    | Lobbying Expenditures During 4-Year Averaging Period      |          |                 |                 |                 |                  |  |  |
|----|---|----------|-----------------|-----------------|-----------------|------------------|--|--|
|    | Calendar year (or fiscal year<br>beginning in)            | (a) 2005 | <b>(b)</b> 2006 | <b>(c)</b> 2007 | <b>(d)</b> 2008 | <b>(e)</b> Total |  |  |
| 2a | Lobbying non-taxable amount                               |          |                 |                 | 22,021          | 22,021           |  |  |
| ь  | Lobbying ceiling amount<br>(150% of line 2a, column(e))   |          |                 |                 |                 | 33,032           |  |  |
| С  | Total lobbying expenditures                               |          |                 |                 |                 |                  |  |  |
| d  | Grassroots non-taxable amount                             |          |                 |                 |                 |                  |  |  |
| e  | Grassroots ceiling amount<br>(150% of line d, column (e)) |          |                 |                 |                 |                  |  |  |
| f  | Grassroots lobbying expenditures                          |          |                 |                 |                 |                  |  |  |

| Part II-B | To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form |
|-----------|--|
|           | 5768 (election under section 501(h)). (See the instructions for Schedule C for details.) |

|     |  |         | 1)    | ( D)    |  |
|-----|--|---------|-------|---------|--|
|     |  | Yes     | No    | A mount |  |
| 1   | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of |         |       |         |  |
| а   | Volunteers?  |         | Νo    |         |  |
| b   | Paid staff or management (include compensation in expenses reported on lines c through i)?   |         | Νo    |         |  |
| c   | Media advertisements?  |         | Νo    |         |  |
| d   | Mailings to members, legislators, or the public?   |         | Νo    |         |  |
| e   | Publications, or published or broadcast statements?  |         | Νo    |         |  |
| f   | Grants to other organizations for lobbying purposes?   |         | Νo    |         |  |
| g   | Direct contact with legislators, their staffs, government officials, or a legislative body?  |         | Νo    |         |  |
| h   | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?  |         | Νo    |         |  |
| i   | Other activities If "Yes," describe in Part IV   | Yes     |       | 155,172 |  |
| j   | Total lines 1c through   |         |       | 155,172 |  |
|     | 11   |         |       |         |  |
| 2a  | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  |         | Νo    |         |  |
| b   | If "Yes" enter the amount of any tax incurred under section 4912   |         |       |         |  |
| c   | If "Yes" enter the amount of any tax incurred by organization managers under section 4912  |         |       |         |  |
| d   | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?   |         |       |         |  |
| Dar | + TO be completed by all organizations exempt under section $501(c)(4)$  | section | 501(0 | )(5) or |  |

# **section 501(c)(6).** (See the instructions for Schedule C for details.)

|   |  |   | Yes | No |
|---|--|---|-----|----|
| 1 | Were substantially all (90% or more) dues received nondeductible by members?                     | 1 |     |    |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less?                | 2 |     |    |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | 3 |     |    |

#### Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.) Dues, assessments and similar amounts from members

| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).   |       |
|---|---|-------|
| а | Current Year  | 2a \$ |
| b | Carryover from last year  | 2b\$  |
| c | Total   | 2c \$ |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues   | 3 \$  |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political |       |
|   | expenditure next year?  | 4 \$  |
| 5 | Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)   | 5 \$  |

#### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

| Ident if ier                 | Return Reference | Explanation  |
|------------------------------|------------------|--|
| Schedule C Part II-B line 11 |                  | Winning strategies Washington works on behalf of Drew University to advocate and advance funding and policy "fixes" from their inception to conclusion through the legislative, appropriations and regulatory processes Specifically, we have a strong understanding of what strategies work best in gaining the interest and support of Members of Congress, especially with regard to working effectively with Members of the New Jersey delegation. In addition, AICUNJ and NAICU are consortium groups, of which Drew is a member institution, that work together to make an impact on their common ideas/goals, especially with government agencies. Each year they lobby for an increase or at least a stabilization of government funds for student aid, of which we are very interested. Our goal is to get as much funding as possible. |
|                              |                  |  |
|                              |                  |  |
|                              |                  |  |
|                              |                  |  |

1 \$

| Part IV Supplemental I | nformation       |             |
|------------------------|------------------|-------------|
| Ident if ier           | Return Reference | Explanation |
|                        |                  |             |
|                        |                  |             |
|                        |                  |             |
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Schedule C (Form 990 or 990EZ) 2008

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DLN: 93493137039460

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Financial Statements** 

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection

|     | me of the organization EW UNIVERSITY   | Employer identification number   |  |  |  |  |
|-----|--|--|--|--|--|--|
| ואט | LTT ONLYLINGE !  |  | 22-1487164   |  |  |  |
| Pa  | organizations Maintaining Donor Acorganization answered "Yes" to Form 99   |  |  |  |  |  |
|     |  | (a) Donor advised funds  | (b) Funds and other accounts                                     |  |  |  |
| L   | Total number at end of year  |  |  |  |  |  |
| 2   | Aggregate Contributions to (during year)   |  |  |  |  |  |
| 3   | Aggregate Grants from (during year)  |  |  |  |  |  |
| 1   | Aggregate value at end of year   |  |  |  |  |  |
| 5   | Did the organization inform all donors and donor advifunds are the organization's property, subject to the   | _  | oradvised <b>Yes No</b>  |  |  |  |
| 5   | Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben  |  | may be   |  |  |  |
| Da  | rt II Conservation Easements. Complete   | if the organization answered "Ves" to  |  |  |  |  |
| 1   | Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat  | rganization (check all that apply)<br>on or pleasure) Preservation of an<br>Preservation of ce | historically importantly land area<br>rtified historic structure |  |  |  |
| 2   | Complete lines 2a-2d if the organization held a quali<br>on the last day of the tax year   | fied conservation contribution in the form   | Held at the End of the Year                                      |  |  |  |
| а   | Total number of conservation easements   |  | 2a   |  |  |  |
| b   | Total acreage restricted by conservation easement  | s  | 2b   |  |  |  |
| c   | Number of conservation easements on a certified hi   | storic structure included in (a)   | 2c   |  |  |  |
| d   | Number of conservation easements included in (c) a   | • •  | 2d   |  |  |  |
| 3   | Number of conservation easements modified, transfe   | •  | d by the organization during                                     |  |  |  |
|     | the taxable year 🕨   | ,  |  |  |  |  |
| 1   | Number of states where property subject to conserva  | ation easement is located ►  |  |  |  |  |
| 5   | Does the organization have a written policy regarding enforcement of the conservation easements it holds?  | •  | ations, and Yes No   |  |  |  |
| 5   | Staff or volunteer hours devoted to monitoring, inspe  |  |  |  |  |  |
| 7   | A mount of expenses incurred in monitoring, inspecti   | ng, and enforcing easements during the ye  | ear 🕨 \$   |  |  |  |
| 3   | Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?   | (d) above satisfy the requirements of sec  | tion Yes No  |  |  |  |
| •   | In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and<br>balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes<br>the organization's accounting for conservation easements |  |  |  |  |  |
| ar  | Complete if the organization answered '  | 'Yes" to Form 990, Part IV, line 8.  |  |  |  |  |
| la  | If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin   | for public exhibition, education or research   | ch in furtherance of public service,                             |  |  |  |
| b   | If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items  | public exhibition, education, or research ii   | •  |  |  |  |
|     | (i) Revenues included in Form 990, Part VIII, line 1   |  | <b>▶</b> -\$   |  |  |  |
|     | (ii) Assets included in Form 990, Part X   |  | <b>►</b> \$  |  |  |  |
| 2   | If the organization received or held works of art, histofollowing amounts required to be reported under SFA  | · · · · · · · · · · · · · · · · · · ·  | or financial gain, provide the                                   |  |  |  |
| а   | Revenues included in Form 990, Part VIII, line 1   |  | <b>▶</b> \$  |  |  |  |
| b   | Assets included in Form 990 Part Y   |  | <b>b</b>   |  |  |  |

| Part         |              | Organizations Maintaining Co   | llections of Art,          | His         | <u>tori</u> | <u>cal Tre</u>         | eası   | ires, or Ot                             | her       | <u>Similar</u>       | Asse     | ts (co           | ntınued)   |
|--------------|--------------|--|----------------------------|-------------|-------------|------------------------|--------|---|-----------|----------------------|----------|------------------|------------|
| 3            |              | g the organization's accession and othe<br>s (check all that apply)                        | r records, check any       | of th       | e foll      | owing th               | nat ar | re a sıgnıfıcan                         | tuse      | of its co            | llection | ı                |            |
| а            | $\Gamma$     | Public exhibition  |                            | d           | Γ           | Loan o                 | rexc   | hange progra                            | ms        |                      |          |                  |            |
| b            | $\Gamma$     | Scholarly research   |                            | e           | $\Gamma$    | Other                  |        |   |           |                      |          |                  |            |
| С            | $\Gamma$     | Preservation for future generations  |                            |             |             |                        |        |   |           |                      |          |                  |            |
| 4            | Prov<br>Part | ide a description of the organization's co   | ollections and explair     | n how       | v they      | further                | the    | organızatıon's                          | exer      | mpt purpo            | se in    |                  |            |
| 5            |              | ng the year, did the organization solicit of<br>ts to be sold to raise funds rather than t |                            |             |             |                        |        |   | sımıla    | ar                   | Г        | Yes              | ┌ No       |
| Par          | t IV         | Trust, Escrow and Custodial an are IV, line 9, or reported an ar                           |                            |             |             |                        |        | anızatıon an                            | swer      | ed "Yes              | " to Fo  | orm 99           | 90,        |
| 1a           |              | e organization an agent, trustee, custoo<br>ded on Form 990, Part X?                       | lian or other intermed     | lary        | for c       | ontribut               | ions   | or other asse                           | ts no     | t                    | Γ        | Yes              | ┌ No       |
| b            | If"Y         | es," explain why in Part XIV and comple  | ete the following table    | 1           |             |                        |        |   |           |                      |          |                  |            |
|              |              |  |                            |             |             |                        |        |   |           |                      | A mou    | nt               |            |
| С            | Begi         | nning balance  |                            |             |             |                        |        | 1                                       | С         |                      |          |                  |            |
| d            | Add          | itions during the year   |                            |             |             |                        |        | 1                                       | d         |                      |          |                  |            |
| е            | Dıst         | ributions during the year  |                            |             |             |                        |        | 1                                       | e         |                      |          |                  |            |
| f            | End          | ng balance   |                            |             |             |                        |        | 1                                       | f         |                      |          |                  |            |
| 2a           | Dıd t        | he organization include an amount on Fe  | orm 990, Part X, line      | 21?         |             |                        |        |   |           |                      | Γ        | Yes              | ┌ No       |
| b            | If "Y        | es," explain the arrangement in Part XI\   |                            |             |             |                        |        |   |           |                      |          |                  |            |
| Pai          | rt V         | Endowment Funds. Complete  |                            |             |             |                        |        |   |           |                      |          | NE sur Va        | ara Da ale |
| 1a           | Regi         | nning of year balance  | (a)Current Year<br>221,297 | (D)         | Prior Y     | ear                    | (C)IW  | vo rears back                           | (a) i iii | ree Years B          | ack   (e | rour re          | ars back   |
| ь            |              | ributions  | 1,967                      |             |             |                        |        |   |           |                      |          |                  |            |
| c            |              | stment earnings or losses  | -48,518                    |             |             |                        |        |   |           |                      |          |                  |            |
| d            |              | ts or scholarships   | 14,113                     |             |             |                        |        |   |           |                      |          |                  |            |
| e            |              | r expenditures for facilities  |                            |             |             |                        |        |   |           |                      |          |                  |            |
|              | and p        | programs   |                            |             |             |                        |        |   |           |                      |          |                  |            |
| f            | Adm          | inistrative expenses   |                            |             |             |                        |        |   |           |                      |          |                  |            |
| g            |              | of year balance  | 160,633                    |             |             |                        |        |   |           |                      |          |                  |            |
| 2            | Prov         | ide the estimated percentage of the yea  |                            | ;           |             |                        |        |   |           |                      |          |                  |            |
| а            | Boar         | d designated or quasi-endowment 🕨  | 23 %                       |             |             |                        |        |   |           |                      |          |                  |            |
| b            | Perm         | nanent endowment 🕨 41 %  |                            |             |             |                        |        |   |           |                      |          |                  |            |
| c            | Term         | n endowment 🕨 36 %   |                            |             |             |                        |        |   |           |                      |          |                  |            |
| 3a           |              | there endowment funds not in the posse nization by   | ssion of the organizat     | ion t       | hat a       | re held                | and a  | administered :                          | for th    | е                    |          |                  |            |
|              |              | nrelated organizations   |                            |             |             |                        |        |   |           | [                    | 3a(i)    | Yes              | No<br>No   |
|              |              | elated organizations   |                            |             |             |                        |        |   |           |                      | 3a(ii)   |                  | Νο         |
| b            | If"Y         | es" to 3a(ıı), are the related organızatıo   | ns listed as required      | on S        | ched        | ule R?                 |        |   |           |                      | 3b       |                  |            |
| 4            |              | cribe in Part XIV the intended uses of th  | e organization's endo      | wme         | nt fu       | nds                    |        |   |           |                      |          |                  |            |
| Par          | t VI         | Investments—Land, Buildings  | s, and Equipmen            | <b>t.</b> S | ee F        | orm 99                 | 0, P   | art X, lıne 1                           | 0         |                      |          |                  |            |
|              |              | Description of investment  |                            |             |             | Cost or ot<br>(Investm |        | ( <b>b</b> )Cost or other basis (other) | er (      | ( <b>c)</b> Deprecia | ation    | ( <b>d</b> ) Boo | k value    |
| <b>1</b> a l | and          |  |                            |             |             |                        | 0      | 10,524,0                                | 00        |                      |          | 10               | ,524,000   |
| b E          | Buildii      | ngs  |                            |             |             |                        | 0      | 195,362,0                               | 00        | 78,79                | 7,437    | 116              | 5,564,563  |
| <b>c</b> l   | ease         | hold improvements  |                            |             |             |                        |        |   |           |                      |          |                  |            |
| d E          | Equip        | ment   |                            | •           |             |                        | 0      | 20,192,0                                | 00        | 8,14                 | 1,254    | 12               | 2,047,746  |
| <b>e</b> (   | Other        |  | <u> </u>                   |             | <u></u>     |                        | 0      | 10,270,0                                | 00        | 4,14                 | 2,309    |                  | 5,127,691  |

| Part VII Investments—Other Securities. See  | Form 990, Part X, line 12. |  |
|---|----------------------------|--|
| <ul><li>(a) Description of security or cateory<br/>(including name of security)</li></ul> | ( <b>b)</b> Book value     | <b>(c)</b> Method of valuation<br>Cost or end-of-year market value |
| Financial derivatives and other financial products  |                            | ·  |
| Closely-held equity interests   |                            |  |
| Other ALTERNATIVE INVESTMENTS   | 31,519,000                 | F  |
| Other PARTIES   | 12,165,000                 | F  |
| Other POOLED INCOME FUNDS   | 5,626,000                  | F  |
| Other BOND PROCEEDS HELD BY TRUSTEES  | 4,891,000                  | F  |
|   |                            |  |
|   |                            |  |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 12 )                       | 54,201,000                 |  |
| Part VIII Investments—Program Related. Se   | •                          |  |
|   |                            | (c) Method of valuation  |
| (a) Description of investment type  | (b) Book value             | Cost or end-of-year market value                                   |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 13)                        | 15                         |  |
| Part IX Other Assets. See Form 990, Part X, II  (a) Descri                                |                            | (b) Book value   |
| ACCRUED INTEREST RECEIVABLE   | F - 1 - 1 - 1              | 212,000  |
| A/R FROM RELATED ENTITIES   |                            | 200,000  |
| OTHER ASSETS  |                            | 153,000  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
|   |                            |  |
| <b>Total.</b> (Column (b) should equal Form 990, Part X, col.(B) line                     | 15.)                       |  |
| Part X Other Liabilities. See Form 990, Part X  | T I                        |  |
| (a) Description of Liability  | (b) A mount                |  |
| Federal Income Taxes  |                            |  |
| STUDENT SECURITY DEPOSITS   | 1,793,000                  |  |
| ANNUITY LIABILITY   | 1,419,000                  |  |
| ASSET RETIREMENT OBLIGATIONS  | 4,910,000                  |  |
| POSTRETIREMENT BENEFITS   | 10,933,000                 |  |
| FEDERAL STUDENT LOAN FUNDS  | 2,585,000                  |  |
| OBLIGATIONS UNDER CAPITAL LEASES  | 673,000                    |  |
|   |                            |  |
|   |                            |  |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )                       | 22,313,000                 |  |

| Pai    | rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen | ıts      |                       |
|--------|--|----------|-----------------------|
| 1      | Total revenue (Form 990, Part VIII, column (A), line 12)                         | 1        | 55,516,022            |
| 2      | Total expenses (Form 990, Part IX, column (A), line 25)                          | 2        | 110,440,388           |
| 3      | Excess or (deficit) for the year Subtract line 2 from line 1                     | 3        | -54,924,366           |
| 4      | Net unrealized gains (losses) on investments                                     | 4        | -10,559,000           |
| 5      | Donated services and use of facilities   | 5        |                       |
| 6      | Investment expenses  | 6        |                       |
| 7      | Prior period adjustments   | 7        |                       |
| 8      | Other (Describe in Part XIV)   | 8        | -5,609,829            |
| 9      | Total adjustments (net) Add lines 4 - 8  | 9        | -16,168,829           |
| 10     | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 | 10       | -71,093,195           |
| Par    | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p  | er R     | eturn                 |
| 1      | Total revenue, gains, and other support per audited financial statements         | 1        | 11,924,000            |
| 2      | A mounts included on line 1 but not on Form 990, Part VIII, line 12              |          |                       |
| а      | Net unrealized gains on investments  |          |                       |
| b      | Donated services and use of facilities   |          |                       |
| c      | Recoveries of prior year grants  |          |                       |
| d      | Other (Describe in Part XIV)   |          |                       |
| e      | Add lines 2a through 2d  | 2e       | -15,913,775           |
| 3      | Subtract line <b>2e</b> from line <b>1</b>                                       | 3        | 27,837,775            |
| 4      | A mounts included on Form 990, Part VIII, line 12, but not on line 1             |          |                       |
| а      | Investment expenses not included on Form 990, Part VIII, line 7b . 4a            |          |                       |
| b      | Other (Describe in Part XIV)   |          |                       |
| c      | Add lines 4a and 4b  | 4c       | 27,678,247            |
| 5      | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)  | 5        | 55,516,022            |
|        | Reconciliation of Expenses per Audited Financial Statements With Expenses        |          |                       |
| 1      | Total expenses and losses per audited financial statements                       | 1        | 83,519,600            |
| 2      | A mounts included on line 1 but not on Form 990, Part IX, line 25                |          |                       |
| a      | Donated services and use of facilities   |          |                       |
| ь      | Prior year adjustments   |          |                       |
| C      | Losses reported on Form 990, Part IX, line 25                                    |          |                       |
| d      | Other (Describe in Part XIV)   | 20       | 010.030               |
| е<br>3 | Subtract line 2e from line 1   | 2e<br>3  | 919,030<br>82,600,570 |
|        | Amounts included on Form 990, Part IX, line 25, but not on line 1:               |          | 82,000,370            |
| 4<br>a | Investment expenses not included on Form 990, Part VIII, line 7b 4a              |          |                       |
| b      |  |          |                       |
| c      | Other (Describe in Part XIV)   | 4c       | 27,839,818            |
| 5      | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 5        | 110,440,388           |
|        | rt XIV Supplemental Information  | <u> </u> | 110,440,388           |
|        |  |          |                       |

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b,

| Ident if ier                   | Return Reference                                      | <b>Explanat ion</b>  |
|--------------------------------|---|--|
| Schedule D, PART XII, Line 2d  | REVENUE ON BOOKS BUT NOT ON RETURN                    | Income from related entities 417,225 Loss on change in fair value of trust, pooled income funds & gift annuities & related distributions (4,880,000) Effect of the adoption of FAS 158 (892,000) (5,354,775) =============   |
| Schedule D, Part XII, Line 4b  | Revenue on Form 990, but not on Financial Statements  | Scholarships and financial aid 27,839,818 Special Event Direct Expenses (160,565) Other (1,006) 27,678,247   |
| Schedule D, Part XIII, Line 2d | Expenses ON BOOKS BUT NOT ON RETURN                   | Expenses from related entities 919,030   |
| Schedule D, Part XIII, Line 4b | Expenses on Form 990, but not on Financial Statements | Scholarships and financial aid 27,839,818  |
| Schedule D, PART XI, Line 8    | Reconciliation of Net assets                          | Effect of Adoption of FAS 158 (892,000) Loss on change in fair value of trust, Pooled Income Funds & gift annuities and related distributions (4,880,000) Sp Event Direct Expenses 160,565 Other 1,606 Total (5,609,829)   |
| SCHEDULE D, Part X             | FIN 48  | FIN 48, Accounting for the Uncertainty in Income Taxes addresses the accounting for uncertainties in income taxes recognized in an organization's financial statements and prescribes a threshold or more-likely-than-not for recognition and de-recognition of tax positions taken or expected to be taken in a tax return FIN 48 also provides related guidance on measurement, classification, interest and penalties, and disclosures There was no significant impact to the University's financial statements as a result of the adoption of FIN 48 The effect of adoption of FIN 48 is not expected to have a material effect on the financial statements of the Drew University |
| Schedule D, PART V, Line 4     | Intended Uses of Endowment Funds                      | The intended use of Drew University endowment funds is principally to accomplish the following. Endowment funds are to be held in perpetuity and to provide for the generation of investment income through strategic investing as approved by the Board of Trustees Investment Committee. This investment income is used to provide support of the university's education mission statement as described on page two, part III of form 990, commensurate with the donor and board specific instructions on how the funds are to be used.  |

OMB No 1545-0047

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

**Schools** 

Name of the organization DREW UNIVERSITY

**Employer identification number** 

22-1487164 YES NO 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes 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? Yes 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 3 Yes PUBLICIZE NON-DISCRIMINATORY POLICY THROUGH RECRUITING MATERIALS SENT STUDENTS Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes **b** Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes **b** Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either 6a or b, please explain using an attached statement 🧈 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05

of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," attach an explanation

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OMB No 1545-0047

Department of the Treasury

(Form 990 or 990-EZ)

SCHEDULE G

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

**Supplemental Information Regarding** 

**Fundraising or Gaming Activities** 

Open to Public

| Internal Revenue Service lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a. |  |                            |                          |  |  | Inspection           |                     |                      |  |            |  |     |  |                                   |
|---|--|----------------------------|--------------------------|--|--|----------------------|---------------------|----------------------|--|------------|--|-----|--|-----------------------------------|
| Name of the organiz<br>DREW UNIVERSIT   |  |                            |                          |  |  | Employer ide         | ntification number  |                      |  |            |  |     |  |                                   |
| DREW UNIVERSIT  | 1  |                            |                          |  |  | 22-1487164           |                     |                      |  |            |  |     |  |                                   |
| Part I Fundr  | aising Act   | t <b>ivities.</b> Complete | e ıf the oı              | rganızat   | ion answered "Yes"                                     | to Form 990, Part IV | ', line 17.         |                      |  |            |  |     |  |                                   |
|   | _  | nization raised funds      | through a                | ny of the  | following activities Che                               |                      |                     |                      |  |            |  |     |  |                                   |
| a Mail solic  |  |                            |                          |  | e  |                      |                     |                      |  |            |  |     |  |                                   |
| <u>-</u>  | Email solicitations <b>f</b> Solicitation of g Phone solicitations <b>g</b> Special fundrais |                            |                          |  |  |                      |                     |                      |  |            |  |     |  |                                   |
|   | solicitations  |                            |                          |  | g , opecial landia.                                    |                      |                     |                      |  |            |  |     |  |                                   |
| •   |  |                            |                          | •  | ividual (including office<br>ction with professional f |                      | Г Yes Г No          |                      |  |            |  |     |  |                                   |
| •   | -  | •                          | •                        |  | rs) pursuant to agreeme<br>I-EZ filers are not requi   |                      |                     |                      |  |            |  |     |  |                                   |
|   |  |                            |                          | (iii) Did<br>fundraiser have<br>custody or<br>control of |  |                      | (v) A mount paid to | (vi) A mount paid to |  |            |  |     |  |                                   |
| (i) Name of in<br>or entity (fund   |  | (ii) Activity              | custody or<br>control of |  |  | control of           |                     | control of           |  | control of |  | 1 ' |  | (iv) Gross receipts from activity |
|   |  |                            | Yes No                   |  |  |                      |                     |                      |  |            |  |     |  |                                   |
|   |  |                            |                          |  |  |                      |                     |                      |  |            |  |     |  |                                   |
|   |  |                            |                          |  |  |                      |                     |                      |  |            |  |     |  |                                   |
|   |  |                            |                          |  |  |                      |                     |                      |  |            |  |     |  |                                   |
|   |  |                            |                          |  |  |                      |                     |                      |  |            |  |     |  |                                   |
|   |  |                            |                          |  |  |                      |                     |                      |  |            |  |     |  |                                   |
|   |  |                            |                          |  |  |                      |                     |                      |  |            |  |     |  |                                   |
|   |  |                            |                          |  |  |                      |                     |                      |  |            |  |     |  |                                   |
| Total   |  |                            |                          | •  |  |                      |                     |                      |  |            |  |     |  |                                   |

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

| Pa        | rt II | Fundraising Events. Com more than \$15,000 on Form             |                                       |   |   |                            | report | :ed   |
|-----------|-------|--|---------------------------------------|---|---|----------------------------|--------|-------|
|           |       |  | (a) Event #1  Homecoming (event type) | (b) Event #2  Far Hills Horse (event type)          | (c) O ther Events  2 (total number)               | (d) Tot<br>(Add col<br>col |        |       |
| \$        | 1     | Gross receipts   | 30,555                                | 8,250   | <del>  ' '                                 </del> |                            | 5!     | 5,116 |
| Revenue   | 2     | Less Charitable contributions                                  | 25,555                                | 7,250   | 6,216   |                            | 39     | 9,021 |
|           | 3     | Gross revenue (line 1 minus line 2)                            | 5,000                                 | 1,000   | 10,095  |                            | 16     | 6,095 |
|           | 4     | Cash Prizes  |                                       |   |   |                            |        |       |
| Ses       | 5     | Non-cash Prizes  |                                       |   |   |                            |        |       |
| Expenses  | 6     | Rent/Facility costs  |                                       |   |   |                            |        |       |
| ă<br>ĸ    | 7     | Other direct expenses  | 123,991                               | 11,611  | 24,963  |                            | 160    | 0,565 |
| Direct    | 8     | Direct expense summary Add lin                                 | _                                     |   |   |                            |        | 0,565 |
|           | 9     | Net income summary Combine III                                 |                                       |   |   |                            |        | 4,470 |
| Par       | t III | <b>Gaming.</b> Complete if the or \$15,000 on Form 990-EZ, lir |                                       | 'Yes" to Form 990, Pa                               | art IV, line 19, or repo                          | rted more                  | e than | 1     |
| Reveitue  |       |  | (a) Bingo                             | (b) Pull tabs/Instant<br>bingo/progressive<br>bingo | (c) O ther gaming                                 | (d) Total<br>col (a) thr   |        |       |
| <u>~</u>  | 1     | Gross revenue  |                                       |   |   |                            |        |       |
| 9         | 2     | Cash prizes  |                                       |   |   |                            |        |       |
| Expenses  | 3     | Non-cash prizes  |                                       |   |   |                            |        |       |
| <u>ស្</u> | 4     | Rent/facility costs  |                                       |   |   |                            |        |       |
| Direct    | 5     | Other direct expenses  |                                       |   |   |                            |        |       |
|           | 6     | Volunteer labor  | ┌ Yes                                 | ┌ Yes%_<br>┌ No                                     | ┌ Yes <u>%</u><br>┌ No                            |                            |        |       |
|           | 7     | Direct expense summary Add line                                | s 2 through 5 ın column (ı            | d)  |   |                            |        |       |
|           | 8     | Net gaming income summary Com                                  | bine lines 1 and 7 in colu            | mn (d)  |   |                            |        |       |
| 9         |       | er the state(s) in which the organiza                          | · · · · · · · · · · · · · · · · · · · |   |   |                            | Yes    | No    |
| a<br>b    |       | he organization licensed to operate<br>No," Explain            | gaming activities in each             | of these states?                                    |   | · 9a                       |        |       |
|           |       |  |                                       |   |   | _                          |        |       |
| 10a<br>b  |       | re any of the organization's gaming l<br>Yes," Explain         | ıcenses revoked, suspen               | ded or terminated during                            | g the tax year?                                   | 10a                        |        |       |
| -         |       | ,  |                                       |   |   | _                          |        |       |
| 11        |       | es the organization operate gaming a                           | activities with nonmembe              | rs?   |   | 11                         |        |       |
| 12        | Ist   | he organization a grantor, beneficia                           | ry or trustee of a trust or           | a member of a partnersh                             | np or other entity                                |                            |        |       |
|           | forn  | ned to administer charitable gaming                            | 7                                     |   |   | 12                         |        |       |

|     |   |     | <br><del></del> |
|-----|---|-----|-----------------|
| 13  | Indicate the percentage of gaming activity operated in  |     |                 |
| а   | The organization's facility   |     |                 |
| b   | An outside facility   |     |                 |
| 14  | Provide the name and address of the person who prepares the organization's gaming/special events books and records  |     |                 |
|     | Name •  |     |                 |
|     | Address •   |     |                 |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming revenue?  | 15a |                 |
| Ь   | If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount of gaming revenue retained by the third party <b>&gt;</b> \$              |     |                 |
| c   | If "Yes," enter name and address  |     |                 |
|     | Name •  |     |                 |
|     | Address 🟲   |     |                 |
| 16  | Gaming manager information  |     |                 |
|     | Name 🟲  |     |                 |
|     | Gaming manager compensation 🕨 \$  |     |                 |
|     | Description of services provided 🟲  |     |                 |
|     | Director/officer Employee Independent contractor  |     |                 |
| 17  | Mandatory distributions   |     |                 |
| а   | Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  | 17a |                 |
| b   | Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲 |     |                 |

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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2008

Schedule I (Form 990) 2008

OMB No 1545-0047

**Grants and Other Assistance to Organizations,** Governments and Individuals in the U.S.

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

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| Name of the organization   |  |  |                              |   |   | Employer identif                       | ication number                        |
|--|--|--|------------------------------|---|---|--|---------------------------------------|
| DREW UNIVERSITY  |  |  |                              |   |   | 22-1487164                             |                                       |
| Part I General Inform  | nation on Gra                            | nts and Assistance                             |                              |   |   | •                                      |                                       |
| Does the organization ma<br>the selection criteria used     Describe in Part IV the organization | d to award the gra<br>rganızatıon's proc | nts or assistance?<br>edures for monitoring th | e use of grant funds in t    | he United States                          |   |  |                                       |
| Form 990, Part I<br>Part IV and Scho   | V, line 21 for a<br>edule I-1 if addi    | ny recipient that rece<br>tional space is      | eived more than \$5,0        | 000. Check this box                       | tes. Complete if the oil if no one recipient rece           | eived more than \$5,                   |                                       |
| 1(a) Name and address of organization or government  | <b>(b)</b> EIN                           | (c) IRC section<br>if applicable               | (d) A mount of cash<br>grant | (e) A mount of non-<br>cash<br>assistance | (f) Method of valuation<br>(book, FMV, appraisal,<br>other) | (g) Description of non-cash assistance | (h) Purpose of grant<br>or assistance |
|  |  |  |                              |   |   |  |                                       |
|  |  |  |                              |   |   |  |                                       |
|  |  |  |                              |   |   |  |                                       |
|  |  |  |                              |   |   |  |                                       |
|  |  |  |                              |   |   |  |                                       |
|  |  |  |                              |   |   |  |                                       |
|  |  |  |                              |   |   |  |                                       |
|  |  |  |                              |   |   |  |                                       |
|  |  |  |                              |   |   |  |                                       |
|  |  |  |                              |   |   |  |                                       |
| 2 Enter total number of seconganizations   |  |  |                              |   | •   |  |                                       |
| 3 Enter total number of other  |  |  |                              |   |   |  | <u> </u>                              |

Cat No 50055P

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

| (a)Type of grant or assistance | <b>(b)</b> Number of recipients | (c)A mount of<br>cash grant | (d)A mount of<br>non-cash assistance | (e) Method of valuation<br>(book, FMV, appraisal,<br>other) | (f)Description of non-cash assistance |
|--------------------------------|---------------------------------|-----------------------------|--------------------------------------|---|---------------------------------------|
| SCHOLARSHIP & FINANCIAL AID    |                                 | 23,576,946                  |                                      |   |                                       |
| ENDOWED SCHOLARSHIPS           |                                 | 4,234,942                   |                                      |   |                                       |
| OUTSTANDING SCHOLARSHIP        |                                 | 23,883                      |                                      |   |                                       |
| MICKEL SCHOLARSHIP             |                                 | 1,000                       |                                      |   |                                       |
| GRAYBEAL SCHOLARSHIP           |                                 | 500                         |                                      |   |                                       |
| VAN HOUTEN SCHOLARSHIP         |                                 | 2,547                       |                                      |   |                                       |
|                                |                                 |                             |                                      |   |                                       |

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

See Additional Data Table

| Ident if ier               | Return Reference | Explanation  |
|----------------------------|------------------|--|
| Schedule I Part IV, Line 2 |                  | For the period July 1, 2008 through June 30, 2009, Drew University granted funds to students in the form or scholarships, fellowships, student loans as well as other financial aid. Financial aid is granted to students based on eligibility guidelines as defined by the Federal Department of Education as well as the State of New Jersey. If a student is not eligible to receive federal or state based financial aid, the aid will not be applied to the student's account. In addition, Drew University grants funds to students in the form of institutional aid based on merit and need criteria. |
|                            |                  |  |
|                            |                  |  |
|                            |                  |  |
|                            |                  |  |
|                            |                  |  |
|                            |                  |  |
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|                            |                  |  |

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OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury

## **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** DREW UNIVERSITY 22-1487164

| Pa | rt I Questions Regarding Compensation  | on   |    |     |    |
|----|--|--|----|-----|----|
|    |  |  |    | Yes | Νo |
| 1a |  | rovided any of the following to or for a person listed in Form<br>II to provide any relevant information regarding these items |    |     |    |
|    | First class or charter travel  | ✓ Housing allowance or residence for personal use  |    |     |    |
|    | Travel for companions  | Payments for business use of personal residence  |    |     |    |
|    | Tax idemnification and gross-up payments   | Health or social club dues or initiation fees  |    |     |    |
|    | Discretionary spending account   | Personal services (e.g., maid, chauffeur, chef)  |    |     |    |
| b  | If line 1a is checked, did the organization follow a v<br>provision of all the expenses described above? If "    | written policy regarding payment or reimbursement or<br>'No," complete Part III to explain                                     | 1b | Yes |    |
| 2  | Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv         | reimbursing or allowing expenses incurred by all ve Director, regarding the items checked in line 1a?                          | 2  | Yes |    |
| 3  | Indicate which, if any, of the following the organizatorganization's CEO/Executive Director Check all            | ·  |    |     |    |
|    | ✓ Compensation committee   | Written employment contract  |    |     |    |
|    | Independent compensation consultant  | Compensation survey or study   |    |     |    |
|    | Form 990 of other organizations  | Approval by the board or compensation committee  |    |     |    |
| 4  | During the year, did any person listed in Form 990   | , Part VII, Section A , line 1a  |    |     |    |
| а  | Receive a severance payment or change of control   | payment?   | 4a |     | Νo |
| b  | Participate in, or receive payment from, a supplement  | ental nonqualified retirement plan?  | 4b |     | Νo |
| c  | Participate in, or receive payment from, an equity-  | based compensation arrangement?  | 4c |     | Νo |
|    | If "Yes" to any of lines 4a-c, list the persons and p  | provide the applicable amounts for each item in Part III   |    |     |    |
|    | 501(c)(3) and 501(c)(4) organizations only must c  | complete lines 5-8.  |    |     |    |
| 5  | For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of                   | , line 1a, did the organization pay or accrue any  |    |     |    |
| а  | The organization?  |  | 5a |     | Νo |
| Ь  | Any related organization?  |  | 5b |     | Νo |
|    | If "Yes," to line 5a or 5b, describe in Part III   |  |    |     |    |
| 6  | For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of               | , line 1a, did the organization pay or accrue any  |    |     |    |
| а  | The organization?  |  | 6a |     | No |
| b  | Any related organization?  |  | 6b |     | No |
|    | If "Yes," to line 6a or 6b, describe in Part III   |  |    |     |    |
| 7  | For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"           | , line 1a, did the organization provide any non-fixed<br>describe in Part III  | 7  |     | No |
| 8  | Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III | paid or accured pursuant to a contract that was in Regs section 53 4958-4(a)(3)? If "Yes," describe                            | 8  |     | No |

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

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| (A) Name               | J           | (B) Breakdown of         | f W-2 and/or 1099-MIS                     | SC compensation             | (C) Deferred | (D) Nontaxable | (E) Total of columns | (F) Compensation                             |
|------------------------|-------------|--------------------------|---|-----------------------------|--------------|----------------|----------------------|--|
|                        |             | (i) Base<br>compensation | (ii) Bonus &<br>incentive<br>compensation | (iii) Other<br>compensation | compensation | benefits       | (B)(ı)-(D)           | reported in prior Form<br>990 or Form 990-EZ |
| ROBERT WEISBUCH        | (1)<br>(11) | 340,633<br>0             | O<br>C                                    | 16,800                      | 65,000<br>0  | 52,514<br>0    | 474,947              | 175,89                                       |
| PAMELA GUNTER<br>SMITH | (ı)<br>(ıı) | 182,591<br>0             | 0<br>C                                    | 8,800                       | 19,000<br>0  | 65,099         | 275,490              | 93,919                                       |
| HOWARD BUXBAUM         | (ı)<br>(ıı) | 178,458<br>0             | O<br>C                                    | 21,500                      | 18,500<br>0  | 19,499         | 237,957              | 88,696                                       |
| MARGARET HOWARD        | (ı)<br>(ıı) | 201,449<br>0             | 0   | 20,503                      | 20,503<br>0  |                | 268,996              | 108,457                                      |
| RONALD ROSS            | (ı)<br>(ıı) | 133,173<br>0             | 0   | 24,319                      | 16,037<br>0  | 12,563         | 186,092              | 28,030                                       |
| MAXINE BEACH           | (ı)<br>(ıı) |                          | 0   | 28,993                      | 19,387<br>0  | 11,327         | 224,056              | 93,894                                       |
| MARY BETH CAREY        | (ı)<br>(ıı) |                          | O<br>C                                    | 6,925                       | 15,250<br>0  | 8,021          | 230,575              | 102,068                                      |
| ANDREW<br>SCRIMGEOUR   | (ı)<br>(ıı) |                          | 0   | 11,987                      | 12,688<br>0  | 15,625         | 151,563              | 60,188                                       |
| DONNA FRITHSEN         | (ı)<br>(ıı) | 213,479<br>0             | 0   | 9,300                       | 20,000       | 6,590<br>0     | 249,369              | 108,991                                      |
| PAOLO CUCCHI           | (ı)<br>(ıı) | 188,325<br>0             | O<br>C                                    | 8,182                       | 17,648<br>0  | 1              | 238,595              | 88,959                                       |
| CHRISTOPHR VAN<br>WYK  | (ı)<br>(ıı) |                          | O<br>C                                    | 15,428                      | 16,128<br>0  | 29,544         | 199,794              | 75,72  |
| JOSEPH KELLY           | (ı)<br>(ıı) | 146,658<br>0             | O<br>C                                    | 7,364                       | 16,128<br>0  | 27,472         | 197,622              | 75,67  |
| CHRISTINE KINEALY      | (ı)<br>(ıı) | 144,870<br>0             | 0   | 6,383                       | 14,633<br>0  | 11,731         | 177,617              |  |
| ALAN CANDIOTTI         | (ı)<br>(ıı) |                          | 0<br>C                                    | 6,506                       | 14,413<br>0  | 1              | 164,358              | 68,67  |
|                        | (i)<br>(ii) |                          |   |                             |              |                |                      |  |

#### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

| Ident if ier    | Return<br>Reference                                   | Explanation   |
|-----------------|---|---|
|                 | University<br>Housing and<br>Automobile<br>Allowances | University Housing and Automobile Allowances Description Housing Allowance As part of the following employees Condition of Employment, where the duties and responsibilities of these employees require their services on a twenty four hour basis throughout the year. The university provides campus housing to them to accomplish their required and continuous duties and responsibilities on campus. The following employees are provided campus housing as a condition of their employment and therefore not included in taxable income. Pamela Gunter-Smith Jonathan Levin The following employee is provided campus housing but is not a condition of their employment therefore it is included in taxable income. Mary Beth Carey Automobile Allowance. The automobile allowance for the following employees is part of their compensation agreement and is reflected in as part of taxable income and included as taxable income on their form w-2, box 1,3 and 5. Robert Weisbuch Margaret Howard Mary Beth Carey. |
| SCH J, Part II, | Compensation<br>reported in<br>column (F)             | Compensation reported in column (F) above as compensation that also appeared on a prior year's Form 990 include the 6 months of regular compensation paid from January 1, 2008 - June 30, 2008 Those amounts were included on the Form 990 for the June 30, 2008 tax year. The revised Form 990 requires reporting compensation on a calendar year basis, instead of a fiscal year basis on the old Form 990. Accordingly, Drew University has identified the 6 months of compensation in column (F) to prevent double counting these amounts   |
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(1)

(11)

ALAN CANDIOTTI

133,979

68,670

9,460

164,358

Software ID: Software Version:

**EIN:** 22-1487164

0

Name: DREW UNIVERSITY

| (A) Name               |             | (B) Breakdown of         | W-2 and/or 1099-MIS                       | C compensation              | (C) Deferred | (D) Nontaxable | (E) Total of columns | (F) Compensation reported in prior Form |
|------------------------|-------------|--------------------------|---|-----------------------------|--------------|----------------|----------------------|---|
|                        | · ·         | (i) Base<br>Compensation | (ii) Bonus &<br>incentive<br>compensation | (iii) Other<br>compensation | compensation | benefits       | (B)(ı)-(D)           | 990 or Form 990-EZ                      |
| ROBERT WEISBUCH        | (ı)<br>(ıı) |                          | 0   | 16,800<br>0                 | 65,000<br>0  | 52,514<br>0    | 474,947<br>0         | 175,891<br>0                            |
| PAMELA GUNTER<br>SMITH | (ı)<br>(ıı) |                          | 0 0                                       | 8,800<br>0                  | 19,000<br>0  | 65,099<br>0    | 275,490<br>0         | 93,919<br>0                             |
| HOWARD BUXBAUM         | (ı)<br>(ıı) | 178,458<br>0             | 0   | 21,500<br>0                 | 18,500<br>0  | 19,499         | 237,957              | 88,696<br>0                             |
| MARGARET HOWARD        | (ı)<br>(ıı) |                          | 0 0                                       | 20,503<br>0                 | 20,503<br>0  | 26,541<br>0    | 268,996<br>0         | 108,457<br>0                            |
| RONALD ROSS            | (ı)<br>(ıı) |                          | 0   | 24,319<br>0                 | 16,037<br>0  | 12,563<br>0    | 186,092              | 28,030                                  |
| MAXINE BEACH           | (ı)<br>(ıı) |                          | 0 0                                       | 28,993<br>0                 | 19,387<br>0  | 11,327<br>0    | 224,056              | 93,894<br>0                             |
| MARY BETH CAREY        | (ı)<br>(ıı) |                          | 0 0                                       | 6,925<br>0                  | 15,250<br>0  | 8,021<br>0     | 230,575              | 102,068                                 |
| ANDREW<br>SCRIMGEOUR   | (ı)<br>(ıı) |                          | 0 0                                       | 11,987<br>0                 | 12,688<br>0  | 15,625<br>0    | 151,563<br>0         | 60,188<br>0                             |
| DONNA FRITHSEN         | (ı)<br>(ıı) |                          | 0   | 9,300<br>0                  | 20,000       | 6,590<br>0     | 249,369              | 108,991                                 |
| PAOLO CUCCHI           | (ı)<br>(ıı) |                          | 0   | 8,182<br>0                  | 17,648<br>0  | 24,440         | 238,595              | 88,959<br>0                             |
| CHRISTOPHR VAN<br>WYK  | (ı)<br>(ıı) |                          | 0   | 15,428<br>0                 | 16,128<br>0  | 29,544<br>0    | 199,794<br>0         | 75,721<br>0                             |
| JOSEPH KELLY           | (ı)<br>(ıı) |                          | 0   | 7,364<br>0                  | 16,128<br>0  | 27,472<br>0    | 197,622<br>0         | 75,671<br>0                             |
| CHRISTINE KINEALY      | (I)<br>(II) |                          | 0   | 6,383                       | 14,633       | 11,731         | 177,617<br>0         | 0                                       |

6,506

14,413

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

**Supplemental Information on Tax Exempt Bonds** 

OMB No 1545-0047

2008

DLN: 93493137039460

Open to Public Inspection

Schedule K (Form 990) 2008

Department of the Treasury
Internal Revenue Service
Name of the organization

**DREW UNIVERSITY** 

Schedule K

(Form 990)

To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.

Inspection

Employer identification number

Cat No 50193E

22-1487164

| Pa        | art I Bond Issues (Required  | for 2008)              |                      |          |        |           |         |                                       |                            |     |                |       |     |                      |
|-----------|--|------------------------|----------------------|----------|--------|-----------|---------|---------------------------------------|----------------------------|-----|----------------|-------|-----|----------------------|
|           | (a) Issuer Name  | (b) Issuer EIN         | (c) CUSIP #          | (d) Date | Issued | (e) Issue | Price   | (f) Des                               | (f) Description of Purpose |     | <b>(g)</b> Det | eased | Beh | On<br>alf of<br>suer |
|           |  |                        |                      |          |        |           |         |                                       |                            |     | Yes            | No    | Yes | No                   |
| A         | New Jersey Educational Facilities<br>Authority                         | 22-1829511             | 64605LDZ8            | 05-29-   | 2003   | 22,8      | 872,229 | 2003 Series<br>MAINTENA               |                            | RED |                | x     |     | ×                    |
| В         | New Jersey Educational Facilities<br>Authority                         | 22-1829511             | 646065CWO            | 04-12-   | 2007   | 30,!      | 557,236 | 2007 Series<br>HOUSING fa             |                            | NT  |                | х     |     | х                    |
| С         | New Jersey Educational Facilities<br>Authority                         | 22-1829511             | 646065CEO            | 04-04-   | 2008   | 11,       | 353,764 | 2008 Series B REVENUE<br>REFUNDING    |                            |     | Х              |       | х   |                      |
| D         | New Jersey Educational Facilities<br>Authority                         | 22-1829511             |                      | 06-26-   | 2008   | 12,0      | 000,000 | 2008 Series I DEFERRED<br>MAINTENANCE |                            |     | Х              |       | Х   |                      |
| Pa        | rt III Proceeds (Optional for  | 2008)                  |                      | -        |        | _         |         |                                       |                            |     |                |       |     |                      |
| 1         | 1 Total Proceeds of Issue  |                        |                      |          | 4      | E         | 3       |                                       |                            | D   |                |       | E   |                      |
| <u> -</u> | Gross Proceeds in Reserve Funds  |                        |                      |          |        |           |         |                                       |                            |     |                |       |     |                      |
| 3         | Proceeds in Refunding or Defeasai                                      |                        |                      |          |        |           |         |                                       |                            |     |                |       |     |                      |
| 4         | · · · · · · · · · · · · · · · · · · ·                                  |                        |                      |          |        |           |         |                                       |                            |     |                |       |     |                      |
|           | Issuance Costs from Proceeds   |                        |                      |          |        |           |         |                                       |                            |     |                |       |     |                      |
| 6         | Working Capital Expenditures from                                      | n Proceeds             |                      |          |        |           |         |                                       |                            |     |                |       |     |                      |
| 7         | Capital Expenditures from Proceed                                      | ds                     |                      |          |        |           |         |                                       |                            |     |                |       |     |                      |
| 8         | Year of Substantial Completion   |                        |                      |          |        | <u> </u>  |         |                                       |                            |     |                |       |     |                      |
| -         |  |                        |                      | Yes      | No     | Yes       | No      | Yes                                   | No                         | Yes | No             | Yes   | s   | No                   |
| 9         | Were the bonds issued as part of a                                     | a current refunding is | sue?                 |          |        |           |         |                                       |                            |     |                |       |     |                      |
| 10        | 10 Were the bonds issued as part of an advance refunding issue?        |                        |                      |          |        |           |         |                                       |                            |     |                |       |     |                      |
| 11        | 11 Has the final allocation of proceeds been made?                     |                        |                      |          |        |           |         |                                       |                            |     |                |       |     |                      |
| 12        | Does the organization maintain ad final allocation of proceeds?        | equate books and red   | cords to support the |          |        |           |         |                                       |                            |     |                |       |     |                      |
| Pa        | rt IIII Private Business Use   | (Optional for 2008     | ")                   |          |        |           |         |                                       |                            |     |                |       |     |                      |
|           |  |                        |                      | <u></u>  |        | E 14      |         |                                       |                            | D   |                |       | E   |                      |
| 1         | Was the organization a partner in a which owned property financed by   |                        | ember of an LLC,     | Yes      | No     | Yes       | No      | Yes                                   | No                         | Yes | No             | Yes   | 5   | No                   |
| 2         | Are there any lease arrangements<br>which may result in private busine | with respect to the f  | inanced property     |          |        |           |         |                                       |                            |     |                |       |     |                      |

| Schedule K | (Form 990) 20 | 800        |             |
|------------|---------------|------------|-------------|
| Part III   | Private Bu    | siness Use | (Continued) |

|     |  | A   |    | E   | 3  | (   | С        | I   | D        | I   | E  |
|-----|--|-----|----|-----|----|-----|----------|-----|----------|-----|----|
|     |  | Yes | No | Yes | No | Yes | No       | Yes | No       | Yes | No |
| 3a  | Are there any management or service contracts with respect to the financed property which may result in private business use?  |     |    |     |    |     |          |     |          |     |    |
| 3b  | Are there any research agreements with respect to the financed property which may result in private business use?  |     |    |     |    |     |          |     |          |     |    |
| 3с  | Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?   |     |    |     |    |     |          |     |          |     |    |
| 4   | Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government  |     |    |     |    |     |          |     |          |     |    |
| 5   | Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government |     |    |     |    |     |          |     |          |     |    |
| 6   | Total of lines 4 and 5   |     |    |     |    |     |          |     |          |     |    |
| 7   | Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?  |     |    |     |    |     |          |     |          |     |    |
| Pai | rt IV Arbitrage (Optional for 2008)  |     |    |     |    |     |          |     |          |     |    |
|     |  | ı   | Α  | E   | 3  | (   | <u>c</u> | ı   | <u> </u> | ı   | Ε  |
|     |  | Yes | No | Yes | No | Yes | No       | Yes | No       | Yes | No |
| 1   | Has a Form 8038-T been filed wth respect to the bond issue?  |     |    |     |    |     |          |     |          |     |    |
| 2   | Is the bond issue a variable rate issue?   |     |    |     |    |     |          |     |          |     |    |
| 3a  | Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?  |     |    |     |    |     |          |     |          |     |    |
| ь   | Name of provider   |     |    |     |    |     |          |     |          |     |    |
| С   | Term of hedge  |     |    |     |    |     |          |     |          |     |    |
| 4a  | Were gross proceeds invested in a GIC?   |     |    |     |    |     |          |     |          |     |    |
| ь   | Name of provider   |     |    |     |    |     |          |     |          |     |    |
| С   | Term of GIC  |     |    |     |    |     |          |     |          |     |    |
| d   | Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?  |     |    |     |    |     |          |     |          |     |    |
| 5   |  |     |    |     |    |     |          |     |          |     |    |
|     | Were any gross proceeds invested beyond an available temporary period?   |     |    |     |    |     |          |     |          |     |    |

DLN: 93493137039460

OMB No 1545-0047

Open to Public Inspection

### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

Transactions with Interested Persons

Name of the organization **Employer identification number** DREW UNIVERSITY 22-1487164 Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person 1 (b) Description of transaction Yes 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . . . . Loans to and/or From Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) (b) Loan to or (e) In Approved (g)Written (a) Name of interested person and from the (c)Original principal default? by board or agreement? (d)Balance due organization? purpose amount committee? Τо From Yes No Yes No Yes No Part III Grants or Assistance Benefitting Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27. (b)Relationship between interested person (a) Name of interested person (c)A mount of grant or type of assistance and the organization

#### **Business Transactions Involving Interested Persons**

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

| (a) Name of interested person | (b) Relationship<br>between interested<br>person and the | (c) A mount of<br>transaction | (d) Description of transaction | (e) Sharing of<br>organization's<br>revenues? |    |
|-------------------------------|--|-------------------------------|--------------------------------|---|----|
|                               | organization   |                               |                                | Yes   | No |
| William Huff                  | Trustee  | 160,611                       | Investment Fees                |   | No |
| Jeffrey Noss                  | Trustee  | 63,836                        | Investment Fees                |   | Νο |
|                               |  |                               |                                |   |    |
|                               |  |                               |                                |   |    |
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DLN: 93493137039460

OMB No 1545-0047

Inspection

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## **SCHEDULE M** (Form 990)

Department of the Treasury Internal Revenue Service

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

**Non-Cash Contributions** 

Name of the organization DREW UNIVERSITY

Employer identification number

22-1487164

| Pa  | TT Types of Property  |                    |                                |  |                                       |        |   |    |
|-----|---|--------------------|--------------------------------|--|---------------------------------------|--------|---|----|
|     |   | (a)<br>Check<br>ıf | (b)<br>Number of Contributions | (c)<br>Revenues reported on<br>Form 990, Part VIII, line | ( <b>d</b> )<br>Method of de<br>reven | etermı | nıng  |    |
|     |   | applicable         |                                | 1 g  |                                       |        |   |    |
| 1   | Art—Works of art  |                    |                                |  |                                       |        |   |    |
| 2   | Art—Historical treasures .  |                    |                                |  |                                       |        |   |    |
| 3   | Art—Fractional interests  |                    |                                |  |                                       |        |   |    |
| 4   | Books and publications  |                    |                                |  |                                       |        |   |    |
| 5   | Clothing and household  |                    |                                |  |                                       |        |   |    |
|     | goods   |                    |                                |  |                                       |        |   |    |
| 6   | Cars and other vehicles   |                    |                                |  |                                       |        |   |    |
| 7   | '   |                    |                                |  |                                       |        |   |    |
|     | Intellectual property   |                    |                                |  |                                       |        |   |    |
|     | Securities—Publicly traded .  | X                  | 9                              | 187,743  | FMV                                   |        |   |    |
|     | Securities—Closely held stock .   |                    |                                |  |                                       |        |   |    |
|     | Securities—Partnership, LLC, or trust interests                               |                    |                                |  |                                       |        |   |    |
|     | Securities—Miscellaneous  |                    |                                |  |                                       |        |   |    |
| 13  | Qualified conservation contribution (historic structures)                     |                    |                                |  |                                       |        |   |    |
| 14  | Q ualified conservation   |                    |                                |  |                                       |        |   |    |
|     | contribution (other)  |                    |                                |  |                                       |        |   |    |
| 15  | Real estate—Residential .   | Х                  | 1                              | 525,000  | FMV                                   |        |   |    |
| 16  | Real estate—Commercial  |                    |                                |  |                                       |        |   |    |
| 17  | Real estate—Other   |                    |                                |  |                                       |        |   |    |
| 18  | Collectibles  |                    |                                |  |                                       |        |   |    |
| 19  | Food inventory  |                    |                                |  |                                       |        |   |    |
| 20  | Drugs and medical supplies .  |                    |                                |  |                                       |        |   |    |
| 21  | Taxıdermy   |                    |                                |  |                                       |        |   |    |
| 22  | Historical artifacts  |                    |                                |  |                                       |        |   |    |
| 23  | Scientific specimens  |                    |                                |  |                                       |        |   |    |
| 24  | Archeological artifacts   |                    |                                |  |                                       |        |   |    |
| 25  | Other (describe)  |                    |                                |  |                                       |        |   |    |
| 26  | Other (describe)  |                    |                                |  |                                       |        |   |    |
| 27  | Other (describe)  |                    |                                |  |                                       |        |   |    |
| 28  | Other (describe)  |                    |                                |  |                                       |        |   |    |
| 29  | Number of Forms 8283 received which the organization complete Acknowledgement |                    |                                | ar for contributions for                                 | 29                                    |        |   |    |
|     | -   |                    |                                |  |                                       | 1      | Yes   | No |
| 30a | During the year, did the organization hold for at                             |                    |                                |  |                                       |        |   |    |
|     | least three years from the date of  |                    |                                | not required to be used for e                            | exempt purposes                       |        |   |    |
|     | for the entire holding period? .  |                    |                                |  |                                       | 30a    |   | No |
|     | If "Yes", describe the arrangeme  |                    |                                |  |                                       | 34     | \<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\<br>\ |    |
| 31  | Does the organization have a gif  | τacceptano         | ce policy that requires the r  | eview of any non-standard                                | contributions?                        | 31     | Yes   |    |
| 32a | Does the organization hire or us contributions?                               | e third parti      | es or related organizations    | to solicit, process, or sell i                           | non-cash                              | 32a    |   | No |
| Ь   | If "Yes", describe in Part II   |                    |                                |  |                                       |        |   |    |
| 33  | If the organization did not report  | revenuesı          | n Column (c) for a type of p   | roperty for which Column (a                              | a) is                                 |        |   |    |
|     | checked, describe in Part II  |                    |                                |  |                                       |        |   |    |

| Part II Supplemental Information 32b, and 33. Also con | r <b>mation.</b> Complete this part to pinplete this part for any additional | rovide the information required by Part I, lines 30b, information.   |
|--|--|--|
| Identifier   | ReturnReference  | Explanation  |
| Form 990, SCH M, Part I, Line 31                       | Gift Acceptance Policy   | Drew University has a Gift Acceptance Policy which is in place<br>Policy requires the review of any non-standard contributions |
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DLN: 93493137039460

## OMB No 1545-0047

# **SCHEDULE 0**

Department of the Treasury Internal Revenue Service

Name of the organization DREW UNIVERSITY

(Form 990)

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

**Supplemental Information to Form 990** 

Inspection

22-1487164

**Employer identification number** 

| ldentifier                       | Return<br>Reference | Explanation  |
|----------------------------------|---------------------|--|
| Form 990, Part V,<br>question 7B |                     | Drew University notifies the donor of the breakout between any goods and services received and their donation amount. If No goods and service were received we then notify the donor of that too |

| ldentifier     | Return<br>Reference                            | Explanation   |
|----------------|--|---|
| Question 2 and | Trustee<br>relationship with<br>the University | As a result of the Universities conflict of interest tax questionnaire, it has found the following relationships exist between the University and Trustees 1 A University Trustee is employed by BNY Mellon, who is the University Endowment Custodian. The Trustee has indicated that he has no influence or control over that business unit line with BNY Mellon. 2 A University Trustee is a greater than 35% equity owner in an investment fund which the university endowment invests. |

| ldentifier                              | Return<br>Reference          | Explanation   |
|---|------------------------------|---|
| Form 990,<br>Part VI,<br>Question<br>10 | Reviewing<br>the From<br>990 | During the October 2009 and the February 2010 Audit Committee meeting, management presented and updated the audit committee on the new regulations for the new ly revised form 990. Additionally, the committee was advised that there was now a requirement that the Trustees on the committee review the process and return, which was presented at the May 2010 meeting. During the May 2010 Audit Committee meeting, form 990 was presented. As part of this process the Audit Committee review ed the key governance policies and practices in addition to the financial data contained in the core form pages one thru eleven. The following key governance and policy topics were reviewed by Audit Committee. 1. The Statement of Revenue and Balance Sheet, including the reconciliation to the annual financial statements. 2. Governance and policy review a Compensation review process and results b. Whistleblower policy c. Review in detail the results of the Conflict of Interest Questionnaire d. Lobbying activity e. Tax Exempt bond Disclosures. The Chairman of the Audit Committee then provides a summarization of key Form 990 topics discussed and any reportable issues to the full Board of Trustees. All members of the Board of Trustees are provided a copy of form 990 via the Trustee web-site. |

| Identifier                              | Return<br>Reference  | Explanation  |
|---|--|--|
| Form 990,<br>Part VI,<br>Question<br>12 | CONFLICT-OF-<br>INTEREST POLICY<br>FOR TRUSTEES<br>AND OFFICERS OF<br>ADMINISTRATION | All decisions of the Board of Trustees, Officers and employees of Drew University are to be made solely on the basis of a desire to promote the best interests of the University. It is therefore the policy of the Board and the University 1 That all activities or behavior which conflict with the best interests of the University are prohibited. This could include but would not be limited to a) Use of University Resources. For a University Trustee, Officer or employee to make improper use of any University resources, including the services of University employees, for his or her own personal benefit b) Compliance with Rules. For a University Trustee, Officer, or employee to fail to comply with the University's duly established rules, regulations or standards of personal behavior c) Disclosure of Confidential Information. For a University Trustee, officer, or employee, without proper authority, to give or release to anyone not authorized to receive such information, any data of a confidential nature secured through his or her relationship to the University d) Acceptance of Gifts. For a University Trustee, Officer or employee, or any dependent member of his or her immediate family to accept from any organization or person that they know to be doing or seekings to do business with the University, a loan or a gift or favor of more than normal value. This paragraph shall not be deemed to prohibit loans made in the normal course of business with the terms standard for such loans from banks or financial institutions that may have or expect to have relations with the University of Competition with the University of a University Trustee or Officer, directly or through a corporation in which he or she has a substantial interest, to engage in for remuneration any other activity which is in direct competition with the University, or a University of the Board or any Officer of the President or the President of the President sit is designed to the total proposed or a University Officer she has howelded on the resource of the Boa |

| ldentifier                                     | Return<br>Reference | Explanation  |
|--|---------------------|--|
| Form 990,<br>Part VI,<br>Question<br>15a & 15b | COMPENSATION        | Compensation for the officers, executive director and key employees is determined by the drew board of directors on the recommendation of the compensation committee. No individuals with a conflict of interest may be involved in the compensation determination process. Comparability data for similarity qualified persons in functionally comparable positions at similarity situated organizations is prepared by the organization and reviewed by the board of directors, the minutes of the board of directors and the compensation committee document the board's and committee's deliberations and decisions regarding compensation. The benchmark data is derived from a custom report provided by the College and University Personnel Association (CUPA). The University maintains a list of about 50 institutions that are similar to Drew in size, scope and mission. Mean and median salaries for positions that are comparable to our Cabinet are derived from the data provided by CUPA and adjusted by a cost of living factor to determine the benchmark. The benchmark is used by the committee to determine the appropriateness of salaries, salary increases and salaries of new executive hires." |

| ldentifier                           | Return<br>Reference | Explanation   |
|--------------------------------------|---------------------|---|
| Form 990,<br>Part VI,<br>Question 19 | Disclosure          | Drew University makes its governing documents available to the public in the following manner 1 Governing documents such as the conflict of interest policy, University Charter, University Mission Statement, Whistle Blower Policy, Travel and entertainment, purchasing, signature authority are made available to the public through the University web-site. The web-site is available on demand to the public at www Drew edu 2. The University tax filing form 990 is available at www guidestar org 3. The University financial statements are also available on the web-site and available upon demand by the public 4. Any changes that are made to the governing documents once ratified, are updated to the University web-site instantly, thereby making the web-site an up to date and live environment for the University's documents. |

| Identifier                     | Return<br>Reference   | Explanation  |
|--------------------------------|-----------------------|--|
| Form 990,<br>SCH L,<br>Part IV | Interested<br>persons | The nature of the transactions with the interested person William Huff is as follows. The university is a limited partner/investor in the Huff Energy Fund. The university has a 10 million dollar commitment to invest in the fund. The university pays a management and incentive fees to the fund for the management of the fund. All transactions are conducted at arms length, meaning they are executed in accordance with the investment agreement. Due diligence was conducted by independent external investment consultants that are retained by the university. The university measures investment performance on a quarterly basis, conducts portfolio reviews and on site visits on an annual basis and reports results to the investment committee. The nature of the transactions with the interested person Jeffrey Noss is as follows. Mr. Jeffrey Noss is an employee of Bank of New York Mellon Wealth Management as a Managing Director. He is a Trustee and Chairman of the Finance Committee for the university. The university's transactions with BNY/Mellon are, BNY/Mellon is custodian for separately managed account assets of the endow ment funds. The selection of BNY/Mellon was made through a competitive bid process. All transactions are conducted at an arm length. The university measures BNY's custodial performance and related fees on a annual basis. The university continues to evaluate custodial performance and reports on any changes and exceptions that may occur. |

| ldentifier                 | Return<br>Reference         | Explanation  |
|----------------------------|-----------------------------|--|
| Form 990, SCH K,<br>Part I |                             | 2008 SERIES I - New Jersey Educational Facility Ahthority - no cusip number has been entered as there is no cusip number for a bank purchased bond |
| Car Danaswash Dadwatan A   | at Nation and the Institute | Cot No. E1 0 E 6 V   |

#### DLN: 93493137039460

OMB No 1545-0047

2008

Open to Public Inspection

## **SCHEDULE R** (Form 990)

Department of the Treasury Internal Revenue Service

**Related Organizations and Unrelated Partnerships** 

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Name of the organization **Employer identification number** DREW UNIVERSITY 22-1487164 Part I **Identification of Disregarded Entities** Name, address, and EIN of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity **Identification of Related Tax-Exempt Organizations** Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Primary activity Direct controlling or foreign country) (if section 501(c)(3)) University Housing Project Corporation Drew Univer 36 Madison Ave DVLPM HOUSING NJ 501(c)(3) Madison, NJ07940 22-2970182

Part III Identification of Related Organizations Taxable as a Partnership

| (A)<br>Name, address, and EIN of<br>related organization                                     | <b>(B)</b><br>Primary activity |                                | (C) Legal Iomicile state or foreign ountry)  (D) Direct controlling entity |  | (E) Predominant income(related, investment, unrelated) | (F)<br>Share of total income                  | ( <b>G</b> ) Share of end-of- year assets | (H)<br>Disproprtiona<br>allocations? |              | conate Code V—UBI amount on Box 20 of K-1 |                      | (J)<br>General o<br>managing<br>partner? |    |
|--|--------------------------------|--------------------------------|--|--|--|---|---|--------------------------------------|--------------|---|----------------------|--|----|
|  |                                |                                |  |  |  |   |   | Yes                                  | No           |   |                      | Yes                                      | No |
|  |                                |                                |  |  |  |   |   |                                      |              |   |                      |  |    |
|  |                                |                                |  |  |  |   |   |                                      |              |   |                      |  |    |
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|  |                                |                                |  |  |  |   |   |                                      |              |   |                      |  |    |
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|  |                                |                                |  |  |  |   |   |                                      |              |   |                      |  |    |
| Part IV Identification of Re   | elated Org                     | anizations T                   | axable as  | a Corporation  | n or Trust   |   | -   | l .                                  | <u> </u>     |   |                      |  |    |
| (A)<br>Name, address, and EIN of related orga  | anızatıon                      | <b>(B)</b><br>Primary activity | 1  | (C)<br>al domicile<br>state or<br>foreign<br>ountry) | ( <b>D)</b> Direct controlling entity                  | (E) Type of entity (C corp, S corp, or trust) | <b>(F)</b><br>Share of total incom        | е                                    | Sha<br>end-c | G)<br>are of<br>of-year<br>sets           | (H<br>Percei<br>owne | ntage                                    |    |
| Copper Beach Condominium Association CBC<br>36 Madison Ave<br>Madison, NJ07940<br>22-3094649 |                                | Real estate mgt                |  | NJ   | Drew University  | Condo Assoc                                   | 156,7                                     | 75                                   |              | 532,970                                   | 59 7 %               | Vo                                       |    |
|  |                                |                                |  |  |  |   |   |                                      |              |   |                      |  |    |
|  |                                |                                |  |  |  |   |   |                                      |              |   |                      |  |    |
|  |                                |                                |  |  |  |   |   |                                      |              |   |                      |  |    |
|  |                                |                                |  |  |  |   |   |                                      |              |   |                      |  |    |
|  |                                |                                |  |  |  |   |   |                                      |              |   |                      |  |    |

No

No No

No

No No No No

No No No No No

No

No No

r O ther transfer of cash or property from other organization(s)

| Part         | V Transactions with Related Organizations   |           |     |
|--------------|---|-----------|-----|
| N            | lote. Complete line 1 if any entity is listed in Parts II, III or IV  |           | Yes |
| <b>1</b> Dur | ing the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? |           |     |
| a F          | Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity   | 1a        | Yes |
| <b>b</b> (   | Gift, grant, or capital contribution to other organization(s)   | 1b        |     |
| <b>c</b> G   | Gift, grant, or capital contribution from other organization(s)   | <b>1c</b> |     |
| d L          | oans or loan guarantees to or for other organization(s)   | 1d        | Yes |
| e L          | oans or loan guarantees by other organization(s)  | 1e        |     |
| f S          | iale of assets to other organization(s)   | 1f        |     |
| g F          | Purchase of assets from other organization(s)   | 1g        |     |
| h E          | Exchange of assets  | 1h        |     |
| i L          | ease of facilities, equipment, or other assets to other organization(s)   | 1i        |     |
| j L          | ease of facilities, equipment, or other assets from other organization(s)   | 1j        |     |
| k F          | Performance of services or membership or fundraising solicitations for other organization(s)  | 1k        |     |
| I P          | erformance of services or membership or fundraising solicitations by other organization(s)  | 11        |     |
| m S          | haring of facilities, equipment, mailing lists, or other assets   | 1m        |     |
| n S          | Sharing of paid employees   | 1n        |     |
|              |   |           |     |
| o F          | Reimbursement paid to other organization for expenses   | 10        |     |
| p F          | Reimbursement paid by other organization for expenses   | 1p        | Yes |
| q            | O ther transfer of cash or property to other organization(s)  | 1q        |     |

| - | If the answer to any of the above is "Ves  | " saa tha instructions for information on who i | must complete this line, including sov | ered relationships and transaction thresholds |
|---|--|---|--|---|
|   | Ti the answer to any of the above is fies, | , see the histractions for information on who r | must complete this line, including cov | ered relationships and transaction thresholds |

|     | (A) Name of other organization(s)           | <b>(B)</b><br>Transaction<br>type(a-r) | <b>(C)</b><br>Amount Involved |
|-----|---|--|-------------------------------|
| (1) | United Housing Project                      | 1A                                     | 198,238                       |
| (2) | United Housing Project                      | 1D                                     | 4,684,209                     |
| (3) | Copper Beach                                | 1D                                     | 461,450                       |
| (4) | Payments on behalf of UHP & CBC by Drew Unv | 1P                                     | 580,322                       |
| (5) |   |  |                               |
| (6) |   |  |                               |

## Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

|  |                                |   |   |    |   |                                  |    |  | _  |    |
|--|--------------------------------|---|---|----|---|----------------------------------|----|--|--|----|
| <b>(A)</b><br>Name, address, and EIN of entity | <b>(B)</b><br>Primary activity | <b>(C)</b><br>Legal domicile<br>(state or foreign<br>country) | (D) Are all partners section 501(c)(3) organizations? |    | <b>(E)</b><br>Share of<br>end-of-year<br>assets | (F) Disproprtionate allocations? |    | ( <b>G)</b> Code V—UBI amount on Box 20 of K-1 | (H)<br>General o<br>managing<br>partner? | )  |
|  |                                |   | Yes   | No |   | Yes                              | No |  | Yes                                      | No |
|  |                                |   |   |    |   |                                  |    |  |  |    |
|  |                                |   |   |    |   |                                  |    |  |  |    |
|  |                                |   |   |    |   |                                  |    |  |  |    |
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|  |                                |   |   |    |   |                                  |    |  |  |    |
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|  |                                |   |   |    |   |                                  |    |  |  |    |
|  |                                |   |   |    |   |                                  |    |  |  |    |
|  |                                |   |   |    |   |                                  |    |  |  |    |
|  |                                |   |   |    |   |                                  |    |  |  |    |
|  |                                |   |   |    |   |                                  |    |  |  |    |
|  |                                |   | •   | •  |   | •                                |    | Cabadul  | D / Form                                 |    |

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DLN: 93493137039460

OMB No 1545-0172

Department of the Treasury

Internal Revenue Service

## **Depreciation and Amortization** (Including Information on Listed Property)

Attachment See separate instructions. ► Attach to your tax return. Sequence No 67 **Identifying number** Name(s) shown on return Business or activity to which this form relates DREW UNIVERSITY GENERAL DEPRECIATION 22-1487164 Part I **Election To Expense Certain Property Under Section 179 Note:** If you have any listed property, complete Part V before you complete Part I. \$ 250,000 **1** Maximum amount See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 \$800,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 **8** Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 **16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 91,084,000 17 MACRS deductions for assets placed in service in tax years beginning before 2008 18 If you are electing to group any assets placed in service during the tax year into one or more Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation year placed in (business/investment (e) Convention (f) Method property period deduction service use only—see instructions) 19a 3-year property **b** 5-year property **c** 7 - year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs h Residential rental 27 5 yrs ММ S/L property 27 5 yrs ΜМ S/L i Nonresidential real 39 yrs ΜМ S/L property ΜМ S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year S/L S/L **c** 40-year **Summary** (See instructions) Part IV 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 91,084,000 and on the appropriate lines of your return Partnerships and S corporations—see instr

23 For assets shown above and placed in service during the current year, enter the

23

Form 4562 (2008) Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and Part V property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (c) (i) (e) (b) Business/ (d) (h) (a) (g) Basis for depreciation Flected Type of property (list Date placed in investment Cost or other Recovery Method/ Depreciation/ section 179 (business/investment Convention deduction vehicles first) service basis use period cost use only) percentage 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -% S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 1 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use Yes No Yes No Yes No Yes No Yes No Yes No during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? . . . . . **36** Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No **38** Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? \_ . . . . . . 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) . . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (b) (e) (d) (f) (c) (a) Date A mortization A mortizable Code A mortization for Description of costs amortization period or

#### amount section this year beains percentage 42 A mortization of costs that begins during your 2008 tax year (see instructions) 43 A mortization of costs that began before your 2008 tax year 43 44 Total. Add amounts in column (f) See the instructions for where to report 44