Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2008

Open to Public Inspection

A For the 2008 calendar year, or tax year beginning 07-01-2008 and ending 06-30-2009

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

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

C Name of organization
THE COLLEGE OF WOOSTER

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
1101 NORTH BEVER STREET

City or town, state or country, and ZIP + 4
WOOSTER, OH 44691

D Employer identification number
34-0714654

E Telephone number
(330) 263-2321

G Gross receipts $ 166,348,861

F Name and address of Principal Officer
GRANT CORNWELL PRESIDENT
1101 NORTH BEVER STREET
WOOSTER,OH 44691

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

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

H(c) Group Exemption Number ▶

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Web site:** ▶ WWW WOOSTER EDU

K Type of organization ☑ Corporation ☐ trust ☐ association ☐ other ▶

L Year of Formation 1866

M State of legal domicile OH

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

THE COLLEGE OF WOOSTER IS A COMMUNITY OF INDEPENDENT MINDS, WORKING TOGETHER TO PREPARE STUDENTS TO BECOME LEADERS OF CHARACTER AND INFLUENCE IN AN INTERDEPENDENT GLOBAL COMMUNITY

2 Check this box ☐ 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	42
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	41
5	Total number of employees (Part V, line 2a)	5	2,494
6	Total number of volunteers (estimate if necessary)	6	720
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	1,480,923
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-97,163

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	18,748,949	10,221,907
	9	Program service revenue (Part VIII, line 2g)	76,628,594	83,102,410
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	475,325	-5,607,791
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	42,059	975,289
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	95,894,927	88,691,815
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	30,659,379	33,333,967
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	42,157,113	44,206,694
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	(Total fundraising expenses, Part IX, column (D), line 25 3,633,094)		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	28,051,759	28,044,559
	18	Total expenses—add lines 13–17 (must equal Part IX, line 25, column (A))	100,868,251	105,585,220
	19	Revenue less expenses Subtract line 18 from line 12	-4,973,324	-16,893,405

			Beginning of Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	453,924,302	398,916,769
	21	Total liabilities (Part X, line 26)	48,168,243	47,232,865
	22	Net assets or fund balances Subtract line 21 from line 20	405,756,059	351,683,904

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

Please Sign Here

****** | 2010-05-12
Signature of officer | Date

LAURIE STICKELMAIER VP FOR FINANCE AND BUSINESS
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ CHRISTOPHER B ANDERSON | Date | Check if self-empolyed ▶ ☐ | Preparer's PTIN (See Gen Inst)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ MALONEY NOVOTNY LLC
1111 SUPERIOR AVENUE SUITE 700
CLEVELAND, OH 44114

EIN ▶

Phone no ▶ (216) 363-0100

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

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

1 Briefly describe the organization's mission

See Additional Data Table

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 (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 56,203,683 including grants of $ 33,016,273) (Revenue $ 62,763,685)

INSTRUCTION - THE COLLEGE OF WOOSTER IS A LIBERAL ARTS INSTITUTION MADE UP OF A COMPREHENSIVE LIBERAL EDUCATION, CULMINATING IN A RIGOROUS, IN-DEPTH SENIOR PROJECT OF INQUIRY OR CREATIVE EXPRESSION CALLED INDEPENDENT STUDY THE COLLEGE OF WOOSTER AWARDED SCHOLARSHIPS TO 1,769 UNDERGRADUATE STUDENTS AVERAGING $18,665 PER STUDENT TO ASSIST IN MEETING CALCULATED FINANCIAL NEED

4b (Code) (Expenses $ 14,768,528 including grants of $ 230) (Revenue $ 16,152,198)

AUXILIARY SERVICES - THE COLLEGE OF WOOSTER IS A RESIDENTIAL CAMPUS, WHICH MEANS THAT OVER 99% OF ALL ENROLLED STUDENTS RESIDE IN A RESIDENCE HALL OR PROGRAM HOUSE THE OFFICE OF RESIDENCE LIFE MANAGES AND OVERSEES FOURTEEN RESIDENCE HALLS, HOUSING FROM 50 TO 270 STUDENTS EACH, AND 22 PROGRAM HOUSES THAT SERVE THE COLLEGE AND GREATER WOOSTER COMMUNITY THERE WERE APPROXIMATELY 1,694 FULL-TIME RESIDENTS DURING THIS FISCAL YEAR

4c (Code) (Expenses $ 12,818,716 including grants of $ 166,442) (Revenue $ 1,073,865)

STUDENT SERVICES - THE COLLEGE'S 120 STUDENT ORGANIZATIONS AND 22 ATHLETIC TEAMS REFLECT THE WIDE RANGE OF INTERESTS, IDEAS, HOBBIES, AND PASSIONS ON CAMPUS OPERATING EXPENSES INCLUDE THE DEAL OF STUDENTS, ADMISSIONS, FINANCIAL AID, REGISTRAR, AND STUDENT HEALTH, EACH DESIGNED TO ENHANCE STUDENT LIFE WITH SERVICE TO THE ENTIRE STUDENT BODY

(Code) (Expenses $ 9,159,773 including grants of $ 172,343) (Revenue $ 1,588,682)

RESEARCH PROGRAMS, PUBLIC & ACADEMIC SUPPORT

4d Other program services (Describe in Schedule O)

(Expenses $ 9,159,773 including grants of $ 172,343) (Revenue $ 1,588,682)

4e Total program service expenses $ 92,950,700 *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)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? *If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		No
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 ? *If "Yes," complete Schedule F, Part I*	14b	Yes	
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? *If "Yes," complete Schedule F, Part II*	15		No
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? *If "Yes," complete Schedule F, Part III*	16	Yes	
17	Did the organization report more than $15,000 on Part IX, column (A), line 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19	Yes	
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No
21	Did the organization report more than $5,000 on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to question 25*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27	Yes	

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)? *If "Yes," complete Schedule L, Part IV* . . .	**28a**		No
b	Have a family member who had a direct or indirect business relationship with the organization? *If "Yes," complete Schedule L, Part IV* . . .	**28b**	Yes	
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? *If "Yes," complete Schedule L, Part IV* .	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M* . . .	**30**	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I* . . .	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II* . . .	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I* . . .	**33**	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1* . . .	**34**	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* . . .	**35**	Yes	
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2* . . .	**36**		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI* . . .	**37**		No

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	2,502			
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?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	2,494			
b	If at least one is reported in 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.*			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	Yes	
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)?			4a		No
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?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, *Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?*			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
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 $75 or more?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
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?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
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?			8		
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					
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					
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?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	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 2-7 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 . . **1a** 42			
b	Enter the number of voting members that are independent . . **1b** 41			
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?	**2**		No
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?	**3**		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	**4**		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	**5**		No
6	Does the organization have members or stockholders?	**6**		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	**7a**		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	the governing body?	**8a**	Yes	
b	each committee with authority to act on behalf of the governing body?	**8b**	Yes	
9a	Does the organization have local chapters, branches, or affiliates?	**9a**		No
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?	**9b**		
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	**10**	Yes	
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	**11**		No

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? *If "No", go to line 13*	**12a**	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	**12c**	Yes	
13	Does the organization have a written whistleblower policy?	**13**	Yes	
14	Does the organization have a written document retention and destruction policy?	**14**		No
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			
a	The organization's CEO, Executive Director, or top management official?	**15a**	Yes	
b	Other officers or key employees of the organization?	**15b**	Yes	
	Describe the process in Schedule O			
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?	**16a**		No
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?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed OH

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ own website ☑ another's website ☑ upon request

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 See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

TODD E BURSON
1101 NORTH BEVER STREET
WOOSTER, OH 44691
(330) 263-2321

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) and key employees regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations

* List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations

* List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

☐ 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) Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations

Part VII Continued

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Total . . . . ▶								1,763,698	0	365,806

2 Total number of individuals (including those in 1a) who received more than $100,000 in reportable compensation from the organization ▶9

			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**	Yes	
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

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
MACLACHLAN CORNELIUS AND FILONI INC 307 FOURTH AVENUE SUITE 200 PITTSBURGH, PA 15222	ARCHITECTURAL	623,306
MCCLINTOCK ELECTRIC INC 402 EAST HENRY STREET WOOSTER, OH 44691	ELECTRIC CONTRACTOR	379,472
SPECIALTY SURFACES INTERNATIONAL IN 1200 LIBERTY RIDGE DRIVE SUITE 100 WAYNE, PA 19087	ART TURF INSTALLER	981,886
GUENTHER MECHANICAL INC 1248 MIDDLE ROWSBURG ROAD ASHLAND, OH 44805	MECHANICAL SERVICE	824,073
WOOSTER GLASS COMPANY INC 419 S MARKET STREET WOOSTER, OH 44691	GLASS INSTALLTION	298,960

2 Total number of independent contractors (including those in 1) who received more than $100,000 in compensation from the organization . . . . ▶ 19

Part VIII Statement of Revenue

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
	Contributions, gifts, grants and other similar amounts						
1a	Federated campaigns . . 1a						
b	Membership dues 1b						
c	Fundraising events 1c		5,250				
d	Related organizations . . . 1d		10,975				
e	Government grants (contributions) 1e		897,132				
f	All other contributions, gifts, grants, and similar amounts not included above 1f		9,308,550				
g	Noncash contributions included in lines 1a-1f $ 456,016						
h	**Total (Add lines 1a-1f)** . . . . ▶			10,221,907			
	Program Service Revenue		Business Code				
2a	TUITION AND FEES		900,099	62,436,826	62,436,826		
b	ROOM & BOARD		721,000	15,673,926	15,673,926		
c	STUDENT AUXILIARY SERVICES		451,211	1,982,224	478,272	405,160	1,098,792
d	STUDENT SERVICES		900,099	1,073,865	1,073,865		
e	COMMUNITY EVENTS		900,099	857,352	857,352		
f	All other program service revenue			1,078,217	1,058,189		20,028
g	**Total. Add lines 2a-2f** . . . . ▶ $ 83,102,410						
	Other Revenue						
3	Investment income (including dividends, interest other similar amounts) . . . . ▶			1,626,878		117,280	1,509,598
4	Income from investment of tax-exempt bond proceeds . . ▶			0			
5	Royalties			5,303			5,303
		(i) Real	(ii) Personal				
6a	Gross Rents	74,503					
b	Less rental expenses	68,675					
c	Rental income or (loss)	5,828					
d	Net rental income or (loss) . . . . ▶			5,828			5,828
		(i) Securities	(ii) Other				
7a	Gross amount from sales of assets other than inventory	17,578,242	52,757,565				
b	Less cost or other basis and sales expenses	24,755,106	52,815,370				
c	Gain or (loss)	-7,176,864	-57,805				
d	Net gain or (loss) . . . . ▶			-7,234,669			-7,234,669
8a	Gross income from fundraising events (not including $ 6,965 of contributions reported on line 1c) See Part IV, line 18 *Attach Schedule G if total exceeds $15,000* . . . . a		5,250				
b	Less direct expenses . . . b		7,655				
c	Net income or (loss) from fundraising events . . ▶			-690			-690
9a	Gross income from gaming activities See part IV, line 19 *Complete Schedule G if total exceeds $15,000* a		16,605				
b	Less direct expenses . . . b		10,240				
c	Net income or (loss) from gaming activities . . . ▶			6,365			6,365
10a	Gross sales of inventory, less returns and allowances . a						
b	Less cost of goods sold . . b						
c	Net income or (loss) from sales of inventory . . ▶			0			
	Miscellaneous Revenue		Business Code				
11a	ADMIN AUXILIARY SERVICES		721,110	958,483		958,483	
b							
c							
d	All other revenue						
e	**Total. Add lines 11a-11d** . . . . $ 958,483						
12	**Total Revenue.** Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . ▶			88,691,815	81,578,430	1,480,923	-4,589,445

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	51,581	51,581		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	32,105,314	32,105,314		
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	1,177,072	1,177,072		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,669,698	314,121	1,102,385	253,192
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	32,544,998	27,963,391		1,608,647
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,665,916	2,265,532	271,800	128,584
9	Other employee benefits	4,897,268	4,190,988	480,723	225,557
10	Payroll taxes	2,428,814	2,006,962	301,889	119,963
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	100,722	12,638	88,084	
c	Accounting	61,000	3,000	58,000	
d	Lobbying	0			
e	Professional fundraising *See Part IV, line 17*	0			
f	Investment management fees	191,219		191,219	
g	Other	2,009,722	1,667,484	227,236	115,002
12	Advertising and promotion	115,037	100,742	7,097	7,198
13	Office expenses	5,726,758	5,087,686	296,669	342,403
14	Information technology	1,796,597	956,865	786,517	53,215
15	Royalties	43,275	42,134	941	200
16	Occupancy	2,360,816	1,347,158	992,558	21,100
17	Travel	1,867,555	1,498,900	82,657	285,998
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	1,305	1,305		
19	Conferences, conventions and meetings	409,100	369,930	29,914	9,256
20	Interest	425,041	281,707	140,461	2,873
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	5,894,398	5,414,446	378,122	101,830
23	Insurance	394,790	377,387	7,843	9,560
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	OFF-CAMPUS PROGRAMS	2,103,256	2,103,256		
b	SMALL EQUIPMENT	1,481,705	1,294,335	117,669	69,701
c	REPAIRS & MAINTENANCE	888,344	652,812	209,184	26,348
d	LIBRARY MATERIALS	464,003	464,003		
e	STUDENT PROGRAMS	458,190	458,190		
f	All other expenses	1,251,726	741,761	257,498	252,467
25	**Total functional expenses.** Add lines 1 through 24f	105,585,220	92,950,700	9,001,426	3,633,094
26	**Joint Costs.** Check ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		16,221	1	11,959
	2	Savings and temporary cash investments		495,626	2	1,003,344
	3	Pledges and grants receivable, net		8,343,087	3	8,233,754
	4	Accounts receivable, net		642,110	4	723,408
	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		65,806	7	496,827
	8	Inventories for sale or use		774,054	8	707,019
	9	Prepaid expenses and deferred charges		527,062	9	1,242,052
	10a	Land, buildings, and equipment cost basis	10a 193,368,747			
	b	Less accumulated depreciation *Complete Part VI of Schedule D*	10b 68,484,365	123,970,589	10c	124,884,382
	11	Investments—publicly traded securities		95,183,420	11	81,261,755
	12	Investments—other securities See Part IV, line 11 *Complete Part VII of Schedule D*		213,437,903	12	170,772,145
	13	Investments—program-related See Part IV, line 11 *Complete Part VIII of Schedule D*		5,397,742	13	5,544,280
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11 *Complete Part IX of Schedule D*		5,070,682	15	4,035,844
	16	**Total assets.** *Add lines 1 through 15 (must equal line 34)*		453,924,302	16	398,916,769
Liabilities	17	Accounts payable and accrued expenses		7,466,191	17	8,282,228
	18	Grants payable			18	
	19	Deferred revenue		1,418,445	19	1,561,634
	20	Tax-exempt bond liabilities		21,098,404	20	19,657,246
	21	Escrow account liability *Complete Part IV of Schedule D*			21	
	22	Payable 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		4,838	23	0
	24	Unsecured notes and loans payable			24	
	25	Other liabilities *Complete Part X of Schedule D*		18,180,365	25	17,731,757
	26	**Total liabilities.** *Add lines 17 through 25*		48,168,243	26	47,232,865
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		278,729,225	27	235,373,970
	28	Temporarily restricted net assets		24,830,561	28	19,676,432
	29	Permanently restricted net assets		102,196,273	29	96,633,502
		Organizations that do not follow SFAS 117, check here ▶ ☐ 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		405,756,059	33	351,683,904
	34	Total liabilities and net assets/fund balances		453,924,302	34	398,916,769

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ cash ☑ accrual ☐ other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
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?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

Part I Reason for Public Charity Status (to be completed by all organizations) (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 331/3% 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 331/3% 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 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?

		Yes	No
(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 the supported organization?	**11g(i)**		No
(ii) a family member of a person described in (i) above?	**11g(ii)**		No
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		No

h Provide the following information about the organizations the organization supports

(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? Yes	No	**(v)** Did you notify the organization in col **(i)** of your support? Yes	No	**(vi)** Is the organization in col **(i)** organized in the U S ? Yes	No	**(vii)** Amount of support?
Total									

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

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 line 1-3						
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
6 **Public Support** subtract line 5 from line 4						

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 501(c)(3) organization, check this box and **stop here** ▶☐

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 for 2007 Schedule A, Part IV-A, line 26f | 15 |

16a **33 1/3% 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 ▶☐

b **33 1/3% Test - 2007.** If the organization did not check the 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 ▶☐

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 ▶☐

b **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 ▶☐

18 **Private Foundation.** If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in IRC 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 Total of lines 7a and 7b						
8 **Public Support** (Substract line 7c from line 6)						

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 30 June, 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 501(c)(3) organization, check this box and **stop here** ▶☐

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 for 2007 Schedule A, Part IV-A, line 27g	**16**	

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% 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% 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 ▶☐

Part IV **Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

SCHEDULE 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
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

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 importantly 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 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 the 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 why in Part XIV and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

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 the 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	276,807,481				
b	Contributions	2,020,346				
c	Investment earnings or losses	-42,236,887				
d	Grants or scholarships					
e	Other expenditures for facilities and programs	20,844,862				
f	Administrative expenses					
g	End of year balance	215,746,078				

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

a Board designated or quasi-endowment ▶ 55 224 %

b Permanent endowment ▶ 42 296 %

c Term endowment ▶ 2 479 %

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

			Yes	No
	(i) unrelated organizations	3a(i)	Yes	
	(ii) related organizations	3a(ii)	Yes	
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	Yes	

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	136,837	1,560,680		1,697,517
b Buildings	719,238	74,128,660	29,129,642	45,718,256
c Leasehold improvements	23,298	68,148,231	16,027,438	52,144,091
d Equipment		30,966,135	17,807,271	13,158,864
e Other		17,685,668	5,520,014	12,165,654
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				124,884,382

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other See Additional Data		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	170,772,145	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
STUDENT LOANS	5,544,280	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

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	88,691,815
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	105,585,220
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-16,893,405
4	Net unrealized gains (losses) on investments	4	-37,178,750
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	-37,178,750
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-54,072,155

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	18,656,068
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-37,178,750		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	81,320		
e	Add lines **2a** through **2d**			2e	-37,097,430
3	Subtract line **2e** from line **1**			3	55,753,498
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	32,938,317		
c	Add lines **4a** and **4b**			4c	32,938,317
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	88,691,815

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

1	Total expenses and losses per audited financial statements			1	72,728,223
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	81,320		
e	Add lines **2a** through **2d**			2e	81,320
3	Subtract line **2e** from line **1**			3	72,646,903
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	32,938,317		
c	Add lines **4a** and **4b**			4c	32,938,317
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	105,585,220

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 XIV, 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

Identifier	Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 34-0714654
Name: THE COLLEGE OF WOOSTER

Form 990, Schedule D, Part VII - Investments— Other Securities

(a) Description of security or cateory (including name of security)	**(b)**Book value	**(c)** Method of valuation Cost or end-of-year market value
ABBOTT CAPITAL EQUITY FUND LTD	298,738	F
ABBOTT CAPITAL EQUITY III LTD	1,934,909	F
ALT INVESTMENTS INT'L LTD	8,112,288	F
ALTERNATIVE INVESTMENTS LTD	10,661,636	F
BERENS CAPITAL FUND LTD	9,043,968	F
BLUE ORCHID LTD	7,229,439	F
ARROWPOINT INVESTMENT LTD	10,000,000	F
BOW RIVER CAPITAL V LTD	1,624,715	F
COGENT INVESTMENT STRATEGIES	10,026,187	F
INDUS ASIA PACIFIC FUND LTD	8,706,154	F
INTRGRAL CAPITAL VII LTD	4,430,112	F
KARSCH CAPITAL LTD	10,578,373	F
MOON CAPITAL LTD	6,422,862	F
MORGAN STANLEY REAL ESTATE III	2,556,380	F
OASIS OFFSHORE LTD	2,728,199	F
PENNANT CAPITAL MGMT LTD	10,976,078	F
PENNANT WINDWARD LTD	9,878,163	F
SANDALWOOD LTD	3,405,416	F
SKYBRIDGE CAPITAL LTD	2,687,818	F
TOCONIC OPPORTUNITY OFFSHORE	11,459,779	F
DAVIDSON KEMPNER LP	10,101,776	F
INDUS ALT EQUITY FUND	73,544	F
NEUBERGER BERMAND SEC OPP	1,648,835	F
PENNANT CREDIT OPP LP	6,793,228	F
ROSE GROVE LTD	11,393,548	F
SAMLYN LTD	8,000,000	F

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
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?	2	Yes	
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	3	Yes	
	THE COLLEGE IS IN COMPLIANCE WITH REV PROC 75-50 THE COLLEGE PUBLISHES ITS NONDISCRIMINATION POLICY IN DOCUMENTS USED FOR FINANCIAL AID, ADMISSIONS, AND STUDENT PROGRAMS, AND HAS THE POLICY POSTED ON ITS WEB SITE			
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
5	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		No
	If you answered "Yes" to either 6a or b, please explain using an attached statement			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	7	Yes	

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance . . . . ☑ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees or agents in region	**(d)** Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures in region
See Add'l Data					
Totals . . . . . ▶	0	0			1,507,378

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . ▶ ☐
Use Schedule F-1 if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of organizations that are recognized as charities by the foreign country or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

3 Enter total number of other organizations or entities . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of non-cash assistance	**(g)** Description of non-cash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)
SCHOLARSHIPS FOR STUDY ABROAD PROGRAMS	Cent America/Caribbean	3			9,100	CRED TO ACCT	FMV
SCHOLARSHIPS FOR STUDY ABROAD PROGRAMS	East Asia/Pacific	14			161,821	CRED TO ACCT	FMV
SCHOLARSHIPS FOR STUDY ABROAD PROGRAMS	Europe/Iceland/Greenland	73			642,797	CRED TO ACCT	FMV
SCHOLARSHIPS FOR STUDY ABROAD PROGRAMS	North America	5			42,265	CRED TO ACCT	FMV
SCHOLARSHIPS FOR STUDY ABROAD PROGRAMS	Russia	1			16,755	CRED TO ACCT	FMV
SCHOLARSHIPS FOR STUDY ABROAD PROGRAMS	South America	16			135,291	CRED TO ACCT	FMV
SCHOLARSHIPS FOR STUDY ABROAD PROGRAMS	South Asia	2			13,000	CRED TO ACCT	FMV
SCHOLARSHIPS FOR STUDY ABROAD PROGRAMS	Sub-Saharan Africa	15			126,430	CRED TO ACCT	FMV
SCHOLARSHIPS FOR STUDY ABROAD PROGRAMS	Sub-Saharan Africa	1	10,500	WIRE TRANS			
STUDENT RESEARCH	Cent America/Caribbean	2	2,414	CHECK			
STUDENT RESEARCH	East Asia/Pacific	1	539	CHECK			
STUDENT RESEARCH	Europe/Iceland/Greenland	9	7,539	CHECK			
STUDENT RESEARCH	North America	3	2,611	CHECK			
STUDENT RESEARCH	South America	2	1,328	CHECK			
STUDENT RESEARCH	Sub-Saharan Africa	2	4,682	CHECK			

Part IV **Supplemental Information**

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

Identifier	ReturnReference	Explanation
MONITORING USE OF GRANT FUNDS,	PART I, LINE 2	SELECTION COMMITTEES COMPLETE FORMS PROVIDING INFORMATION ON INDIVIDUAL RECIPIENTS, THE AWARD PROVIDED, SELECTION CRITERIA, HOW FUNDS MAY BE USED, HOW THE USE OF FUNDS WILL BE MONITORED, RELATED PARTIES, AND THE OFFICE RESPONSIBLE FOR MAINTAINING RECORDS THE SELECTION COMMITTEE IS RESPONSIBLE FOR ONGOING MONITORING, WHICH MAY INVOLVE REIMBURSEMENT OF ACTUAL EXPENSES, WRITTEN REPORTS, SITE VISITS, OR CREDITS TO STUDENT ACCOUNTS (FOR SCHOLARSHIPS)

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 34-0714654
Name: THE COLLEGE OF WOOSTER

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
Central America and the Caribbean	0	0	Program Services	INVESTMENTS	
Central America and the Caribbean	0	0	Program Services	ACADEMIC SUPPPORT	3,984
Central America and the Caribbean	0	0	Program Services	INSTRUCTION	23,085
Central America and the Caribbean	0	0	Program Services	RESEARCH	2,414
Central America and the Caribbean	0	0	Program Services	STUDENT SERVICES	581
East Asia and the Pacific	0	0	Program Services	ACADEMIC SUPPORT	3,514
East Asia and the Pacific	0	0	Program Services	INSTRUCTION	161,821
East Asia and the Pacific	0	0	Program Services	RESEARCH	4,235
East Asia and the Pacific	0	0	Program Services	STUDENT SERVICES	1,622
Europe (Including Iceland and Greenland)	0	0	Program Services	ACADEMIC SUPPORT	15,051
Europe (Including Iceland and Greenland)	0	0	Program Services	INSTRUCTION	705,603
Europe (Including Iceland and Greenland)	0	0	Program Services	RESEARCH	175,616
Europe (Including Iceland and Greenland)	0	0	Program Services	ADMINISTRATIVE SUPPORT	109
Middle East and North Africa	0	0	Program Services	INSTRUCTION	50,735
Middle East and North Africa	0	0	Program Services	RESEARCH	5,036
North America	0	0	Program Services	ACADEMIC SUPPORT	2,409
North America	0	0	Program Services	INSTRUCTION	65
North America	0	0	Program Services	RESEARCH	7,766
North America	0	0	Program Services	STUDENT SERVICES	875
Russia and the Newly Independent States	0	0	Program Services	INSTRUCTION	16,755
Russia and the Newly Independent States	0	0	Program Services	RESEARCH	446
South America	0	0	Program Services	ACADEMIC SUPPORT	5,659
South America	0	0	Program Services	INSTRUCTION	137,058
South America	0	0	Program Services	RESEARCH	1,328
South Asia	0	0	Program Services	ACADEMIC SUPPORT	465
South Asia	0	0	Program Services	INSTRUCTION	13,000
South Asia	0	0	Program Services	RESEARCH	6,817
South Asia	0	0	Program Services	STUDENT SERVICES	272
Sub-Saharan Africa	0	0	Program Services	ACADEMIC SUPPORT	1,098
Sub-Saharan Africa	0	0	Program Services	INSTRUCTION	137,017
Sub-Saharan Africa	0	0	Program Services	RESEARCH	6,302
Sub-Saharan Africa	0	0	Program Services	STUDENT SERVICES	16,640
East Asia and the Pacific			Fundraising		
Europe (Including Iceland and Greenland)			Fundraising		
North America			Fundraising		
South America			Fundraising		
South Asia			Fundraising		

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
		Yes	**No**			
Total			▶			

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

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 (event type)	(b) Event #2 (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Charitable contributions				
	3 Gross revenue (line 1 minus line 2)				
Direct Expenses	4 Cash Prizes				
	5 Non-cash Prizes				
	6 Rent/Facility costs				
	7 Other direct expenses				
	8 Direct expense summary Add lines 4 through 7 in column (d) ▶				
	9 Net income summary Combine lines 3 and 8 in column (d) ▶				

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))
Revenue	1 Gross revenue			16,605	16,605
Direct Expenses	2 Cash prizes			3,905	3,905
	3 Non-cash prizes			0	0
	4 Rent/facility costs			3,813	3,813
	5 Other direct expenses			2,477	2,477
	6 Volunteer labor	☐ Yes ___ % ☐ No	☐ Yes ___ % ☐ No	☑ Yes 50 % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				10,195
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				6,410

			Yes	No
9	Enter the state(s) in which the organization operates gaming activities OH			
a	Is the organization licensed to operate gaming activities in each of these states?	9a		No
b	If "No," Explain THE COLLEGE CONDUCTED GAMES OF CHANCE ONLY AND NO LICENSE IS REQUIRED FOR A QUALIFIED CHARITABLE ORGANIZATION LIKE THE COLLEGE TO CONDUCT A GAME OF CHANCE			
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a		No
b	If "Yes," Explain			
11	Does the organization operate gaming activities with nonmembers?	11		No
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?	12		No

					Yes	No
13	Indicate the percentage of gaming activity operated in					
a	The organization's facility	13a	100 %			
b	An outside facility	13b	0 %			

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

Name ▶ SHEILA WILSON SECRETARY OF THE COL

Address ▶ 1101 NORTH BEVER STREET
WOOSTER, OH 44691

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . **15a** 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 ▶ JESSICA ARMSTRONG

Gaming manager compensation ▶ $ 1,178

Description of services provided ▶ PLANNING, ORGANIZATION, ADVERTISING, RECORD-KEEPING

☐ 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** 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 I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 if additional space is needed . . . ☐

1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AKRON-CANTON REGIONAL FOODBANK INC 350 OPPORTUNITY PARKWAY AKRON, OH 44307	34-1369388	501(C)(3)	10,000				HELP AMELIORATE HUNGER
GREAT DECISIONS232 ELM DRIVE WOOSTER, OH 44691	30-0085518	501(C)(3)	6,546				LECTURE SERIES AT COLLEGE OF WOOSTER
HEIFER PROJECT INTERNATIONAL INC1 WORLD AVE LITTLE ROCK, AR 72202	35-1019477	501(C)(3)	10,000				SUPPORT HEIFER PROJECT
WESTMINSTER PRESBYTERIAN CHURCH 353 E PINE ST WOOSTER, OH 44691	34-0991124	501(C)(3)	10,000				OPERATING SUPPORT

2 Enter total number of section 501(c)(3) and government organizations . . . 4

3 Enter total number of other organizations . . . 0

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
See Additional Data Table					

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

See Additional Data Table

Identifier	Return Reference	Explanation
MONITORING USE OF GRANT FUNDS,	PART I, LINE 2	SELECTION COMMITTEES COMPLETE FORMS PROVIDING INFORMATION ON INDIVIDUAL RECIPIENTS, THE AWARD PROVIDED, SELECTION CRITERIA, HOW FUNDS MAY BE USED, HOW USE OF FUNDS WILL BE MONITORED, RELATED PARTIES, AND THE OFFICE RESPONSIBLE FOR MAINTAINING RECORDS THE COLLEGE ALSO OBTAINS DOCUMENTATION THAT U S ENTITIES ARE ELIGIBLE TO RECEIVE CHARITABLE CONTRIBUTIONS BEFORE PAYING GRANTS THE SELECTION COMMITTEE IS RESPONSIBLE FOR ONGOING MONITORING, WHICH MAY INVOLVE REIMBURSEMENT OF ACTUAL EXPENSES, REPORTS, SITE VISITS, OR CREDITS TO STUDENT ACCOUNTS (FOR SCHOLARSHIPS)

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 34-0714654
Name: THE COLLEGE OF WOOSTER

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(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
SCHOLARSHIPS FOR COURSES	1762		31,790,858	FMV	CREDIT TO STUD ACCT
SCHOLARSHIPS FOR RESEARCH	103	58,903			
SCHOLARSHIPS FOR RESEARCH	8		8,573	FMV	SUPPLIES FOR RSCH
SUMMER STUDENT FELLOWSHIPS	59	88,808			
ENTREPRENEURIAL GRANTS FOR STUDENTS	21	65,750			
PRIZES FOR STUDENTS	127	58,319			
PRIZES FOR STUDENTS	3		311	FMV	BOOKS & OTHER AWARDS
VOCATIONAL GRANTS FOR STUDENTS	9	21,750			
EDUCATIONAL TRAVEL	11	11,812			
USED BEDS FOR THE NEEDY	23		230	FMV	USED BEDS

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
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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 ☐ First class or charter travel ☑ Housing allowance or residence for personal use ☑ Travel for companions ☐ Payments for business use of personal residence ☑ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☑ Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	**1b**		No
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?	**2**	Yes	
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 ☑ Compensation committee ☑ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☐ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a			
a	Receive a severance payment or change of control payment?	**4a**	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only 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?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
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?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured 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	**8**	Yes	

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

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

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

(A) Name		(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				
Cornwell Grant	(i)	315,000	0	36,376	58,000	53,156	462,532	180,500
	(ii)	0	0	0	0	0	0	0
Patton Sara L	(i)	162,482	0	21,040	21,945	7,614	213,081	103,679
	(ii)	0	0	0	0	0	0	0
Crawford Iain	(i)	147,420	0	21,040	20,373	8,499	197,332	96,362
	(ii)	0	0	0	0	0	0	0
Vellines Mary K	(i)	126,949	0	41,894	16,213	1,954	187,010	88,671
	(ii)	0	0	0	0	0	0	0
Sell John	(i)	141,522	0	5,106	18,265	14,346	179,239	86,318
	(ii)	0	0	0	0	0	0	0
Moore Stephen	(i)	86,783	0	41,705	15,934	13,135	157,557	51,975
	(ii)	0	0	0	0	0	0	0
Schilling Hayden	(i)	92,613	0	44,860	17,476	16,957	171,906	81,233
	(ii)	0	0	0	0	0	0	0
Hales R Stanton	(i)	92,517	0	25,147	14,400	7,612	139,676	139,676
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
BENEFITS PROVIDED TO CERTAIN OFFICERS,	PART I, LINE 1A	Travel for companions the President's spouse traveled with the President to various events because of her job responsibilities with the college None of the travel was treated as taxable income to the President or his spouse Tax indemnification the President's payroll was grossed-up for the taxable tuition benefit that the College provided Housing allowance the College provided the President with a house on campus The house is used substantially for College-related purposes including meetings with students and faculty, meetings with alumni and donors, and other similar events None of this benefit was treated as taxable income to the President Social club dues the College paid for the President's membership to a local country club The President used the Club mostly for College-related purposes including entertaining prospective donors and Trustees The President's personal use of the Club was treated as taxable compensation Personal services the College provided custodial services for the President's house Part of these services was treated as taxable compensation to the President
WRITTEN POLICY FOR PAYMENT OF EXPENSES,	PART I, LINE 1B	THE PRESIDENT'S CONTRACT DETERMINED WHEN TRAVEL FOR COMPANIONS OR TAX INDEMNIFICATION OR GROSS-UP PAYMENTS WOULD BE PERMITTED THIS CONTRACT WAS DEVELOPED BY THE BOARD OF TRUSTEES, AND THE TRUSTEES WERE INDEPENDENT OF THE PRESIDENT THE PRESIDENT'S JOB RESPONSIBILITIES REQUIRE THE NEED FOR A HOUSE ON CAMPUS, SOCIAL CLUB DUES, AND CERTAIN PERSONAL SERVICES THE PROVISION OF THESE BENEFITS IN HIS CONTRACT WAS APPROVED BY THE BOARD OF TRUSTEES THE CONTRACT MEETS THE PROVISIONS OF THE "INITIAL CONTRACT" EXCEPTION OF REGULATION SECTION 53 4958-4(A)(3)
SEVERANCE PAYMENTS,	PART I, LINE 4A	R STANTON HALES RECEIVED COMPENSATION AS PART OF HIS SEVERANCE PACKAGE, INCLUDING SALARY OF $117,664, DEFERRED COMPENSATION OF $14,400, AND OTHER COMPENSATION OF $7,612
SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN,	PART I, LINE 4B	MARY K VELLINES AND GRANT CORNWELL EACH PARTICIPATED IN A SECTION 457(F) PLAN AND RECEIVED CONTRIBUTIONS TO THE PLAN OF $16,213 AND $58,000 RESPECTIVELY
INITIAL CONTRACT EXCEPTION,	PART I, LINE 8	JOHN SELL SERVED AS INTERIM VP OF FINANCE AND BUSINESS THROUGH MARCH 8, 2009, AS APPROVED BY THE BOARD OF TRUSTEES AND THE PRESIDENT ALL OF HIS SALARY AND BENEFITS WERE PAID UNDER THIS INITIAL CONTRACT ADDITIONALLY, GRANT CORNWELL, PRESIDENT OF THE COLLEGE OF WOOSTER, RECEIVED COMPENSATION AND BENEFITS PURSUANT TO HIS INITIAL CONTRACT WITH THE INSTITUTION

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

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 Yes	(g) Defeased No	(h) On Behalf of Issuer Yes	(h) On Behalf of Issuer No
A	OHIO HIGHER EDUCATIONAL FACILITY COMMISSION	34-6849674	67756BQW3	12-28-2005	15,852,223	EDUCATIONAL FACILITIES		X		X
B	OHIO HIGHER EDUCATIONAL FACILITY COMMISSION	34-6849674	67756AHX1	04-03-2003	7,748,270	EDUCATIONAL FACILITIES		X		X

Part II Proceeds *(Optional for 2008)*

		A	B	C	D	E
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					

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
9	Were the bonds issued as part of a current refunding issue?		X		X						
10	Were the bonds issued as part of an advance refunding issue?		X		X						
11	Has the final allocation of proceeds been made?		X		X						
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X		X						

Part III Private Business Use *(Optional for 2008)*

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

Part III Private Business Use *(Continued)*

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X		X						
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X		X						
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X		X						
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government										
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?		X		X						

Part IV Arbitrage *(Optional for 2008)*

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed with respect to the bond issue?		X		X						
2	Is the bond issue a variable rate issue?		X		X						
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?		X		X						
b	Name of provider										
c	Term of hedge										
4a	Were gross proceeds invested in a GIC?		X		X						
b	Name of provider										
c	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		X		X						
6	Did the bond issue qualify for an exception to rebate?		X		X						

Schedule L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . ▶ $

Part II Loans to and/or From Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization? To	From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	No	(f) Approved by board or committee? Yes	No	(g) Written agreement? Yes	No
Total . . . ▶ $										

Part III Grants or Assistance Benefitting Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance

Part IV Business Transactions Involving Interested Persons

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
MARGUERITE K CORNWELL	SPOUSE OF PRESIDENT	75,537	PAYROLL		No
PAMELA K TEGTMEIER	SPOUSE OF TREASURER	43,953	PAYROLL		No
WOOSTER GLASS COMPANY	SPOUSE OF TRUSTEE	298,960	SEE SCHEDULE O		No

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Non-Cash Contributions

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art	X	7	0	N/A
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		0	N/A
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	43	390,981	FMV
10 Securities—Closely held stock	X	1	8,333	APPRAISAL
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (describe ALUMNI EVENT COSTS)	X	4	16,609	COST
26 Other (describe LIFE INSURANCE POLICY)	X	1	33,190	CASH SURRENDER VALUE
27 Other (describe SILENT AUCTION DONATIONS)	X	62	5,250	FMV
28 Other (describe COMPUTER EQUIPMENT)	X	1	1,649	FMV
Other (describe OTHER EQUIPMENT)	X	4	4	N/A

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, *Part IV, Donee Acknowledgement* . . . . | 29 | 0

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes", describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a	Yes	
b If "Yes", describe in Part II			
33 If the organization did not report revenues in Column (c) for a type of property for which Column (a) is checked, describe in Part II			

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	ReturnReference	Explanation
THIRD PARTY INVOLVEMENT,	PART I, LINE 32B	THE COLLEGE USES A BROKER TO PROCESS AND SELL DONATED SECURITIES THE FEES CHARGED BY THE BROKER ARE AT OR BELOW THE FAIR MARKET VALUE OF SUCH SERVICES
REVENUE REPORTING FOR CERTAIN NON-CASH CONTRIBUTIONS,	PART I, LINE 33	UNDER SFAS 116, "COLLECTIONS" ARE DEFINED AS WORKS OF ART, HISTORICAL TREASURES, OR SIMILAR ASSETS THAT ARE (A) HELD FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC SERVICE RATHER THAN FINANCIAL GAIN, OR (B) PROTECTED, KEPT UNENCUMBERED, CARED FOR, AND PRESERVED UNDER THIS ACCOUNTING STANDARD, THE COLLEGE DOES NOT CAPITALIZE "COLLECTIONS" AND ACCORDINGLY DID NOT RECORD REVENUE FOR DONATIONS THAT MET THE DEFINITION OF "COLLECTIONS", INCLUDING WORKS OF ART, RARE BOOKS, AND OTHER HISTORICAL MEMORABILIA OTHER GIFTS FOR WHICH THERE WERE NO READILY-AVAILABLE ESTIMATES OF FAIR MARKET VALUE EITHER WERE NOT RECORDED OR WERE RECORDED AT $1 FOR TRACKING PURPOSES

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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	Employer identification number
THE COLLEGE OF WOOSTER	34-0714654

Identifier	Return Reference	Explanation
NEW PROGRAM SERVICE ACTIVITIES,	FORM 990, PART III, LINE 2	THE COLLEGE ADDED THE NEUROSCIENCE MAJOR AND ENVIRONMENTAL STUDIES MINOR TO ITS CURRICULUM DURING THE FISCAL YEAR ENDED JUNE 30, 2009

Identifier	Return Reference	Explanation
SIGNIFICANT CHANGES IN PROGRAM SERVICE ACTIVITIES,	FORM 990, PART III, LINE 3	THE COLLEGE CHANGED ITS WOMEN'S STUDIES MAJOR TO WOMEN'S, GENDER AND SEXUALITY STUDIES MAJOR

Identifier	Return Reference	Explanation
FORM 990 REVIEW,	FORM 990, PART VI, LINE 10	The Board of Trustees has delegated the responsibility and authority for review of the Form 990 to the audit committee The audit committee, with the assistance of the independent public accounting firm, reviews the Form 990 and approves it before it is filed with the IRS

Identifier	Return Reference	Explanation
MONITORING AND ENFORCEMENT OF CONFLICT POLICY,	FORM 990, PART VI, LINE 12C	The Provost follows up throughout the year if needed regarding any identified or potential conflict of interest issues

Identifier	Return Reference	Explanation
DOCUMENT RETENTION AND DESTRUCTION POLICY,	FORM 990, PART VI, LINE 14	AS OF THE FILING OF THIS FORM 990, THE BOARD OF TRUSTEES HAS APPROVED A DOCUMENT RETENTION AND DESTRUCTION POLICY

Identifier	Return Reference	Explanation
COMPENSATION REVIEW AND APPROVAL,	FORM 990, PART VI, LINE 15	The Executive Committee of the Board of Trustees review surveys conducted by the Great Lakes Colleges Association (GLCA) and joint payroll surveys conducted by the GLCA and Associated Colleges of the Midwest (ACM) Compensation arrangements for the President are reviewed and approved by the independent members of the Executive Committee The President's compensation is determined based on reference to the salary surveys and the President's job performance Recommended compensation arrangements for other senior officers and staff are developed by the President in consultation with the Chairman of the Board and are based on the above mentioned salary surveys, job performance, and experience in the position These recommendations are presented to the full Executive Committee for discussion and approval Compensation decisions by the Executive Committee affecting the President and other senior officers are reported to the full Board of Trustees

Identifier	Return Reference	Explanation
AVAILABILITY OF FORM 1023,	FORM 990, PART VI, LINE 18	THE COLLEGE FILED ITS FORM 1023 BEFORE JULY 15, 1987, AND DID NOT HAVE A COPY OF THIS FILING AS OF THAT DATE UNDER THE REGULATIONS OF THE INTERNAL REVENUE CODE, THE COLLEGE IS NOT REQUIRED TO MAKE ITS FORM 1023 AVAILABLE FOR PUBLIC INSPECTION

Identifier	Return Reference	Explanation
AVAILABILITY OF DOCUMENTS,	FORM 990, PART VI, LINE 19	THE COLLEGE MAKES ITS FINANCIAL STATEMENTS AVAILABLE TO A NUMBER OF OTHER PEER HIGHER EDUCATION INSTITUTIONS BY POSTING THEM ON THE COLLEGE'S WEB SITE AND NOTIFYING THE SCHOOLS OF THE LOCATION THE COLLEGE DOES NOT MAKES ITS GOVERNING DOCUMENTS AND CONFLICT POLICY AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
COMPENSATION OF VP FOR FINANCE AND BUSINESS,	FORM 990 PART VII	LAURIE STICKLEMAIER, THE COLLEGE'S VICE PRESIDENT FOR FINANCE AND BUSINESS, STARTED IN HER POSITION ON MARCH 9, 2009 WHILE SHE WAS COMPENSATED FOR THE PERIOD FROM MARCH 9, 2009 THROUGH JUNE 30, 2009, SHE DID NOT RECEIVE A 2008 FORM W-2 FROM THE COLLEGE AS SUCH, SHE HAS NO "REPORTABLE COMPENSATION" FOR PART VII OR SCHEDULE J

Identifier	Return Reference	Explanation
TRANSACTIONS WITH INTERESTED PERSONS,	SCHEDULE L, PART IV	KATHRYN LONG IS THE SPOUSE OF GREGORY LONG, A TRUSTEE OF THE COLLEGE OF WOOSTER THEY OWN A MAJORITY INTEREST IN WOOSTER GLASS COMPANY WOOSTER GLASS COMPANY WON A COMPETITIVE BIDDING PROCESS TO PROVIDE GLASS INSTALLATION SERVICES TO THE COLLEGE IN CONNECTION WITH THE RENOVATION OF CERTAIN PROPERTY ON THE CAMPUS OF THE COLLEGE THE COLLEGE PAID WOOSTER GLASS COMPANY $298,960 IN THIS ARMS' LENGTH TRANSACTION, WHICH WAS AT OR BELOW THE FAIR MARKET VALUE OF SUCH SERVICES

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization
THE COLLEGE OF WOOSTER

Employer identification number
34-0714654

Part I Identification of Disregarded Entities

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
WOOSTER TECHNOLOGY GROUP LTD 1101 NORTH BEVER STREET WOOSTER, OH 44691 26-3895769	HOLD PATENTS	OH	-22,927	52,101	COLLOF WOOS
THE WOOSTER INN MANAGEMENT COMPANY LTD 1101 NORTH BEVER STREET WOOSTER, OH 44691 26-4321151	INN MGMT	OH	-5,009	2,991	COLLOF WOOS

Part II Identification of Related Tax-Exempt Organizations

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity status (if section 501(c)(3))	(F) Direct controlling entity
GREAT LAKES COLLEGES ASSOCIATION INC 535 WEST WILLIAM ANN ARBOR, MI48103 38-1678376	EDUC CONSORT	MI	501(C)(3)	11A	NA
THE FIVE COLLEGE OF OHIO 209 CHASE AVENUE EATON CENTER GAMBIER, OH43022 31-1440434	EDUC CONSORT	OH	501(C)(3)	11A	NA
YODER MEMTRUST FUND 710400 WOOSTER COLL PO BOX 1558 DEPT EA4E86 COLUMBUS, OH43216 31-6201860	INVEST SUPP	OH	501(C)(3)	11D	NA

Part III Identification of Related Organizations Taxable as a Partnership

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproprtionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General or managing partner?	
							Yes	No		Yes	No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership
LEAH STONER STEVENS TRUST NCB PO BOX 94651 CLEVELAND, OH44101 34-6802427	INVESTMENT SUPP	OH	NA	4947(A)(1)TRUST	-2,995	307,215	100 %
WNCOFFEY&FJTOWNSEND COFFEE CRUT 1101 NORTH BEVER STREET WOOSTER, OH44691 34-1881267	CHAR REM TRUST	OH	COLLOF WOOSTER	TRUST	0	19,230	62 %
MARTHA CURL MOORE CRUT 1101 NORTH BEVER STREET WOOSTER, OH44691 34-6992814	CHAR REM TRUST	OH	COLLOF WOOSTER	TRUST	0	111,618	82 %
JEAN & RUSSELL EBERLY CRUT 1101 NORTH BEVER STREET WOOSTER, OH44691 34-6990825	CHAR REM TRUST	OH	COLLOF WOOSTER	TRUST	0	23,020	56 %
ERNEST S&EMILY K INFIELD CRUT 1101 NORTH BEVER STREET WOOSTER, OH44691 34-7029120	CHAR REM TRUST	OH	COLLOF WOOSTER	TRUST	0	0	100 %

Part V Transactions with Related Organizations

Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b		No
c Gift, grant, or capital contribution from other organization(s)	1c		No
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	Yes	
m Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
n Sharing of paid employees	1n		No
o Reimbursement paid to other organization for expenses	1o	Yes	
p Reimbursement paid by other organization for expenses	1p		No
q Other transfer of cash or property to other organization(s)	1q		No
r Other transfer of cash or property from other organization(s)	1r	Yes	

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)	ES&EK INFIELD CRUT	R	140,675
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership

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

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

Additional Data

Software ID:
Software Version:
EIN: 34-0714654
Name: THE COLLEGE OF WOOSTER

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099MISC)	(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			
WILSON JAMES R , TRUSTEE	10 0	X						0	0	0
BRUSH DOUGLAS F , TRUSTEE	2 0	X						0	0	0
ABBEY PAUL R , TRUSTEE	2 0	X						0	0	0
BAY THE REVEREND EUGENE C , TRUSTEE	5 0	X						0	0	0
BELL RICHARD J , TRUSTEE	2 0	X						0	0	0
BLANCHARD JOAN , TRUSTEE	2 0	X						0	0	0
BONE STEPHEN K , TRUSTEE	2 0	X						0	0	0
CARLSON MARJORIE M , TRUSTEE	5 0	X						0	0	0
CARTER JOAN P , TRUSTEE	2 0	X						0	0	0
CHAMBERS JAYNE HART , TRUSTEE	2 0	X						0	0	0
CLARKE JAMES T , TRUSTEE	5 0	X						0	0	0
EVANS T WILLIAM , TRUSTEE	2 0	X						0	0	0
FOSTER DOON A , TRUSTEE	2 0	X						0	0	0
FREDERICO DONALD R , TRUSTEE	2 0	X						0	0	0
GAULT STEPHEN C , TRUSTEE	5 0	X						0	0	0
GUNNING DAVID H , TRUSTEE	5 0	X						0	0	0
HAMBURGER DIANE L , TRUSTEE	5 0	X						0	0	0
HAVERKAMP JENNIFER A , TRUSTEE	5 0	X						0	0	0
JOHNSTON III JC , TRUSTEE	2 0	X						0	0	0
KNEEN JOHN W , TRUSTEE	2 0	X						0	0	0
LONG GREGORY A , TRUSTEE	2 0	X						0	0	0
LONGBRAKE WILLIAM A , TRUSTEE	5 0	X						0	0	0
LUCE H CHRISTOPHER , TRUSTEE	2 0	X						0	0	0
MCCLUNG JAMES A , TRUSTEE	2 0	X						0	0	0
MCCREIGHT LYNNE D , TRUSTEE	5 0	X						0	0	0
MOORE JR E BLAKE , TRUSTEE	2 0	X						0	0	0
OLIVER JR HONORABLE SOLOMON , TRUSTEE	5 0	X						0	0	0
PANCOAST CAROL S , TRUSTEE	2 0	X						0	0	0
PAPP JOHN P MD , TRUSTEE	2 0	X						0	0	0
PERRY DALE C , TRUSTEE	2 0	X						0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual Trustee or Director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
RYAN CHARLES S , TRUSTEE	2 0	X						0	0	0
SALOVAARA MIKAEL , TRUSTEE	2 0	X						0	0	0
SAVITT ROBERT L , TRUSTEE	2 0	X						0	0	0
SEAMAN RICHARD N , TRUSTEE	2 0	X						0	0	0
SPRAGUE MARIANNE MORROW , TRUSTEE	2 0	X						0	0	0
STALEY SALLY J , TRUSTEE	2 0	X						0	0	0
STEINER JEFFREY A , TRUSTEE	2 0	X						0	0	0
SUNDMAN PETER E , TRUSTEE	5 0	X						0	0	0
SUTHERLAND NANCY WILKIN , TRUSTEE	2 0	X						0	0	0
WILLIAMS CLARENCE R , TRUSTEE	5 0	X						0	0	0
WILLIAMS RUTH W , TRUSTEE	5 0	X						0	0	0
Cornwell Grant , President	70 0			X				351,376	0	102,465
Patton Sara L , VP of Development	60 0			X				183,522	0	28,089
Crawford Iain , VP of Academic Affairs	60 0			X				168,460	0	27,477
Vellines Mary K , VP for Enrollment Services	60 0			X				168,843	0	16,813
Sell John , Interim VP for Bus & Fin	60 0			X				146,628	0	31,317
Garg Shila , Dean of Faculty	60 0			X				97,115	0	18,368
Tegtmeier Timothy , Treasurer	60 0			X				88,866	0	23,811
Wilson Sheila T , Secretary	60 0			X				75,046	0	8,973
Sticklemaier Laurie , VP For Finance & Business	60 0			X				0	0	0
Moore Stephen , Basketball Coach	40 0					X		128,488	0	28,265
Schilling Hayden , PROFESSOR	40 0					X		137,473	0	33,808
Havholm Peter , Professor	40 0					X		100,217	0	24,954
Hales R Stanton , President	0 0						X	117,664	0	21,466

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

		Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a	TUITION AND FEES	900,099	62,436,826	62,436,826		
b	ROOM & BOARD	721,000	15,673,926	15,673,926		
c	STUDENT AUXILIARY SERVICES	451,211	1,982,224	478,272	405,160	1,098,792
d	STUDENT SERVICES	900,099	1,073,865	1,073,865		
e	COMMUNITY EVENTS	900,099	857,352	857,352		

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

The College of Wooster is a community of independent minds, working together to prepare students to become leaders of character and influence in an interdependent global community. We engage motivated students in a rigorous and dynamic liberal education. Mentored by a faculty nationally recognized for excellence in teaching, Wooster graduates are creative and independent thinkers with exceptional abilities to ask important questions, research complex issues, solve problems, and communicate new knowledge and insight.