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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2008

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning **JUL 1, 2008** and ending **JUN 30, 2009**

| | | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| B Check if applicable: <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | Please use IRS label or print or type See Specific Instructions | C Name of organization NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE) | | D Employer identification number 23-1657958 |
| | | Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite ONE NEUMANN DRIVE | | E Telephone number (610) 558-5503 |
| | | City or town, state or country, and ZIP + 4 ASTON, PA 19014-1298 | | G Gross receipts \$ 88,712,046. |
| | | F Name and address of principal officer MR. JOSEPH GORMAN SAME AS C ABOVE | | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶ |
| I Tax exempt status <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | | | |
| J Website: ▶ WWW.NEUMANN.EDU | | | | |
| K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ | | | L Year of formation: 1965 M State of legal domicile: PA | |

Part I Summary

| | | | |
|--------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities TO MAINTAIN AND OPERATE A COLLEGE FOR THE LIBERAL EDUCATION OF MEN AND WOMEN. | | |
| | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets | | |
| | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 | 25 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 23 |
| | 5 Total number of employees (Part V, line 2a) | 5 | 954 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 10 |
| | 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) | 7a | 9,240. |
| b Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0. | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year | Current Year |
| | 9 Program service revenue (Part VIII, line 2g) | 3,041,590. | 5,939,985. |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 51,944,508. | 54,910,823. |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 1,316,057. | -644,221. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 1,313,939. | 1,142,072. |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 57,616,094. | 61,348,659. |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 13,871,989. | 14,391,925. |
| | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 18,366,114. | 20,889,329. |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | | 8,657. |
| | b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,400,893. | | |
| 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) | 18,232,408. | 18,014,805. | |
| 18 Total expenses - add lines 13-17 (must equal Part IX, column (A), line 25) | 50,470,511. | 53,304,716. | |
| 19 Revenue less expenses Subtract line 18 from line 12 | 7,145,583. | 8,043,943. | |
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) | Beginning of Year | End of Year |
| | 21 Total liabilities (Part X, line 26) | 111,715,681. | 120,858,601. |
| | 22 Net assets or fund balances Subtract line 21 from line 20 | 56,251,248. | 57,942,398. |
| | | 55,464,433. | 62,916,203. |

Part II Signature Block

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

Sign Here ▶ *Rosalie Mirenda* Signature of officer Date **05-12-10**

▶ **DR. ROSALIE MIRENDA, PRESIDENT** Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ *[Signature]* Date **5/12/10** Check if self-employed Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed) address and ZIP + 4 ▶ **PARENTEBEARD LLC**
1650 MARKET STREET, SUITE 4500
PHILADELPHIA, PA 19103

EIN ▶ _____ Phone no ▶ **(215) 972-0701**

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

SCANNED JUL 14 2010

G-15 14

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission

NEUMANN UNIVERSITY EDUCATES A DIVERSE COMMUNITY OF LEARNERS BASED UPON THE BELIEF THAT KNOWLEDGE IS A GIFT TO BE SHARED IN THE SERVICE OF OTHERS AND THAT LEARNING IS A LIFELONG PROCESS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes", describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes", describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 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.

SEE SCHEDULE O FOR CONTINUATION(S)

4a (Code) (Expenses \$ 46500592. including grants of \$ 14391925.) (Revenue \$ 48158262.) NEUMANN UNIVERSITY IS A PRIVATE, CATHOLIC, FRANCISCAN, CO-EDUCATIONAL UNIVERSITY.

FALL ENROLLMENT (FULL TIME AND PART TIME) FOR 2009, WAS 3,100 STUDENTS PURSUING UNDERGRADUATE AND GRADUATE DEGREES. THE UNIVERSITY OFFERS BACHELOR OF ARTS AND BACHELOR OF SCIENCE DEGREES IN A BROAD RANGE OF SUBJECTS. GRADUATE DEGREES INCLUDE TWO DOCTORAL PROGRAMS AND FIVE MASTER OF SCIENCE PROGRAMS. STUDENT ACTIVITIES INCLUDE NUMEROUS CLUB ACTIVITIES, ART AND MUSICAL GROUPS, AND NINETEEN SPORTS TEAMS.

FACULTY AND STUDENTS HAVE BEEN RECOGNIZED BY MANY ORGANIZATIONS FOR THEIR RESPECTIVE CONTRIBUTIONS TO ACADEMIC EXCELLENCE AND COMMUNITY

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 46,500,592. (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

| | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> | X | |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors? | X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | | X |
| 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> | X | |
| 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? <i>If "Yes," complete Schedule C, Part III</i> | | |
| 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? <i>If "Yes," complete Schedule D, Part I</i> | | X |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | | X |
| 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? <i>If "Yes," complete Schedule D, Part IV</i> | | X |
| 10 Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | X | |
| 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> | X | |
| 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? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> | X | |
| 13 Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | X | |
| 14a Did the organization maintain an office, employees, or agents outside of the U S ? | | X |
| b 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 ? <i>If "Yes," complete Schedule F, Part I</i> | | X |
| 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> | | X |
| 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 "Yes," complete Schedule F, Part III</i> | | X |
| 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i> | | X |
| 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | X | |
| 19 Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | X | |
| 20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> | | X |
| 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | | X |
| 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | X | |
| 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i> | X | |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No", go to question 25</i> | X | |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | X |
| 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? | | X |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | X |
| 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? <i>If "Yes," complete Schedule L, Part I</i> | | X |
| b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i> | | X |
| 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? <i>If "Yes," complete Schedule L, Part II</i> | | X |
| 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? <i>If "Yes," complete Schedule L, Part III</i> | | X |

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee | | |
| a 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)? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| 28a | | X |
| b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| 28b | | X |
| c 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? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| 28c | | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | | X |
| 29 | | X |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | | X |
| 30 | | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | | X |
| 31 | | X |
| 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> | | X |
| 32 | | X |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | | X |
| 33 | | X |
| 34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> | X | |
| 34 | X | |
| 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | X |
| 35 | | X |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | X |
| 36 | | X |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | | X |
| 37 | | X |

Form 990 (2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance

| | | 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 | 68 | |
| b | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable | | |
| | 1b | 0 | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | X | |
| 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 | 954 | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) | X | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | X | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | X | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | X |
| b | If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | X |
| c | If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? | | |
| 6a | Did the organization solicit any contributions that were not tax deductible? | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | |
| a | Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? | X | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | X | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | |
| | 7d | | |
| e | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | X |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | | |
| | 7g | | |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? | | |
| | 7h | | |
| 8 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | |
| 9 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. | | |
| a | Did the organization make any taxable distributions under section 4966? | | |
| | 9a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | | |
| | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter N/A | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | | |
| | 10a | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | |
| | 10b | | |
| 11 | Section 501(c)(12) organizations. Enter N/A | | |
| a | Gross income from members or shareholders | | |
| | 11a | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | |
| | 11b | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A | | |
| | 12b | | |

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

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

| | | Yes | No |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a | Enter the number of voting members of the governing body | | |
| 1b | Enter the number of voting members that are independent | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | | X |
| 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? | | X |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | X | |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | | X |
| 6 | Does the organization have members or stockholders? | X | |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | X | |
| 7b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | X | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| 8a | a The governing body? | X | |
| 8b | b Each committee with authority to act on behalf of the governing body? | X | |
| 9a | Does the organization have local chapters, branches, or affiliates? | | X |
| 9b | b 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? | | |
| 10 | Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 | X | |
| 11 | Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | X |

Section B. Policies

| | | Yes | No |
|-----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | X | |
| 12b | b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | X | |
| 12c | c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done | X | |
| 13 | Does the organization have a written whistleblower policy? | X | |
| 14 | Does the organization have a written document retention and destruction policy? | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: | | |
| 15a | a The organization's CEO, Executive Director, or top management official? | X | |
| 15b | b Other officers or key employees of the organization? Describe the process in Schedule O (see instructions) | X | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | | X |
| 16b | b 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? | | |

Section C. Disclosure

| | |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶ PA |
| 18 | Section 6104 requires an organization to make its Forms 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. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request |
| 19 | 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 |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ JOSEPH GORMAN - (610) 558-5503 ONE NEUMANN DRIVE, ASTON, PA 19014-1298 |

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

| (A) Name and Title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099 MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|-------------------------------------|-------------------------------|----------------------------------------|-----------------------|---------|--------------|------------------------------|----------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| DR. ROSALIE M. MIRENDA PRESIDENT | 60.00 | X | | X | | | 312,265. | 0. | 25,755. | |
| MARGARET S. AMBROSE VICE CHAIR | 1.00 | X | | X | | | 0. | 0. | 0. | |
| ANN BAIADA, RN, CRRN TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| MONSIGNOR FEDERICO A. BR TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| THOMAS A. BRUDER, JR. TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| JAMES D. DELANEY TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| DEACON DANIEL N. DELUCCA TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| JAY DEVINE CHAIR | 1.00 | X | | X | | | 0. | 0. | 0. | |
| JOHN C. FORD TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| GERALDINE A. HENWOOD TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| JACK H. HOLEFELDER TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| SR. MARIJANE HRESKO, OSF TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| FRANK J. JANTON TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| SR. MARGARET M. LEWIS, O TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| MARTIN F. MCKERNAN, JR., TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| WILLIAM J. MCLAUGHLIN TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| MARIAN D. MOSKOWITZ TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |

NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)

Form 990 (2008)

23-1657958 Page 8

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| (A) Name and title | (B) Average hours per week | (C) Position (check all that apply) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|----------------------------------------------|-------------------------------|----------------------------------------|-----------------------|---------|--------------|------------------------------|-------------------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| JEFF MULLEN TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| AURORA C. O'BRIEN TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| THOMAS P. PHIAMBOLIS, M. TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| FRANCIS G.X. PILEGGI, ES TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| SR. MARIE ANGELA PRESENZ TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| SR. LINDA M. SARIOGO, OS TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| SR. CLARE CHRISTI SCHIEF TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| THOMAS C. SHEA, SR. TRUSTEE | 1.00 | X | | | | | 0. | 0. | 0. | |
| DR. GERALD O'SULLIVAN VP ACADEMIC AFFAIRS | 50.00 | | | X | | | 121,541. | 0. | 19,500. | |
| JOSEPH GORMAN VP FINANCE & ADMIN | 50.00 | | | X | | | 115,513. | 0. | 1,797. | |
| 1b Total | | | | | | | 1,400,646. | 0. | 175,711. | |

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 11

| | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | 3 | X |
| 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual | 4 | X |
| 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 | X |

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

| (A) Name and business address | (B) Description of services | (C) Compensation |
|---------------------------------------------------------------------------|--------------------------------|---------------------|
| DANIEL J. KEATING CO. INC. 134 N. NARBERTH AVE., NARBERTH, PA 19072 | CONSTRUCTION | 18,895,727. |
| SODEXHO OPERATIONS LLC 4880 PAYSHERE CIRCLE, CHICAGO, IL 60674 | FOOD SERVICE | 2,349,785. |
| ALLIED BARTON SECURITY SERVICE P.O. BOX 828854, PHILADELPHIA, PA 19182 | SECURITY SERVICES | 1,300,481. |
| ARAMARK FACILITY SERVICES P.O. BOX 33170, NEWARK, NJ 07188 | FACILITIES & HOUSEKEEPING SVCS | 988,896. |
| THE BREAKER GROUP INC. 32 MILL STREET, MOUNT HOLLY, NJ 08060 | CONSTRUCTION | 507,600. |

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 13

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Form 990 (2008)

NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)

Form 990 (2008)

23-1657958 Page 9

Part VIII Statement of Revenue

| | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 | |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------|-----------------------------------------|------------------------------------------------------------------------------|---------|
| Contributions, gifts, grants and other similar amounts | 1 a Federated campaigns | 1a | | | | |
| | b Membership dues | 1b | | | | |
| | c Fundraising events | 1c 131,794. | | | | |
| | d Related organizations | 1d | | | | |
| | e Government grants (contributions) | 1e 2,496,612. | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f 3,311,579. | | | | |
| | g Noncash contributions included in lines 1a-1f \$ | | | | | |
| | h Total. Add lines 1a-1f | | 5939985. | | | |
| | Program Service Revenue | 2 a TUITION AND FEES | Business Code 611600 | 48,109,675. | 48,109,675. | |
| b ROOM AND BOARD | | 611600 | 6801148. | | 6,801,148. | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| f All other program service revenue | | | | | | |
| g Total. Add lines 2a-2f | | | 54,910,823. | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | 1174961. | | 1,174,961. | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | |
| | 5 Royalties | | | | | |
| | 6 a Gross Rents | (i) Real | 3,170. | | | |
| | | (ii) Personal | | | | |
| | | b Less rental expenses | 10,115. | | | |
| | | c Rental income or (loss) | -6,945. | | | |
| | d Net rental income or (loss) | | -6,945. | | -6,945. | |
| | 7 a Gross amount from sales of assets other than inventory | (i) Securities | 24,324,381. | | | |
| | | (ii) Other | | | | |
| | | b Less cost or other basis and sales expenses | 26,143,563. | | | |
| | | c Gain or (loss) | -1,819,182. | | | |
| | d Net gain or (loss) | | -1,819,182. | | -1,819,182. | |
| | 8 a Gross income from fundraising events (not including \$ 131,794. of contributions reported on line 1c) See Part IV, line 18 | a | 86,248. | | | |
| | | b Less direct expenses | 90,448. | | | |
| | | c Net income or (loss) from fundraising events | | -4,200. | | -4,200. |
| | 9 a Gross income from gaming activities See Part IV, line 19 | a | 20,050. | | | |
| b Less direct expenses | | 2,500. | | | | |
| c Net income or (loss) from gaming activities | | | 17,550. | | 17,550. | |
| 10 a Gross sales of inventory, less returns and allowances | a | 1,559,490. | | | | |
| | b Less cost of goods sold | 1,116,761. | | | | |
| | c Net income or (loss) from sales of inventory | | 442,729. | | 442,729. | |
| Miscellaneous Revenue | | Business Code | | | | |
| 11 a CAFETERIA & MEAL REV | | 722210 | 258,199. | | 258,199. | |
| | b CHILD DEVELOPMENT CTR | 611600 | 216,809. | | 216,809. | |
| | c VARIOUS FINES & FEES | 900099 | 48,160. | | 48,160. | |
| | d All other revenue | 531390 | 169,770. | 43,347. | 9,240. | |
| | e Total. Add lines 11a-11d | | 692,938. | | | |
| 12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c and 11e | | 61,348,659. | 48,153,022. | 9,240. | 7,246,412. | |

NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)

Form 990 (2008)

23-1657958 Page 10

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to individuals in the U S See Part IV, line 22 | 14,391,925. | 14,391,925. | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 1,200,500. | 502,195. | 698,305. | |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 15,128,062. | 12,952,188. | 1,385,855. | 790,019. |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 703,957. | 581,666. | 87,959. | 34,332. |
| 9 Other employee benefits | 2,665,713. | 2,240,214. | 289,168. | 136,331. |
| 10 Payroll taxes | 1,191,097. | 984,180. | 148,827. | 58,090. |
| 11 Fees for services (non-employees) | | | | |
| a Management | | | | |
| b Legal | 142,842. | | 142,842. | |
| c Accounting | 70,040. | 13,500. | 56,540. | |
| d Lobbying | 20,800. | | 20,800. | |
| e Professional fundraising services. See Part IV, line 17 | 8,657. | | | 8,657. |
| f Investment management fees | 42,830. | 42,830. | | |
| g Other | 4,591,624. | 3,430,719. | 1,007,734. | 153,171. |
| 12 Advertising and promotion | 585,535. | 494,806. | 90,529. | 200. |
| 13 Office expenses | 2,500,397. | 1,871,411. | 491,803. | 137,183. |
| 14 Information technology | 111,809. | 47,866. | 62,125. | 1,818. |
| 15 Royalties | | | | |
| 16 Occupancy | 1,824,218. | 1,824,218. | | |
| 17 Travel | 432,870. | 351,832. | 71,278. | 9,760. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 75,136. | 50,660. | 19,508. | 4,968. |
| 20 Interest | 1,358,520. | 1,358,520. | | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 2,281,982. | 2,281,982. | | |
| 23 Insurance | 309,082. | 309,082. | | |
| 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.) | | | | |
| a FOOD SERVICES | 1,794,523. | 1,794,523. | | |
| b OTHER EDUCATION EXPENSE | 680,511. | 176,030. | 504,481. | |
| c ENTERTAINMENT | 325,692. | 225,668. | 61,084. | 38,940. |
| d SPECIAL EVENTS | 184,126. | 138,856. | 24,626. | 20,644. |
| e MEMBERSHIP DUES | 177,962. | 84,193. | 89,271. | 4,498. |
| f All other expenses | 504,306. | 351,528. | 150,496. | 2,282. |
| 25 Total functional expenses. Add lines 1 through 24f | 53,304,716. | 46,500,592. | 5,403,231. | 1,400,893. |
| 26 Joint Costs Check here <input type="checkbox"/> 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 | | | | |

NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)

Form 990 (2008)

23-1657958 Page 11

Part X Balance Sheet

| | | (A) Beginning of year | | (B) End of year | |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------|-------------|
| Assets | 1 | Cash - non-interest-bearing | 4,695,122. | 1 | 1,767,373. |
| | 2 | Savings and temporary cash investments | 44,608,178. | 2 | 31,985,819. |
| | 3 | Pledges and grants receivable, net | 550,000. | 3 | 3,265,231. |
| | 4 | Accounts receivable, net | 539,081. | 4 | 915,780. |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L | | 6 | |
| | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | 404,950. | 8 | 492,315. |
| | 9 | Prepaid expenses and deferred charges | 395,440. | 9 | 458,415. |
| | 10a | Land, buildings, and equipment cost basis | 92,756,809. | | |
| | b | Less accumulated depreciation Complete Part VI of Schedule D | 29,835,523. | 10c | 62,921,286. |
| | 11 | Investments - publicly traded securities | 42,737,650. | 11 | 17,671,411. |
| | 12 | Investments - other securities See Part IV, line 11 | 16,354,150. | 12 | |
| | 13 | Investments - program related See Part IV, line 11 | 90,978. | 13 | 95,558. |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets See Part IV, line 11 | 1,340,132. | 15 | 1,285,413. |
| 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 111,715,681. | 16 | 120,858,601. | |
| Liabilities | 17 | Accounts payable and accrued expenses | 4,480,659. | 17 | 6,768,123. |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | 103,356. | 19 | 397,348. |
| | 20 | Tax-exempt bond liabilities | 49,340,000. | 20 | 48,650,000. |
| | 21 | Escrow account liability Complete Part IV of Schedule D | | 21 | |
| | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L | | 22 | |
| | 23 | Secured mortgages and notes payable to unrelated third parties | 1,350,000. | 23 | 1,125,000. |
| | 24 | Unsecured notes and loans payable | | 24 | |
| | 25 | Other liabilities Complete Part X of Schedule D | 977,233. | 25 | 1,001,927. |
| | 26 | Total liabilities. Add lines 17 through 25 | 56,251,248. | 26 | 57,942,398. |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | |
| | 27 | Unrestricted net assets | 48,604,691. | 27 | 53,832,073. |
| | 28 | Temporarily restricted net assets | 1,530,909. | 28 | 3,701,394. |
| | 29 | Permanently restricted net assets | 5,328,833. | 29 | 5,382,736. |
| | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34. | | | | |
| | 30 | Capital stock or trust principal, or current funds | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| 33 | Total net assets or fund balances | 55,464,433. | 33 | 62,916,203. | |
| 34 | Total liabilities and net assets/fund balances | 111,715,681. | 34 | 120,858,601. | |

Part XI Financial Statements and Reporting

| | Yes | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other | | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? | | X |
| b Were the organization's financial statements audited by an independent accountant? | X | |
| c 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? | X | |
| 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? | X | |
| b If "Yes," did the organization undergo the required audit or audits? | X | |

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization **NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)** Employer identification number **23-1657958**

Part I Reason for Public Charity Status (All organizations must complete this part) (see instructions)

The organization is not a private foundation because it is (Please check only one organization)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete the Part III)
- 10 An organization organized and operated exclusively to test for public safety See section 509(a)(4). (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the organizations the organization supports

| | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the organization in col. (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col. (i) organized in the U S? | | (vii) Amount of support |
|------------------------------------|----------|---------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----|-----------------------------------------------------------------|----|------------------------------------------------------------|----|-------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2004 | (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 | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 - 3 | | | | | | |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 Public Support. Subtract line 5 from line 4 | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 7 Amounts 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 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 instructions) | | | | | 12 | |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---|
| 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) | 14 | % |
| 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f | 15 | % |
| 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | |
| 16b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | |
| 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | |
| 17b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/> | | |

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2004 | (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 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 - 5 | | | | | | |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 | | | | | | |
| c Add lines 7a and 7b | | | | | | |
| 8 Public support (Subtract line 7c from line 6) | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
|-------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6 | | | | | | |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | | | | | | |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | |
| 13 Total support (Add lines 9, 10c, 11, and 12) | | | | | | |

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

| | | |
|--------------------------------------------------------------------------------------------------|-----------|---|
| 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|-------------------------------------------------------------------------------------------------------|-----------|---|
| 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2007 Schedule A, Part IV A, line 27h | 18 | % |

19a 33 1/3% support 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

b 33 1/3% support 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

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

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

2008
Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ 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), then

- 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 990-EZ, Part VI, line 47 (Lobbying Activities), then

- 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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization **NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)** Employer identification number **23-1657958**

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.

See the instructions for Schedule C for details

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B To be completed by all organizations exempt under section 501(c)(3).

See the instructions for Schedule C for details

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).

See the instructions for Schedule C for details

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120 POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 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 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) Address | (c) EIN | (d) Amount paid from filing organization's funds If none, enter 0 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter 0 |
|----------|-------------|---------|-------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|
| | | | | |
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NEUMANN UNIVERSITY (FORMERLY NEUMANN

Schedule C (Form 990 or 990-EZ) 2008

COLLEGE)

23-1657958 Page 2

Part II-A 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

- A Check if the filing organization belongs to an affiliated group
 B Check if the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals | | | | | | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-------------------------------------------------|------------------------------------|--------------------|------------------------------|-----------------------------------------|-------------------------------------------------|-------------------------------------------|---------------------------------------------------|--------------------------------------------|--------------------------------------------------|-------------------|-------------|--|--|
| 1a Total lobbying expenditures to influence public opinion (grassroots lobbying) | | | | | | | | | | | | | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | | | | | | | | | | | | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | | | | | | | | | | | | | | |
| d Other exempt purpose expenditures | | | | | | | | | | | | | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | | | | | | | | | | | | | | |
| f Lobbying nontaxable amount Enter the amount from the following table in both columns | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table> | | 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 | | |
| 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 | | | | | | | | | | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | | | | | | | | | | | | | | |
| h Subtract line 1g from line 1a Enter -0- if line g is more than line a | | | | | | | | | | | | | | | |
| i Subtract line 1f from line 1c Enter -0- if line f is more than line c | | | | | | | | | | | | | | | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | | | | | | | | | | | | | | |

Yes No

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 2a through 2f of the instructions.)

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

Schedule C (Form 990 or 990-EZ) 2008

NEUMANN UNIVERSITY (FORMERLY NEUMANN

Schedule C (Form 990 or 990-EZ) 2008 COLLEGE)

23-1657958 Page 3

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

| | (a) | | (b) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|---------|
| | Yes | No | Amount |
| 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 | | | |
| a Volunteers? | | X | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | X | |
| c Media advertisements? | | X | |
| d Mailings to members, legislators, or the public? | | X | |
| e Publications, or published or broadcast statements? | | X | |
| f Grants to other organizations for lobbying purposes? | | X | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | X | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? | | X | |
| i Other activities? If "Yes," describe in Part IV | X | | 20,800. |
| j Total lines 1c through 1i | | | 20,800. |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | X | |
| 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? | | | |

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(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? | | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | |
| 3 Did the organization agree to carryover lobbying and political expenditures from the prior year? | | |

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 Schedule C instructions for details

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|
| 1 Dues, assessments and similar amounts from members | 1 | |
| 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). | | |
| a 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

PART II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES:

NEUMANN UNIVERSITY HAS RETAINED THE SERVICES OF CASSIDY & ASSOCIATES AND MARY SHIELDS GOVERNMENT RELATIONS, LLC OF WASHINGTON, D.C. FOR THE PURPOSE OF FUNDRAISING, WHICH INCLUDES LOBBYING ACTIVITIES TO OBTAIN GOVERNMENT MONIES. THE TOTAL EXPENSES PAID IN CONNECTION WITH LOBBYING ACTIVITIES WAS \$20,800 AND REPRESENTS 20% OF THE TOTAL AMOUNT OF MONIES

Schedule C (Form 990 or 990-EZ) 2008

Part IV Supplemental Information (continued)

THAT NEUMANN UNIVERSITY PAID TO CASSIDY & ASSOCIATES AND MARY SHIELDS
GOVERNMENT RELATIONS, LLC.

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.

OMB No 1545-0047

2008
Open to Public
Inspection

Name of the organization **NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)** Employer identification number **23-1657958**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

| | (a) Donor advised funds | (b) Funds and other accounts |
|--------------------------------------------|-------------------------|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area

Protection of natural habitat Preservation of certified historic structure

Preservation of open space

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

| | Held at the End of the Year |
|--------------------------------------------------------------------------------------|-----------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06 | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

| | Amount |
|----|--------|
| 1c | |
| 1d | |
| 1e | |
| 1f | |

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

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

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

| | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--------------------------------------------------|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | 13,323,866. | | | | |
| b Contributions | 218,535. | | | | |
| c Investment earnings or losses | -1,851,736. | | | | |
| d Grants or scholarships | 200,449. | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | 13,457,034. | | | | |

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi endowment ▶ 60.00 %
- b Permanent endowment ▶ 40.00 %
- c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
- (ii) related organizations

| | Yes | No |
|--------|-----|----|
| 3a(i) | | X |
| 3a(ii) | | X |
| 3b | | |

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

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

| Description of investment | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Depreciation | (d) Book value |
|--------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------|------------------|----------------|
| 1a Land | | 1,857,876. | | 1,857,876. |
| b Buildings | | 47,296,081. | 15,784,004. | 31,512,077. |
| c Leasehold improvements | | | | |
| d Equipment | | 11,598,992. | 9,962,290. | 1,636,702. |
| e Other | | 32,003,860. | 4,089,229. | 27,914,631. |
| Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c)) | | | | 62,921,286. |

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

| | | | |
|----|---------------------------------------------------------------------------------|----|-------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 61,348,659. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 53,304,716. |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | 8,043,943. |
| 4 | Net unrealized gains (losses) on investments | 4 | -592,173. |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV) | 8 | |
| 9 | Total adjustments (net) Add lines 4-8 | 9 | -592,173. |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 10 | 7,451,770. |

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

| | | | |
|---|---------------------------------------------------------------------------------|----|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 47,735,815. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| a | Net unrealized gains on investments | 2a | -592,173. |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIV) | 2d | -14240495. |
| e | Add lines 2a through 2d | 2e | -14832668. |
| 3 | Subtract line 2e from line 1 | 3 | 62,568,483. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b | Other (Describe in Part XIV) | 4b | -1,219,824. |
| c | Add lines 4a and 4b | 4c | -1,219,824. |
| 5 | Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 5 | 61,348,659. |

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

| | | | |
|---|----------------------------------------------------------------------------------|----|-------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 40,284,045. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| a | Donated services and use of facilities | 2a | |
| b | Prior year adjustments | 2b | |
| c | Losses reported on Form 990, Part IX, line 25 | 2c | |
| d | Other (Describe in Part XIV) | 2d | 1,219,824. |
| e | Add lines 2a through 2d | 2e | 1,219,824. |
| 3 | Subtract line 2e from line 1 | 3 | 39,064,221. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1 | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | |
| b | Other (Describe in Part XIV) | 4b | 14,240,495. |
| c | Add lines 4a and 4b | 4c | 14,240,495. |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 5 | 53,304,716. |

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9 Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

PART V, LINE 4: ENDOWMENT FUNDS ARE USED TO PROVIDE FOR SCHOLARSHIPS,
OPERATING COSTS, AND FUTURE CAPITAL PROJECTS.

PART X: THE UNIVERSITY ADOPTED THE PROVISIONS OF FASB
INTERPRETATION NO. 48, "ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES - AN
INTERPRETATION OF FASB STATEMENT NO. 109" ("FIN 48") EFFECTIVE JULY 1,
2007. FIN 48 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES
RECOGNIZED IN AN ORGANIZATION'S FINANCIAL STATEMENTS AND PRESCRIBES A

Part XIV Supplemental Information (continued)

RECOGNITION THRESHOLD OF MORE-LIKELY-THAN-NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPROPRIATE TAXING AUTHORITY. MEASUREMENT OF THE TAX UNCERTAINTY OCCURS IF THE RECOGNITION THRESHOLD HAS BEEN MET. FIN 48 ALSO PROVIDES GUIDANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, AND DISCLOSURE. THE ADOPTION OF FIN 48 DID NOT HAVE A MATERIAL EFFECT ON THE FINANCIAL STATEMENTS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

STUDENT AID: -14240495.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

BOOKSTORE EXPENSES: -1116761.

SPECIAL EVENTS & GAMING EXPENSE: -92948.

RENTAL EXPENSES: -10115.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

BOOKSTORE EXPENSES: 1116761.

SPECIAL EVENTS & GAMING EXPENSE: 92948.

RENTAL EXPENSES: 10115.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

STUDENT AID: 14240495.

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2008
Open to Public
Inspection

Name of the organization **NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)** Employer identification number **23-1657958**

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?

2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain.
RACIALLY NON-DISCRIMINATORY POLICY APPEARS IN ALL ADVERTISEMENTS AND THE STUDENT AFFAIRS HANDBOOK.

| | YES | NO |
|----|-----|----|
| 1 | X | |
| 2 | X | |
| 3 | X | |
| 4a | X | |
| 4b | X | |
| 4c | X | |
| 4d | X | |
| 5a | | X |
| 5b | | X |
| 5c | | X |
| 5d | | X |
| 5e | | X |
| 5f | | X |
| 5g | | X |
| 5h | | X |
| 6a | X | |
| 6b | | X |
| 7 | X | |

4 Does the organization maintain the following?

a Records indicating the racial composition of the student body, faculty, and administrative staff?

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

d Copies of all material used by the organization or on its behalf to solicit contributions?
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)

5 Does the organization discriminate by race in any way with respect to

a Students' rights or privileges?

b Admissions policies?

c Employment of faculty or administrative staff?

d Scholarships or other financial assistance?

e Educational policies?

f Use of facilities?

g Athletic programs?

h Other extracurricular activities?
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)

6a Does the organization receive any financial aid or assistance from a governmental agency?

b Has the organization's right to such aid ever been revoked or suspended?
If you answered "Yes" to either line 6a or line 6b, please explain using an attached statement **STATEMENT 1**

7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75 50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation

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

Schedule E (Form 990 or 990-EZ) 2008

NEUMANN UNIVERSITY (FORMERLY NEUMANN

Schedule G (Form 990 or 990-EZ) 2008 COLLEGE)

23-1657958 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

| | | (a) Event #1 | (b) Event #2 | (c) Other Events | (d) Total Events | |
|-----------------|---|------------------------------------------------------------|-----------------------------|---------------------|-------------------------------|------------|
| | | SCHOLARSHIP GALA (event type) | GOLF OUTING (event type) | 1 (total number) | (Add col (a) through col (c)) | |
| Revenue | 1 | Gross receipts | 156,049. | 32,648. | 29,345. | 218,042. |
| | 2 | Less Charitable contributions | 105,099. | 12,600. | 14,095. | 131,794. |
| | 3 | Gross revenue (line 1 minus line 2) | 50,950. | 20,048. | 15,250. | 86,248. |
| Direct Expenses | 4 | Cash prizes | | | | |
| | 5 | Non cash prizes | | | | |
| | 6 | Rent/facility costs | 4,200. | | | 4,200. |
| | 7 | Other direct expenses | 50,950. | 20,048. | 15,250. | 86,248. |
| | 8 | Direct expense summary Add lines 4 through 7 in column (d) | | | | (90,448.) |
| | 9 | Net income summary Combine lines 3 and 8 in column (d) | | | | -4,200. |

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

| | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (Add col (a) through col (c)) | |
|-----------------|---------------------------------------------------------------|-----------------------|---------------------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------------------------------|---------|
| | | 1 | Gross revenue | | | 20,050. |
| Direct Expenses | 2 | Cash prizes | | | 1,500. | 1,500. |
| | 3 | Non-cash prizes | | | 1,000. | 1,000. |
| | 4 | Rent/facility costs | | | | |
| | 5 | Other direct expenses | | | | |
| | 6 | Volunteer labor | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input checked="" type="checkbox"/> Yes 5.00 % <input type="checkbox"/> No | |
| 7 | Direct expense summary Add lines 2 through 5 in column (d) | | | | (2,500.) | |
| 8 | Net gaming income summary Combine lines 1 and 7 in column (d) | | | | 17,550. | |

| | | | | |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------|----|-----|----|
| 9 | Enter the state(s) in which the organization operates gaming activities | PA | Yes | No |
| a | Is the organization licensed to operate gaming activities in each of these states? | | X | |
| b | If "No," Explain | | | |
| 10a | Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? | | | X |
| b | If "Yes" Explain | | | |
| 11 | Does the organization operate gaming activities with nonmembers? | | | X |
| 12 | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? | | | X |

Schedule G (Form 990 or 990-EZ) 2008

NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)

Schedule G (Form 990 or 990-EZ) 2008

23-1657958 Page 3

13 Indicate the percentage of gaming activity operated in

- a The organization's facility
- b An outside facility

| | | |
|------------|--|---------|
| 13a | | 50.00 % |
| 13b | | 50.00 % |

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ► HENRY SUMNER

Address ► ONE NEUMANN DRIVE - ASTON , PA 19014

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

| | | | | |
|------------|--|--|------------|-----------|
| 15a | | | | |
| | | | Yes | No |

- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____
- c If "Yes," enter name and address

Name ► _____

Address ► _____

16 Gaming manager information

Name ► NONE

Gaming manager compensation ► \$ _____

Description of services provided ► _____

- Director/officer
 Employee
 Independent contractor

17 Mandatory distributions

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

| | | | | |
|------------|--|--|------------|-----------|
| 17a | | | | |
| | | | Yes | No |

- b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Schedule G (Form 990 or 990-EZ) 2008

NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)

Schedule I (Form 990) 2008 **23-1657958** Page 2

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) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|
| STUDENT AID | 2483 | 14,240,495 | 0 | | |
| GRANTS TO VARIOUS STUDENTS | 80 | 151,430 | 0 | | |
| | | | | | |
| | | | | | |

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

SCHEDULE I, PART I, LINE 2: NEUMANN UNIVERSITY'S PROCESS FOR MONITORING FINANCIAL AID AND MONITORING GRANT FUNDS IS A COMBINATION OF PROCEDURES INVOLVING THE FOLLOWING OFFICES - FINANCIAL AID, INSTITUTIONAL ADVANCEMENT, REGISTRAR, AND THE BUSINESS OFFICE.

INSTITUTIONAL ADVANCEMENT AND THE FINANCIAL AID OFFICE AWARD SCHOLARSHIPS AND GRANTS ACCORDING TO THE SPECIFICATIONS/REQUIREMENTS OF THE SPECIFIC AWARD.

Part IV Supplemental Information

THE FINANCIAL AID OFFICE, REGISTRAR, AND BUSINESS OFFICE COORDINATE THE
AWARDING AND DOCUMENTATION OF FINANCIAL AID TO INCLUDE ELIGIBILITY OF
FINANCIAL AID, NOTIFICATION OF STUDENTS, CHANGE OF STATUS, AND
RECONCILEMENT OF STUDENT ACCOUNTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization **NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)** Employer identification number **23-1657958**

Part I Questions Regarding Compensation

| | Yes | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|
| 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) | | |
| b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | X | |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | X | |
| 3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee | | |
| 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a | | |
| a Receive a severance payment or change of control payment? | | X |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | | X |
| c Participate in, or receive payment from, an equity based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III | | X |
| Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. | | |
| 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of | | |
| a The organization? | | X |
| b Any related organization? If "Yes," to line 5a or 5b, describe in Part III | | X |
| 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of | | |
| a The organization? | | X |
| b Any related organization? If "Yes" to line 6a or 6b, describe in Part III | | X |
| 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III | | X |
| 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III | | X |

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

Schedule J (Form 990) 2008

NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)

Schedule J (Form 990) 2008

23-1657958

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is 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 | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|------------------------|----------------------------------------------------|-------------------------------------|--------------------------|---------------------------|-------------------------|---------------------------------|------------------------------------------------------------|
| | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other compensation | | | | |
| DR. ROSALIE M. MIRENDA | (i) 260,543. | (ii) 0. | (iii) 51,722. | 0. | 25,755. | 338,020. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | |
| | (ii) | | | | | | |
| | (i) | | | | | | |
| | (ii) | | | | | | |
| | (i) | | | | | | |
| | (ii) | | | | | | |
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| | (ii) | | | | | | |
| | (i) | | | | | | |
| | (ii) | | | | | | |
| | (i) | | | | | | |
| | (ii) | | | | | | |

NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)

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.

PART I, LINE 1A: THE PRESIDENT'S SPOUSE ATTENDS AN ANNUAL EVENT WITH THE PRESIDENT AS A UNIVERSITY AMBASSADOR. HIS TRAVEL EXPENSES FOR THIS EVENT ARE PAID BY THE UNIVERSITY.

Multiple horizontal lines for supplemental information.

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Attach to Form 990 To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a
Provide descriptions, explanations, and any additional information on Schedule O (Form 990)

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the organization **NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE)** Employer identification number **23-1657958**

Part I Bond Issues (Required for 2008)

| (a) Issuer name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issue price | (f) Description of purpose | (g) Defeased | | (h) On behalf of issuer | |
|----------------------------------------|----------------|-------------|-----------------|-----------------|--------------------------------------|--------------|----|-------------------------|----|
| | | | | | | Yes | No | Yes | No |
| DELAWARE COUNTY A AUTHORITY | 23-1973437 | 246003LD7 | 04/03/08 | 22,025,000. | FINANCE CAPITAL ADDITIONS | | X | | X |
| B | | | | | | | | | |
| C | | | | | | | | | |
| D | | | | | | | | | |
| E | | | | | | | | | |

Part II Proceeds (Optional for 2008)

| | A | | B | | C | | D | | E | |
|-----------------------------------------------|-----|----|-----|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 Total proceeds of issue | | | | | | | | | | |
| 2 Gross proceeds in reserve funds | | | | | | | | | | |
| 3 Proceeds in refunding or defeasance escrows | | | | | | | | | | |
| 4 Other unspent proceeds | | | | | | | | | | |
| 5 Issuance costs from proceeds | | | | | | | | | | |
| 6 Working capital expenditures from proceeds | | | | | | | | | | |
| 7 Capital expenditures from proceeds | | | | | | | | | | |
| 8 Year of substantial completion | | | | | | | | | | |

| | | | | | | | | | | |
|-----------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|--|--|
| 9 Were the bonds issued as part of a current refunding issue? | | | | | | | | | | |
| 10 Were the bonds issued as part of an advance refunding issue? | | | | | | | | | | |
| 11 Has the final allocation of proceeds been made? | | | | | | | | | | |
| 12 Does the organization maintain adequate books and records to support the final allocation of proceeds? | | | | | | | | | | |

Part III Private Business Use (Optional for 2008)

| | A | | B | | C | | D | | E | |
|------------------------------------------------------------------------------------------------------------------------------|-----|----|-----|----|-----|----|-----|----|-----|----|
| | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| 1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax exempt bonds? | | | | | | | | | | |
| 2 Are there any lease arrangements with respect to the financed property which may result in private business use? | | | | | | | | | | |

832121
12-18-08

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

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to 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.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

NEUMANN UNIVERSITY (FORMERLY NEUMANN
COLLEGE)

Employer identification number
23-1657958

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS

SERVICE. DURING THE YEAR ENDED JUNE 30, 2009, THE UNIVERSITY PROVIDED STUDENTS WITH FINANCIAL AID FROM INTERNAL RESOURCES OF APPROXIMATELY \$14,240,000, WHICH REPRESENTED 30% OF GROSS TUITION AND FEE REVENUE FOR THE YEAR.

FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION'S ARTICLES OF INCORPORATION AND BYLAWS WERE AMENDED DUE TO THE ORGANIZATION CHANGING ITS NAME TO NEUMANN UNIVERSITY. THE ORGANIZATION'S FORMER NAME WAS NEUMANN COLLEGE.

FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERS OF THE UNIVERSITY CONSIST OF THE CONGREGATIONAL MINISTER AND THE COUNCIL OF THE RELIGIOUS CONGREGATION OF THE SISTERS OF ST. FRANCIS OF PHILADELPHIA.

FORM 990, PART VI, SECTION A, LINE 7A: THE SISTERS OF ST. FRANCIS HAVE CERTAIN RESERVE POWER REGARDING DECISIONS OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 7B: THE SISTERS OF ST. FRANCIS HAVE CERTAIN RESERVE POWER REGARDING DECISIONS OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 10: THE ANNUAL FEDERAL NON-PROFIT TAX RETURN FORM, IRS FORM 990, APPLICABLE TO NEUMANN UNIVERSITY, IS COMPLETED AND SUBMITTED TO THE IRS BY THE NEUMANN UNIVERSITY ADMINISTRATION THROUGH THE OFFICE OF THE VICE PRESIDENT FOR FINANCE AND ADMINISTRATION. THE FORM 990 IS SHARED WITH THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES. AFTER

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

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to 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.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

NEUMANN UNIVERSITY (FORMERLY NEUMANN
COLLEGE)

Employer identification number
23-1657958

FORM 990 IS REVIEWED BY THE AUDIT COMMITTEE, A FINAL COPY IS SENT TO EACH MEMBER OF THE BOARD OF TRUSTEES BEFORE FORM 990 IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: ALL OFFICERS, TRUSTEES AND KEY EMPLOYEES REVIEW AND SIGN THE CONFLICT OF INTEREST POLICY ANNUALLY. THE UNIVERSITY PRESIDENT AND GENERAL COUNSEL REVIEW THE SIGNED STATEMENTS AND HANDLE ANY CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: THE PRESIDENT'S COMPENSATION IS REVIEWED BY A SUB-COMMITTEE OF THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES. THE PROCESS INCLUDES A REVIEW OF PEER COMPENSATION (COLLEGE AND UNIVERSITY PROFESSIONAL ASSOCIATION (CUPA) Ø HUMAN RESOURCES SURVEY), THE UNIVERSITY'S MISSION AND VISION, ECONOMIC CLIMATE FOR THE REGION, AND THE ACHIEVEMENT OF GOALS AS CONTAINED IN THE STRATEGIC PLAN. WHEN THIS PROCESS IS COMPLETED, THE PRESIDENT'S COMPENSATION IS DECIDED AND INCLUDED IN THE ANNUAL BUDGET, WHICH IS APPROVED BY THE BOARD OF TRUSTEES.

INCREASE IN COMPENSATION IS CONSISTENT FOR ALL KEY EMPLOYEES AND OFFICERS OF NEUMANN UNIVERSITY AND INCLUDED IN THE ANNUAL BUDGET WHICH IS APPROVED BY THE BOARD OF TRUSTEES. THE PERCENTAGE INCREASE FOR UNIVERSITY EMPLOYEES IS A COMBINATION OF ECONOMIC CONDITIONS FOR THE REGION AND THE CUPA SURVEY.

FORM 990, PART VI, SECTION C, LINE 19: ACCESS TO THE UNIVERSITY'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS WILL NOT BE UNREASONABLY WITHHELD.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to 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.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

**NEUMANN UNIVERSITY (FORMERLY NEUMANN
COLLEGE)**

Employer identification number

23-1657958

FORM 990, PART V, LINE 2

NUMBER OF EMPLOYEES

**THE UNIVERSITY HAS 954 EMPLOYEES OF WHICH 330 ARE FULL TIME AND 624 ARE
STUDENT WORKERS OR WORK STUDY STUDENTS.**

Part V Transactions With Related Organizations

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

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

- a** Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to other organization(s)
- c** Gift, grant, or capital contribution from other organization(s)
- d** Loans or loan guarantees to or for other organization(s)
- e** Loans or loan guarantees by other organization(s)

- f** Sale of assets to other organization(s)
- g** Purchase of assets from other organization(s)
- h** Exchange of assets
- i** Lease of facilities, equipment, or other assets to other organization(s)

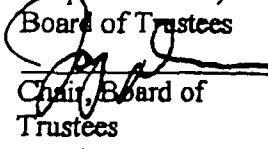
- j** Lease of facilities, equipment, or other assets from other organization(s)
- k** Performance of services or membership or fundraising solicitations for other organization(s)
- l** Performance of services or membership or fundraising solicitations by other organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets
- n** Sharing of paid employees

- o** Reimbursement paid to other organization for expenses
- p** Reimbursement paid by other organization for expenses

- q** Other transfer of cash or property to other organization(s)
- r** Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

| | (A) Name of other organization(s) | (B) Transaction type (a-r) | (C) Amount involved |
|-----|--------------------------------------|-------------------------------|------------------------|
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |

| | |
|-------------------------|-------------------------------------------------------------------------------------------------------------------|
| <u>Policy #:</u> | <u>BT 1.00</u> (6 pages) |
| Classification: | Board of Trustees |
| Category: | Official Documents |
| <u>Topic:</u> | <u>Articles of Incorporation (Charter)</u> |
| Approved by: | 1) Pennsylvania Department of Education 2) Members of the Corporation & 3) Board of Trustees |
| Signature: |  Chair, Board of Trustees |
| Original Date: | March 3, 1965 |
| Latest Review: | 2008 |
| Latest Revision: | October 14, 2008 |

Articles of Incorporation (Charter)

In compliance with the requirements of 15 Pa. C.S. § 5915, The Articles of Incorporation of Neumann University are hereby amended and restated as follows:

BE IT KNOWN, that the undersigned, all of whom are residents of the Commonwealth of Pennsylvania and citizens of the United States, and all of whom are of full age, having associated themselves together for the purpose of incorporating Neumann University as a nonprofit corporation, do hereby declare, set forth and certify that the following are the purposes, objects, articles and conditions of their association for and upon which they desire to be incorporated.

Article I. Name

The name of the corporation is Neumann University.

Article II. Address

The address of the registered office of the corporation is One Neumann Drive, Aston, Delaware County, Pennsylvania 19014.

Article III. Purposes

The corporation is incorporated under the Nonprofit Corporation Law of the Commonwealth of Pennsylvania exclusively for charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, specifically to maintain and operate a University for the liberal education of men and women, as well as to promote their spiritual, intellectual, cultural and professional well being consistent with the tenets of the Roman Catholic Church. The Corporation, through its Board of Trustees has the authority to confer the degree of Bachelor of Arts

and the degree of Bachelor of Science to those who successfully complete the required courses and to confer such other degrees as may be approved and authorized from time to time by the duly constituted authorities. The Corporation does not contemplate pecuniary gain or profit, incidental or otherwise.

Article IV. Term

The term for which the corporation is to exist is perpetual.

Article V. Corporation Basis

The corporation is organized on a non-stock basis.

Article VI. Non-Stock Members

The Members of this corporation shall consist of the Congregational Minister and the Council of the religious congregation of the Sisters of St. Francis of Philadelphia, and such other Sisters of St. Francis as may be designated in writing from time to time by the Congregational Minister and Council.

At all meetings of the Members of this corporation, the presence of a majority of the total number of Members of this corporation shall constitute a quorum for the transaction of business by this corporation.

Except as otherwise required by law, the vote of a majority of Members of this corporation present at any meetings at which a quorum is present shall be the act of the Members of this corporation.

From among the Members of this corporation, one person, who is so selected by the other Members, shall serve as a voting member of the Board of Trustees of this corporation ex officio, during her term of office as a Member. At least five elected members of the Board of Trustees of this corporation shall be members of the religious congregation of the Sisters of St. Francis of Philadelphia.

Articles VII. Incorporators

The names and addresses of the incorporators of the corporation were:

| | |
|--------------------------------------------------------------|-----------------------------------------------------------------------------------|
| Mary R. MacIntyre, known in religion as Mother Mary Agnes | Convent of Our Lady of Angels Convent Road Glen Riddle, Delaware County, PA |
| Agnes M. Keough, known in religion as Mother Mary Leandro | Convent of Our Lady of Angels Convent Road Glen Riddle, Delaware County, PA |
| Mary E. Bowman, known in religion as Sister Mary Leobalda | Convent of Our Lady of Angels Convent Road Glen Riddle, Delaware County, PA |

Jane D. Bogle, known in religion
as Sister Mary St. Robert

Convent of Our Lady of Angels
Convent Road
Glen Riddle, Delaware County, PA

Anna A. Egan, known in religion
as Sister Mary Marita

Convent of Our Lady of Angels
Convent Road
Glen Riddle, Delaware County, PA

Article VIII. Initial Trustees

The names and addresses of the initial Trustees of the corporation were:

| Names and Addresses | Title |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| Mary R. MacIntyre, known in religion as Mother Mary Agnes Convent of our Lady of Angels Convent Road Glen Riddle, Delaware County, PA | Trustee |
| Agnes M. Keough, known in religion as Mother Mary Leandro Convent of our Lady of Angels Convent Road Glen Riddle, Delaware County, PA | Trustee |
| Jane D. Bogle, known in religion as Sister Mary St. Robert Convent of our Lady of Angels Convent Road Glen Riddle, Delaware County, PA | Trustee |
| Mary E. Bowman, known in religion as Sister Mary Leobalda Convent of our Lady of Angels Convent Road Glen Riddle, Delaware County, PA | Trustee |
| Anna A. Egan, known in religion as Sister Mary Marita Convent of our Lady of Angels Convent Road Glen Riddle, Delaware County, PA | Trustee and Secretary |
| Catherine M. Berlo, known in religion | Trustee and Treasurer |

as Sister Mary Ernesta
Convent of our Lady of Angels
Convent Road
Glen Riddle, Delaware County, PA

Margaret V. Flynn, known in religion as Trustee, President and Dean
Mother Mary Everilda
Convent of our Lady of Angels
Convent Road
Glen Riddle, Delaware County, PA

Article IX. Lobbying Prohibition

(a) No substantial part of the activities of the corporation shall be the carrying on of propoganda, or otherwise attempting to influence legislation, (except as otherwise provided by Section 501 (h) of the Internal Revenue Code of 1986, or corresponding provisions of any subsequent Federal tax laws), and the corporation shall not participate in or intervene in (including the publishing or distributing of statements) any political campaign on behalf of (or in opposition to) any candidate for public office.

(b) Notwithstanding any other provisions set forth herein, the corporation shall not carry on any activities not permitted to be carried on (i) by a corporation exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1986, or corresponding provisions of any subsequent Federal tax law, or (ii) by a corporation, contributions to which are deductible for Federal income tax purposes.

(c) The corporation shall be managed at all times with policies and practices that provide for equal rights, privileges and opportunities to any person regardless of race, sex, religion or national origin.

Article X. Governance

Subject to the purposes and provisions of these Articles, the Board of Trustees shall manage, and shall adopt Bylaws and Amendments thereto for the conduct of its business, including the election, appointment, and removal of the members of the said Board. The Board of Trustees shall consist of no less than fifteen and no more than thirty Trustees.

Article XI. Reserved Powers

The corporation shall reserve to its Members the power to approve or disapprove any action or proposal of the Board of Trustees relating to: (a) the election of the President; (b) the amendment of the Articles of Incorporation; (c) the amendment of provisions of the Bylaws relating to the Members of the corporation; (d) the dissolution or consolidation of the corporation, including but not limited to the terms of said dissolution or consolidation and to the disposition of assets pursuant

to said dissolution or consolidation; (e) the acquisition, disposition or encumbrance of real property of the corporation; (f) a change in the philosophy or purposes of the corporation; and (g) the approval of any new debt for capital or operational expenditure if such new debt, together with the debt expected to be outstanding at the time the new debt is acquired, exceeds by one hundred ten percent the amount of revenues then projected by the combined capital and operational budgets currently in effect at the time when such debt is incurred. Any action by the Board of Trustees on the foregoing subjects shall not take effect unless and until such action is duly approved by the Members in a written resolution of the Members duly delivered to the chairperson of the Board of Trustees.

Article XII. Distributions of Assets in Case of Dissolution

In the event of the entire or partial termination, dissolution or winding up of the corporation in any manner or for any reason whatsoever, the assets of the corporation which remain after payment, or making provision for payment, of all liabilities of the corporation, shall be distributed to, and only to, one or more organizations selected by the Members of this corporation, and exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code of 1986, or corresponding provisions of any subsequent Federal tax laws. Any such assets not so disposed of shall be distributed by the Court of Common Pleas of the county in which the principal office of the corporation is then located, or as otherwise provided by law, exclusively to such exempt organizations as the Court shall determine.

Article XIII. Money

The Corporation, through its Board of Trustees, shall maintain a protective endowment of at least \$500,000 beyond all indebtedness and assets invested in buildings and apparatus for the exclusive purpose of promoting instruction, provided that financial support or contributed services by its Member organization, the Sisters of St. Francis of Philadelphia, equivalent in value to the endowment may be substituted for such endowment to the extent permitted by Pennsylvania law.

Article XIV. Staff

The minimum number of persons whom it is intended to employ as members of the faculty of the University shall consist of eight regular, full-time professors in addition to the President of the Corporation, the Chief Academic Officer, and the Registrar.

Article XV. Admission

The qualifications for admission to the four-year University courses, or to advanced classes in these courses, shall be not less than four years of academic or high school preparation, or its equivalent, and shall be subject to the standards promulgated by the State Board of Education. The curriculum for these courses shall be four years in length, or its equivalent, and shall be in compliance with such rules and regulations as may be prescribed by the State Board of Education.

Revision by Board of Trustees:

November 3, 1974

July 1, 1980

December 20, 1988

October 28, 1991

December 17, 1991

December 13, 1994

March 11, 1998

October 14, 2008

EXHIBIT A

**NEUMANN COLLEGE
RESOLUTION OF THE MEMBERS OF THE CORPORATION**

WHEREAS, the Board of Members of Neumann College desire to duly approve the changes to the Neumann College Articles of Incorporation (Charter), also known as Neumann College Policy No. BT 1.00, pursuant to same policy at Article XI - Reserved Powers, at sentence following section (g);

NOW THEREFORE, BE IT RESOLVED THAT:

Any and all changes reflected in the updated Neumann College Articles of Incorporation (Charter), also known as Neumann College Policy No. BT 1.00 attached hereto as APPENDIX A, which require approval under and by Article XI - Reserved Powers, at sentence following section (g), are hereby resolved and recognized as duly approved.

Such approval is further resolved and recognized by the letter of the Congregational Minister of the Sisters of St. Francis of Philadelphia dated September 11, 2008 to the Neumann College President, attached hereto as APPENDIX B.

Pursuant to Article XI - Reserved Powers, at sentence following section (g), this resolution shall be duly delivered to the Chairperson of the Board of Trustees of Neumann College forthwith.

The resolution, is hereby accepted and approved by the Neumann College Corporation Members effective immediately.

Date: October 20, 2008

Signature: Sister Esther Anderson, OSF

SISTER ESTHER ANDERSON, OSF
President of Neumann College
Corporation Members

DELIVER TO: Jay Devine, Chairman, Neumann
College Board of Trustees

COPYS TO: Dr. Rosalie M. Mirenda,
President, Neumann College

Jonathan Peri, Esq. Vice President
and General Counsel, Neumann
College

Neil O'Brien, Esq. Counsel for the
Sisters of St. Francis of
Philadelphia



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF EDUCATION
333 MARKET STREET
HARRISBURG, PENNSYLVANIA 17126-0333

SECRETARY OF EDUCATION

April 24, 2009

717-787-5820

Dr. Rosalie M. Miranda
President
Neumann College
One Neumann Drive
Aston, PA 19014-1298

Dear Dr. Miranda:

By the authority vested in me by the GAA Amendments Act of 1990, as found in 24 Pa. C.S.A. § 6503, and based upon recommendation of staff, I am pleased to grant provisional approval, as per 22 Pa. Code § 40.51(a), to Neumann College to operate as a university within the Commonwealth of Pennsylvania with a change of legal name to 'Neumann University'.

A report after the second year of moving to university status should be submitted to the Division of Program Services. If it demonstrates success and growth, final approval of university status may be granted.

Additionally, I approve the use of 'Neumann College' as a fictitious name. Note that once university status is implemented, degree granting authority will rest solely with operation under the name 'Neumann University'.

I thank the college for its contributions to date to the higher education of this commonwealth, and I wish it success in its transition to university status as it continues to provide students a high quality education.

Sincerely,

A handwritten signature in cursive script that reads "Gerald L. Zahorchak".

Gerald L. Zahorchak, D.Ed.

DEPARTMENT OF EDUCATION
COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF STATE, CORPORATION BUREAU

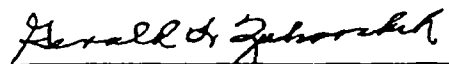
IN RE: APPLICATION FOR AMENDMENT AND RESTATEMENT OF
ARTICLES OF INCORPORATION AT NEUMANN UNIVERSITY

TO THE HONORABLE, SECRETARY OF THE COMMONWEALTH:

The petition of Neumann University with registered office located at One Neumann Drive, Aston, Delaware County, Pennsylvania 19014 for amendment to the Articles of Incorporation, having been duly considered, I find no objection to the petition to amend and restate the Articles of Incorporation as stated in Exhibit A attached hereto and made a part hereof.

Wherefore, I approve this amendment to the Articles of Incorporation of Neumann University as stated in Exhibit A, adopted by the Members pursuant to 15 Pa. C.S. § 5914 (c) and by the board of directors pursuant to 15 Pa. C. S. § 5914 (b), and recommend to the Department of State of the Commonwealth of Pennsylvania that the petition be granted.

Given under my hand and seal this 24th day of April, Two
Thousand and Nine.



Gerald L. Zahorchak, D.Ed.
Secretary of Education

Attachment

**PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU**

**Articles of Amendment-Domestic Corporation
(15 Pa.C.S.)**

- Business Corporation (§ 1915)
 Nonprofit Corporation (§ 5915)

| | | |
|--------------------------------------------------------------------------|--------------------|--------------------------|
| Name Jonathan Peri, Esq., Vice President & General Counsel | | |
| Address One Neumann Drive | | |
| City Aston, | State PA | Zip Code 19014 |

Document will be returned to the name and address you enter to the left.



Commonwealth of Pennsylvania
ARTICLES OF AMENDMENT-NONPROFIT 24 Page(s)



T0912447095

Fee: \$70

In compliance with the requirements of the applicable provisions (relating to articles of amendment), the undersigned, desiring to amend its articles, hereby states that:

1. The name of the corporation is:
Neumann College

2. The (a) address of this corporation's current registered office in this Commonwealth or (b) name of its commercial registered office provider and the county of venue is (the Department is hereby authorized to correct the following information to conform to the records of the Department):

| (a) Number and Street | City | State | Zip | County |
|--------------------------|--------------|-----------|--------------|-----------------|
| One Neumann Drive | Aston | PA | 19014 | Delaware |

(b) Name of Commercial Registered Office Provider **c/o same** County

3. The statute by or under which it was incorporated: **PA Nonprofit Corp Law, Act of 5/5/1933 as amended.**

4. The date of its incorporation: **3/3/1965**

5. Check, and if appropriate complete, one of the following:

The amendment shall be effective upon filing these Articles of Amendment in the Department of State.

The amendment shall be effective on: _____ at _____
Date Hour

PENNSYLVANIA DEPARTMENT OF STATE
CORPORATION BUREAU

Application for Registration of Fictitious Name
54 Pa.C.S. § 311

| | | |
|--------------------------------------------------------------------------|--------------------|--------------------------|
| Name Jonathan Peri, Esq., Vice President & General Counsel | | |
| Address One Neumann Drive | | |
| City Aston, | State PA | Zip Code 19014 |

Document will be returned to the name and address you enter to the left.

Commonwealth of Pennsylvania
FICTITIOUS NAME 12 Page(s)



Fee: \$70

In compliance with the requirements of 54 Pa.C.S. § 311 (relating to registration), the undersigned entity(ies) desiring to register a fictitious name under 54 Pa.C.S. Ch. 3 (relating to fictitious names), hereby state(s) that:

| |
|------------------------------------------------------|
| 1. The fictitious name is: Neumann College |
|------------------------------------------------------|

| |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. A brief statement of the character or nature of the business or other activity to be carried on under or through the fictitious name is: Same as Neumann University, i.e., Higher Education |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | | | | |
|-----------------------------------------------------------------------------------------------------------------------------|--------------|-----------|--------------|-----------------|
| 3. The address, including number and street, if any, of the principal place of business (P.O. Box alone is not acceptable): | | | | |
| One Neumann Drive | Aston | PA | 19014 | Delaware |
| Number and street | City | State | Zip | County |

| | | | |
|-----------------------------------------------------------------------------------------------------------------|-------------------|------|-------|
| 4. The name and address, including number and street, if any, of each individual interested in the business is: | | | |
| Name | Number and Street | City | State |
| | | | |
| | | | |
| | | | |

2009 MAY -4 PM 2: 22

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ▶
 - If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

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

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

| | | |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| Type or print | Name of Exempt Organization NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE) | Employer identification number 23-1657958 |
| File by the due date for filing your return. See instructions | Number, street, and room or suite no. If a P.O. box, see instructions. ONE NEUMANN DRIVE | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. ASTON, PA 19014-1298 | |

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

- | | | |
|----------------------------------------------|-------------------------------------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

CONTROLLER

- The books are in the care of ▶ **ONE NEUMANN DRIVE - ASTON, PA 19014-1298**
Telephone No ▶ **(610) 558-5505** FAX No ▶ _____
- If the organization does not have an office or place of business in the United States, check this box ▶
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **FEBRUARY 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for
▶ calendar year _____ or
▶ tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**

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

| | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|----|-----|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | \$ | |
| 3b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | 3b | \$ | |
| 3c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | N/A |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

| | | |
|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|
| Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed) | | |
| Type or print File by the extended due date for filing the return. See instructions | Name of Exempt Organization NEUMANN UNIVERSITY (FORMERLY NEUMANN COLLEGE) | Employer identification number 23-1657958 |
| | Number, street, and room or suite no. If a P.O. box, see instructions. ONE NEUMANN DRIVE | For IRS use only |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions ASTON, PA 19014-1298 | |

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

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

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

CONTROLLER

- The books are in the care of **▶ ONE NEUMANN DRIVE - ASTON, PA 19014-1298**
Telephone No **▶ (610) 558-5505** FAX No. **▶**

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

- 4 I request an additional 3-month extension of time until **MAY 15, 2010**.
- 5 For calendar year **_____**, or other tax year beginning **JUL 1, 2008**, and ending **JUN 30, 2009**.
- 6 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period
- 7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED IN ORDER TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------------|
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 8a | \$ |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. | 8b | \$ |
| c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 8c | \$ N/A |

Signature and Verification

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

Signature **▶ *[Signature]*** Title **▶ CPA - AGENT** Date **▶ 2/12/10**