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DLN: 93493068005182

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

2010

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2	2010 ca	alendar year, or tax year begi	nning 07-01-2010 and ending 06-30-2	2011			
B Che	eck if ap	pplicable	C Name of organization YORK COLLEGE OF PENNSYLVAN	ITA.			D Employer	identification number
┌ Add	ress ch	nange		MIN			23-1352	698
┌ Nar	ne chai	nge	Doing Business As				E Telephone	number
┌ Init	al retur	rn	Number and street (or P O box	r if mail is not delivered to street address)	Roo	om/suite	(717)81	5-6579
┌ Ten	mınated	d	441 Country Club Road			,	(/1/)01	
┌ Am	ended r	return	City or town, state or country, a	and ZIP + 4			G Gross recei	pts \$ 140,785,515
Г Арр	lication	pending	York, PA 174033651					
			F Name and address of	principal officer	н	a) Isthisa	group return for affi	liates? Yes No
			George Waldner		'``	 , 13 (1113 d	group recurrior um	nates y les y no
			441 Country Club Road York, PA 174033651		H(b) Are all a	affiliates included	Yes No
						_	," attach a lıs o exemptıon r	t (see instructions)
I Tax	k-exem	npt status	▼ 501(c)(3)	◀ (insert no) 4947(a)(1) or 527	Н(c) Group	o exemption i	idilibel F
J W	ebsit e	· • ww	w ycp edu					
K Forn	n of org	ganızatıon	Corporation Trust Assoc	ation Other 🕨	L	Year of for	mation 1873	M State of legal domicile PA
Pa	rt I	Sum	ımary					
		,	5	ssion or most significant activities				
ey .	<u> </u>	POST-S	ECONDARY & PRE-SCHOO	L THROUGH GRADE 12 EDUCATION				
Governance	_							
₩	_							
<u>\$</u>	2 (Check th	his box 🚩 if the organization	n discontinued its operations or dispose	ed of mo	re than 25	5% of its net	assets
න න්	3 1	Number	of voting members of the gov	erning body (Part VI, line 1a)			3	31
ŝ	4 1	Number	of independent voting member	ers of the governing body (Part VI, line 1	1b) .		4	27
Activities &			• •	l ın calendar year 2010 (Part V, lıne 2a))	•	5	2,302
Ę.			mber of volunteers (estimate				6	239
٠.				m Part VIII, column (C), line 12			7a	15,541
	ь	Net unre	elated business taxable incon	ne from Form 990-T, line 34			7b	8,740
	_				<u> </u>	Prior	Year	Current Year
₫	8		- ,	I, line 1h)	•		9,156,989	17,399,543
enu	9	-	•	I, line 2g)	. –		93,530,098	99,742,443
Revent	10			umn (A), lines 3, 4, and 7d)	· -		570,128 918,146	458,866
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 11 (must equal Part VIII)				line		910,140	821,371
	12					1	04,175,361	118,422,223
	13	Grants	s and similar amounts paid (P	art IX, column (A), lines 1-3)			10,126,633	12,542,779
	14			art IX, column (A), line 4)			0	0
g)	15	Saları 10)	es, other compensation, emp	loyee benefits (Part IX, column (A), line	s 5-		50,694,727	51,909,851
Expenses	16a	•	ssional fundraising fees (Part	IX, column (A), line 11e)			0	66,250
e e	ь		undraising expenses (Part IX, colum				-	
ш	17			A), lines 11a-11d, 11f-24f)	⁻. ├		31,577,222	34,033,149
	18			must equal Part IX, column (A), line 25			92,398,582	98,552,029
	19	Reven	ue less expenses Subtract I	ine 18 from line 12			11,776,779	19,870,194
<u>항</u>					1		of Current	End of Year
Net Assets or Fund Balances	20	Total	accete (Part V line 16)		\vdash		24,580,961	383,102,549
AB GB	21						05,540,251	122,944,988
2 E	22			act line 21 from line 20	_		19,040,710	260,157,561
	t II		nature Block		•		15,010,710	200,137,301
Under	penal edge a	ties of p	erjury, I declare that I have exa	mined this return, including accompanying ete. Declaration of preparer (other than off		pased on a		
Sign		Signa	ature of officer			Dat		
Here			atthew Smith CFO					
		F 11	e or print name and title			1		
		Print/Type preparer's		Preparer's signature	Date		check if self- employed •	PTIN
Paid		Firm's nai			1		<u> </u>	Firm's EIN
Prepa		Fırm's add	dress •					
Use (Only							Phone no 🕨
May t	he IR:	S discus	ss this return with the prepare	er shown above? (see instructions) .				⊤Yes

Form	990 (2010)				Page 2
Par		ent of Program Service A chedule O contains a response	Accomplishments to any question in this Part III		৮
1	Briefly describe	the organization's mission			
educ well a unde dedic	ation components as the arts and sci rgraduate curricul	appropriate for the program's clences, To offer carefully select um and the professional develo	legree level and which cover a br ted master's degree programs, w pment needs of the region York	gh-quality academic programs, wo road range of majors in profession hich reflect the enrollment empha Country Day School is a college ts in preparation for a lifetime of l	nal and career fields as asis of the preparatory school
2	Did the organizat		rogram services during the year		es 🔽 No
	If "Yes," describe	e these new services on Schedu	ıle O		
3	services?		significant changes in how it cor		es 🗸 No
4	Describe the exe Section 501(c)(3	3) and 501(c)(4) organizations		largest program services by expe re required to report the amount of ervice reported	
4a	Institute, a non-der program at the juniname was changed humanities to its 4, Doctorate in Nursing students. Little known and has grown to be students select York tuition make the Coextraordinary graduindicates that within are employed on a the PRAXIX PSST Y World Report's Ame Professional Excelle career opportunities.	nnsylvania traces its founding back to nominational sister institution which wa for college level and adopted the namil to York College of Pennsylvania. Tod 700 full-time undergraduate students g Practice in fall 2011. York College haven outside south-central Pennsylvania to the eighth largest private college in k College from a geographic area that ollege cost effective for most students uates who are making real contribution one year of graduation, 80% of the part-time basis. During 2010-2011, 1 fork College continues to receive very erica's Best Colleges. York is ranked as ence in early 2011 released the results and helps its students develop a con-	as founded in 1873 In 1941, the institute York Junior College In 1968, the curriay, the College offers more than 50 bar. The College also offers master's progrates thrived because it has embraced innota thirty years ago, the College is now ra Pennsylvania York College attracts facing grows larger each passing year. The contract of the average incoming freshman awards to communities all across the country College's graduates are working full-time 100% of nursing graduates passed the All positive rankings in national publication is a "top regional School", "national best of its second annual national poll result	11,677,264) (Revenue \$ y Academy In 1929, the institution mergition's charter was amended to provide for culum grew to a full bachelor's degree pictual programs in business, education and nursing any ation and change, and has dedicated it ted as one of the best values in higher eality from the best graduate schools in the mpetitive tuition combined with scholars of from institutional funds was \$4,013. The and increasingly around the world. The error are enrolled in a graduate school procession of the sincluding Barron's Best Buys in Higher Chay", "best value" and "hidden gem". To son professionalism. The College emphad career success. York College encouraged these of the career they pursue.	or a two-year liberal arts rogram and the institution's ims, the sciences and ind began offering a self to the service of its ducation in the Northeast e country Outstanding hips that average 15 3% of the College also produces a 2010-2011 alumni survey ogram. An additional 15% ucation graduates passed colleges and U.S. News and he York College Center for asizes professionalism for all
4b	(Code) (Expenses \$	2,718,109 including grants of \$	549,690) (Revenue \$	3,409,526)
	1953 by a group of was moved to a se twelve In 1975, th library, the swimmi with the inauguratic students for admiss additional language requirements, all Sc discretion of the Up a broader range of Country Day studer who have demonst	parents and civic leaders who sought venteen acre tract in the suburbs sout ie school became a part of York Colleging pool and the inclusion of qualified on of a new curriculum, stressing new sion to the most demanding institution electives, new reading, social studies eniors traditionally take one full semes oper School Head. The seniors' class so subjects and have some "practice" in ints as college students and the faculty	a challenging academic program in a pi hwest of York, and in the following yea je of Pennsylvania, and the academic pi York Country Day students in college co academic programs and expanded active is of higher learning, the Board of Truste and science curriculums, and a new proster-length course at York College each chedule is designed with time built in for the college arena before they arrive on holds York Country Day students to the ake classes at York College with the pel	om preschool through twelfth grade. The rivate setting for the children of York Cours the school grew to include preschool cirogram was enriched through the use of urses. In 1985, the second phase of the vities and athletic opportunities. Calling forces increased the school's graduation requirements for two and three year olds. As passemester, and may take up to three courcollege courses. Taking these courses all their chosen campuses as Freshmen. You exame academic standards as full-time significant.	inty In 1956, the school lasses through grade college facilities such as the Plan for Excellence began or the school to prepare urements and added int of graduation rses per semester at the lows the students to study with College treats York students Underclassmen
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program s	services (Describe in Schedule	e O)		

4e Total program service expenses▶\$

(Expenses \$

84,873,846

0) (Revenue \$

0 including grants of \$

0)

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? ਓ	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, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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		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? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	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.	11b	Yes	
c	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.	11c		Νο
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," complete Schedule D, Part IX.	11d		Νo
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes,"</i> complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b		No
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 U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 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, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 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 lines 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	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	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, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Volume			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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	37		No
38	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	38	Yes	

Form 990 (2010)											
Part V	Statements Regarding Ot	her IRS Filings and	l Tax Compliance								

	Check if Schedule O contains a response to any question in this Part V		. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 6,509			
b	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?	1 c	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			
b	return	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	162	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶BD , CJ , LU , NT			
	See instructions for 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		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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		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 receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N o
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization 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	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Νο
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
_	facilities			
11				
	Gross income from members or shareholders			
Ь	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		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who 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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	res	No
	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?	10b		110
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	100		
		11a	Yes	
Ь	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	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	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	
	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	Yes	
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	Yes	
Se	ection C. Disclosure	100	162	
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 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 Vpon request

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 C Matthew Smith

441 Country Club Road

York, PA 174033651 (717) 815-6579

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

Check if Schedule O contains a response to any question in this Part VII

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any 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

Check this box if neither the organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) Average hours per	Posi		C) (che	cka			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	week (describe hours for related organizations in Schedule O)	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
See Additional Data Table										
-										
			<u> </u>							

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

	(A) Name and Title	(B) A verage	Pos	((C)	cka	11		(D) Reportable	(E) Reportable		(F)	
	Name and Title	hours that apply)						1	compensation from the	compensation from related		amount of other compensation	
		week (describe hours	Individual t or director	Institut		Ke)	Highest compensated employee		organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	organization an related		ion and
		for related organizations	Individual truste or director	Institutional Trustee	Office Figure	Key employee	compe	Former				organiza	ations
		in Schedule O)	nstee	rustee		o o	nsateo						
See A	dditional Data Table	0)											
1b								Þ					
	Total from continuation sheets	<u>-</u>					•		1.051.050		0		504.677
d	Total (add lines 1b and 1c) .)	1,851,850		0		504,677
2	Total number of individuals (inc \$100,000 in reportable comper						above) WIIC	received more tha	11			
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sc.	·				ey e	mploy •	ee, o	r highest compens	ated employee • • •	3		No
4	For any individual listed on line organization and related organiz	•	•						•				
_	individual			•	•	•		•			4	Yes	
5	Did any person listed on line 1a services rendered to the organiz									r individual for	5		No
1	ection B. Independent Con Complete this table for your five		nsated	ndep	end	ent o	ontra	ctors	that received more	than			
	\$100,000 of compensation from	n the organizatio (A)	n						<u> </u>	(B)		(C	`
Kingle		ne and business ad	dress						Descr	iption of services		Comper	
2700 PO Bo	ey Construction Water Street ox 2886 PA 174052886								General Cont	ractor		21	,568,895
Chart PO Bo	wells Compass Group x 91337 go, IL 606931337								Food Service			4	,404,770
1110	besign E Princess St PA 17403								Design			1	.,790,060
1920	l & Company East Parham Road oond, VA 23228								Recruitment	fulfıllment			867,984
1910	e Lower Patrick Scott Harrington Drive ster, PA 17601								Architectural	Services			737,063
	Total number of independent cont \$100,000 in compensation from			ot lin	nite	d to	those	liste	d above) who receiv	ed more than			

rm 990 a rt VI	(2010) Statement of Reven					Pag	e 9
	Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
	- Federated composins	10	0				514
줕	a Federated campaigns	1a					
, <u>ē</u>	b Membership dues						
`त्त्	c Fundraising events		41,912				
	d Related organizations		100,000				
r Si	e Government grants (contributions)	1e	3,139,305				
\$	f All other contributions, gifts, grants similar amounts not included above	2	14,118,326				
	g Noncash contributions included in li	nes 1a-1f \$	714,165				
क	h Total. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·		17,399,543			
<u>.</u>			Business Code				
≱ .	b Auxillary - Room, Board, Books		611310 611710		79,792,688 19,943,497		
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	C Advinary - Room, Board, Books		611710	12,242,733	17,743,437	0,236	
<u>{</u> .	d						
<u>ا</u> اِ	е						
ē 1	f All other program service re	venue		0	0	0	
2 ,	g Total. Add lines 2a-2f			99,742,443			
3	Investment income (includir	g dıvıdends, ınterest					
	and other similar amounts)		-	336,015		-,	326,
4			-	110,777	110,777		
5	Royalties [(ı) Real	(II) Personal				
6	a Gross Rents	0	0				
	b Less rental expenses	0	0				
	c Rental income	0	0				
,	or (loss) [d Net rental income or (loss)			0	О	О	
		(ı) Securities	(II) O ther				
7	a Gross amount from sales of	18,689,711	0				
	assets other than inventory						
	b Less cost or other basis and	18,677,637	0				
	sales expenses c Gain or (loss)	12,074	0				
	d Netgain or (loss)	·	l	12,074	12,074	0	
	a Gross income from fundraisi						
	(not including						
	of contributions reported on						
	See Part IV, line 18	a	60,897				
	b Less direct expenses .	b	53,097				
_	c Net income or (loss) from fu			7,800		0	7,8
		ctivities See Part IV, line 19 .	_				
	b Less direct expenses .c Net income or (loss) from ga		b 6,058	1,973	1,973	О	
	0a Gross sales of inventory, les						
	returns and allowances .	a					
	b Less cost of goods sold .		3,792,649 3,626,500				
	c Net income or (loss) from sa		3,320,300	166,149	166,149	О	
	Miscellaneous Revenue		Business Code				
1	1a Parking revenue		812930	211,542			
	b Centers for Excellence, Entrpreneurial studies		611710	125,460	125,460	0	
	c Laudary and miscellaneous		812300	308,447	308,447	0	
	vending			0	0	0	
	d All other revenue e Total. Add lines 11a-11d			0			
	- Iosan Aud IIIIes IIa-IIU			645,449			
1	2 Total revenue. See Instructi	ons	-	110 422 222		15 5/11	334

Part IX Statement of Functional Expenses

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

Α	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c	-		(D).	
	ot include amounts reported on lines 6b, b, 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	315,825	315,825		· ·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	12,226,954	12,226,954		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	1,443,414	0	1,443,414	0
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	37,346,802	32,297,617	4,086,678	962,507
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,560,580	2,218,455	274,960	67,165
9	Other employee benefits	7,812,751	6,760,300	848,527	203,924
10	Payroll taxes	2,746,304	2,369,434	306,001	70,869
а	Fees for services (non-employees) Management	0	0	0	0
b	Legal	180,837	0	180,837	0
c	Accounting	91,493	0	91,493	0
d	Lobbying	0	0	0	0
е	Professional fundraising services See Part IV, line 17	66,250			66,250
f	Investment management fees	111,091	0	111,091	0
g	Other	1,112,947	666,598	420,184	26,165
12	Advertising and promotion	1,719,418	211,763	1,358,742	148,913
13	Office expenses	3,443,904	2,089,857	1,315,488	38,559
14	Information technology	2,391,549	2,084,252	271,409	35,888
15	Royalties	0	0	0	0
16	Occupancy	5,991,023	5,758,774	142,877	89,372
17	Travel	854,679	634,996	158,147	61,536
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	5,215	0	0	5,215
20	Interest	2,714,200	2,710,022	4,178	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	9,027,659	8,688,314	203,886	135,459
23	Insurance	62,329	42,601	19,728	0
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	Meal plan expenses	3,725,499	3,725,499	0	0
b	A cademic programming expenses	1,020,900	905,238	112,852	2,810
c d					
e •	All other expenses	1 500 405	1 167 047	205.026	117.222
f SE	All other expenses	1,580,406	1,167,347		117,223
25	Total functional expenses. Add lines 1 through 24f	98,552,029	84,873,846	11,646,328	2,031,855
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 11,498 11,498 1 8.151.557 2 2 12.319.126 5,832,082 12,963,985 3 1,209,006 1,076,814 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 0 5 Schedule L . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets 0 0 6 0 0 7 691,058 8 784,755 Prepaid expenses and deferred charges 2,475,833 2,381,949 10a Land, buildings, and equipment cost or other basis Complete 308,721,178 10a Part VI of Schedule D 79.959.774 ь Less accumulated depreciation 10b 203,790,595 **10c** 228.761.404 16.826.736 11 11 22.626.953 80,717,515 96,463,100 12 Investments—other securities See Part IV, line 11 12 0 0 13 13 Investments—program-related See Part IV, line 11 . . 0 0 14 14 4,875,081 15 5,712,965 15 16 324.580.961 16 383,102,549 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 9.575,121 9.246.246 17 17 Accounts payable and accrued expenses . 0 0 18 18 19 19 78,734,278 20 20 96,796,404 Liabilities 21 0 21 0 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 0 22 150.620 66.821 23 23 Secured mortgages and notes payable to unrelated third parties . . 2.000.000 24 24 Unsecured notes and loans payable to unrelated third parties 25 15.492.906 25 16.422.843 Other liabilities Complete Part X of Schedule D 26 105.540.251 26 122,944,988 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 189.514.287 216,565,988 Unrestricted net assets Temporarily restricted net assets 28 6,512,369 28 18,747,366 Fund 23,014,054 29 24,844,207 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 219,040,710 33 260, 157, 561 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 383,102,549 324,580,961

Par	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		110/	122,223
2	Total expenses (must equal Part IX, column (A), line 25)	2			52,029
3	Revenue less expenses Subtract line 2 from line 1	3			370,194
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		219,0	040,710
5	Other changes in net assets or fund balances (explain in Schedule O)	5		21,2	246,657
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		260,1	157,561
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		•	୮	
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other 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		Νo
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the laudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

Employer identification number

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

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

Public Charity Status and Public Support

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

Name of the organization YORK COLLEGE OF PENNSYLVANIA

23-1352698 Reason for Public Charity Status (All organizations must complete this part.) See instructions 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) 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, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 10 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I Type II c Type III - Functionally integrated Type III - Other 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 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 the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizat col (i) list your gove docume	e ion in ted in rning	(v) Did you not organizat col (i) of suppor	ion in your	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
									1
									1
 Total									+

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

11g(iii)

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	dider rate III. If the	organización i	ans to quanty t	maci die tests	iisted below, pie	case complet	c raic III.
S	ection A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from						
Ü	line 4						
S	ection B. Total Support	1				I	
	endar year (or fiscal year beginning						
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
-	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activities	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,
	check this box and stop here	_	r		•	. , . , -	▶ ┌॔
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14	
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15	
							
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec	
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor کد	. -
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶
r/a	10%-facts-and-circumstances test-						ın.
	is 10% or more, and if the organization made			•			
	in Part IV how the organization mee	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1
ט	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat			•		<u>-</u>	clv
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	LIY ▶
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1
	instructions	a.a not eneck		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □

Schedule A (Form 990 or 990-EZ) 2010 Page 3 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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. 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% support tests—2009. 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) 2010							
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•					

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

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DLN: 93493068005182

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

ternal Revenue Service ► Attach to Form 990. ► See separate instructions.					Inspection		
Name of the organization YORK COLLEGE OF PENNSYLVANIA				Employer identifie	cation number		
YUF	RK COLLEGE OF PENI	ISYLVANIA		23-1352698			
Pa			dvised Funds or Other Similar		s. Complete if the		
	organiz	ation answered "Yes" to Form 99		(1) 5 1			
	T.4-1	 	(a) Donor advised funds	(b) Funds and	other accounts		
1	Total number at	·					
2 3		ributions to (during year) ts from (during year)					
<i>3</i> 4	Aggregate yran	, • ,					
5							
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit						
Pa		· · · · · · · · · · · · · · · · · · ·	if the organization answered "Yes"	" to Form 990, Part 1	IV, line 7.		
2	Preservation of land for public use (e.g., recreation or pleasure) Protection of natural habitat Preservation of a certified historic structure Preservation of open space						
				Held at th	e End of the Year		
а	Total number o	f conservation easements		2a			
b	Total acreage r	estricted by conservation easements		2b			
c	Number of cons	servation easements on a certified his	toric structure included in (a)	2c			
d	Number of cons	servation easements included in (c) ac	equired after 8/17/06	2d			
3	Number of cons	ervation easements modified, transfe	rred, released, extinguished, or termina	ated by the organization	n durıng		
	the taxable yea	nr №					
4	Number of state	es where property subject to conserva	ition easement is located ►				
5		nization have a written policy regarding the conservation easements it holds?	the periodic monitoring, inspection, h	andling of violations, ar	TYes No		
6	Staff and volunt	teer hours devoted to monitoring, insp	ecting and enforcing conservation eas	ements during the year	-		
7	A mount of expe	enses incurred in monitoring, inspecti	ng, and enforcing conservation easeme	nts during the year ► \$			
8		servation easement reported on line 2 i and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of s	section	┌ Yes		
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements						
Par			ns of Art, Historical Treasures	s, or Other Similar	Assets.		
1a	Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items						
b	historical treas	·	116, to report in its revenue statemen public exhibition, education, or researc		•		
	(i) Revenues ir	ncluded in Form 990, Part VIII, line 1		► \$			
	(ii) Assets incl	uded in Form 990, Part X		► \$			
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items						

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

ar	Titl Organizations Maintaining Co	<u>llections of Art</u>	, Hist	<u>torica</u>	<u>I Trea</u>	sures, or (<u> 2the</u>	er Similai	ASS	ets (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of the	e follow	ing tha	t are a sıgnıfıc	ant ı	use of its co	llectio	n	
а	Public exhibition		d	L L	oan or e	exchange prog	rams	5			
b	Scholarly research		e	Г о	ther						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ın how	they fu	ırther tl	he organizatio	n's e	xempt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			•				nılar	Г	Yes	┌ No
Pai	t IV Escrow and Custodial Arrang						ed "\	es" to For	m 990	0,	
	Part IV, line 9, or reported an an			•							
la	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	diary	for cont	tributio	ns or other as	sets	not	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	followi	ıng tabl	е						
									A mo	unt	
С	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?						Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/									
a'	rt V Endowment Funds. Complete										
		(a)Current Year	(b)	Prior Yea		(c)Two Years Bac	- '	d) Three Years	Back (e) Four Y	ears Back
a	Beginning of year balance	53,896,242			07,450	67,798,	-				
b	Contributions	1,090,964			0,226	814,	_				
c	Investment earnings or losses	11,538,498			1,006	-16,149,	_				
d	Grants or scholarships	2,895,572		3,05	0	3,355,	0				
е	Other expenditures for facilities and programs				١		Ĭ				
f	Administrative expenses	0			0		0				
g	End of year balance	63,630,132		53,89	6,242	49,107,	450				
<u>:</u>	Provide the estimated percentage of the yea	r end balance held a	as		· · · · · · · · · · · · · · · · · · ·				<u> </u>		
а	Board designated or quasi-endowment 🕨	59 9 %									
ь	Permanent endowment 40 1 %										
c	Term endowment ► 0 %										
a	Are there endowment funds not in the posses	ssion of the organiza	ation t	hat are	held ar	nd administere	d for	the			
_	organization by									Yes	No
	(i) unrelated organizations								3a(i)	Yes	
	(ii) related organizations								3a(ii)		No
	If "Yes" to 3a(II), are the related organizatio						•		3b		
_	Describe in Part XIV the intended uses of th						- 10				
'al	t VI Investments—Land, Buildings	s, and Equipme	nt. 50						Т		
	Description of investment				st or othe vestmer			(c) Accumu depreciat		(d) Boo	k value
а	Land					0 7,63	2,351				7,632,351
b	Buildings		.			0 221,35	7,084	46,72	8,690	174	1,628,394
c	Leasehold improvements		.			0	0		0		(
d	Equipment		.			0 44,97	8,358	33,23	31,084	1:	,747,274
e	Other		.			0 34,75	3,385		0	34	1,753,385

228,761,404

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives	0	
(2)Closely-held equity interests	0	
(3)O ther (A) Diversifying equity	34,885,819	
(B) U S equity securities	25,064,770	
(C) Non U S equity securities	10,921,097	
(D) U S government obligations	16,016,988	
(E) Private equity and venture capital	6,295,616	
(F) Money markets	170,028	
(G) Real estate securities	2,881,132	
(H) Other	227,650	
Total. (Column (b) should equal Form 990. Part X. col (B) line 12)	06 462 100	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIIII Investments—Program Related. See		
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin		
(a) Descrip	tion	(b) Book value
T.1. (6) (1) (1) (15 (16) (17) (17) (17)	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1. Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
Deferred compensation	8,968,535	
Student advance payments and deposits	6,634,713	
A dvances from federal government Annuities payable	389,339 391,503	
Deposits held in custody for others	38,753	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	16,422,843	

che	dule D (Form 990) 2010		Page 4
Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	_
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	118,422,223
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	98,552,029
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	19,870,194
4	Net unrealized gains (losses) on investments	4	21,246,657
5	Donated services and use of facilities	5	0
6	Investment expenses	6	0
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net) Add lines 4 - 8	9	21,246,657
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	41,116,851
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	
1	Total revenue, gains, and other support per audited financial statements	1	131,068,426
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 0		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 3,626,500		
e	Add lines 2a through 2d	2e	24,873,157
3	Subtract line 2e from line 1	3	106,195,269
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 0		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	12,226,954
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	118,422,223
ar	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	89,951,575
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	3,626,500
3	Subtract line 2e from line 1	3	86,325,075
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 0		
b	Other (Describe in Part XIV)]	
c	Add lines 4a and 4b	4c	12,226,954

Part XIV Supplemental Information

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

Total expenses Add lines $\bf 3$ and $\bf 4c.$ (This should equal Form 990, Part I, line 18) . . .

Ident if ier	Return Reference	Explanat ion
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The College's endowment consists of approximately 300 individual funds established for a variety of purposes including both donor-restricted endowment funds and funds designated by the Board of Trustees to function as endowments. As required by accounting principles generally accepted in the United States of America, net assets associated with endowment funds, including funds designated by the Board of Trustees to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions. The College classifies as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in the permanently restricted net assets is classified as either temporarily restricted or unrestricted net assets based on the existence of donor restrictions or by law
SchD_P10_S00_L02	Schedule D, Part X, Line 2	The College is organized under Internal Revenue Code Section 501(c)(3), and therefore is exempt from income taxes on activities related to its exempt purpose. In addition, the College has been determined by the Internal Revenue Service not to be a "private foundation" within the meaning of Section 509(a) of the Code. The College accounts for uncertainty in income taxes using a recognition threshold of more-likely-than-not to be sustained upon examination by the appropriate taxing authority. Measurement of the tax uncertainty occurs if the recognition threshold is met. Management determined that there were no tax uncertainties that met the recognition threshold in 2011 and 2010. The College's policy is to recognize interest related to unrecognized tax benefits in interest expense and penalties in operating expenses. No interest or penalties were recognized in 2011 or 2010. The College's federal Exempt Organization Business Income Tax Returns for the fiscal years ended June 30, 2010, 2009, and 2008 remain subject to examination by the Internal Revenue Service.
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Excluded from revenue is the cost of goods sold relating to the Bookstore of \$3,626,500
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	A mounts awarded to students for financial aid which were excluded from Revenues per the audited financial statements Total amount of revenue (offset) was \$12,226,954
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	Excluded from expense is the cost of goods sold relating to the Bookstore of \$3,626,500
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	A mounts awarded to students for financial aid which were excluded from Expenses per the audited financial statements Total amount of expense was \$12,226,954

98,552,029

Additional Data

Software ID: 10000077

Software Version: v1.00

EIN: 23-1352698

Name: YORK COLLEGE OF PENNSYLVANIA

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

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value		
Diversifying equity	34,885,819	F_		
U S equity securities	25,064,770	F		
Non U S equity securities	10,921,097	F		
U S government obligations	16,016,988	F		
Private equity and venture capital	6,295,616	F		
Money markets	170,028	F		
Real estate securities	2,881,132	F		
Other	227,650	F		

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OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Schools

▶Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ.

Employer identification number

ORK	COLLEGE OF PENNSYLVANIA							
		23-1352698		T				
Pa	tI	ı		YES	NO			
1	Does the organization have a racially nondiscriminatory policy toward students by statement in it other governing instrument, or in a resolution of its governing body?	s charter, bylaws,	1	Yes				
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?							
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadce the period of solicitation for students, or during the registration period if it has no solicitation progethat makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain. If you need more space use Part II	ram, in a way	3	Yes				
	December 2							
4	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?		4-	Vaa				
	Records documenting that scholarships and other financial assistance are awarded on a racially r	ondiscriminatory	4a	Yes				
_	basis?	,	4b	Yes				
c	Copies of all catalogues, brochures, announcements, and other written communications to the pul with student admissions, programs, and scholarships?	olic dealing	4c	Yes				
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes				
5	If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to							
	Students' rights or privileges?		5a	<u> </u> 	N o			
b	Admissions policies?		5b		No			
c	Employment of faculty or administrative staff?		5c		Νo			
d	Scholarships or other financial assistance?		5d		No			
e	Educational policies?		5e		No			
f	Use of facilities?		5f		No			
g	Athletic programs?		5g		No			
h	Other extracurricular activities?		5h		No			
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II							
6-	Does the organization receive any financial aid or assistance from a governmental agency?		6a	Yes				
	Has the organization's right to such aid ever been revoked or suspended?		6b	162	No			
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 ()1 through 4 05						
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Par	t II	7	Yes	1			

Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
SchE_P01_S00_L03	Schedule E, Part I, Line 3	All communications written and verbal affirm the nondiscriminatory policy of the College
SchE_P01_S00_L06	Schedule E, Part I, Line 6	The College receives Federal and State grants that are normally available to an institution including Federal Workstudy, SEOG, Academic Competitive, National SMART, National TEACH, National Science, HRSA Nursing, and Pennsylvania grants IAG, PHEAA, National Guard, Byrd, New Economy, Chafee, Path, Wage and others

Schedule E (Form 990 or 990-EZ) 2010

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DLN: 93493068005182

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2010

OMB No 1545-0047

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Inspection

Name of the organization
YORK COLLEGE OF PENNSYLVANIA

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Employer identification number

23-1352698

- Indicate whether the organization raised funds through any of the following activities. Check all that apply
- a Mail solicitations
- **b** 🔽 Internet and e-mail solicitations
- c 🔽 Phone solicitations
- d 🔽 In-person solicitations

- e Solicitation of non-government grants
- **f** Solicitation of government grants
- g 🔽 Special fundraising events
- or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? γ

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

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) DId fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
Wilson Bennett Technology Inc 206 Plaza Blvd Suite C	Direct the annual "phonathon" to raise funds for the Annual Fund for scholarships		No	165,790	66,250	99,540
Total			165,790	66,250	99,540	

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

PA

			(a) Event #1 Horse show (event type)	(b) Event #2 Greyhound Race for Gold (event type)	(c) O ther Events 30 (total number)	(d) Total Events (Add col (a) through col (c))
E	1	Gross receipts	9,749	17,099	83,992	110,840
Revenue	2	Less Charitable contributions	2,800	9,068	30,044	41,912
	3	Gross income (line 1 minus line 2)	6,949	8,031	53,948	68,928
	4	Cash prizes	C	2,151	. 0	2,151
ses	5	Non-cash prizes	C	0	0	0
Expenses	6	Rent/facility costs	C	0	0	0
ă	7	Food and beverages	C	0	0	o
Direct	8	Entertainment	C	0	0	0
ā	9	Other direct expenses .	4,835	3,907	48,262	57,004
	10	Direct expense summary Add lin	ies 4 through 9 in column	(d)		59,155
	11	Net income summary Combine li	nes 3 and 10 ın column (d)		9,773
Par	t II	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
မှာ ()	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes % ┌ No	┌ Yes % ┌ No	┌ Yes %	
	7	Direct expense summary Add line	s 2 through 5 ın column (d)		
	8	Net gaming income summary Com	nbine lines 1 and 7 in colu	ımn (d)	<u> ▶ </u>	
9 a b	Ιs	ter the state(s) in which the organization licensed to operate "No," Explain	gaming activities in eacl			· Fyes Fno
10a b		ere any of the organization's gaming "Yes," Explain			the tax year?	· · Fyes Fno

11	Does the organization operate ga	aming activities with nonmembers?		Г үе	s Γ_{No}
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mer	nber of a partnership or other entity		
	formed to administer charitable (jaming?		Г _{Yе}	s Γ_{No}
13	Indicate the percentage of gamin	ng activity operated in			
а	The organization's facility			1	
b	An outside facility			,	
14	Provide the name and address or records	f the person who prepares the organız	ation's gaming/special events books and	d	
	Name 🟲				
	Address 🟲				
15a		ntract with a third party from whom th		_	_
					s No
ь		ning revenue received by the organizated by the third party 🟲 \$	ation > \$ and the		
c	If "Yes," enter name and address	5			
	Name 🟲				
	Address 🟲				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation l	* \$			
	Description of services provided	>			
	Director/officer	Employee	Independent contractor		
17	Mandatory distributions				
а		er state law to make charitable distrib		_	_
p.				· Ye	s No
D		required under state law distributed activities during the tax year - \$	to other exempt organizations or spent		
Par		<u>-</u>	r responses to question on Schedul	e G (see	
	Identifier	ReturnReference	Explanation		

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DLN: 93493068005182

Schedule I (Form 990)

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

OMB No 1545-0047

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Department of the Treasury Attach to Form 990 Internal Revenue Service

Inspection

Name of the organization **Employer identification number** YORK COLLEGE OF PENNSYLVANIA 23-1352698 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" 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. Part II can be duplicated if additional space is needed. 1 (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 106,685 0 FMV Contract Police (1) York City Police 23-6001908 Partner with Campus Support Police to provide Department50 West King Street enhanced safety in York, PA 17405 the vicinity of offcampus housing 0 FMV (2) York Suburban School 23-6005956 100,000 The College elects to District1800 Hollywood pay an equivalent Drive (donation in-lieu) for York, PA 17403 the assessed value of lowned property that is otherwise exempt from taxation 0 FMV (3) York City School District 23-6004284 55,625 The College elects to 50 West King Street pay an equivalent York, PA 17405 (donation in-lieu) for the assessed value of owned property that is lotherwise exempt from taxatıon 0 FMV 23-6003037 31,700 (4) Spring Garden Township The College elects to 558 South Ogontz Street pay an equivalent York, PA 17403 (donation in-lieu) for the assessed value of owned property that is otherwise exempt from taxation 0 FMV (5) City of York 50 West King 23-6001908 21,487 The College elects to Street pay an equivalent York, PA 17405 (donation in-lieu) for the assessed value of lowned property that is otherwise exempt from taxation Enter total number of section 501(c)(3) and government organizations

0

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

(a)Type of grant or assistance	(b) Number of recipients	(c)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
(1) Unfunded merit and need scholarships from institutional funds	4817	7,576,198	0	FM∨	
(2) Scholarships funded through the College endowment (\$534,661) and Quasi-endowment (\$1,914,009)	1561	2,448,670	0	FMV	
(3) Scholarships and aid from Federal and State programs of \$1,190,417 which is partially funded by grants of \$893,761	297	1,190,417	0	FMV	
(4) Scholarships for the K-12 Day School	58	549,690	0	FMV	
(5) Scholarships funded by outside Trusts and other external organizations	1750	415,050	0	FMV	
(6) All other miscellaneous scholarships	243	46,929	0	FMV	

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

Ident if ier	Return Reference	Explanation
SchI_P01_S00_L02		The College establishes seperate funds for each grant received Expenditures are reviewed to ensure propriety with the grant and are charged against the appropriate fund A final reconciliation is completed to ensure that all grant revenue and expenditures are appropriate and recorded properly

Schedule I (Form 990) 2010

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DLN: 93493068005182

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization YORK COLLEGE OF PENNSYLVANIA **Employer identification number**

23-1352698

Pa	rt I Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments ▼ Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	_		
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 147	2	Yes	<u> </u>
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply			
	▼ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		Νο
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4с		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	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, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
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, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regs-section 53 4958-4(a)(3)? If "Yes," describe in Part III			
		8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies 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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) Waldner Dr George W	(I) (II)	376,000 0	0 0	4,810 0	144,000 0	76,023 0	600,833 0		
(2) Smith C Matthew	(I) (II)	200,800 0	0	919 0	24,700 0	18,181 0	244,600 0		
(3) Coffman Nathaniel	(1) (11)	151,000 0	0	2,832 0	15,100 0	45,706 0	214,638		
(4) DelliCarpini Dominic	(1) (11)	145,720 0	0	738 0	14,500 0	22, 4 67 0	183,425		
(5) Martın Kenneth	(I) (II)	175,000 0	0	818 0	17,500 0	6,600 0	199,918		
(6) Helwig Daniel	(I) (II)	161,000 0	0	2,861 0	16,100 0	18,181	198,142 0		
(7) Glandon Brian	(1) (11)	163,882 0	0	640 0	10,904	18,688 0	194,114 0		
(8) Khanna Sardarı	(1) (11)	155,620 0	0	547 0	12,543	20,388 0	189,098		
(9) Dammann Stacey	(1) (11)	172,880 0	0 0	502 0	8,167 0	3,051 0	184,600 0		
(10) Mussano Frank	(1) (11)	134,500 0	0 0	781 0	·	3,128 0	177,159 0		
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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	Ret urn Ref erence	Explanation
	Part I, Line 1a	The President of the College, Dr George Waldner, and the Headmaster of York Country Day School, Nat Coffman, are required by employment agreement to live on campus in homes provided by the College Country Club dues are in some part reimbursed for the President, Dean of Advancement (Dan Helwig) and the Headmaster to facilitate the operations of the College and Day School Dues reimbursed to the Dean of Advancement and Headmaster are reported as earnings on their respective W-2's The President has use of a College owned car The College includes the fair value for the President's use of the car and related tax reimbursement in the President's Form W-2
	Part I, Line 1b	Payment or compensation provided (as checked) under Schedule J, Part I, Line 1a for the President, was disclosed in documents approved in advance by the Board of Trustees All other such compensation provided to other employees listed on Schedule J, Part I, Line 1a were approved in advance by the President
SchJ_P01_S00_L04	Part I, Line 4	The President of the College, Dr George Waldner, participates in a supplemental nonqualified 457 (f) retirement plan. During 2011 \$96,750 of the President's compensation was deferred into the 457 (f) plan. An additional \$22,000 was deferred into a 457 (b) plan resulting in a total deferral for the year of \$118,750

Schedule J (Form 990) 2010

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

DLN: 93493068005182

Employer identification number

23-1352698

Department of the Treasury Internal Revenue Service Name of the organization

YORK COLLEGE OF PENNSYLVANIA

P	art I Bond Issues														
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue P	rice	(f) Descriptio	n of Purpose	(g) Defeased		Beh	On alf of suer		Pool ncing	
									Yes	No	Yes	No	Yes	No	
A	Pennsylvania Higher Educational Facilities Authority	23-2243852	70917NC28	02-12-2004	10,721	L,841 Nev	v health and fil	tness center		x		x		X	
В	Pennsylvania Higher Educational Facilities A uthority	23-2243852	70917NC51	03-01-2004	9,200),000 Nev	v health and fil	tness center		х		Х		х	
c	Pennsylvania Higher Educational Facilities Authority	23-2243852	70917N8U1	11-22-2005	32,689	New fitne	New dormitories, new health and fitness center			Х		Х			
D	General Authority of Southcentral Pennsylvania	23-2982233	84129NFD6	06-05-2007	17,061	L,253 proj	nanıtıes/Thea ject/Little Run mitory			×		Х		Х	
_															
P	art II Proceeds														
	ditii					A B		В	С			D			
1	A mount of bonds retired					1,210,000 500,000		500,000	2,065,00			0 190,		190,000	
2	A mount of bonds legally defe	eased					0 0			0					
3	Total proceeds of issue					10,916,77	1	9,421,100	34,614,128			17,647,55			
4	Gross proceeds in reserve fu	ınds				822,14	10	0	2,243,97				1,	608,424	
5	Capitalized interest from pro	ceeds				32,334 0		0			89,021			C	
6	Proceeds in refunding escro	N				0		0)			0			
7	Issuance costs from proceed	ds				153,193 133,226		133,226	354,8			221,35			
8	Credit enhancement from pro	oceeds				221,471 39,72:		39,721	451,50			5 227,00			
9	Working capital expenditures	<u> </u>					0	0	o			0			
10	Capital expenditures from pr	oceeds				9,687,77	' 3	9,248,153		31,530,335			15,	591,004	
11	Other spent proceeds						0	0	0		0			C	
12	O ther unspent proceeds						0	0			0	0		C	
13	Year of substantial completion				20	04	20	005		2007			2008		
					Yes	No	Yes	No	Yes		No	Yes		No	
14					Х		X			Х			X		
15	Were the bonds issued as part of an advance refunding issue?					Х		Х			Χ			X	
16	Has the final allocation of proceeds been made?				X		X		Х			X			
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?						X		Х			х			
Pa	rt IIII Private Business	Use						<u> </u>				Τ			
						A		В		С		1	D		

			A		В		C)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		х		×		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		X

Schedule K (Form 990) 2010

Part III Private Business Use (Continued)

ĿĊ	Private business Ose (Continued)								
			Α		В		С	I	D
	Г	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		×		х		х		×
b	Are there any research agreements that may result in private business use of bond-financed property?		х		Х		X		×
С	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?	х		х		х		х	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %			0 %		0 %		0 %
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 section 501(c)(3) organization, or a state or local government	0 %		0 %		0 %			
6	Total of lines 4 and 5	0 %			0 %		0 %		0 %
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	х		x		х	х		

	post-issuance compliance of its tax-exempt bond liabilities?								
Par	rt IV Arbitrage								
Ì		A		В		С		D	
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	Yes	No X	Yes	No X	Yes	No	Yes	No X
2	Is the bond issue a variable rate issue?		X	X			X		X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		x		х		x		X
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?	,							
4a	Were gross proceeds invested in a GIC?	Х			Х	Х		Х	
ь	Name of provider	AIG Redeeme due to downgr 06 21 07-05	rade			Trinity Plus Funding 11 30 05-11 01 33		Citigroup Redeemed in 2008 due to downgrade 06 21 07-05 31 37	
С	Term of GIC		25 7				27 9		29 9
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	x				х		х	
5	Were any gross proceeds invested beyond an available temporary period?		х		Х		х		х
6	Did the bond issue qualify for an exception to rebate?	х		х			х	х	

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Ident if ier	Ret urn Ref erence	Explanation
	Schedule K, Part II, Line 3	All columns include issue price plus investment earnings. Columns A & C - Preissuance accrual interest also included and shown as an expenditure on line 5.
	Schedule K, Part II, Line 12	also lines 13 & 16 - CUSIP# 369013AM9 - Project was in process as of June 30, 2011 and was substantially completed subsequent to June 30, 2011
	Schedule K, Part IV, Line 4c	Columns A & D - this was the original maturity for debt service reserve GICS, these were terminated in 2008
	Schedule K, Part IV, Line 6	CUSIP 369013AM9 - Sıx month benchmark was met subsequent to June 30, 2011 Project was completed subsequent to June 30, 2011

DLN: 93493068005182 OMB No 1545-0047

Inspection

Open to Public

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990). ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service Name of the organization

Schedule K

(Form 990)

YORK COLLEGE OF PENNSYLVANIA

Employer identification number

22 1252600

										2	3-135	2698			
P	art I Bond Issues									,					
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue F	rice	(f)	Description of Purpose		(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
										Yes	No	Yes	No	Yes	No
A _	General Authority of Southcentral Pennsylvania	23-2982233	369013AM9	03-10-2011	19,65	2,078	ı	Science renov dormitory	vation and		Х		Х		Х
_														 	
_															
Pa	art III Proceeds						<u> </u>								
						4		Е	3		С			D	
1	A mount of bonds retired						0								
2	A mount of bonds legally defe	ased					0								
3	Total proceeds of issue					19,665	,150								
4	Gross proceeds in reserve fu						0								
_5	Capitalized interest from prod				0										
6	Proceeds in refunding escrow	1			0										
7	Issuance costs from proceed	s			211,287										
8	Credit enhancement from pro	ceeds			0										
9	Working capital expenditures	from proceeds					0								
10	Capital expenditures from pro	oceeds			15,251,563										
11	Other spent proceeds						0								
12	Other unspent proceeds					4,202	,300								
13	Year of substantial completio	n													
'					Yes	No	•	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as par	rt of a current refund	ding issue?			Х									
15	Were the bonds issued as par	rt of an advance refu	ındıng ıssue?			X									
16	Has the final allocation of proceeds been made?			Х											
17			X								1				
Do	allocation of proceeds?	lla o													
Ľā	rt III Private Business l	USE				4	Т	E	<u> </u>		С .		\top	D	
					Yes	No	,	Yes	No	Yes	Ī	No	Yes		No
1	Was the organization a partner	er in a partnership, c	or a member of an Ll	LC, which owned		х									

Are there any lease arrangements that may result in private business use of bond-

property financed by tax-exempt bonds?

financed property?

Schedule K (Form 990) 2010

Part III Private Business Use (Continued)

		Α		В		С		!	D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		×						
b	Are there any research agreements that may result in private business use of bond-financed property?		х						
С	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?	Х							
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %						
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 section 501(c)(3) organization, or a state or local government		0 %						
6	Total of lines 4 and 5		0 %						
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х							

|--|

		^		0				"	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		х						
2	Is the bond issue a variable rate issue?		X						
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		×						
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х						
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?		х						
6	Did the bond issue qualify for an exception to rebate?	×							

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Ident if ier	Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493068005182

N. 93493008003182

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.

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

2010

Open to Public Inspection

Name of the organization YORK COLLEGE OF PENNSYLVANIA								Employer identification number						
Part	I Excess Benefit Trai	nsacti	ions (s	section 501	(c)(3) a	and section 501	(c)(4)		3-13526 zations (
	Complete if the organizat										ıne 40b			
1	(a) Name of disq	ualıfıed	l person			(b) Desc	rintion	of trans	action		(c) C	(c) Corrected?		
i (a) Name of disc			. parson			(b) Desc	. HPCIOH	OI LIAIIS	action		Yes	No		
													_	
													_	
2	Enter the amount of tax impos	ad on t	he orga	nization man	agers of	disqualified ners	one duri	na the s	vear unde	r	•	'		
	section 4958								Þ	• \$ —			_	
3 1	Enter the amount of tax, if any	, on lin	e 2, abo	ve, reimburs	ed by th	ie organization .			•	· \$				
		_											_	
Par	Loans to and/or I Complete if the organiz) Part IV line 26	or For	m 990-l	EZ Part V	' line 3.8	la.			
	Complete if the organiz			1 163 0111	01111 330	7, r art 1 v , iiiie 2 o	, <u>01 1 011</u>	11 330 1	(f)	, iiie se	, u			
(a) N	ame of interested person and	1 ' '	oan to	(c)0 rig	ainal		(e) In		Approved		1 107	(g)Written		
(4) 11	purpose		ization?	principal	· 114	(d)Balance due	default?		by board or committee?		agreem	ent?		
		To	From	1			Yes	No	Yes	No	Yes	No		
		'	1				1.55	1	1	1	1.55	1	_	
Total	· · · · · · · · · · · · · · · · · · ·				▶ \$	Dawasas	<u> </u>							
Part	Grants or Assistar Complete if the orga						/ line 2	7						
						een interested per							_	
	(a) Name of interested pers	on				ganızatıon .		(c)An	nount of g	rant or t	ype of ass	istance		
													_	

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization	n answered "Yes" on	Form 990, Part IV, III	<u>ie 28a, 28b, or 28c.</u>			
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	1 -	aring of zation's nues?	
	organization			Yes	No	
(1) Robert A Kınsley	Chairman of Kinsley Construction and member, Board of Trustees-York College of Pennsylvania	23,358,955	Kinsley Construction is an independent building contractor which served as the general contractor for several projects including the renovation of the Life Sciences building and Northside Commons dormitory		No	
(2) Laura T Wand	VP Product Mgmt, Johnson Controls, Inc and member-Board of Trustees-York College of Pennsylvania	2,009,146	Johnson Controls, Inc provided HVAC equipment and service on several academic and residential buildings		Νο	
(3) Patti Stirk	President, Star Systems Engineering, Inc and spouse of Board of trustees member, Jeffrey Hines	277,068	Provider of information technology equipment		No	
(4) John D Brown	CEO of Blockhouse Company, Inc and member Board of Trustees-York College of Pennsylvania	223,023	Blockhouse is an independent contractor that supplied dorm related furniture		Νο	
(5) Jeffrey Hines	President of York Water Company and member Board of Trustees-York College of Pennsylvania	151,818	York Water Company provided water utlility to the College		No	
				L		

Supplemental Information Part V

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Ident if ier	Return Reference	Explanation
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OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

7

17

19 20

23

Department of the Treasury Internal Revenue Service

Part I Types of Property

Art-Works of art . . . Art—Historical treasures Art-Fractional interests Books and publications Clothing and household Cars and other vehicles .

Boats and planes . . . Intellectual property . .

Securities—Publicly traded

Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests . 12 Securities—Miscellaneous 13 Qualified conservation contribution—Historic structures

14 Qualified conservation

contribution—Other . . Real estate—Residential . Real estate—Commercial Real estate—Other . .

Collectibles Food inventory . . .

Drugs and medical supplies Taxidermy Historical artifacts . .

Scientific specimens . . Archeological artifacts . Donated HVAC

> Mechanical Enaineerina

Other **>** (<u>equipment</u>

Other ► (equipment Donated

Other ► (furnishings)

Donated

b If "Yes," describe in Part II

describe in Part II

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization YORK COLLEGE OF PENNSYLVANIA

Employer identification number 23-1352698 (a) (b) (c) (d) Noncash contribution amounts reported on Form 990, Part VIII, line Number of Contributions or items contributed Check if Method of determining oncash contribution amounts 615,599 FMV Χ Χ 1 50.000 FMV 19,800 FMV 24,534 FMV Х 1 4,232 FMV Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a No **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash 32a Νo

If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

Page 2

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 Return Reference Explanation

Schedule M (Form 990) 2010

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As Filed Data -

DLN: 93493068005182

OMB No 1545-0047

2010

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization YORK COLLEGE OF PENNSYLVANIA Employer identification number

23-1352698

ldentifier	Return Reference	Explanation
F990_P03_S00_L00	Form 990, Part III	Parts of Form 990 part III are continued on schedule O

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11a	Form 990, Part VI, Section B, Line 11a	The IRS form 990 is prepared internally and reviewed by the Chief Financial Officer (CFO). The CFO then forwards the form 990 to the independent audit firm of ParenteBeard for review. The form 990 is distributed to members of the Finance & Audit Committee for review and is discussed and approved for filing. The completed form 990 is made available to the entire Board of Trustees for a one-week comment period prior to filing. Significant changes made as a result of the review of the Board of Trustees is approved by the Finance & Audit Committee.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	The College's conflict of interest policy includes a requirement that no trustee, officer, or key employee shall become involved directly or indirectly in any business relationship or transaction with the College or receive a substantial benefit (5% or more ownership in an organization that receives \$10,000 or more annually) from the College, without disclosing the interest in such relationship Each trustee, officer, or key employee shall have the obligation to disclose any actual or potential conflict of interest that such individual may have during his or her tenure in office. This obligation includes relationships maintained by members of the individuals' families. The College requires each trustee, officer, or key employee complete an annual conflict of interest statement. These statements are reviewed to identify potential conflicts. The backgrounds and organizational affiliations of each individual are well known and understood by individuals responsible for procurement and reporting. Trustees and officers are not allowed to vote on the approval of contracts with organizations to which they are affiliated. The College-Wide Conflict of interest Policy covers all faculty, administration and staff. This policy emphasizes amongst other requirements, "the fundamental obligation of disclosing in writing (to his/her supervisor or department chairperson) any relationship which may be or appear to be a conflict of interest." Each employee is required to periodocally acknowledge, understand, accept and agree to comply with the information contained in the conflict of interest policy. Failure to comply with the College's policy constitutes grounds for disciplinary action, up to and including discharge of employment. The College periodically reviews vendor purchasing data to properly accumulate and report transactions that occur with related parties.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The compensation of the President of the College is determined by the Governance Committee of the Board of Trustees. The Governance Committee is responsible for, among other things, "an annual evaluation of the President, reporting the conclusions of that evaluation to the Board of Trustees, along with its recommendation regarding reappointment and compensation." The Governance Committee evaluates the performance of the President by reviewing success in achieving annual goals set at the beginning of each fiscal year. The Committee consults comparability data of the compensation components and ranges of other College Presidents in similar sized colleges and universities in similar geographic areas. The results of this review are documented in Committee minutes and the resulting recommendation is approved by the entire Board of Trustees. The President evaluates the performance of other key employees of the College. The President evaluates the performance of each key employee by reviewing success in achieving annual goals set at the beginning of each fiscal year. The President consults comparability data of the compensation components and ranges of other individuals with similar responsibilities in similar sized colleges and universities in similar geographic areas. Compensation of key employees is effectively approved by the Board of Trustees as part of the annual budgeting process,

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	The College will make the governing document, conflict of interest policy, and financial statements available upon request

ldentifier	Return Reference	Explanation
F990_P11_S00_L05	Form 990, Part XI, Line 5	Net unrealized gains on investments of 21,246,656

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DLN: 93493068005182

2010

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** YORK COLLEGE OF PENNSYLVANIA 23-1352698 Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.) Part I (d) (b) Name, address, and EIN of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 51 contr organi	olled
						Yes	No
	To benefit the activities of York College of Pennsylvania	РА	501(c)(3)	11	N/A		No
							_
For Drivery Ast and Denominal Poduction Ast Notice and the Treturet	: f F 000	Cat Na EO	1257		Cabadula D (F		2010

(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(g) end-of-year sssets	(h Disprop allocat	ortionate	(i) Code V— amount in bo Schedule (Form 10	x 20 of K-1	(j Gener mana partr	al or ging	(k) Percentage ownership
								Yes	No			Yes	No	
				ble as a Corpora zations treated as a						nswered "Y	es" on	Form	990,	Part IV,
Name, address, an	(a) Id EIN of related organiz	zation	(b) Primary activity	(c) Legal domicile (state or foreign country)	Direct cor	(d) Direct controlling entity (e) Type of er (C corp, S or trust		corp,	corp,		(g) e Share of end-of-year assets			(h) Percentage ownership

					.9
Part V Transactions With Related Organizations (Complete if the organization answer	red "Yes" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)		
Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more rela	ted organizations listed in Par	ts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1a		No
b Gift, grant, or capital contribution to other organization(s)			1b		No
c Gift, grant, or capital contribution from other organization(s)			1c	Yes	
d Loans or loan guarantees to or for other organization(s)			1d		No
e Loans or loan guarantees by other organization(s)			1e		No
f Sale of assets to other organization(s)			1f		No
g Purchase of assets from other organization(s)			1 g		No
h Exchange of assets			1h		No
i Lease of facilities, equipment, or other assets to other organization(s)			1i		No
j Lease of facilities, equipment, or other assets from other organization(s)			1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)			1k		No
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	1	No
n Sharing of paid employees			1n	+	No
ii Sharing or para employees			<u> </u>		
• Reimbursement paid to other organization for expenses			10		No
p Reimbursement paid by other organization for expenses			1p		No
q Other transfer of cash or property to other organization(s)			19		No
r Other transfer of cash or property from other organization(s)			1r		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete the	nis line, including covered rela	tionships and transacti	ıon thresholds		
(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determ involve		ount
1) The Huber Foundation	С	100,000	FMV		
2)					

(a) Name of other organization	Transaction type(a-r)	(c) Amount involved	Method of determining amount involved
(1) The Huber Foundation	С	100,000	FMV
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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	(a) Iddress, and EIN of entity Primary activity Legal domicile (state or foreign country)		(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		rtionate cions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) neral or naging irtner?	
			Yes	No		Yes	No		Yes	N	
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

I Identifier I Return Reference I	er Return Reference Explanation
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Schedule R (Form 990) 2010

Software ID: 10000077
Software Version: v1.00

EIN: 23-1352698

Name: YORK COLLEGE OF PENNSYLVANIA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Name and Title	Compensated Employees, and Independent Contractors											
Week Q Judge December D		A verage hours		tion (che)			Reportable compensation	Reportable compensation	Estimated amount of other	
Board Member			Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former	organization (W-	organızatıons (W- 2/1099-	from the organization and related	
Board Member		1	×						0	0	0	
Campus Anthony P		1	Х						0	0	0	
Crosswhite R Joseph 150 X 0 0 0 0 0 0 0 0	Campisi Anthony P	1 50	X						0	0	0	
Delp Robert A Dear Member Dear Member	Crosswhite R Joseph	1 50	Х						0	0	0	
Board Member	Delp Robert A	1							0	0	0	
Soard Member												
Soard Member	Board Member	1	Х						0	0	0	
Board Member	· ·	1	X						0	0	0	
Board Member		1	×						0	0	0	
Hogentogler Richard C		1	Х						0	0	0	
Kinsley Robert A		1 50	Х						0	0	0	
Note	Kınsley Robert A	1	Х						0	0	0	
McMillan MD Deborah Board Member 1 50 X 0	Kochenour Kenneth	1	Х						0	0	0	
Mehmet Jr Robert E 1 X 0 0 0 Myers Sharon E 1 X 0 0 0 Board Member 1 X 0 0 0 Rinehart W Scott 1 X 0 0 0 Board Member 1 5 X 0 0 0 Schrantz John M 1 5 X 0 0 0 0 Schrantz John M 1 5 X 0	McMıllan MD Deborah	1 50	Х						0	0	0	
Myers Sharon E 1 X 0 0 0 Rinehart W Scott 1 X 0 0 0 Board Member 1 X 0 0 0 Schrantz John M 1 50 X 0 0 0 Schrantz John M 1 50 X 0 0 0 0 Shipley III William S 1 X 0	Mehmet Jr Robert E	1	X						0	0	0	
Board Member		1							0	0		
Board Member		1							0	0		
Board Member	Board Member	1	Х						0	0	0	
Shorb George A 1 50 X 0 0 0 0 0 0 0 0		1 50	Х						0	0	0	
Shorb George A 150 X 0		1	X						0	0	0	
Simpson Robert L 1 X 0 0 0 Board Member 1 X 0 0 0 Simpson William H 1 X 0 0 0 Board Member 1 X 0 0 0 Vizzi Carl J 1 X 0 0 0 Board Member 1 X 0 0 0 Wand Laura 1 X 0 0 0 Welker Brian K 1 X 0 0 0 Wolf Constance L 1 X 0 0 0	Shorb George A	1 50	Х						0	0	0	
Simpson William H 1 X 0 0 0 Vizzi Carl J 1 X 0 0 0 Board Member 1 X 0 0 0 Wand Laura 1 X 0 0 0 Board Member 1 X 0 0 0 Welker Brian K 1 X 0 0 0 Wolf Constance L 1 X 0 0 0	Sımpson Robert L	1	Х						0	0	0	
Vizzi Carl J 1 X 0 0 0 Board Member 1 X 0 0 0 Wand Laura Board Member 1 X 0 0 0 Welker Brian K Board Member 1 X 0 0 0 Wolf Constance L 1 X 0 0 0	Sımpson William H	1	Х						0	0	0	
Wand Laura 1 X 0 0 0 Board Member 1 X 0 0 0 Welker Brian K 1 X 0 0 0 Board Member 1 X 0 0 0 Wolf Constance L 1 X 0 0 0	Vızzı Carl J	1	х						0	0	0	
Welker Brian K 1 X 0 0 0 Board Member 1 X 0 0 0 Wolf Constance L 1 X 0 0 0	Wand Laura	1	Х						0	0	0	
Wolf Constance L	Welker Brian K	1	х						0	0	0	
		1	х						0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per	I .	((tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation	
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
Yates Edward D Board Member	1	x						0	О	0	
Zıfferer Jr Morton F Board Member	1	х						0	0	0	
Cayce D Scott Chairman	1 5	х		х				0	0	0	
Glatfelter II George H Vıce Chaırman	1 5	Х		х				0	0	0	
Campbell Jr H Douglas Secretary	1 5	Х		х				0	0	0	
Freed Robert S Treasurer	1 5	Х		х				0	0	0	
Waldner Dr George W President	37 5			х				380,810	0	220,023	
Smith C Matthew CFO	37 5			х				201,719	0	42,881	
Martin Kenneth Dean of Campus Operations	37 5				х			175,818	0	24,100	
Coffman Nathaniel Headmaster York Country Day School	37 5				х			153,832	0	60,806	
DellıCarpını Dominic Academic Dean	37 5				х			146,458	0	6,967	
Dammann Stacey Professor	37 5					Х		173,382	0	11,218	
Glandon Brian Professor	37 5					Х		164,522	0	29,592	
Helwig Daniel Dean of Advancement	37 5					х		163,861	0	34,281	
Khanna Sardarı Professor	37 5					Х		156,167	0	32,931	
Mussano Frank Dean of Administrative Services	37 5					х		135,281	0	41,878	