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Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2009 Open to Public Inspection

	F4b- 00	00	.	ar, or tax year beginning $07/01/09$, and ending $06/30/10$			
							
	Check of applic		lease se IRS	C Name of organization Association of Independent Colleges	P	Empl	oyer identification number
<u></u>	Address chan	1e er	bel or	and Universities of Pennsylvania		0.5	1666617
∐ ≀	Name change	p	rint or	Doing Business As			<u>-1666617</u>
\Box_1	Initial return		type.	Number and street (or P O box if mail is not delivered to street address) Room/suite	ĮΕ		hone number
음 [·]			See pecific	101 North Front Street	_	71	<u>7-232-8649 </u>
ַ י	Termination		struc-	City or town, state or country, and ZIP + 4	<u> </u>	Gross rec	peipts \$ 1,875,358
$\bigsqcup t$	Amended retu	m t	ions	Harrisburg PA 17101-1405			
\Box	Application pe	nding F	Name	and address of principal officer	H	(a) is this	s a group return for
		Ĭ	Dr		1	affiliat	
			10	1 North Front Street		(b) Are al includ	ied? Yes No
			Ha:	rrisburg PA_17101-1405		If "No	o," attach a list. (see instructions)
ı	Tax-exemp	t status	X	501(c) (3) ◀ (insert no) 4947(a)(1) or 527			
J	Website: I	► ww	w.a	icup.org	н	(c) Group	p exemption number
ĸ	Type of organ	nzation []	X Con	poration Trust Association Other L Year of formative			M State of legal domicile PA
	art I		nmar				
				ie organization's mission or most significant activities			
		-		dule O Additional Information			
ည							
naı							•
Ver	0.05		.				
ô	1			if the organization discontinued its operations or disposed of more than 25% of its net	assets	1 . !	ا م
8			_	members of the governing body (Part VI, line 1a)		3	23
Activities & Governance				endent voting members of the governing body (Part VI, Ime 1b)		4	22
ti Vi				mployees (Part V, line 2a) RECEIVED		_ 5	11
Aci	6 Tota	al numb	er of v	olunteers (estimate if necessary)		6	56
	7a Tota	al gross	unrela	ated business revenue from Part (IIII) column (C) pline 12 011		7a	815
	b Net	unrelate	ed bus	iness taxable income from Form 990-1, line 34		7b	
				1)	rior Year		Current Year
0	8 Cor	ntribution	ns and	grants (Part VIII, line 1h) OGDEN, UT		,732	629,303
Revenue	9 Pro	gram se	rvice i	revenue (Part VIII, line 2g)	,019,		1,035,851
NO.	10 Inve	estment	ıncom	e (Part VIII, column (A), lines 3, 4, and 7d)		, 478	· · · · · · · · · · · · · · · · · · ·
<u> </u>	11 Oth	er reven	nue (P	art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		,708	
	12 Total	al reveni	ue – a	dd lines 8 through 11 (must equal Part VIII, column (A), line 12)	,842,	,060	1,836,975
	13 Gra	ints and	sımıla	r amounts paid (Part IX, column (A), lines 1–3)	371,	, 250	340,050
	14 Ber	efits par	id to o	r for members (Part IX, column (A), line 4)			
_s				mpensation, employee benefits (Part IX, column (A), lines 5–10)	885,	, 930	929,129
Expenses	l			raising fees (Part IX, column (A), line 11e)			,
<u>ē</u>				expenses (Part IX, column (D), line 25) ▶ 162, 319			
Ш			_	Part IX, column (A), lines 11a–11d, 11f–24f)	649.	,829	499,168
	40 Tak		•		907,		1,768,347
5	10 Po			penses Subtract line 18 from line 12		949	68,628
e o	10 110	rende le	00 CAP	Beginning			End of Year
Net Assets of Util	20 Tota	al assets	s (Part		910,		2,915,426
Ass	21 Tota				556,		1,409,097
از چ	22 Net				353,		1,506,329
	art II			e Block	<u> </u>		1/000/023
<u> </u>	<u> </u>			es of perjury, I declare that I have examined this return, including accompanying schedules and statement	s and to t	the best (of my knowledge
<u> </u>				s true, correct, and complete Declaration of preparer (other than officer) is based on all information of white			
Z Sin	n	<u> </u>	$\downarrow \rangle$	an I Trances		12/	13/11
Sig Her	**	-	<u></u>	OV O TI WOVING			
	•	3	ignatur	e of officer And And S And S		Date	
UJ) =		DN LIFRANCIS, TRESIONAT			
		V	ype or	print name and title			Drangrada idaalifi
Pai	d	Prepar	rer's	JL 1004	Check if self-	_	Preparer's identifying number (see instructions)
		signati	ure		employed	<u> </u>	P00033890
	parer's	1	nama	Greenawalt & Company, P.C.		EIN D	23-2405297
USE	e Only		name i employ	ACC IT - A Mail - Change		Phone	
				ZIP+4 Mechanicsburg, PA 17055	İ		→ 717 - 766-4763
May	the IRS d	iscuss th	his ret	urn with the preparer shown above? (see instructions)			Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. DAA

476)

) (Revenue \$

4d Other program services (Describe in Schedule O)

4e Total program service expenses ▶

295,854 including grants of \$

-					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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		_	2	Χ	
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete					
	Schedule C, Part II			4	X	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)					
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III			5		
6	Did the organization maintain any donor advised funds or any similar funds or 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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"					
	complete Schedule D, Part III			8		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part					İ
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"					
	complete Schedule D, Part IV			9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or					
	quasi-endowments? If "Yes," complete Schedule D, Part V			10	Х	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,					
	VII, VIII, IX, or X as applicable			11	X	<u> </u>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete					
	Schedule D, Part VI					
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more					
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII					
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more					
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII					
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets					
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX					
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X					
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses					
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X					
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete					<u> </u>
	Schedule D, Parts XI, XII, and XIII	م		12	X	ļ
I2A	Was the organization included in consolidated, independent audited financial statements for the tax year?		es No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	X			.,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			13		X
I4a	Did the organization maintain an office, employees, or agents outside of the United States?			14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			l		.,
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I			14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any					v
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II			15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance					v
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III			16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			4-		v
10	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I			17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on					v
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			46		v
۰0	If "Yes," complete Schedule G, Part III			19 20		X
20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H				990	
				COLI		(ZUU9)

Yes

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Form	n 990 (2009) Association of Independent Colleges 25-1666617	
Pa	art IV Checklist of Required Schedules (continued)	
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	24
22	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants and other assistance to individuals in the	<u>21</u>
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated	23
24a	employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23
240	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a
ь		24b
С	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
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d
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

with a disqualified person during the year? If "Yes," complete Schedule L, Part I

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a

prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

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

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1

35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R. Part V. line 2

36 Section 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

37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O

Form **990** (2009)

	art V Statements Regarding Other IRS Filings and Tax Compliance		F	Page :
_:F4	art 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		Tes	1 10
	U.S Information Returns Enter -0- if not applicable	9		1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0		I
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			1
	gaming (gambling) winnings to prize winners?	. 1c	X	1
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1	1
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	11		I
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
	instructions)			I
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			l
	this return?	3a	X	1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			T
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			l
	and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	<u> </u>		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	<u> </u>		1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			ı
	and services provided to the payor?	7a	İ	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			1
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e	1	İ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	1	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			Г
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			•
	organization, have excess business holdings at any time during the year?	8_		
9	Sponsoring organizations maintaining donor advised funds.			1
а	Did the organization make any taxable distributions under section 4966?	9a		<u>.</u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	
10	Section 501(c)(7) organizations. Enter			1
а	Initiation fees and capital contributions included on Part VIII, line 12			Ī
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			ŧ
11	Section 501(c)(12) organizations. Enter			1
а	Gross income from members or shareholders			ŧ
b	Gross income from other sources (Do not net amounts due or paid to other sources against			l
	amounts due or received from them)			ŧ
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

Part Vi Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes. or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent	_		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6	X	<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members		١	
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Χ	ļ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		v	
a	The governing body?	8a	X	-
ь	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			_v
800	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	L	<u>X</u>
	tion B. Policies (This Section B requests information about policies not required by the Internal renue Code.)			
1164	ende dode.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	163	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	100		
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	Х	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Χ	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Χ	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	Χ	
13	Does the organization have a written whistleblower policy?	13	Χ	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Χ	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
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		X
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	4		
500	the organization's exempt status with respect to such arrangements? tion C. Disclosure	16b		
<u>3ec</u> 17	List the states with which a copy of this Form 990 is required to be filed PA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Tim Alexander 101 North Front Street			
На	rrisburg PA 17101-1405 71	7-23	2-8	649

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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

(A) Name and Title	(B) Average	Pos	ition (C) k all t	hat ap	ndv)	(D) Reportable	(E) Reportable	(F) Estimated	
Name and The	hours per week	or director		Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations	
Thomas R Kepple	2.00	Х						0	0	(
Fr Timothy R Lann		╁	\vdash			Н		U			
Vice Chair	2.00	X						ol	0	(
Kathleen C Owens	2.00	1									
Treasurer	2.00	X				1		ol	0	(
L Jay Lemons	2.00	11								`	
Past Chair	2.00	X						ol	0	(
Thomas F Flynn		1									
E D Chair	2.00	X						ol	0	(
Thomas Gamble											
R Chair	2.00	X						0	0	(
Fr Gabriel J Zeis										-	
C Chair	2.00	X						0	0	(
Joseph E Gilmour											
G R Liason	2.00	X						0	0	(
Jerry M Greiner								_			
PACU Liason	2.00	X				Ш		0	0	·-·	
Peyton R Helm											
NAICU Liason	2.00	X	<u> </u>			-		0	0	(
Edward G Boehm	2 00	١.,									
Director M. Danaha	2.00	X				Н		0	0	(
Fr Peter M Donohu		\ v							0	,	
<u>Director</u> Sr Candace Introc	2.00	X	\vdash			\vdash		0	0	(
•	2.00	X						o	0	(
<u>Director</u> Tori Haring-Smith		┢				\vdash	_	- 0	<u> </u>		
Director	2.00	X						o	0	(
Sr R Patricia Fad		 ^``				H					
Director	2.00	X						o	0	(
Stephen C MacDona	1d	<u> </u>									
Director	2.00	X						o	0	(
Peter Teague						\Box					
Director	2.00	X	1					ol	0	(

Part VII Section A. Officers	Directors, Trus	tees	, Ke	y Em	ploy	/ees	and	d Highest Compensated E	mployees (continued)	
(A) Name and Title	(B) Average hours per	Pos	ition (C) k all t	hat aş		(D) Reportable compensation	(E) Reportable	(F) Estimated
	week or not not to the organizations week organizations			amount of other compensation from the organization and related organizations						
Daniel H Weiss Director	2.00	Х						0	0	0
Gregory G Dell'Om Director		Х						0	0	0
Antoine M Garibal	di									
•	2.00 II	X		-				0	0	0
Director Kim S Phipps	2.00	Х						0	0	0
Director Don L Francis	2.00	X						0	0	0
President Tim Alexander	50.00			Х				232,509	0	37,912
VP Fin & Adm Dr Mary Young	50.00			Х	_			111,360	0	30,646
VP - Govt Re	50.00			Х				111,119	0	18,050
Ron Uroda VP - Researc	50.00			Х				82,973	0	19,825
1b Total	1	L					<u> </u>	537,961		106,433
2 Total number of individuals (increportable compensation from the compensation)	-		to th	ose	isted	d abo	ve)	who received more than \$10	00,000 in	
 Did the organization list any for employee on line 1a? If "Yes," of For any individual listed on line the organization and related organization and related organization listed on line 1a services rendered to the organization B. Independent Contractor Complete this table for your five 	complete Schedu 1a, is the sum of ganizations great a receive or accru ization? If "Yes," ors e highest comper	ile J f repo er th ue co comp	for si ortab an \$ mpe olete	uch i le co 150,(nsati Sch	ndivi impe 0007 on fi edul	dual ensat If "Y rom a	ion a 'es," any u	and other compensation fror complete Schedule J for su unrelated organization for ich person	ch	3 X 4 X 5 X
compensation from the organiz	(A) business address							Descript	(B) uon of services	(C) Compensation
						,				
Total number of independent commore than \$100,000 in compendate		_				to th	ose	listed above) who received		0 Form 990 (2009

	/III Statem	ent of Revenu			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
និសិ 1a	Federated cam	paigns 1	a				1	
i lõga	b Membership du	ies <u>1</u>	ь					
a a a	Fundraising even	ents <u>1</u>	с				Ī	
	d Related organia	zations 1	d					
έ <u>Ε</u> e	Government grants (contributions) 1	е	102,578			I	
and other similar amounts	f All other contributions and similar amounts		f	526,725	# # # # # # # # # # # # # # # # # # #			
	g Noncash contribution	is included in lines 1a-1f	\$	1				
	h Total. Add line:	s 1a–1f		>	629,303			
Program Service Revenue				Busn. Code				
통 2a	Membersh	nip Dues			994,790	994,790		_
<u>ہے</u> ا	b Meetings	and Workshops	5		40,585	40,585		
ဦ ၂	-	n Programs			476	476		
, 첫	d	•						
Ĕ e	Ð							
<u> </u>	f Ali other progra	ım service revenue						
ᇎ ,	Total. Add line			•	1,035,851			
-		ome (including divid	ends. inte	rest, and				
	other similar ar			•	25,314			25,314
4		vestment of tax-exe	mpt bond	proceeds	==,===			20/021
5	Royalties			•	143,986			143,986
"	r toyamoo [(ı) Real	7 (ıı) Personal				
62	a Gross Rents	6,60		.,,	I		ı	
	Less rental exps	5,78			Į.		I	
			15		1		1	
ء ا		•			815		815	
7a	Gross amount from	(i) Secunties		(II) Other	013		013	
	sales of assets	34,20	10	(ii) Giller			1	
	other than inventory	24,21	70				1	
"	Less cost or other	32,59	20				1	
	basis & sales exps	1,60					1	
	Gain or (loss) [)		1 600		ŧ	1 600
	Net gain or (los				1,602			1,602
호 88		m fundraising events					I	
<u> </u>	(not including \$						I	
<u></u>		eported on line 1c).					I	
<u>-</u>	See Part IV, line		a				1	
\sim 1	Less direct exp		b		I		1	
		(loss) from fundrais	ng <u>events</u>					
9a	Gross income fro		ŀ				•	
ŀ	See Part IV, line		a				1	
	Less direct exp		b [
		(loss) from gaming	acti <u>vities</u>	•				
10a	a Gross sales of	•					1	
	returns and allo		a				1	
	Less cost of go		b				1	
<u> </u>		(loss) from sales of	nventory	<u> </u>				
	Misce	ellaneous Revenue		Busn. Code			1	
11a	Miscellan	eous revenues			104			104
ь)							
c	;							
d	All other revenu	Je						
- 1	Total. Add lines	s 11a–11d		>	104			
0					1,836,975			

Part IX Statement of Functional Expenses

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

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

	All other organizations must o		(B)	(C)	(D)
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				***************************************
	organizations in the U.S. See Part IV, line 21	340,050	340,050		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
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	647,440	473,573	118,646	55,221
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		i		
	persons described in section 4958(c)(3)(B)	1.70			
7	Other salaries and wages	152,427	85,666	50,116	16,645
8	Pension plan contributions (include section 401(k)	70 404	10 017	6 100	0.045
	and section 403(b) employer contributions)	18,494	10,317	6,132	2,045
9	Other employee benefits	63,869	44,837	13,891	5,141
10	Payroll taxes	46,899	32,553	10,089	4,257
11	Fees for services (non-employees)		1		
a	Management	2 045	400	2 (20)	
b	Legal	3,045 13,188	425	2,620 13,188	<u>-</u>
C	Accounting	13,188		13,188	
đ	Lobbying				
e	Professional fundraising services See Part IV, line 17				-
f	Investment management fees	120,575	114,347	3,941	2,287
g 42	Other	120,373	114,347		2,201
12	Advertising and promotion	4,012	3,403	243	366
13 14	Office expenses Information technology	4,012	3,403	243	
15	Royalties	+			
16	Occupancy	66,285	46,009	14,258	6,018
17	Travel	33,342	22,311	7,481	3,550
18	Payments of travel or entertainment expenses	00/012	22/311	77.101	3,000
,,	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	47,666	44,854	2,812	
20	Interest	12,591	8,739	2,709	1,143
21	Payments to affiliates				-,
22	Depreciation, depletion, and amortization	39,002	26,444	9,021	3,537
23	Insurance	4,025	1,392	2,451	182
24	Other expenses Itemize expenses not		verver		
	covered above (Expenses grouped together	1		1	
	and labeled miscellaneous may not exceed	1		1	
	5% of total expenses shown on line 25 below)	I			
а	Dues and subscriptions	86,578	7,011	19,999	59,568
b	Printing and postage	28,372	17,196	10,251	925
С	Internet aggregation gran	11,988	11,988		
ď	Telephone/internet	9,611	6,671	2,068	872
е	Cultivation	8,144	6,928	1,216	
f	All other expenses	10,744	8,848	1,334	562
25	Total functional expenses. Add lines 1 through 24f	1,768,347	1,313,562	292,466	162,319
26	Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
DAA	fundraising solicitation			i	Form 990 (2009)

P	art X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing	-			1	
	2	Savings and temporary cash investments			927,940	2	906,012
	3	Pledges and grants receivable, net	<u>525</u>	3			
	4	Accounts receivable, net		•	70,090	4	48,645
	5	Receivables from current and former officers, directors, to	rustees, key				
		employees, and highest compensated employees. Comp					
		Schedule L		5			
	6	Receivables from other disqualified persons (as defined to					
		4958(f)(1)) and persons described in section 4958(c)(3)(l					
"		Part II of Schedule L				_6	
Assets	7	Notes and loans receivable, net		7			
SS	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			7,663	9	7,663
	10a	Land, buildings, and equipment cost or	1 [
		other basis Complete Part VI of Schedule D	10a 1	,604,458			
	ь	Less accumulated depreciation	10b	515,153	1,130,078	10c	1,089,305
	11	Investments—publicly traded securities	<u> </u>	•	774,395	11	863,801
	12	Investments—other securities See Part IV, line 11			12		
	13	Investments—program-related See Part IV, line 11			13	,	
	14	Intangible assets		, ,	14		
	15	Other assets See Part IV, line 11			15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3		2,910,691	16	2,915,426
_	17	Accounts payable and accrued expenses	·	-	91,019	17	31,704
	18	Grants payable		<u> </u>	18		
	19	Deferred revenue		346,505	19	428,727	
	20	Tax-exempt bond liabilities			900,000	20	800,000
Ø	21	Escrow or custodial account liability Complete Part IV of	Schodule D		200,000	21	000,000
Liabilities	22	Payables to current and former officers, directors, trustee					
Ė	22	•	•				
iat		employees, highest compensated employees, and disqua persons Complete Part II of Schedule L	aiilleu			22	
لب	33	·				22	
	23	Secured mortgages and notes payable to unrelated third				23 24	
	24	Unsecured notes and loans payable to unrelated third particles Complete Part X of Schedule D	rues	İ	219,468	-	148,666
	25	·			1,556,992	25 26	1,409,097
<u>_</u>	26	Total liabilities. Add lines 17 through 25	रा		1,330,992	26	1,403,037
Ses		Organizations that follow SFAS 117, check here ▶ [2]	X and				
Ĭ	27	complete lines 27 through 29, and lines 33 and 34.			011 520		1 056 076
ali	27	Unrestricted net assets			944,538		1,056,076
Net Assets or Fund Balances	28	Temporarily restricted net assets		}	400 161	28	4E0 2E2
Ĕ	29	Permanently restricted net assets	بىم _~		409,161	_29	450,253
Ē		Organizations that do not follow SFAS 117, check he	re >				
ō		and complete lines 30 through 34.					
)ts	30	Capital stock or trust principal, or current funds				30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment				31	
ž	32	Retained earnings, endowment, accumulated income, or	other funds	ļ	1 252 522	32	1 500 000
<u>e</u> t	33	Total net assets or fund balances			1,353,699	33	1,506,329
	34	Total liabilities and net assets/fund balances			2,910,691	34	2,915,426

orm	1990 (2009) Association of Independent Colleges 25-1666617		Pag	ge 12
Pa	art XI Financial Statements and Reporting			
_			Yes	_No
1	Accounting method used to prepare the Form 990			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<u>X</u> _
b	Were the organization's financial statements audited by an independent accountant?	2b	Χ	
C	If "Yes" to line 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	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both Only one entity			
	X Separate basis			
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		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		
		Form	990	(2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Association of Independent Colleges and Universities of Pennsylvania

Employer identification number 25–1666617

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

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Association of Independent Colleges 25-1666617

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (e) 2009 (b) 2006 (d) 2008 (c) 2007 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 1,375,714 1,508,408 1,649,854 1,624,093 1,393,594 7,551,663 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 1,393,594 1,375,714 1,508,408 1,649,854 1,624,093 7,551,663 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 1,195,547 Public support. Subtract line 5 from line 4 6,356,116 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 1,393,594 1,375,714 1,508,408 1,649,854 1,624,093 7,551,663 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 81,378 82,257 63,890 36,484 169,300 433,309 sources Net income from unrelated business activities, whether or not the business is 886 967 815 2,668 regularly carried on Other income Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 11 7,987,640 12 12 Gross receipts from related activities, etc. (see instructions) 190,180 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 14 79.57% 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 79.72% 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

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

Sec	tion A. Public Support	ecked the box of	on line 9 of Pai	τι.)			
	lendar year (or fiscal year beginning in)	(2) 2005	(b) 2006	(a) 2007	(4) 2009	(0) 2000	(f) Total
Cal	iendar year (or fiscar year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					1	
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 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year				ļ		
C	Add lines 7a and 7b				<u> </u>		
8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support		Г			ı	
	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						. = . =
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	rganization's first,	second, third, fourti	n, or fifth tax year a	is a section 501(c)(3)	▶ [
Sec	tion C. Computation of Public Su	pport Percent	age				
15	Public support percentage for 2009 (line 8,	column (f) divided l	oy line 13, column (f))		15	%
16	Public support percentage from 2008 Schee					16	%
Sec	tion D. Computation of Investme	•			· · · · · · · · · · · · · · · · · · ·		
17	Investment income percentage for 2009 (lin			olumn (f))		17	%
18	Investment income percentage from 2008 S					18	%
19a	33 1/3 % support tests—2009. If the organ				•		
	17 is not more than 33 1/3 %, check this bo	•	•				▶ [
þ	33 1/3 % support tests—2008. If the organ			•		•	
	line 18 is not more than 33 1/3 %, check thi	•	_	•			P
20	Private foundation. If the organization did	<u>not check a box on</u>	line 14, 19a, or 19	b, check this box a	nd see instructions		

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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

OMB No 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

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

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

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

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

Name of organization Association of Independent Colleges

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

	and Universities of	Pennsylvania		25-16666	17			
Pai	t I-A Complete if the organization is exer	mpt under section 501(c)	or is a section	on 527 organizatio	n.			
1	Provide a description of the organization's direct and indire	ct political campaign activities in	Part IV					
2	Political expenditures			▶ \$				
3	Volunteer hours			_ :				
Par	t I-B Complete if the organization is exe	npt under section 501(c)	(3).					
1	Enter the amount of any excise tax incurred by the organiz	ation under section 4955		▶ \$				
2	Enter the amount of any excise tax incurred by organizatio	n managers under section 4955		▶ \$	- =			
3	If the organization incurred a section 4955 tax, did it file Fo	rm 4720 for this year?			Yes No			
	Was a correction made?				Yes No			
	If "Yes," describe in Part IV							
	t I-C Complete if the organization is exe			ion 501(c)(3).				
1	Enter the amount directly expended by the filing organization	on for section 527 exempt function	n					
_	activities			▶\$				
2	Enter the amount of the filing organization's funds contribu	ted to other organizations for sec	tion					
	527 exempt function activities			▶\$	-			
3	Total exempt function expenditures Add lines 1 and 2 Ent	er nere and on Form 1120-POL,		. .				
	line 17b ▶ \$							
4								
3	5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount haid from the filing organization's funds. Also enter the amount of political							
	were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated							
	fund or a political action committee (PAC) If additional spa	• •	-	separate segregated				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political			
	(a) Hamb	(b) / (diress	(0, 2	filing organization's	contributions received and			
				funds if none, enter -0-	promptly and directly			
					delivered to a separate political organization If			
			ļ		none, enter -0-			
_								
				 				
Fo- 5	bissess Act and Danomicark Dedication Act Matics and the	o Instructions for Farm 000) 000 E7	1				
ror F	rivacy Act and Paperwork Reduction Act Notice, see the	e mstructions for Form 990 or t	73U-EŁ.	Schedule C (Form	1 990 or 990-EZ) 2009			

Sch	edule C (Form 990 or 990-EZ) 2009 AS	<u>sociation of Independent Coll</u>	<u>eges 25-166661</u>	.7 Page 2
Pa	rt II-A Complete if the organi	zation is exempt under section 501(c)(3) and	d filed Form 5768 (elect	ion
	under section 501(h)).			
A	Check ▶ ☐ if the filing organization	tion belongs to an affiliated group.		
В	Check ▶	tion checked box A and "limited control" provi	sions apply.	
		bbying Expenditures means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
18	Total lobbying expenditures to influence pu	iblic opinion (grass roots lobbying)		
ŀ	Total lobbying expenditures to influence a	egislative body (direct lobbying)	75,118	
(Total lobbying expenditures (add lines 1a a	and 1b)	75,118	
	Other exempt purpose expenditures		1,341,192	
•	Total exempt purpose expenditures (add li	nes 1c and 1d)	1,416,310	
	f Lobbying nontaxable amount. Enter the arr	nount from the following table in both		
	columns		216,631	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
ę	Grassroots nontaxable amount (enter 25%	of line 1f)	54,158	
ı	Subtract line 1g from line 1a If zero or less	s, enter -0-	0	
	i Subtract line 1f from line 1c If zero or less	, enter -0-	0	
	j If there is an amount other than zero on eit	her line 1h or line 1i, did the organization file Form 4720 rep	orting	
	section 4911 tax for this year?			Yes No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

<u> </u>	bbying Expenditure	es During 4-Year	Averaging Period	<u> </u>	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount	226,824	222,459	240,003	216,631	905,917
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					1,358,876
c Total lobbying expenditures	126,853	183,082	133,980	75,118	519,033
d Grassroots nontaxable amount	56,706	55,615	60,001	54,158	226,480
e Grassroots ceiling amount (150% of line 2d, column (e))					339,720
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Pa	★ II-B Complete if the organization is exempt under section 501(c)(3) and has NOT find (election under section 501(h)).	iled F	orm	1 5768			
	(clostion and of bootion borting).	(a	1)		(b)		
		Yes	No	Aı	mour	nt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local				m. ren. r		••••
	legislation, including any attempt to influence public opinion on a legislative matter or						
	referendum, through the use of			1			
а	Volunteers?			_			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?]			
С	Media advertisements?						
d	Mailings to members, legislators, or the public?						
9	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?						
i	Other activities? If "Yes," describe in Part IV						
j	Total Add lines 1c through 1i						
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	If "Yes," enter the amount of any tax incurred under section 4912			1			
	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?						
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), c	or se	ction			
	501(c)(6).						
					\Box ,	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			_1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			_ 2	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?				3		
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), c	rse	ction			
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1	ne 3 i	is ar	ıswered			
	"Yes."						
1	Dues, assessments and similar amounts from members		1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political						
	expenses for which the section 527(f) tax was paid).			1			
а	Current year		2a				
b	Carryover from last year	Į	2b				
С	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 (see instructions)		5				
Par	t IV Supplemental Information						

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

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. ▶ See separate instructions.

Employer identification number

Name	of the organization		Employer identification number
	ssociation of Independent Colleges		
_a:	nd Universities of Pennsylvania		25-1666617
Pa	organizations Maintaining Donor Advised Fur the organization answered "Yes" to Form 990, F	nds or Other Similar Funds or Acc Part IV, line 6.	counts. Complete if
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (dunng year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the	he assets held in donor advised	
	funds are the organization's property, subject to the organization's exclus	ive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in w	riting that grant funds can be	
	used only for charitable purposes and not for the benefit of the donor or o	lonor advisor, or for any other	
	purpose conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the orga	<u>nization answered "Yes" to Form </u>	990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check a	ll tha <u>t a</u> pply)	
	Preservation of land for public use (e g , recreation or pleasure)	Preservation of an historically impor	tant land area
	Protection of natural habitat	Preservation of certified historic stru	ucture
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conserva-	ation contribution in the form of a conservatio	n
	easement on the last day of the tax year		(m) voj
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure include	ded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06		2d
3	Number of conservation easements modified, transferred, released, extir	nguished, or terminated by the organization d	uring
	the taxable year		
4	Number of states where property subject to conservation easement is loc	cated >	
5	Does the organization have a written policy regarding the periodic monitor	ring, inspection, handling of	П., П.,
	violations, and enforcement of the conservation easements it holds?		∐ Yes ∐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	g conservation easements during the year	
-			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co	nservation easements during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section	Yes No
9	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	ate in its revenue and evenues statement, an	
9	In Part XIV, describe how the organization reports conservation easemer balance sheet, and include, if applicable, the text of the footnote to the or	•	
	the organization's accounting for conservation easements	garnzation's interioral statements that describ	
Pa	rt III Organizations Maintaining Collections of Art,	Historical Treasures, or Other Sir	milar Assets.
	Complete if the organization answered "Yes" to		
1a	If the organization elected, as permitted under SFAS 116, not to report in	its revenue statement and balance sheet wo	orks of
	art, historical treasures, or other similar assets held for public exhibition,	education, or research in furtherance of publi	c service,
	provide, in Part XIV, the text of the footnote to its financial statements that	t describes these items	
b	If the organization elected, as permitted under SFAS 116, to report in its	revenue statement and balance sheet works	of art,
	historical treasures, or other similar assets held for public exhibition, educ	cation, or research in furtherance of public se	ervice,
	provide the following amounts relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical treasures, or of	ther similar assets for financial gain, provide	the
	following amounts required to be reported under SFAS 116 relating to the	ese items	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
ь	Assets included in Form 990, Part X		▶ \$

		<u>on of Independ</u>			<u> 25-16666</u>		Page 2
	rt III Organizations Maintaining						(continued)
3	Using the organization's acquisition, accession collection items (check all that apply).	, and other records, check a	iny of the following ti	nat are a	significant use of it	ts	
а	Public exhibition	d 🔲 Loan or	exchange programs	3			
b	Scholarly research	e 🔲 Other					
С	Preservation for future generations						
4	Provide a description of the organization's colle Part XIV	ections and explain how they	further the organiza	ition's ex	kempt purpose in		
5	During the year, did the organization solicit or rassets to be sold to raise funds rather than to be				ılar		Yes No
Pa	rt IV Escrow and Custodial Arra	ingements. Complete	e if the organiza	tion ar	nswered "Yes" t	to Form 9	90, Part
	IV, line 9, or reported an am	ount on Form 990, P	art X, line 21.				
1a	Is the organization an agent, trustee, custodian	or other intermediary for co	entributions or other	assets n	ot		
	included on Form 990, Part X?						Yes No
b	If "Yes," explain the arrangement in Part XIV at	nd complete the following tal	ble		_		
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	· · · · · · · · · · · · · · · · · · ·
e	Distributions during the year		•			1e	_
f	Ending balance					1f	
2a	Did the organization include an amount on Fore	m 990, Part X, line 21?			_		Yes No
ь	If "Yes," explain the arrangement in Part XIV						
***********	et V Endowment Funds. Compl	ete if organization ans	swered "Yes" to	Form	990, Part IV, li	ne 10	
		(a) Current year	(b) Pnor year			ree years bacl	k (e) Four years back
1a	Beginning of year balance	713,290	872,343				
	Contributions		,			***************************************	111111111111111111111111111111111111111
	Net investment earnings, gains,				***************************************		
·	and losses	98,658	-126,553				
ď	Grants or scholarships	16,200	16,500				
	Other expenditures for facilities	10/200	10,000	************	······ · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
·	and programs	18,000	16,000				
	Administrative expenses	10,000	10,000		·	•	
	•	777,748	713,290			••••••	
g	End of year balance		113,290				
2	Provide the estimated percentage of the year € Board designated or quasi-endowment ►						
	_ · · · · · · · · · · · · · · · · · · ·	<u>42.11</u> %					
					- 41		
sa	Are there endowment funds not in the possess	ion of the organization that a	are neid and adminis	terea to	rtne		[V.] N.
	organization by						Yes No
	(i) unrelated organizations						3a(i) X
	(ii) related organizations						3a(ii) X
_	If "Yes" to 3a(II), are the related organizations II	•					3b
4	Describe in Part XIV the intended uses of the c			D = 4 \	V. I 40		
Pa	rt VI Investments—Land, Buildi						
	Description of investment	(a) Cost or other basis	(b) Cost or oth	er	(c) Accumulate	a	(d) Book value
		(investment)	basis (other)		depreciation		115 000
	Land		115,				115,000
	Buildings	ļ	1,348	, 687	381,	885	<u>966,802</u>
С	Leasehold improvements						
d	Equipment		140,	,771	133,	268	7,503
	Other						
Total	. Add lines 1a through 1e (Column (d) must equ	ual Form 990, Part X, colum	n (B), line 10(c))			<u> </u>	1,089,305

148,666

 \blacktriangleright

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

organization's liability for uncertain tax positions under FIN 48

	<u>dule D (Form 990) 2009 Association of Independent Colleges 25-166661</u>	<u>7</u>	Page 4
Pa	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statement	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,836,975
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,768,347
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	<u>68,628</u>
4	Net unrealized gains (losses) on investments	4	84,001
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	04 003
9	Total adjustments (net) Add lines 4 through 8	9	84,002 152,630
10 Pa	Excess or (deficit) for the year per audited financial statements		132,030
1	Total revenue, gains, and other support per audited financial statements	1	1,668,827
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		170007027
а	Net unrealized gains on investments 2a 84,001		
b	Donated services and use of facilities 2b		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV) 2d 40, 989		
е	Add lines 2a through 2d	2e	124,990
3	Subtract line 2e from line 1	3	1,543,837
4	Amounts 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		
b	Other (Describe in Part XIV) 4b 293, 138	- 1	
C	Add lines 4a and 4b	4c	293 , 138
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,836,975
	Reconciliation of Expenses per Audited Financial Statements With Expenses per Ro		1 516 107
1	Total expenses and losses per audited financial statements	_1	1,516,197
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	. 1	
a	Donated services and use of facilities 2a		
b	Prior year adjustments 2b	1	
c d	Other losses 2c Other (Describe in Part XIV) 2d 40,989	1	
e	Add lines 2a through 2d	2e	40,989
3	Subtract line 2e from line 1	3	1,475,208
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1,473,200
a	Investment expenses not included on Form 990, Part VIII, line 7b	- 1	
	Other (Describe in Part XIV) 4b 293, 139		
	Add lines 4a and 4b	4c	293,139
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,768,347
Pa	rt XIV Supplemental Information		
Comp	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b		
and 2	b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
	art to provide any additional information		
_ P <u>a</u>	<u> </u>		
	_The_restricted_endowment_supports_annual_scholarship_for_	stuc	dents
	_attending_nursing_programs_and_for_other_students_exhibit		
	volunteer_and_community_service_work_(Good_Citizen_Schola		
	designated_endowment_supports_annual_programs_and_operation	<u>ons</u>	oi_the
	Association.		

Schedule D (Form 990) 2009 Association of Independent Colleges 25-16 Part XIV Supplemental Information (continued)	66617		Page 5
_Part_XI, Line_8 - Reconciliation of Changes - Other			
Revenue_passthroughs grossed up on audit	_ \$ _	3 <u>5,204</u>	
Rental expenses grossed up on audit	<u> \$ </u>	<u>5,7</u> 8 <u>5</u>	
Meeting registrations and other fees netted on audit	<u> </u>		
Donor_specific contributions	<u> \$ </u>	<u>263,4</u> 0 <u>0</u>	
Revenue passthroughs grossed up on audit	_ \$ _	3 <u>5,2</u> 0 <u>4</u>	
Rental expenses grossed up on audit	_ \$ _		
Meeting registration and vendor fees netted on audit	<u> </u>	2 <u>9,738</u>	
Donor_specific contributions	<u> \$ </u>	<u>263,400</u>	
_Book / Tax Depreciation_Difference	_ <u>\$</u> _	1	
_Part XII, Line 2d - Revenue Amounts Included in Financial	<u>s - 0</u>	t <u>her</u>	
Revenue_passthroughs grossed up on audit	_ \$ _	3 <u>5,2</u> 04	
Rental expenses grossed_up on_audit	_ \$ _	5,785	
Part XII, Line 4b - Revenue Amounts Included on Return -	 <u>Other</u>	·	
Meeting_registrations_and_other_fees_netted_on_audit	_ \$ _	2 <u>9,7</u> 3 <u>8</u>	
Donor_specific contributions	_ \$ _	_ <u>263,400</u>	
Part XIII, Line 2d - Expense Amounts Included in Financia	 <u>l</u> s		
Revenue_passthroughs grossed up on audit	_ \$ _	3 <u>5,204</u>	
Rental expenses grossed up on audit	_\$_	5,785	
Part XIII, Line 4b - Expense Amounts Included on Return -	 _O <u>t</u> h <u>e</u>		
Meeting registration and vendor fees netted on audit	<u> </u>	2 <u>9,738</u>	
Donor_specific contributions	<u> \$ </u>	<u>263,400</u>	
_Book / Tax Depreciation_Difference	<u> </u>	1	

SCHEDULE I (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

2009

OMB No 1545-0047

)	•		3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5)
Department of the Treasury Internal Revenue Service		Complete if the org	rganizatioı	n answered "Yes" on Fo ► Attach to Form 990.	anization answered "Yes" on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.	s 21 or 22.		Open to Public Inspection	ıbila Sın
Name of the organization AS	Association of Inder and Universities of	Independent Co s of Pennsylva	ollege. ania	SO		Employer is 25-16	Employer identification number 25–1666617		
Part I General I	General Information on Grants and Assistance	Assistance							
 Does the organization r the selection criteria us Describe in Part IV the 	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantee the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	e amount of the grance?		ance, the grantees' elig the United States	or assistance, the grantees' eligibility for the grants or assistance, and funds in the United States	ssistance, and	÷	X Yes	°N
Part II Grants ar Form 990 Part IV ar	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	vernments and ecipient that reconfided additional sp	d Organization eived more than ace is needed	zations in the Uni ore than \$5,000. C seded	Organizations in the United States. Complete if the organization answered "Yes" to ived more than \$5,000. Check this box if no one recipient received more than \$5,000 colors is needed	lete if the orgai o one recipient	nization answe received more	ered "Yes" to than \$5,000. Use	
1 (a) Name and a	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Alvernia College 400 Saint Bernardine Reading	line Street PA 19607-1799	23-1522643	m	6,200				Scholarships	
Bryn Mawr College 101 North Merion Avenue Bryn Mawr	PA	23-1352621	3	001,7				Scholarships	
Univers ffice,	ıty Bucknell Univ. PA 17837	24-0772407	3	21,000				Scholarships	
Carlow University 3333 Fifth Avenue Pittsburgh	, e PA 15213-3165	25-0965438	3	5,200				Scholarships	
vers nut ia	ity Street PA 19104-2875	23-1352630	8	5,200				Scholarships	
Duquesne University 600 Forbes Avenue Pittsburgh	ty PA 15282-0205	25-1035663	3	6,200				Scholarships	
Grove City Colleg 100 Campus Drive Grove City	је РА 16127-2104	25-1065148	3	10,200				Scholarships	
Juniata College 1700 Moore Street Huntingdon	PA 16652-2119	23-1352652	3	6,700				Scholarships	
Lafayette College High Street Easton	PA 18042-1768	24-0795686	3	5,500				Scholarships	
2 Enter total number of section 501(c)(3) and	ection 501(c)(3) and government	roportzatione						\ <u>\</u>	

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

Schedule I (Form 990) 2009

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations

	Inited States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
s 25-1666617	es. Complete if the orga
Sendent Colleges	als in the United States. Co
Independent	lividua
Association of Independent Colleges	r Assistance to Ind
m 990) 2009	Grants and Other Assis
Schedule I (For	Part

	Use Part IV and Schedule I-1 (Form 990) it additional	(Form 990) if addition	nal space is needed.			
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	•
Part IV	Supplemental Information. Complete this part to provide the information required in Part I line 2 and any other additional information	omplete this part to p	rovide the information	n required in Part I li	ne 2 and any other addition	al information

- Procedures for Monitoring the Use of Grant Funds Part I, Line 2

The scholarships must be applied for through the financial aid offices The scholarship of the participating colleges and universities.

educational institutions, who then apply the payments toward the amounts for the final award winners are paid directly to the

tuition of the awardees.

Schedule I (Form 990) 2009

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SCH	F _o

Department of the Treasury

Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

Schedule I (Form 990), Part II or Part III

► Attach to Form 990 to list additional information for

Open to Public 2009 Inspection

OMB No 1545-0047

Employer Identification number (h) Purpose of grant or assistance Scholarships Scholarships Scholarships Scholarships Scholarships Scholarships Scholarships 25-1666617 Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, (c) IRC Code section (d) Amount of cash grant (e) Amount of non-cash 500 7,000 7.700 7,500 15,200 5,200 Association of Independent Colleges ıf applıcable and Universities of Pennsylvania 24-0795460 23-1353385 23-1352688 25-0965601 23-1386178 25-0965591 (p) EIN 18018-6650 __ __ __ __ 19085-1699 15940-0600 17870-1025 19013-5792 15301-4801 I ١ ١ 15260 ١ (a) Name and address of organization Washington & Jefferson College ١ ı PA PA PA ı 128 North Craig Street ı or government Saint Francis University University of Pittsburgh 60_South_Lincoln_Street_ Susquehanna University 514 University Avenue I 800 Lancaster Avenue One University Place Villanova University 1200 Main Street Widener University Moravian College ١ ١ Name of the organization I PO_Box 600_ Selinsgrove Pittsburgh Bethlehem Villanova Loretto Chester Part !

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

Schedule I-1 (Form 990) 2009

7 eBe√	(f) Description of non-cash assistance									:		Schedule I-1 (Form 990) 2009
90), Part III.)	(e) Method of valuation (book, FMV, appraisal, other)											
es (Schedule I (Form 9	(d) Amount of non-cash assistance						:					
duals in the United States (Sch	(c) Amount of cash grant											
or independent of the Assistance to Individual	(b) Number of recipients											
Schedule 11 (Form 990) 2009 ASSOCIATION OI INDEPENDENT COLLEGES Z3-166661/ Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule (Form 990), Part III.)	(a) Type of grant or assistance							,				

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Association of Independent Colleges

and Universities of Pennsylvania

Employer identification number 25-1666617

Pa	art Questions Regarding Compensation				
		F		Yes	No
				I	
1a	Check the appropriate box(es) if the organization provided any of the	-		I	
	990, Part VII, Section A, line 1a Complete Part III to provide any reli			ı	
	First-class or charter travel	Housing allowance or residence for personal use	1	ı	
	Travel for companions	Payments for business use of personal residence		1	
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees		I	
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)		I	
b	If any of the boxes on line 1a is checked, did the organization follow	a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above	re? If "No," complete Part III to			
	explain		1b		
2	Did the organization require substantiation prior to reimbursing or all	lowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regard	ing the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to estab	olish the compensation of the		1	
	organization's CEO/Executive Director Check all that apply			1	
	Compensation committee	Written employment contract		1	
	Independent compensation consultant X	Compensation survey or study		1	
	Form 990 of other organizations	Approval by the board or compensation committee		I	
				1	
4	During the year, did any person listed in Form 990, Part VII, Section	A, line 1a, with respect to the filing		I	
	organization or a related organization			#	
а	Receive a severance payment or change-of-control payment?		4a		X X X
b	Participate in, or receive payment from, a supplemental nonqualified	I retirement plan?	4b		<u>X</u>
c	Participate in, or receive payment from, an equity-based compensat	on arrangement?	4c		<u>X</u>
	If "Yes" to any of lines 4a-c, list the persons and provide the applica	ble amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must comple	ete lines 5–9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the o	organization pay or accrue any		1	
	compensation contingent on the revenues of			Ī	
а	The organization?		5a		<u>X</u>
b	Any related organization?		5b		<u>X</u>
	If "Yes" to line 5a or 5b, describe in Part III			I	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the o	organization pay or accrue any	- 1	ı	
	compensation contingent on the net earnings of			ł	
а	The organization?		6a		<u>X</u>
b	Any related organization?	ļ	6b		<u>X</u>
	If "Yes" to line 6a or 6b, describe in Part III		1	ŧ	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the o	, ,			
	payments not described in lines 5 and 6? If "Yes," describe in Part II	r	7		<u>X</u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued p	i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de			
	subject to the initial contract exception described in Regs section 53	3 4958-4(a)(3)? If "Yes," describe	1		
	ın Part III		8		<u>X</u>
9	If "Yes" to line 8, did the organization also follow the rebuttable presu	umption procedure described in			
	Regulations section 53 4958-6(c)?		9	- 1	

Page 2

Schedule J (Form 990) 2009 ASSOCIATION OF INDEPENDENT COLLEGES 20-10001, Part # Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

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

	\vdash	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits		reported in prior Form 990 or Form 990-EZ
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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 Supplemental Information Schedule J (Form 990) 2009

Part III Suppler

for any additional information

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Association of Independent Colleges and Universities of Pennsylvania

Employer identification number 25–1666617

Form 990, Part I, Line 6

The Association has several Committees comprised of volunteers from member institutions who provide guidance and opinions on various issues confronting the organization. These committees include the Economic Development Committee, the Member Services/Collaboration Committee, and the Research, Assessment & Accountability Committee. In addition, the regular board members are also volunteers who serve without financial compensation.

Form 990, Part III, Line 4d - All Other Achievements
The Association conducted various research studies which
included the following:

- Freshman admission and financial aid
- Student financial aid
- Financial analysis and trends
- Tuition and fees, and patterns of voluntary support
- Baccalaureate research study

The Association has undertaken an Economic Development project designed to align state, local and and college economic development initiatives and assist individual member schools or consortia of schools with specific projects. The Association will develop an overall economic development stategy for PA's independent higher education sector.

Employer identification number 25–166617

Form 990, Part VI, Line 6 - Classes of Members or Stockholders ...

AICUP is a membership organization. The population of qualified members consists of all independent nonprofit colleges and universities within the Commonwealth of Pennsylvania.

Form 990, Part VI, Line 7a - Election of Members and Their Rights
The Board of Directors is elected annually. Potential board members
consist of the Presidents of the member colleges and universities.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Major decisions are subject to the approval of the membership. Other actions are subject to the approval of the board which consists of representatives of the member colleges and universities.

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 Form 990 is reviewed by the management of AICUP for accuracy before submittal to the IRS. The 990 and 990T are made available to the board of directors for review on a secure portal for a 30 day comment period.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The president reviews all potential conflict of interests of staff or the chair reviews for officers and board members. Resolution of conflicts are made by the board of directors.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The president's compensation package was compared to a survey of similiar statewide organizations from across the country. A subcommittee of the

board of directors made recommendations to the full board based on this review. The full board adopted a compensation package for the president in executive session.

Form 990, Part VI, Line 15b - Compensation Process for Officers

The vice presidents' compensation package was compared to a survey of
similiar statewide organizations from across the country. A subcommittee
of the board of directors made recommendations to the full board based on
this review. The full board adopted a compensation package for the vice
presidents' in executive session.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation All documents that must be made available to the general public are made available upon written request. Other governing documents are generally not made available to the public.

Schedule O - Additional Information

Part 1, Line 1 and Part III, Line 1 - Organizational Mission: The purpose of the Association of Independent Colleges and Universities of Pennsylvania (AICUP) is to serve and promote independent colleges and universities as vital, distinctive components of the higher education community in Pennsylvania and the nation; to preserve and promote the strengths and distinctive characteristics of non-profit higher education institutions and to increase the financial means available to these institutions; to further the availability of educational opportunity for residents of PA and others who seek

Association of Independent Colleges

education or training at independent colleges and universities in PA; to enhance the business and educational partnership in PA and increase the effectiveness of donations in advancing higher education; to encourage and solicit corporate, business, and other giving to the independent colleges and universities of Pennsylvania; to further by study, research, publication, and teaching an understanding of the role and needs of higher education; to encourage and promote research which will foster and promote public knowledge of higher education, and evoke attention to problems in higher education for the improvement of all conditions relating to higher education; to gather, analyze and interpret accurate and reliable information and dates pertinent to independent colleges and universities in PA; and to provide other civic, educational and public features as will foster, stimulate, and encourage public understanding of higher education; to organize conferences, seminars, study groups, and publications in order to expand public information and educational initiatives by independent colleges and universities in Pennsylvania.