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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2008

Open to Public Inspection

A Fo	rthe	2008 ca	endar yea	r, or tax year beginning 07-01-2008	and ending 06-30-200	9		d	
B Ch	eck ıf a	applicable	Please	C Name of organization BOARD OF TRUSTEES			D Employer i	dentification number	
☐ Add	dress cl	hange	use IRS label or	OF WHITMAN COLLEGE			91-05677		
┌ Naı	me cha	ange	print or	Doing Business As			E Telephone	number	
┌ Init	al retu	ırn	type. See Specific	Number and street (or P O box if mail is	not delivered to street addre	ess) Room/suite	(509) 527		
Г _{Тег}	mınatı	on	Instruc- tions.	345 BOYER AVE	Thot delivered to street dutie	1.53) NOOTH, Suite	G Gross recei	pts \$ 144,219,018	
	ended			City or town, state or country, and ZIP +	4				
_		n pending		WALLA WALLA, WA 993622067	•				
j Api	olication	n penaing							
				ne and address of Principal Officer E BRIDGES PRESIDENT			s a group retu		
				YERAVE		affilia	tes?	⊤Yes ▼ No	
				WALLA, WA 993622067	_	H(b) Are all	affiliates inclu	ded?	
I Ta	x-exen	npt status	▽ 501(c)	(3) ◀ (Insert no)	527	(If"N	o," attach a lis	st See instructions)	
J W	eb sit	e: 🕨 HTT	P //WWW	WHITMAN EDU		H(c) Grou	p Exemption N	umber 🟲	
						<u> </u>			
К Тур	e of or	ganızatıon	✓ Corporati	on trust association other 🟲		L Year of For		M State of legal domicile WA	
							1	WA	
Pa	rt I	Sumn	•						
	1			e organization's mission or most sig					
e e				WHITMAN COLLEGE IS TO PROV E EDUCATION	IDE AN EXCELLENT, V	VELL-ROUND	ED LIBERAL A	ARTS AND SCIENCES	
2		UNDERG	SKADUAT	EEDUCATION					
≅									
函	١,	Charlett				.f	50/ of the page		
Governance	2		,	if the organization discontinued its o					
	3		_	nembers of the governing body (Part					
Activities &	4		·	dent voting members of the governi		b)		17	
톧	5			nployees (Part V, line 2a)				1,842	
ទ្	6			lunteers (estimate if necessary) .			6	596	
				ed business revenue from Part VIII			11,918		
	Ь	Net unre	lated busi	ness taxable income from Form 990		7b			
						Prio	r Year	Current Year	
a)	8			grants (Part VIII, line 1h)			12,983,815	13,259,897	
Revenue	9	-		revenue (Part VIII, line 2g)			57,350,981	60,322,851	
ž	10			ne (Part VIII, column (A), lines 3, 4			12,527,022	-5,959,152	
_	11		•	art VIII, column (A), lines 5, 6d, 8c			245,662	861,022	
	12	Total re	evenue—ac	dd lines 8 through 11 (must equal Pa	art VIII, column (A), lır	е	83,107,480	68,484,618	
	13		and simila	r amounts paid (Part IX, column (A)), lines 1–3)		17,081,655	18,375,506	
	14			r for members (Part IX, column (A),	•		11,7001,000	0	
	15			mpensation, employee benefits (Pai		5-			
\$		10)	<i>5, 61111 1 1</i>	impensation, employee benefits (i al	12 17, COTAIIII (7,7,7 IIII CO		32,767,405	37,945,099	
Expenses	16a	Profess	sional fund	raısıng fees (Part IX, column (A), lın	ie 11e)			0	
ੜੇ	ь	(Total fu	ndraising ext	penses, Part IX, column (D), line 25 ^{2,428,5}	00				
ш	17	•		Part IX, column (A), lines 11a-11d	·		23,293,755	25,314,671	
	18			add lines 13–17 (must equal Part II			73,142,815	81,635,276	
	19			enses Subtract line 18 from line 12			9,964,665	-13,150,658	
<u> 8</u> 8			·			Beainni	ng of Year	End of Year	
Not Assets or Fund Balances	20	Total	ssets (Par	t X, line 16)			576,325,593	482,832,875	
8.58 B.28	21			ert X, line 26)			88,538,286	91,610,193	
4 P					- 20			<u></u>	
	22	_		d balances Subtract line 21 from lir	ne 20 		487,787,307	391,222,682	
Pai	rt II		ature Blo						
				gury, I declare that I have examined this re correct, and complete Declaration of prepare					
Plea	se	*****	,	,	,	1	05-14	,	
Sign			ture of office	r		Date	03-14		
Here	е	DETER	O W HARVEY	TREASURER & C F O					
		Туре	or print nam	e and title					
		Draw	. k		Date	Check If	Preparer's PTI	N (See Gen Inst)	
Paid		Preparer's signature		A L ZALAZNIK	2010-05-17	self-	, repaici s i III	. (See Sell Hist)	
	arer's		r 	TALATANI MOODE O ACCOUNTS THE	empolyed 🕨 🦳				
Use (ıf self-em		P			EIN 🕨		
J 3C (Jilly	address, a	and ZIP + 4	PO BOX 1724			Discours	(F00) F26 F600	
				WALLA WALLA, WA 99362			Phone no 🕨	(509) 526-5689	
May	the IR	S discus	s this retui	rn with the preparer shown above? (S	See instructions)			✓ Yes No	

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

			(
1	Briefly describe the organization's mission				
	THE MISSION OF WHITMAN COLLEGE IS TO PRO	OVIDE AN EXCELLENT W	FIL-ROUNDED LIBERAL ARTS	AND SCIENCES LINDERGRADUATE	FDUCATION
	THE THESION OF WHITH WAY COLLEGE IS TO THE	OVIDE / IIV EXCELLENT, II	ELE NOONDED EDENGE / IN 13	THE SELENCES CHEEK BOTHE	
2	Did the ergonization undertake any ci	anificant program co	rulese during the weer	which were not listed on	
2	Did the organization undertake any si the prior Form 990 or 990-EZ? .		ervices during the year v	which were not listed on	⊤Yes ✓ No
					105 / 110
_	If "Yes," describe these new services				
3	Did the organization cease conducting	g or make significan	t changes in how it cond	lucts any program	┌ Yes ┌ No
	services?				j Yes No
	If "Yes," describe these changes on S	chedule O			
4	Describe the exempt purpose achieve				
	Section 501(c)(3) and (4) organization				d allocations to
	others, the total expenses, and reven	ue, if any, for each p	rogram service reported	i	
4a	(Code) (Expenses \$		including grants of \$) (Revenue \$	50,671,391)
	1,434 FULL TIME EQUIVALENT STUDENTS 34	0 GRADUATES ACADEMIC	C INSTRUCTION, SUPPORT A	ND OTHER PROGRAMS	
4b	(Code) (Expenses \$	10,900,961	ıncludıng grants of \$) (Revenue \$	8,594,959)
	AUXILIARY ENTERPRISE 845 - STUDENTS IN				, ,
4c	(Code) (Expenses \$	18,375,506	ıncludıng grants of \$	18,375,506) (Revenue \$)
	INSTITUTIONAL FINANCIAL AID 1,173 - STUD		TUTIONAL SCHOLARSHIPS 73	5 - STUDENTS RECEIVING FEDERA	L LOANS OR GRANTS
					•
4d	Other program services (Describe i	n Schedule O N			
TU			f #	\/Payanua #	\
	(Expenses \$	including grants o	·) (Revenue \$)
4e	Total program service expenses \$	71.276.59	1 Must equal Part IX, L	Line 25, column (B).	

art IV	Che	cklist	of Re	eauired	Sche	dules

			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		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	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	Yes	
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		Νο
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		Νο
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		Νο
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		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
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	
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νο
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
8	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		No.
		200		"
D	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
1	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? <i>If "Yes," complete Schedule N, Part II</i>	32		No
3	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		No
4	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	
5	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		No
6	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

Pa	rt 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 2,402			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	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			
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	
Ь	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	Yes	
b	If "Yes," enter the name of the foreign country XE			
	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		N o
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited</i> 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).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νο
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
8	required?	7h		No
•	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the	8		No
9	year?			
	Did the organization make any taxable distributions under section 4966?	9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter			
а	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]		
11	Section 501(c)(12) organizations Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	-		
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			

Section A. Governing Body and Management

No

Νo

Νo

Νo

Νo

Νo

Νo

Yes

Yes

4

5

6

7a

7Ь

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

For each "Yes" response to lines 2-7 below, and for a "No" response to lines	8 or 9b below, describe the circ	umstances,
processes, or changes in Schedule O. See instructions.		
Enter the number of voting members of the governing body	1a	20

Ь	Enter the number of voting members that are independent	1b		17	l
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?				2
3	Did the organization delegate control over management duties customarily performed	•			3

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

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

-																						
Does the organizat	tıon	have	me	mbe	rs,	stoc	kho	lder	s, o	r otl	her	per	sons	who	may	elect	one	or	more	me	mbers	ofthe
governing body?																						

Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	•
Did the organization contemporaneously document the meetings held or written actions undertaken during	the
year by the following	

a	the governing body?																			
b	each committee with a	utho	rity	to ac	t or	n bel	half	of t	he g	jove	rnıı	ng b	ody	?						
	Does the organization	hav	م امد	alch	ant	۵rc	hra	nch	۵.	ora	ffilia	atas	. 7							

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?

,	' '		•				
Was a copy of the Form 990	O provided to the organization	n's governing body bet	fore it was filed? A	II orga	anızat	tions	3
must describe in Schedule	O the process, if any, the org	anızatıon uses to rev	iew the Form 990				

11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reache	d at
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O $$. $$. $$.	•

8a	Yes	
8b	Yes	
9a		No
9b		
10	Yes	
11		No

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	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	Yes	
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			
а	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		Νο
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 WA, OR
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization WHITMAN COLLEGE CONTROLLER'S OFFICE 345 BOYER WALLA WALLA, WA 99362 (509) 527-5411

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

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

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

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

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

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

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

Part VII Continued

			tion that a			all			(E)	(F)
(A) Name and Title	(B) A verage hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			-				-			
			1							
	ļ		-	\sqcup			<u> </u>			
			1	\vdash			\vdash			
	 		\vdash	\vdash						
			1							
1b Total			<u>. </u>	<u> </u>			 	1,906,658	3	337,871
1b Total			•						l .	337,87

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►22

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes," complete Schedule J for such individual</i>	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			
	inalvidual	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
OPP & SEIBOLD GENERAL CONSTRUCTION 1220 W POPLAR WALLA WALLA, WA 99362	GEN CONTRACTOR	6,928,884
LEONE & KEEBLE INC PO BOX 2747 SPOKANE, WA 992202747	GEN CONTRACTOR	5,171,491
WEINSTEIN ARCHITECTS & URBAN DESIGN 121 STEWART STREET SUITE 20 SEATTLE, WA 98101	ARCHITECT	663,176
S & K MOUNTAIN CONSTRUCTION INC 822 W MAIN WALLA WALLA, WA 99362	GEN CONTRACTOR	399,911
WALLA WALLA ELECTRIC 1225 W POPLAR WALLA WALLA, WA 99362	ELECTRICAL CONT	363,586
2 Total number of independent contractors (including those in 1) who reco	, ,	16

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
	1a	Federated campaigns 1a			Revende		312, 313, 01 314
報告	ь	— Membership dues					
on On		1ь —	_				
.કું 🗒	С	Fundraising events 1c —					
≣ੂੁੁ≅	d	Related organizations1d _					
ξŒ.	e	Government grants (contributions) 1e					
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, grants, and similar amounts not included above —	13,259,897				
i i i	g	Noncash contributions included in					
<u>a</u> O		lines 1a-1f \$ 354,215					
	h	Total (Add lines 1a-1f)	· · · · .	13,259,897			
- O		E	Business Code				
E E	2a	STUDENT TUITION & FEES		50,671,391	50,671,391		
94. 84.	b	AUXILIARY ENTERPRISES		8,594,959	8,594,959		
ē. H	С	GOVERNMENT GRANTS		1,045,783			1,045,783
ž	d	INTERNET BOOKSTORE SALES	451,211	10,718		10,718	
R	e						
Program Serwce Revenue	f	All other program service revenue					
<u>\$</u>	g	Total. Add lines 2a-2f					
	3	Investment income (including divide	ends, interest				
		other similar amounts)		4,208,366			4,208,366
	4	Income from investment of tax-exempt bone	d proceeds				
	7						
	5	Royalties					
	6a	(1) Real Gross Rents 774,719	(II) Personal				
	b	Less rental 632,306					
		expenses					
	С	Rental income 142,413 or (loss)					
	d	Net rental income or (loss)	· · · · <u>·</u>	142,413			142,413
		(ı) Securities	(II) O ther				
	7a	Gross amount 64,934,576 from sales of assets other					
	ь	Less cost or 75,102,094					
		other basis and sales expenses					
	С	Gain or (loss) -10,167,518		10.157.510			10 157 510
	d	Net gain or (loss)	▶	-10,167,518			-10,167,518
	8a	Gross income from fundraising					
Other Revenue		sof contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000					
<u>-</u>	ь	Less direct expensesb					
¥	с	Net income or (loss) from fundraising	g events				
J	9a	Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000	-				
	ь	Less direct expensesb					
	c	Net income or (loss) from gaming ac	tivities -				
	10a	Gross sales of inventory, less returns and allowances .					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of in					
	44-		Business Code 451,211	718,609	599,652	1,200	117,757
	11a	OTHER REVENUE	431,211	718,609	399,032	1,200	117,757
	Ь						
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d	 \$ 718,609				
	12	Total Revenue. Add lines 1h, 2g, 3,		68,484,618	59,866,002	11,918	-4,653,199
		8c, 9c, 10c, and 11e	. ▶				

Part IX Statement of Functional Expenses

A	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 ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21										
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	18,375,506	18,375,506								
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16										
4	Benefits paid to or for members										
5	Compensation of current officers, directors, trustees, and key employees	1,286,750	610,100	498,650	178,000						
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$										
7	Other salaries and wages	26,861,506	22,746,902		1,230,655						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,457,857	2,039,493	295,363	123,001						
9	Other employee benefits	5,147,532	4,084,341	782,282	280,909						
10	Payroll taxes	2,191,454	1,818,436	263,349	109,669						
11	Fees for services (non-employees)										
а	Management										
b	Legal	17,623	2,000	13,623	2,000						
С	Accounting	92,200	23,000	57,700	11,500						
d	Lobbying										
e	Professional fundraising See Part IV, line 17										
f	Investment management fees										
g	Other	8,883,565	7,581,590	1,122,450	179,525						
12	Advertising and promotion		, ,		·						
13	Office expenses	4,153,398	3,063,126	1,047,284	42,988						
14	Information technology				·						
15	Royalties										
16	Occupancy	1,944,173	1,842,516	91,491	10,166						
17	Travel	2,606,967	2,268,255	191,000	147,712						
18	Payments of travel or entertainment expenses for any Federal, state or local public officials		_,,		,						
19	Conferences, conventions and meetings										
20	Interest	2,146,330	2,039,013	96,585	10,732						
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	4,816,399	4,575,579	216,738	24,082						
23	Insurance										
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)										
а	COMMUNICATIONS	654,016	206,734	369,721	77,561						
b		051,010	200,731	303,721	77,501						
С											
d											
e											
f	All other expenses										
25	Total functional expenses. Add lines 1 through 24f	81,635,276	71,276,591	7,930,185	2,428,500						
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										

Dart V	Balance	Shoot
Part X	l Balance	Sheet

			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	944,372	1	12,901,057
	2	Savings and temporary cash investments	14,801,513	2	13,743,957
	3	Pledges and grants receivable, net	11,308,977	3	12,029,747
	4	Accounts receivable, net	320.026	4	418,028
	5	Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>	,	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	3,377,224	7	3,318,328
	8	Inventories for sale or use	432,466	8	485,170
92	9	Prepaid expenses and deferred charges	497,048	9	603,969
Assets	10a	Land, buildings, and equipment cost basis 10a 179,869,622			
•	b	Less accumulated depreciation Complete Part VI of			
	ט	Schedule D	120,483,194	10c	135,012,427
	11	Investments—publicly traded securities	119,141,326	11	51,088,876
	12	Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	290,845,325	12	241,807,887
	13	Investments—program-related See Part IV , line 11 <i>Complete Part VIII</i> of Schedule D .		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	14,174,122	15	11,423,429
	16	Total assets. Add lines 1 through 15 (must equal line 34)	576,325,593	16	482,832,875
	17	Accounts payable and accrued expenses .	6,903,954	17	6,920,880
	18	Grants payable	3,266,255	18	3,385,720
	19	Deferred revenue	1,262,390	19	1,179,741
.6	20	Tax-exempt bond liabilities	58,494,699	20	58,520,975
<u>ā</u>	21	Escrow account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Ξ		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	3,137,123	23	2,775,137
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D	15,473,865	25	18,827,740
	26	Total liabilities. Add lines 17 through 25	88,538,286	26	91,610,193
S 0 S		Organizations that follow SFAS 117, check here ▶ ↓ and complete lines 27 through 29, and lines 33 and 34.			
Balance	27	Unrestricted net assets	187,823,213	27	156,968,920
8	28	Temporarily restricted net assets	188,243,798	28	118,449,972
돧	29	Permanently restricted net assets	111,720,296	29	115,803,790
or Fund		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ŋet	33	Total net assets or fund balances	487,787,307	33	391,222,682
_	34	Total liabilities and net assets/fund balances	576,325,593	34	482,832,875
Pa	rt XI	Financial Statements and Reporting			

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

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		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?	3h	Yes	

As Filed Data -

DLN: 93493137019330

OMB No 1545-0047

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.

Open to Public Inspection

		e organizat i	on					Em	ployer ide	nt if icat io	n numb	er
		USTEES COLLEGE						0.1	-0567740	1		
Pa	rt I	Reason	for Public C	harity Status (to be co	mnleted	hy all or	nanizatio					
				ation because it is (Please					moduce	101137		
1	Г			nurches, or association of ch					A)(i).			
2	<u></u>	•		t ion 170(b)(1)(A)(ii). (Attac				(-)(-)	/(-/-			
3	Ĺ.			e hospital service organizati			tion 170(l	o)(1)(A)(i	ii). (Attac	h Schedul	le H)	
4	<u></u>		•	·			-		ion 170(b)(1)(A)(iii). Enter the			a
•	•		name, city, and	· ·	on men a	nospital a			_, _(_,(_,	(,,,(,,,,,		=
5	\vdash	•		or the benefit of a college or	universit	v owned o	r onerated	hy a dove	rnmental	unit desc	rihed in	
_	'	-	·	(Complete Part II)	4111701510	, omica o	. оролагоа	b, a got.		ame acse		
6	\vdash			overnment or governmental	unit dasci	rihad in Sa	ction 170	(b)(1)(A)	(v)			
7	<u>'</u>	•	· -	ally receives a substantial p						n the gene	ral nuh	lic
•	,			o)(1)(A)(vi) (Complete Pari		зарроге пе	in a gove	illine ilitar t		ii tiie gene	ilai pub	110
8	\vdash		-	ped in Section 170(b)(1)(A)	•	nnlata Par	+ T T \					
9	<u>'</u>		-	ally receives (1) more than		-	-	ontribution	s membe	rchin food	and a	rocc
,	ļ	•		ated to its exempt functions	·	• • •			•	•		1033
		•		estment income and unrelate	-		•	, ,	•			
			-	on after June 30, 1975 See			,			() IIOIII bu	31116336	: 5
10	_		-	and operated exclusively to					•	ae instruc	tions)	
11	<u>'</u>			and operated exclusively for								ocas of
11	,			orted organizations describe								
				type of supporting organizat							. , ,	•
		аГ⊺	ype I b	Type II c	Type III	- Function	nally Integ	ırated	d	Г⊤уре	III - C	ther
e	Г	•		rtify that the organization is			•			•	•	
				agers and other than one or	more pub	licly suppo	orted orga	nızatıons (described	ın sectior	1509(a)(1) or
f		section 50		d a written determination fro	m the IRS	S that it is	a Type I	Type II o	r Type III	supportin	na oraar	nization
•		check this		a a written acternmetion no	iii tiic 1itt	o chiac ic is	и турст,	, , pc 11 o	, , , pc 111	Supportin	ig organ	
g		Since Augu	ıst 17, 2006, h	as the organization accepted	d any gift	or contrib	utıon from	any of the	!			
		following pe										
			•	r indirectly controls, either a		-	tn persons	aescribe	a in (ii)	-	Ye	s No
			· -	ng body of the the supported	_	tion				11g		
			•	erson described in (i) above						11g(
		` '		ty of a person described in (11g(iii)	
h		Provide the	following infort	nation about the organizatio	ns the org	janization	supports					
	/:\ NI -		(::) FIN	(:::) T	/: \ T	- 41	(-) D.J.		(-::\ T	- 41	(:x o	
		ame of orted	(ii) EIN	(iii) Type of organization (described on lines 1-9		s the ation in	(v) Did y	nization		s the ation in		mount of opert?
		ızatıon		above or IRC section	_	listed in) of your	_	rganized	""	5 7 0 1 0
	•			(See Instructions))		verning	supp			US?		
					docui	ment?				1		
					Yes	No	Yes	No	Yes	No		
						1	I	i	1	I	1	

Total

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

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV	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 A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Open to Public Inspection

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

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

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

• Se	ction 50	01(c)(3) organizations that	s," to Form 990, Part IV, Line 4, o have filed Form 5768 (election unde	r section 501(h)) c	omplete Part II-A Do not co	mplete	e Part II-B	- 11 A
		. , . ,	: have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5 (P	,	n)) Complete Part II-B Do r	10t coi	mpiete Part	I II-A
	_)1(c)(4), (5), or (6) organເ	•					
		he organization RUSTEES			Employer ider	ntıfıca	tion numbe	er
OF	WHITMAI	N COLLEGE			91-0567740			
Par	t I-A				1 501(c) and section	527		
1	Provid	de a description of the or	ganization's direct and indirect polit	ıcal campaıgn actı	vities in Part IV			
2	Politic	cal expenditures				\$		
3	Political expenditures Volunteer hours art I-B To be completed by all organizations exempt under section 501(c)(3). (See the instance for Schedule C for details.) Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred in a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV art I-C To be completed by all organizations exempt under section 501(c), except section (See the instructions for Schedule C for details.) Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's internal funds contributed to other organizations for section 527 exempt function activities \$				_			
Par	t I-B			under section	501(c)(3). (See the	ınstrı	uctions	
1	Enter	the amount of any excise	tax incurred by the organization ur	nder section 4955		\$		
2	Enter	the amount of any excise	e tax incurred by organization mana	gers under section	4955	\$ <u></u>		
3	Ifthe	organization incurred in a	a section 4955 tax, did it file Form	4720 for this year	?		☐ Yes	✓ No
4a	Wasa	correction made?					☐ Yes	√ No
ь		<u>'</u>						
Par	t I-C			under section	501(c), except sec	tion !	501 (c)(3	3).
1	Enter	the amount directly expe	ended by the filing organization for s	ection 527 exemp	t function activities	\$		
2		_	rganızatıon's ınternal funds contrib	uted to other orgar	nizations for section	\$		
3			mpt function expenditures Add line	es 1 and 2 and ento	er here and on Form	\$		
4	Did th	ne filing organization file F	Form 1120-POL for this year?				☐ Yes	√ No
5	were i	made Enter the amount p cal contributions received	nd Employer Identification Number (laid and indicate if the amount was d and promptly and directly delivere action committee (PAC) If additions	paid from the filing d to a separate po	organization's own interna litical organization, such a	al fund ısase	s or were	nents
		(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	c or dire	Amount on tributions and prompt deliv deliv separate programme anter - learners of the content o	received tly and ered to a olitical If none,
						+-		
						+-		
						+		
_						<u> </u>		
						T		

	(election under sec	organizations exempt under section 501(tion 501(h)). (See the instructions for Schedul belongs to an affiliated group		768
	<u> </u>	checked box A and "limited control" provisions apply		
	Limits on Lo	bbying Expenditures— s" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influe	nce a legislative body (direct lobbying)		
c	Total lobbying expenditures (add line	es 1a and 1b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures	(add lines 1c and 1d)		
f	Lobbying nontaxable amount Enter to columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000	The lobbying nontaxable amount is: 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (ente	r 25% of line 1f)		
h	Subtract line 1g from line 1a Enter -	0 - If line g is more than line a		
i	Subtract line 1f from line 1c Enter -	0- ıf lıne f ıs more than lıne c		
j 	If there is an amount other than zero section 4911 tax for this year?	on either line 1h or line 1i, did the organization file Form	m 4720 reporting	┌ Yes ┌ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 1a through 1f of the instructions.)

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

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

	5/68 (election under section 501(n)). (See the instructions for Schedule C			, for details.)		
		(a	1)		(b)	
		Yes	No	•	\ moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines c through i)?		Νo			
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				670
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo			
i	Other activities If "Yes," describe in Part IV		Νo			
j	Total lines 1c through 1:					670
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
b	If "Yes" enter the amount of any tax incurred under section 4912					
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Νo			
Par	t III-A To be completed by all organizations exempt under section 501(c)(4) section 501(c)(6). (See the instructions for Schedule C for details.)	, section	501(0	:)(5), or	
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?)		Nο

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

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

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

Part IV Supplemental Information

Dues, assessments and similar amounts from members

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

Ident if ier	Return Reference	Explanation

1 \$

Part IV Supplemental I	Part IV Supplemental Information						
Ident if ier	Return Reference	Explanation					

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Open to Public

BOA	me of the organization ARD OF TRUSTEES WHITMAN COLLEGE		Employer identific	ation numbe	er
	Organizations Maintaining Donor Acorganization answered "Yes" to Form 99		91-0567740 unds or Account	s. Comple	te if the
	er gamzaden anenerea 100 to 101111 25	(a) Donor advised funds	(b) Funds and	other accou	nts
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 advi funds are the organization's property, subject to the		or advised	☐ Yes	✓ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?		•	☐ Yes	√ No
Pa	rt III Conservation Easements. Complete	if the organization answered "Yes" t	o Form 990, Part I	V, line 7.	
2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual on the last day of the tax year	on or pleasure) Preservation of an Preservation of ce	n historically importai ertified historic struct n of a conservation ea	ure	а
			Held a	t the End of	the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easement	s	2b		
c	Number of conservation easements on a certified hi	istoric structure included in (a)	2c		
d	Number of conservation easements included in (c) a	• •	2d		
3	Number of conservation easements modified, transfe	•	ed by the organization	n durina	
	the taxable year ►		,		
4					
	Number of states where property subject to conserva		- .		
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	=	ations, and	☐ Yes	✓ No
6	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during the	year 🗠		
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear ► \$		
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	2 (d) above satisfy the requirements of sec	tion	☐ Yes	✓ No
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easer	the footnote to the organization's financia	•		
Par	t IIII Organizations Maintaining Collection Complete if the organization answered '		or Other Similar	Assets.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fire	for public exhibition, education or research	ch in furtherance of p		е,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i		•	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$		
	(ii) Assets included in Form 990, Part X		F \$	9	50,790
2	If the organization received or held works of art, histological following amounts required to be reported under SFA	· · · · · · · · · · · · · · · · · · ·	or financial gain, prov	ıde the	
а	Revenues included in Form 990, Part VIII, line 1		► \$		

b Assets included in Form 990, Part X

Using the organization's accession and other records, check any of the following that are a significant use of its items (check all that apply) a	s collectio	n	
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt positive for the organization of the organization.			
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt p			
4 Provide a description of the organization's collections and explain how they further the organization's exempt positive and explain how they further the organization's exempt positive and explain how they further the organization's exempt positive and explain how they further the organization of the organization organizati			
	urpose in		
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?	Г	Yes	√ No
Part IV Trust, Escrow and Custodial Arrangements. Complete if the organization answered "	Yes" to F	orm 9	90,
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?	Г	Yes	√ No
b If "Yes," explain why in Part XIV and complete the following table			
	A mo	unt	
C Beginning balance			
d Additions during the year			
e Distributions during the year			
f Ending balance			
2a Did the organization include an amount on Form 990, Part X, line 21?	Г	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, III		1= 11	
(a) Current Year (b) Prior Year (c) Two Years Back (d) Three Year 1a Beginning of year balance 365,692,263	ars Back (e	e)Four Y	ears Back
2.200.450			
73 903 911			
d Grants or scholarships			
e Other expenditures for facilities -10,409,277			
and programs			
f Administrative expenses			
g End of year balance			
Provide the estimated percentage of the year end balance held as			
a Board designated or quasi-endowment ► 29 000 %			
b Permanent endowment ► 69 000 %			
C Term endowment ► 2 000 %			
Are there endowment funds not in the possession of the organization that are held and administered for the			
organization by	2-7:	Yes	No
(i) unrelated organizations	. 3a(i) . 3a(ii)	+	
(ii) related organizations	. 3a(11)	165	l No
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.			
(a) Cost or other (b) Cost or other	preciation	(d) Bo	ok value
La Land		1	9,577,866
	1,527,972		1,619,802
c Leasehold improvements			
 	3,329,223		2,863,968
			950,790

135,012,426

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12.		
(a) Description of security or cateory	(b) Book value	(c) Method	
(including name of security) Financial derivatives and other financial products		Cost or end-of-y	ear market value
	FO 119 212		
Closely-held equity interests Other INTERNATIONAL EQUITY	50,118,312 49,152,152		
Other HEDGED EQUITY			
ther ABSOLUTE RETURN	44,584,877 31,428,190		
ther US EQUITY			
	29,399,085		
ther NATURAL RESOURCES	22,743,439		
ther BALANCED	17,077,972		
ther FIXED INCOME	591,973		
ther OTHERINVESTMENTS			
Other PGWC FOUNDATION 91-1648072	-3,288,113		
ther See Additional Data			
otal. (Column (b) should equal Form 990, Part X, col (B) line 12) 🕨	241,807,887		
art VIII Investments—Program Related. See	Form 990, Part X, line 13		
(a) Description of investment type	(b) Book value	(c) Method Cost or end-of-y	
		Cost of end-of-y	ear market value
otal. (Column (b) should equal Form 990, Part X, col (B) line 13) 🕨			
Part IX Other Assets. See Form 990, Part X, III			
(a) Descrip	ption		(b) Book value
otal. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	<u> </u>	
Part X Other Liabilities. See Form 990, Part X	(, line 25.		
(a) Description of Liability	(b) A mount		
ederal Income Taxes			
PLIT INTEREST CONTRACTS	6,095,853		
NTEREST RATE EXCHANGE AGREEMENTS	6,016,000		
OST-RETIREMENT BENEFITS	4,533,930		
EFERRED COMPENSATION	894,408		
SSET RETIREMENT OBLIGATION	752,874		
NSURANCE TERMINAL LIABILITY	534,675		
WAP VALUATIONS	534,075		
THER LIABILITIES			
otal. (Column (b) should equal Form 990, Part X, col (B) line 25) 🛛 🖡	18,827,740		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	68,484,618
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	81,635,276
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-13,150,658
4	Net unrealized gains (losses) on investments	4	-83,413,967
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-3,197,159
9	Total adjustments (net) Add lines 4 - 8	9	-86,611,126
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-99,761,784
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial		-36,001,211
2	statements	1	
2 a	Net unrealized gains on investments		
a b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-104,485,829
3	Subtract line 2e from line 1	3	68,484,618
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		. ,
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
ь	Other (Describe in Part XIV) 4b		
С	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	68,484,618
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	Return
1	Total expenses and losses per audited financial statements	1	63,760,573
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	1	
b	Prior year adjustments	1	
c	Losses reported on Form 990, Part IX, line 25	1	
d	Other (Describe in Part XIV) 2d 500,803	1	
е	Add lines 2a through 2d	2e	500,803
3	Subtract line 2e from line 1	3	63,259,770
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	1	
b	Other (Describe in Part XIV)	1	
c	Add lines 4a and 4b	4c	18,375,506
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	81,635,276

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

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

Ident if ier	Return Reference	Explanation
COLLECTIONS AND RELATION TO EXEMPT PURPOSE	SCHEDULE D, PAGE 2, PART III, LINE 4	THE COLLECTIONS ARE COMPRISED OF ART, HISTORICAL ITEMS, AND RARE BOOKS, AND ARE USED IN PROGRAMS, CULTURAL ENRICHMENT, AND RESEARCH
	SCHEDULE D, PAGE 4, PART XI, LINE 8	RELATED ENTITES' REVENUE (SHARE OF LOSS) -2,696,356 TUITION DISCOUNT -18,375,506 RELATED ENTITIES - 500,803 TUITION DISCOUNT 18,375,506
REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER	SCHEDULE D, PAGE 4, PART XII, LINE 2D	RELATED ENTITES' REVENUE (SHARE OF LOSS) -2,696,356 TUITION DISCOUNT -18,375,506
	SCHEDULE D, PAGE 4, PART XIII, LINE 2D	RELATED ENTITIES 500,803
	SCHEDULE D, PAGE 4, PART XIII, LINE 4B	TUITION DISCOUNT 18,375,506
SUPPLEMENTAL FINANCIAL INFORMATION	SCHEDULE D, PAGE 4, PART XIV	FEDERAL INCOME TAXES WHITMAN COLLEGE IS A QUALIFIED NOT-FOR-PROFIT ORGANIZATION UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND AS SUCH, IS GENERALLY EXEMPT FROM FEDERAL TAXATION OF INCOME ACCORDINGLY NO PROVISION HAS BEEN MADE FOR FEDERAL INCOME TAXES CONTRIBUTIONS TO THE COLLEGE ARE GENERALLY TAX DEDUCTIBLE THE PAUL GARRETT WHITMAN COLLEGE FOUNDATION AND THE 21ST CENTURY TRUST ARE SEPARATE TAX ENTITIES IN ACCORDANCE WITH THE PROVISIONS OF FINANCIAL ACCOUNTING STANDARDS BOARD INTERPRETATION (FIN NO 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, THE COLLEGE HAD NO UNRECOGNIZED TAX BENEFITS AT JUNE 30, 2009 AND 2008

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Schools

Name of the organization **BOARD OF TRUSTEES**

Employer identification number

OF WHITMAN COLLEGE 91-0567740 YES NO 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 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain Yes 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? Yes 4c d Copies of all material used by the organization or on its behalf to solicit contributions? 4d Yes If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? No_ 5c d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes **b** Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either 6a or b, please explain using an attached statement 🤳

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

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493137019330

2008

OMB No 1545-0047

Statement of Activities Outside the United States

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

Open to Public **Inspection**

	ne of the organization					Employer ide	ntification number
	ARD OF TRUSTEES WHITMAN COLLEGE					91-0567740	n
		mation on A	tivities Outsi	de the United States			
Pe	"Yes" to Form 9			de the officed States	. Complete	ii tile organ	iization answered
1				ecords to substantiate (the amount	of the grant	s or
	-	_		assistance, and the se		_	
	the grants or assistan	ıce					┌ Yes ┌ No
2	For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States						
3	Activites per Region (U	se Schedule F-1	(Form 990) ıf add	ditional 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 is a progra describe spe service(s)	m service, ecific type of	(f) Total expenditures in region
	ITRAL AMERICA & RIBBEAN			INVESTMENT			766,023
EA S	T ASIA & PACIFIC			STUDY ABROAD	PROGRAM S	ERVICE	215,814
UR	ROPE			STUDY ABROAD	PROGRAM S	ERVICE	86,309
UR	ROPE			INVESTMENT			582,087

Totals ▶

1,650,233

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

	F-1 (Form 990) if a			tea States. Complete	if the organization a	inswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+					
		1					
		+					
			•				

Schedule F (Form 990) 2008

Complete this part t	o provide the information required	ın Part I, line 2, and any other additional information.
Identifier	ReturnReference	Explanation

Software ID:

Software Version:

EIN: 91-0567740

Name: BOARD OF TRUSTEES

OF WHITMAN COLLEGE

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)	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
--------------------------	--	-------------------------	------------------------------	------------------------------------	---	--	--

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

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

OMB No 1545-0047

2008

DLN: 93493137019330

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

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

Inspect ion

Employer identification number

OF WHITMAN COLLEGE						91-0567740	
1 Does the organization ma	ıntaın records to s		t of the grants or assista				
the selection criteria use 2 Describe in Part IV the o	rganızatıon's proc	edures for monitoring th	ne use of grant funds in t	he United States			
Form 990, Part I Part IV and Scho	IV, line 21 for a edule I-1 if addi	ny recipient that rece tional space is		00. Check this box	tes. Complete if the oif no one recipient rec		
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
2 Enter total number of sec organizations		-			•		
3 Enter total number of other	er organizations .						•

	•				
art III	Gran	nts and Other Assistance to Individuals in the United State	Complete if the organization answ	wered "Yes" on Form 990,	Part IV, line 22.
	Use S	Schedule I-1 (Form 990) if additional space is needed.			

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
INSTIT FINANCIAL AID	1173	18,375,506			

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

See Additional Data Table

Ident if ier	Return Reference	Explanation
ADDITIONAL INFORMATION		THE COLLEGE AWARDS SCHOLARSHIPS IN CONFORMANCE WITH ESTABLISHED POLICIES ON THE BASIS OF BOTH NEED AND SCHOLASTIC MERIT AWARDS TO STUDENTS WITH NEED ARE BASED ON THE STUDENT'S FINANCIAL INFORMATION CONTAINED IN THE FINANCIAL AID PROFILE FILED WITH THE COLLEGE SCHOLARSHIP SERVICE AND THE FREE APPLICATION FOR FINANCIAL AID FILED WITH THE FEDERAL PROCESSOR ALL AID IS OBJECTIVELY DETERMINED AND AWARDED ON AN EQUAL BASIS TO RECIPIENTS WITH SIMILAR ATTRIBUTES

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DLN: 93493137019330

OMB No 1545-0047

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.

2008

Open to Public Inspection

Name of the organization BOARD OF TRUSTEES OF WHITMAN COLLEGE

Employer identification number

91-0567740

Рā	Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropiate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First class or charter travel	<u> - </u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	<u>~</u>	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2	Yes	
3	Indicate which, if any, of the following the organizat organization's CEO/Executive Director Check all t		·			
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant	<u> </u>	, ,			
	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	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	omplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	, lıne 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
Ь	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	, lıne 1a,	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"		•	7	Yes	
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III					No

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

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name			f W-2 and/or 1099-MI	· ·	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	incentive compensation	(iii) Other compensation	1		'	990 of Form 990-EZ
GEORGE W BRIDGES	(1) (11)	286,952		2,181		63,704	352,837	143,476
PETER W HARVEY	(ı) (ıı)	193,959				26,926	220,885	96,980
LORI BETTISON- VARGA	(ı) (ıı)	162,205		17,718		26,299	206,222	81,103
JOHN W BOGLEY	(ı) (ıı)	166,909		3,027		29,340	199,276	83,455
CHARLES E CLEVELAND	(ı) (ıı)	152,198				26,488	178,686	76,099
KEIKO M PITTER	(ı) (ıı)	147,755				21,829	169,584	73,878
DAVID F SCHMITZ	(ı) (ıı)	134,078				22,352	156,430	67,039
ROBERT J CARSON	(ı) (ıı)	131,608				20,067	7 151,675	65,804
PATRICK W KEEF	(ı) (ıı)	148,656				31,674	180,330	74,328
	(ii)		1					
	(i)							_
	(ii)		4		1		<u> </u>	1
	(i)		 		 			4
	(ii)				+		<u> </u>	4
	(i)	ļ	 		+			4
	(ii)	,	1	·	1			1

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
NON-FIXED PAYMENTS PROVIDED	SCHEDULE J, PAGE 1, PART I, LINE 7	PART III PART 1, LINE 7 TRAVEL AND MEAL REIMBURSEMENT PAID PERSUANT TO COLLEGE'S ACCOUNTABLE PLAN
OTHER ADDITIONAL INFORMATION	PART III	PART III PART 1, 1A RESIDENCE FOR PERSONAL USETHE COLLEGE PRESIDENT IS REQUIRED AS A CONDITION OF EMPLOYMENT TO MAINTAIN A PERSONAL RESIDENCE IN A HOUSE PROVIDED BY THE COLLEGE THIS HOUSE IS LOCATED ON THE EDGE OF CAMPUS AND IS REQUIRED FOR THE CONVENIENCE OF THE COLLEGE SOCIAL CLUB DUESTHE COLLEGE PRESIDENT AND VP OF DEVELOPMENT ARE PROVIDED MEMBERSHIPS IN SOCIAL CLUBS BY THE COLLEGE PERSONAL SERVICESTHE PRESIDENT'S PERSONAL RESIDENCE IS PROVIDED CLEANING SERVICES AND YARD CARE BY THE COLLEGE

Software ID: Software Version:

EIN: 91-0567740

Name: BOARD OF TRUSTEES

OF WHITMAN COLLEGE

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

11 Officers/ Bires	torby rrabteeby Re	<u> </u>	<u>goot oompon</u>	24104 2p.07000		
(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	1	(E) Total of columns	(F) Compensation reported in prior Form
(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
(ı) 286,952 II)		2,181		63,704	352,837	143,476
(ı) 193,959 II)				26,926	220,885	96,980
(ı) 162,205 II)		17,718		26,299	206,222	81,103
(ı) 166,909 II)		3,027		29,340	199,276	83,455
(ı) 152,198 II)				26,488	178,686	76,099
(ı) 147,755 II)				21,829	169,584	73,878
(ı) 134,078 II)				22,352	156,430	67,039
(ı) 131,608 II)				20,067	151,675	65,804
(ı) 148,656 II)				31,674	180,330	74,328
	(B) Breakdown of (i) Base Compensation (i) 286,952 (ii) 193,959 (ii) 162,205 (ii) 166,909 (ii) 152,198 (ii) 147,755 (ii) 134,078 (ii) 131,608 (ii) 148,656	(B) Breakdown of W-2 and/or 1099-MIS (i) Base Compensation (i) 286,952 (ii) 193,959 (ii) 162,205 (iii) 166,909 (iii) 152,198 (iii) 134,078 (iii) 131,608 (iii) 148,656	(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation (ii) Bonus & (iii) Other compensation (ii) 286,952 (iii) 193,959 (iii) 162,205 (iii) 166,909 (iii) 152,198 (iii) 134,078 (iii) 131,608 (iii) 148,656	(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation (ii) Base Compensation (iii) Compen	(B) Breakdown of W-2 and/or 1099-MISC compensation (C) Deferred compensation (D) Nontaxable benefits (i) Base Compensation (ii) Bonus & Incentive compensation (iii) Other compensation 63,704 (i) 193,959 2,181 63,704 (i) 193,959 17,718 26,926 (i) 10 162,205 17,718 26,299 (i) 10 166,909 3,027 29,340 (i) 17,718 26,488 (ii) 17,755 21,829 (ii) 131,608 22,352 (ii) 148,656 31,674	(i) Base Compensation (iii) Bonus & Incentive compensation (iii) Other compensation compensation benefits (B)(I)-(D) (i) 286,952 2,181 63,704 352,837 (i) 193,959 26,926 220,885 (i) 162,205 17,718 26,299 206,222 (ii) 166,909 3,027 29,340 199,276 (ii) 152,198 26,488 178,686 (ii) 134,078 21,829 169,584 (ii) 131,608 20,067 151,675 (ii) 148,656 31,674 180,330

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

OMB No 1545-0047

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

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.

Name of the organization BOARD OF TRUSTEES Employer identification number

91-0567740

UГ	WHITMAN COLLEGE													
Pä	art I Bond Issues (Requir	ed for 2008)												
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Description of Purpose		(g) De	(h) Or feased Behalf o Issuer		alfof	
											Yes	No	Yes	No
A	WHEFA 2004 BONDS	91-1306482		11-16-2	2004		100	REFUND A P	RIORISS	UE		х		x
в_	WHEFA 2008 BONDS	91-1306482		06-10-2	2008		100	FACILITIES	CONSTR	JCT		х		х
Pa	rt III Proceeds (Optional f	for 2008)												1
1	Total Proceeds of Issue				4	E	3	(:	<u> </u>	<u> </u>		E	
2	Gross Proceeds in Reserve Fur	nds												
3	Proceeds in Refunding or Defea	sance Escrows												
4	Other Unspent Proceeds													
5	Issuance Costs from Proceeds													
6	Working Capital Expenditures f	rom Proceeds												
7	Capital Expenditures from Proc	eeds												
8	Year of Substantial Completion	1								1		I .		
_	Were the bonds issued as part	of a current refunding ice	21102	Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part													
10			issue,											
11	Has the final allocation of proce													
12	Does the organization maintain final allocation of proceeds?													
Pa	rt IIII Private Business Us	se (Optional for 2008))	1 .				1						
				Yes	No	Yes	No No	Yes No Yes			D		Yes	
1	Was the organization a partner which owned property financed		mber of an LLC,	l es	140	165	140	1 es	140	165	No	i e	9	No
2	Are there any lease arrangeme which may result in private bus	nts with respect to the fi	nanced property											
For	Paperwork Reduction Act Notice, see	the Instructions for Form	990.			Cat No 501	93F			S	chedule K	(Form 99	0) 2008	

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

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

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DLN: 93493137019330

OMB No 1545-0047

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered

Transactions with Interested Persons

"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.

Employer identification number Name of the organization **BOARD OF TRUSTEES** OF WHITMAN COLLEGE 91-0567740 Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only). To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person 1 (b) Description of transaction Yes 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) (b) Loan to or Approved (e) In (g)Written (a) Name of interested person and from the (c)Original principal default? by board or (d)Balance due agreement? organization? purpose amount committee? Τо From Yes No Yes No Yes No Part III Grants or Assistance Benefitting Interested Persons To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27. (b)Relationship between interested person (a) Name of interested person (c)A mount of grant or type of assistance and the organization

Business Transactions Involving Interested Persons Part IV

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	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
MEGAN CLUBB	TRUSTEE	33,116	BANK FEES		Νo
JAMES HAYNER	TRUSTEE	11,600	ATTORNEY FEES		Νo
PETER VAN OPPEN	TRUSTEE	77,023	INTERNET SERVICE		Νο
				1	

DLN: 93493137019330

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

Non-Cash Contributions

Name of the organization BOARD OF TRUSTEES

Employer identification number

	HITMAN COLLEGE				91-0567740			
Pa	rt 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 de reven	etermi	nıng	
1	Art—Works of art	Х	6					
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х						
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	45	321,715	MARKET			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Q ualified conservation							
	contribution (other)							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other	X	1					
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts	X	1	32,500	APPRAISAL			
	Scientific specimens							
24	Archeological artifacts LIFE							
25	Other (describe INSURANCE) COMPUTER	X	1					
26	Other (describe SUPP)	X	3					
	Other (describe)							
	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement			ar for contributions for	29			
30a	During the year, did the organization hold for at						Yes	No
	least three years from the date of			not required to be used for	exempt purposes			
	for the entire holding period? .					30a		No
b	If "Yes", describe the arrangeme	ent in Part 1	II					
31	Does the organization have a gif	·		·		31		No
32a	Does the organization hire or us contributions?	e third part • • •	ies or related organizations	to solicit, process, or sell	non-cash	32a		Νο
b	If "Yes", describe in Part II							
33	If the organization did not report	revenuesı	n Column (c) for a type of p	roperty for which Column (a	a) is			
	checked, describe in Part II							

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					
	Notarii Notari						

OMB No 1545-0047

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.

2008

Open to Public Inspection

Name of the organization BOARD OF TRUSTEES OF WHITMAN COLLEGE ${\bf Employer\ identification\ number}$

91-0567740

ldentifier	Return Reference	Explanation
FINANCIAL ACCOUNTS IN FOREIGN COUNTRIES	FORM 990, PART V, LINE 4B	ENGLAND, CAYMAN ISLANDS, BRITISH INDIAN OCEAN TERRITORY

ldentifier	Return Reference	Explanation
RELATED PARTY INFORMATION AMONG OFFICERS	FORM 990, PAGE 6, PART VI, LINE 2	PETER VAN OPPEN JOHN STANTON TRUSTEE TRUSTEE BUSINESS RELATIONSHIP

ldentifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 10	THE COLLEGE'S AUDIT COMMITTEE WAS PROVIDED A COPY OF THE FORM AND REVIEWED WITH COLLEGE STAFF SUBSEQUENT TO THE COMMITTEE REVIEW, THE TRUSTEES WERE EACH PROVIDED A COPY OF THE FORM PRIOR TO THE COLLEGE'S FILING WITH THE IRS

ldentifier	Return Reference	Explanation
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	TRUSTEES, OFFICERS AND KEY EMPLOYEES ARE GIVEN A QUESTIONNAIRE ANNUALLY THE QUESTIONNAIRE INCLUDES THE COLLEGE'S CONFLICT OF INTEREST POLICY AND ASK EACH INDIVIDUAL ABOUT THE EXISTENCE OF CONFLICTS OF INTEREST AS WELL AS OTHER PAYMENTS OR SITUATIONS WHICH COULD BE CONSTRUED TO PRESENT A CONFLICT IF AN INDIVIDUAL ANSWERS ANY QUESTION IN THE AFFIRMATIVE THEY ARE ASKED TO DESCRIBE THE SITUATION IN THEIR RESPONSE IF THERE ARE ANY CONCERNS RELATIVE TO ANY ONE INDIVIDUAL'S RESPONSES, MANAGEMENT FOLLOWS-UP TO DISCUSS HOW BEST TO DEAL WITH ANY IDENTIFIED SITUATIONS TRUSTEES ARE REMINDED OF POTENTIAL CONFLICTS AT EACH MEETING MANAGEMENT ASCERTAINS ALL IDENTIFIED INDIVIDUALS HAVE RESPONDED AND ALL THE RESPONSES ARE MAINTAINED IN ACCORDANCE WITH THE COLLEGE'S FILE RETENTION POLICY

ldentifier	Return Reference	Explanation
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	TRUSTEES APPROVED THE COMPENSATION PACKAGE OF THE COLLEGE'S PRESIDENT AND THE DELIBERATIONS ON THAT PROCESS ARE DOCUMENTED IN ITS MINUTES COMPARABLE DATA FROM PEER INSTITUTIONS WERE USED TO SET THE COMPENSATION FOR THE PRESIDENT OF THE COLLEGE

ldentifier	Return Reference	Explanation
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	TRUSTEES APPROVED THE COMPENSATION PACKAGES OF THE COLLEGE'S OFFICERS COMPARABLE DATA FROM PEER INSTITUTIONS FOR EACH POSITION WERE USED TO SET THE COMPENSATION FOR EACH OFFICER OF THE COLLEGE

DLN: 93493137019330

2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

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

Related Organizations and Unrelated Partnerships

See separate instructions.

Name of the organization BOARD OF TRUSTEES OF WHITMAN COLLEGE					ification number
Part I Identification of Disregarded Entities				91-0567740	
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) ind-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizat	ions				
(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 statu (if section 501(c)(3	(F) us Direct controlling entity
WHITMAN COLLEGE PAUL GARRETT FOUND					
345 BOYER AVENUE WALLA WALLA, WA99362 91-1648072	TRUST	WA	501	5	N/A
WHITMAN COLLEGE 21ST CENTURY TRUST 345 BOYER AVENUE WALLA WALLA, WA99362 91-6526001	TRUST	WA	501	5	N/A

(A) Name, address, and EIN of related organization	Prin	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related investment, unrelated)	d, Shai	(F) ire of total income	(G) Share of end-of- year assets	(H Disprop allocat	I) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana parti	agıng
									Yes	No		Yes	No
Part IV Identification of	Related	l Organizations	Taxable as	a Corporation	or Trust	•							
(A) Name, address, and EIN of related org		(B) Primary activity		(C) Legal domicile (state or foreign country)	Direct o	D) ontrolling itity	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) Share of d-of-yea assets	(H) Percentage r ownership		

Part V Transactions with Related Organizatio
--

Note. Complete line 1 if any entity is listed in Parts II, III or IV		Ye	es	No
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)	10	: Ye	es	
d Loans or loan guarantees to or for other organization(s)	1 d	ı		No
e Loans or loan guarantees by other organization(s)	1e	=		No
f Sale of assets to other organization(s)		:		No
g Purchase of assets from other organization(s)	19	3		No
h Exchange of assets	1h	1		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i	i		No
j Lease of facilities, equipment, or other assets from other organization(s)		i		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	•		No
Performance of services or membership or fundraising solicitations by other organization(s)	11			No
m Sharing of facilities, equipment, mailing lists, or other assets	1n	n		No
n Sharing of paid employees	1n	1		No
• Reimbursement paid to other organization for expenses	10	,	+	No
p Reimbursement paid by other organization for expenses	1p	•		No
q O ther transfer of cash or property to other organization(s)	19	1		No
r Other transfer of cash or property from other organization(s)	1r	r		No

	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	WHITMAN COLLEGE PAUL GARRETT FOUND	С	218,101
(2)	WHITMAN COLLEGE 21ST CENTURY TRUST	С	190,233
(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 o managing partner?)
			Yes	No		Yes	No		Yes	No
			•	•		•		Cabadul	D / Form	

Software ID: Software Version:

EIN: 91-0567740

Name: BOARD OF TRUSTEES

OF WHITMAN COLLEGE

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa								I			
		(C) Position (check all that apply)							/E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
ANNA HERNANDEZ , TRUSTEE	1		Х					0	0	0	
BRADLEY M MCMURCHIE , TRUSTEE	1		Х					0	0	0	
DAVID W WYCKOFF , TRUSTEE	1		Х					0	0	0	
DEAN NICHOLS , TRUSTEE	1		Х					0	0	0	
ELIZABETH MAIN WELTY , TRUSTEE	1		Х					0	0	0	
JAMES K HAYNER , TRUSTEE	1		Х					0	0	0	
JAMES L ROBART , TRUSTEE	1		Х					0	0	0	
JOHN C COLEMAN , TRUSTEE	1		Х					0	0	0	
JOHN W STANTON , TRUSTEE	1		Х					0	0	0	
KAREN E GLOVER , TRUSTEE	1		Х					0	0	0	
LAWRENCE L DRAKE , TRUSTEE	1		Х					0	0	0	
LAWRENCE R STONE , TRUSTEE	1		Х					0	0	0	
MEGAN CLUBB, TRUSTEE	1		Х					0	0	0	
MEGAN MEDICA , TRUSTEE	1		Х					0	0	0	
PETER VAN OPPEN , TRUSTEE	1		Х					0	0	0	
RICHARD E HUNTER , TRUSTEE	1		Х					0	0	0	
THOMAS H MCCRACKEN , TRUSTEE	1		Х					0	0	0	
DAVID NIERENBERG , TRUSTEE	1		Х					0	0	0	
WALTER C MINNICK , TRUSTEE	1		Х					0	0	0	
NANCY SERRURIER , TRUSTEE	1		Х					0	0	0	
GEORGE W BRIDGES , PRESIDENT	40			Х				289,133	0	63,704	
PETER W HARVEY , TREAS/CFO	40			Х				193,959	0	26,926	
LORI BETTISON-VARGA , PROVOST/DEAN	40			х				179,923	0	26,299	
JOHN W BOGLEY , VP DEVELOPMT	40			Х				169,936	0	29,340	
CHARLES E CLEVELAND , DEAN OF STUD	40			х				152,198	0	26,488	
KEIKO M PITTER , C T O	40			Х				147,755	0	21,829	
JA CABASCO , DEAN OF ADM	40			Х				113,236	0	23,995	
DAVID F SCHMITZ , FACULTY	40					Х		134,078	0	22,352	
ROBERT J CARSON , FACULTY	40					Х		131,608	0	20,067	
LAURI K HOUCK , AVP DEVELOPM	40					Х		124,280	0	25,599	

Form 990, Part VII - Section Aaa

		Posi t	(C tion (hat a	ched					(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
PAUL H YANCEY , FACULTY	40					Х		121,896	0	19,598
PATRICK W KEEF , FACULTY	40					Х	Х	148,656	0	31,674