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Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490





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Return of Organization Exempt From Income Tax

OMB No 1545-0047

2010**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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

A For the 2010 calendar year, or tax year beginning 07/01 , 2010, and ending 06/30 , 20 11																										
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization WHEELING JESUIT UNIVERSITY INC</td> <td>D Employer identification number 55-0394213</td> </tr> <tr> <td colspan="2">Doing Business As</td> <td rowspan="3">E Telephone number 304-243-2044</td> </tr> <tr> <td>Number and street (or P O box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td colspan="2">316 Washington Avenue</td> </tr> <tr> <td colspan="2">City or town, state or country, and ZIP + 4 Wheeling, WV 26003</td> <td>G Gross receipts \$ 52,104,218</td> </tr> <tr> <td colspan="2">F Name and address of principal officer Richard Beyer 316 Washington Ave, Wheeling, WV 26003</td> <td> H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶ </td> </tr> <tr> <td colspan="3"> I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 </td> </tr> <tr> <td colspan="3">J Website: ▶ www.wju.edu</td> </tr> <tr> <td colspan="2">K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation 1954 M State of legal domicile WV</td> </tr> </table>	C Name of organization WHEELING JESUIT UNIVERSITY INC		D Employer identification number 55-0394213	Doing Business As		E Telephone number 304-243-2044	Number and street (or P O box if mail is not delivered to street address)	Room/suite	316 Washington Avenue		City or town, state or country, and ZIP + 4 Wheeling, WV 26003		G Gross receipts \$ 52,104,218	F Name and address of principal officer Richard Beyer 316 Washington Ave, Wheeling, WV 26003		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶	I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			J Website: ▶ www.wju.edu			K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1954 M State of legal domicile WV
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Part I Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities. <u>The university is a Catholic Liberal Arts University founded in 1954. The purpose of the Jesuit Education is to provide students who can contribute intelligently to the welfare of society.</u>	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	3 22
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4 21
	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5 1,012
	6	Total number of volunteers (estimate if necessary)	6 2
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a -5,694
b	Net unrelated business taxable income from Form 990-T, line 34	7b 187,932	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 11,220,019 Current Year 11,066,092
	9	Program service revenue (Part VIII, line 2g)	32,808,145 33,652,655
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	254,659 350,107
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,452 121,583
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	44,286,275 45,190,437
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)
14		Benefits paid to or for members (Part IX, column (A), line 4)	0 0
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	19,408,283 19,313,723
16a		Professional fundraising fees (Part IX, column (A), line 11e)	0 0
b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 450,963	
17		Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	14,436,376 16,887,619
18		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	45,138,045 47,842,518
19		Revenue less expenses. Subtract line 18 from line 12	-851,770 -2,652,081
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 73,166,996 End of Year 75,159,812
	21	Total liabilities (Part X, line 26)	42,504,764 43,854,413
	22	Net assets or fund balances. Subtract line 21 from line 20	30,662,232 31,305,399

Part II Signature Block				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge				
Sign Here	Signature of officer	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED DEC 22 2011 OGDEN, UT </div>		Date
	Kevin Lusk, Chief Financial Officer			
	Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	Firm's name ▶	Firm's EIN ▶		
	Firm's address ▶	Phone no		

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

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2010)

SCANNED JAN 09 2011

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission:

The university is a Catholic Liberal Arts University founded in 1954. The purpose of the Jesuit Education is to provide students who can contribute intelligently to the welfare of society.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 33,160,065 including grants of \$ 11,641,176) (Revenue \$ 37,277,670)

Education, General/Other Postsecondary Education: Wheeling Jesuit is a Catholic Liberal Arts University. The purpose is to produce students who can contribute intelligently to the welfare if society

4b (Code:) (Expenses \$ 7,405,326 including grants of \$ 0) (Revenue \$ 7,912,767)

Postsecondary Education, Research. Wheeling Jesuit University received federal grant dollars for the National Technology Research Center, Center for Educational Technology Transfer Center and faculty reserch.

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services. (Describe in Schedule O.)

(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ► 40,565,391

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 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2 ✓	
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	✓
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	✓
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	✓
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	✓
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	✓
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	✓
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 ✓	
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a ✓	
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	✓
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	✓
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? If "Yes," complete Schedule D, Part IX	11d	✓
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e ✓	
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 ✓	
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a ✓	
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	✓
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 ✓	
14 a Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓
b 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? If "Yes," complete Schedule F, Parts I and IV	14b	✓
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	✓
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	✓
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	✓
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	✓
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	✓
20 a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	✓
b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV Checklist of Required Schedules (continued)

	Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	✓
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22 ✓	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 ✓	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	24a ✓	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	✓
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	✓
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	✓
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a	✓
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? <i>If "Yes," complete Schedule L, Part I</i>	25b	✓
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26	✓
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? <i>If "Yes," complete Schedule L, Part III</i>	27	✓
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):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a	✓
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	✓
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c	✓
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	✓
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	✓
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	✓
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	✓
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	✓
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	✓
a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	✓
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	✓
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 ✓	

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 64		
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 1012		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	✓	
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		✓
b If "Yes," enter the name of the foreign country. ► 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		✓
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
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		✓
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		✓
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		✓
d If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	✓	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	✓	
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.			
a Did the organization make any taxable distributions under section 4966?	9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b 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	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b 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 line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section 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 1a 22		
b Enter the number of voting members included in line 1a, above, who are independent 1b 21		
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?		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6 Does the organization have members or stockholders?		<input checked="" type="checkbox"/>
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		<input checked="" type="checkbox"/>
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		<input checked="" type="checkbox"/>
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	<input checked="" type="checkbox"/>	
b Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
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		<input checked="" type="checkbox"/>

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
b 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	<input checked="" type="checkbox"/>	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	<input checked="" type="checkbox"/>	
13 Does the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14 Does the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	<input checked="" type="checkbox"/>	
b Other officers or key employees of the organization	<input checked="" type="checkbox"/>	
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?		<input checked="" type="checkbox"/>
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► WV

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
☐ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Kevin Lusk, (304)243-2389
 316 Washington Avenue, Wheeling, WV 26003

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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. 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 organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
William Bresnahan Board Member	0	✓						0	0	0
Timothy Brown SJ Board Member	0	✓						0	0	0
Margaret Helm Board Member	0	✓						0	0	0
John Buch Board Member	0	✓						0	0	0
Jane Straub Friday Board Member	0	✓						0	0	0
David Haddad Board Member	0	✓						0	0	0
Christopher Helmrath Board Member	0	✓						0	0	0
Adam Monks Board Member	0	✓						0	0	0
James Dissen Board Member	0	✓						0	0	0
Gerard L. Stockhausen SJ Board Member	0	✓						0	0	0
George Murry SJ Board Member	0	✓						0	0	0
James Cullen Board Member	0	✓						0	0	0
Patricia Weitzel-O'Neill Board Member	0	✓						0	0	0
Brain O'Donnell SJ Board Member	0	✓						0	0	0
Kathleen Durkin SSJ Board Member	0	✓						0	0	0
Daniel Haller Board Member	0	✓						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
James o Malley Board Member	0	✓						0	0	0
Carol A Yarnall Board Member	0	✓						0	0	0
Kevin Wildes SJ Board Member	0	✓						0	0	0
James Will Board Member	0	✓						0	0	0
Robert H Young Board Member	0	✓						0	0	0
Richard Beyer President	40	✓		✓	✓			125,000	0	0
Davitt Mcateer Vice President Spons programs	40			✓				230,658	0	0
William J Van Horn Chief Financial Officer	40			✓				165,342	0	0
Stephan Stahl Academic Dean	40			✓				115,708	0	0
Charles Wood Director of CET	40					✓		128,869	0	0
Alan Sherwin Director of Washington Operations	40					✓		106,880	0	0
Michael Bowman Director CIS	40					✓		102,225	0	0
David Anglich Database Manager	40					✓		100,030	0	0

[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ► 8

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		✓
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4	✓	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5		✓

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶	1
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Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a 0						
	b	Membership dues	1b 0						
	c	Fundraising events	1c 0						
	d	Related organizations	1d 0						
	e	Government grants (contributions)	1e 9,742,186						
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 1,323,906						
	g	Noncash contributions included in lines 1a-1f. \$	0						
	h	Total. Add lines 1a-1f ▶		11,066,092					
Program Service Revenue	Business Code								
	2a	Gross Tuition and fees	611310	27,845,430	27,845,430	0	0		
	b	Auxiliary Enterprises	721000	5,418,109	5,418,109	0	0		
	c							
	d							
	e							
	f	All other program service revenue		389,116	389,116	0	0		
	g	Total. Add lines 2a-2f ▶		33,652,655					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		366,194	366,194	0	0		
	4	Income from investment of tax-exempt bond proceeds ▶		0	0	0	0		
	5	Royalties ▶		127,277	0	0	127,277		
	6a	Gross Rents	(i) Real	(ii) Personal					
			187,932	0					
			b	Less: rental expenses	193,626	0			
			c	Rental income or (loss)	-5,694	0			
	d	Net rental income or (loss) ▶		-5,694	0	-5,694	0		
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other					
			6,704,068	0					
			b	Less: cost or other basis and sales expenses	6,720,155	0			
			c	Gain or (loss)	-16,087	0			
	d	Net gain or (loss) ▶		-16,087	-16,087	0	0		
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c) See Part IV, line 18	a						
	b	Less: direct expenses	b						
	c	Net income or (loss) from fundraising events ▶							
	9a	Gross income from gaming activities See Part IV, line 19	a						
	b	Less: direct expenses	b						
c	Net income or (loss) from gaming activities . . ▶								
10a	Gross sales of inventory, less returns and allowances	a							
		b	Less: cost of goods sold	b					
		c	Net income or (loss) from sales of inventory . . ▶						
Miscellaneous Revenue			Business Code						
11a								
b								
c								
d	All other revenue								
e	Total. Add lines 11a-11d ▶		0						
12	Total revenue. See instructions. ▶		45,190,437	34,002,762	-5,694	127,277			

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	11,641,176	11,641,176		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	636,708	230,658	406,050	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)				
7	Other salaries and wages	14,591,153	12,166,592	2,141,967	282,594
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	551,661	449,116	92,307	10,238
9	Other employee benefits	2,287,963	1,862,668	382,836	42,459
10	Payroll taxes	1,246,238	1,014,583	208,528	23,127
11	Fees for services (non-employees).				
a	Management	0			
b	Legal	153,244		153,244	
c	Accounting	137,847		137,847	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	46,599		46,599	
g	Other	109,208		109,208	
12	Advertising and promotion	757,988	245	757,743	
13	Office expenses	845,952	550,935	264,911	30,106
14	Information technology	480,180	316,019	164,161	
15	Royalties				
16	Occupancy	1,744,901	1,529,537	215,364	
17	Travel	788,986	743,271	38,126	7,589
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,499,816	2,452,727	47,089	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,972,603	1,972,603		
23	Insurance	234,654	332	234,322	
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.)				
a	Contract Services	4,334,366	3,494,186	815,847	24,333
b	Supplies	278,101	216,696	45,713	15,692
c	Allocations	193,490	263,524	-70,034	0
d	Special Programs	227,895	160,174	67,721	0
e	Repairs	410,118	196,432	211,154	2,532
f	All other expenses	1,671,671	1,303,917	355,461	12,293
25	Total functional expenses. Add lines 1 through 24f	47,842,518	40,565,391	6,826,164	450,963
26	Joint costs. Check here <input type="checkbox"/> 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) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,752,946	1	3,099,403
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	1,439,600	3	718,845
	4 Accounts receivable, net	601,374	4	635,114
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	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)		6	
	7 Notes and loans receivable, net	2,217,440	7	2,362,414
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	777,297	9	741,695
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 106,568,090		
	b Less: accumulated depreciation	10b 58,128,341	49,425,305	10c 48,439,749
	11 Investments—publicly traded securities	14,674,284	11	17,634,960
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,278,750	15	1,527,632
16 Total assets. Add lines 1 through 15 (must equal line 34)	73,166,996	16	75,159,812	
Liabilities	17 Accounts payable and accrued expenses	1,801,232	17	1,838,421
	18 Grants payable		18	
	19 Deferred revenue	1,174,918	19	1,152,116
	20 Tax-exempt bond liabilities	12,828,030	20	12,693,987
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	23,303,885	23	24,797,542
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	3,396,699	25	3,372,347
	26 Total liabilities. Add lines 17 through 25	42,504,764	26	43,854,413
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	12,630,001	27	10,349,692
	28 Temporarily restricted net assets	6,359,098	28	9,082,848
	29 Permanently restricted net assets	11,673,133	29	11,872,859
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	30,662,232	33	31,305,399
34 Total liabilities and net assets/fund balances	73,166,996	34	75,159,812	

Part XI Reconciliation of Net AssetsCheck 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	45,190,437
2	Total expenses (must equal Part IX, column (A), line 25)	2	47,842,518
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,652,081
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	30,662,232
5	Other changes in net assets or fund balances (explain in Schedule O)	5	3,295,248
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	31,305,399

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		<input checked="" type="checkbox"/>
b Were the organization's financial statements audited by an independent accountant?	<input checked="" type="checkbox"/>	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	<input checked="" type="checkbox"/>	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	<input checked="" type="checkbox"/>	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<input checked="" type="checkbox"/>	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

WHEELING JESUIT UNIVERSITY INC

Employer identification number

55-0394213

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

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

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

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

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2010

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.)

Section A. Public Support

Calendar 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 include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 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 line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2009 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support test—2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I 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 in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

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	%

Section 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 ► <input type="checkbox"/>		
b 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 ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

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

[illegible]

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

WHEELING JESUIT UNIVERSITY INC

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

55-0394213

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

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

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

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year
►

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

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

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

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

b Assets included in Form 990, Part X ► \$

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** ☐ Public exhibition **d** ☐ Loan or exchange programs
- b** ☐ Scholarly research **e** ☐ Other _____
- c** ☐ Preservation for future generations
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b** If "Yes," explain the arrangement in Part XIV and complete the following table:
- | | Amount |
|----------------------------------------|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No
- b** If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	16,686,699	15,496,477	18,505,340		
b Contributions	199,726	275,954	630,791		
c Net investment earnings, gains, and losses	3,617,439	1,701,956	-2,642,520		
d Grants or scholarships	803,577	787,688	997,134		
e Other expenditures for facilities and programs	0	0	0		
f Administrative expenses	0	0	0		
g End of year balance	19,700,287	16,686,699	15,496,477		

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment ☐ 0 %
- b** Permanent endowment ☒ 100 %
- c** Term endowment ☐ 0 %
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|------------------------------------|-----|-------------------------------------|
| (i) unrelated organizations | | <input checked="" type="checkbox"/> |
| (ii) related organizations | | <input checked="" type="checkbox"/> |
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
- 4** Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	1,091,817		1,091,817
b Buildings	0	71,806,630	26,890,386	44,916,244
c Leasehold improvements	0	3,472,180	3,184,253	287,927
d Equipment	0	29,926,692	27,900,142	2,026,550
e Other	0	270,771	153,560	117,211
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				48,439,749

Part VII 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		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

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

(a) Description	(b) Book value
(1) Funds held in trust by others	1,527,632
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15)	1,527,632

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

1.	(a) Description of liability	(b) Amount
(1)	Federal income taxes	0
(2)	Refundable advances from US Govt	2,710,358
(3)	Postretirement benefit obligation	310,766
(4)	Agency Funds	351,223
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►		3,372,347

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	45,190,437
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	47,842,518
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-2,652,081
4	Net unrealized gains (losses) on investments	4	3,295,248
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 through 8	9	3,295,248
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	643,167

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

1	Total revenue, gains, and other support per audited financial statements	1	48,679,311
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	3,295,248
b	Donated services and use of facilities	2b	0
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIV.)	2d	0
e	Add lines 2a through 2d	2e	3,295,248
3	Subtract line 2e from line 1	3	45,384,063
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIV.)	4b	-193,626
c	Add lines 4a and 4b	4c	-193,626
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	45,190,437

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

1	Total expenses and losses per audited financial statements	1	48,036,144
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	0
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIV.)	2d	0
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	48,036,144
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIV.)	4b	-193,626
c	Add lines 4a and 4b	4c	-193,626
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	47,842,518

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, line 2; 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.

Schedule D, Part V, Line 4 - The endowment is used to provide scholarships to the students of the University

Schedule D, Part X, Line 2 - Generally accepted accounting principles prescribes recognition thresholds and measurement attributes for the financial statement recognition and measurement of a tax position taken or expected to be taken in a tax return. Tax benefits will be recognized only if a tax position is more-likely-than-not sustained in a tax examination, with a tax examination being presumed to occur. The amount recognized will be the largest amount of the tax benefit that is greater than 50% likely being realized on examination. For tax positions not meeting the more-likely-than-not test, no tax benefit will be recorded. Management has concluded that they are unaware of any tax benefits or liabilities to be recognized at June 30, 2011 or 2010, respectively. The University would recognize interest and penalties related to unrecognized tax benefits in interest and income tax expense, respectively. The University is no longer subject to examination by taxing authorities for the years before 2007. The University does not expect the total amount of unrecognized tax benefits to significantly change in the next twelve months.

Part XIV - Supplemental Information (Continued)

Schedule D, Part XII, Line 4b - Allocated Rental expenses

Schedule D, Part XIII, Line 4b - Allocated Rental Expenses

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.**

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number

55-0394213

WHEELING JESUIT UNIVERSITY INC

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	✓
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	✓
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II <u>Wheeling Jesuit University has a policy of providing equal opportunity to its employees, students, and applicants for employment. Accordingly, no person will be denied admission or employment based on race, color, religion, gender, sexual orientation, national origin, ethnicity, age, marital status, blindness, handicap, disability, or a disabled veteran. This policy is reiterated in all solicitations, newspaper advertisements, and media broadcasts for employment and when soliciting for students.</u>	3	✓
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	✓
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	✓
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	✓
d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	4d	✓
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	5a	✓
b Admissions policies?	5b	✓
c Employment of faculty or administrative staff?	5c	✓
d Scholarships or other financial assistance?	5d	✓
e Educational policies?	5e	✓
f Use of facilities?	5f	✓
g Athletic programs?	5g	✓
h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5h	✓
6a Does the organization receive any financial aid or assistance from a governmental agency?	6a	✓
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either line 6a or line 6b, explain on Part II	6b	✓
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	✓

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).

This image shows a full page of a worksheet designed for handwriting practice. It features 20 evenly spaced, horizontal dashed lines across the entire width of the page. The background is plain white, and there are no margins, text, or other markings present.

SCHEDULE I
(Form 990)

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization

WHEELING JESUIT UNIVERSITY INC

Employer identification number

55-0394213

OMB No 1545-0047

2010

Open to Public
Inspection

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" 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 organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

3 Enter total number of other organizations

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

Cat No 50055P

Schedule I (Form 990) (2010)

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.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Rabbi Helman	1	131			
2 McCune/Greene County Scholarship	1	250			
3 Gallagher Memorial	1	400			
4 Schroer Family fund	4	2,000			
5 Hospital Tuition Discount	1	594			
6 Accepted Student Day Scholarship	1	500			
7 (Continued on Schedule I, Part IV, Statement 1)					

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

Schedule I, Part I, Line 2 - The University monitors their respective grants by establishing a separate accounting for each individual grant. All transactions are reviewed and approved by appropriate personnel prior to submission for processing to insure the meet the requirements of the grant.

Description of Grants and Other Assistance to Individuals in the United States

		Number of recipients	Amount of cash grant	Amount of non-cash assistance
Type of grant	Rivaly Scholarship	1	500	
Method of valuation				
Description of non-cash assistance				
Type of grant	Steven M & Meagan T Kirchner Scholarship	1	500	
Method of valuation				
Description of non-cash assistance				
Type of grant	Costain/Giglio-Sallee Memorial	1	898	
Method of valuation				
Description of non-cash assistance				
Type of grant	WJU Charter Guild Endowment Scholarship	1	912	
Method of valuation				
Description of non-cash assistance				
Type of grant	ASD Scholarship	5	950	
Method of valuation				
Description of non-cash assistance				
Type of grant	Dr Lee Jones Scholarship	1	989	
Method of valuation				
Description of non-cash assistance				
Type of grant	Class of 1974 Scholarship	1	1,000	
Method of valuation				
Description of non-cash assistance				
Type of grant	Knights of Columbus- Endowed	1	1,000	
Method of valuation				
Description of non-cash assistance				
Type of grant	Linda Baron Memorial Scholarship	1	1,000	
Method of valuation				
Description of non-cash assistance				
Type of grant	Philadelphia Alumni Scholarship - Rev Charles Curie, SJ	1	1,000	
Method of valuation				
Description of non-cash assistance				
Type of grant	Rakosky Memorial Scholarship	1	1,053	
Method of valuation				
Description of non-cash assistance				

Schedule I, Part IV, Statement 1

WHEELING JESUIT UNIVERSITY INC

Type of grant Philip E Cline Scholarship 1

1,111

Method of valuation

Description of non-cash assistance

Type of grant Chiccarella Scholarship 1

1,113

Method of valuation

Description of non-cash assistance

Type of grant Leonard P Riser Memorial Scholarship 3

1,135

Method of valuation

Description of non-cash assistance

Type of grant Appalachian Power Company 1

1,250

Method of valuation

Description of non-cash assistance

Type of grant BB&T Foundation Scholarship 1

1,250

Method of valuation

Description of non-cash assistance

Type of grant Bernard & Blanche Jacobson Scholarship 1

1,250

Method of valuation

Description of non-cash assistance

Type of grant Mr & Mrs Parry Petroplus 1

1,250

Method of valuation

Description of non-cash assistance

Type of grant Ogden Newspapers, Inc 1

1,250

Method of valuation

Description of non-cash assistance

Type of grant Senator & Mrs Rockefeller Scholarship 1

1,250

Method of valuation

Description of non-cash assistance

Type of grant Steptoe & Johnson Scholarship 1

1,250

Method of valuation

Description of non-cash assistance

Type of grant The H B Wehrle Foundation 1

1,250

Method of valuation

Description of non-cash assistance

Type of grant R Winkler Memorial Scholarship 2

1,417

Method of valuation

Description of non-cash assistance

Type of grant Frank Kirk Memorial Scholarship 1

1,440

Method of valuation

Schedule I, Part IV, Statement 1

WHEELING JESUIT UNIVERSITY INC

Description of non-cash assistance

Type of grant	Healthcare Leadership Scholarship	1	1,740
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Method of valuation

Description of non-cash assistance

Type of grant	Aluise Family Scholarship	2	2,000
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Method of valuation

Description of non-cash assistance

Type of grant	High School Auction Scholarship	2	2,000
---------------	---------------------------------	---	-------

Method of valuation

Description of non-cash assistance

Type of grant	Jesuit - Appalachian Scholarship	2	2,000
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Method of valuation

Description of non-cash assistance

Type of grant	Sally O Bodkin Music Scholarship	1	2,000
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Method of valuation

Description of non-cash assistance

Type of grant	Septimi (Class of 65) Scholarship	1	2,000
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Method of valuation

Description of non-cash assistance

Type of grant	Vicky L DiPiero, '65 Diversity1 Scholarship		2,000
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Method of valuation

Description of non-cash assistance

Type of grant	Wertz Scholarship	1	2,164
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Method of valuation

Description of non-cash assistance

Type of grant	J Adamiak & H Regiec Adamiak Scholarship	1	2,233
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Method of valuation

Description of non-cash assistance

Type of grant	Admission Award II	4	2,250
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Method of valuation

Description of non-cash assistance

Type of grant	Troy Endowment Scholarship2		2,413
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Method of valuation

Description of non-cash assistance

Type of grant	Class of 1972 Scholarship	1	2,500
---------------	---------------------------	---	-------

Method of valuation

Description of non-cash assistance

Type of grant	Buckius-Burke Scholarship	2	2,688
---------------	---------------------------	---	-------

Method of valuation

Description of non-cash assistance

Type of grant	UPS Scholarship/WWICU	2	2,700
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Method of valuation

Description of non-cash assistance

Type of grant	Lantz Scholarship	3	2,931
---------------	-------------------	---	-------

Method of valuation

Description of non-cash assistance

Type of grant	Choral Scholarship	3	3,000
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Method of valuation

Description of non-cash assistance

Type of grant	Jacobson Scholarship	1	3,000
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Method of valuation

Description of non-cash assistance

Type of grant	Pride Scholarship	1	3,113
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Method of valuation

Description of non-cash assistance

Type of grant	Dominion Transmission Foundation Scholarship	1	3,125
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Method of valuation

Description of non-cash assistance

Type of grant	Teen of Week Scholarship	13	3,125
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Method of valuation

Description of non-cash assistance

Type of grant	Bishop Hodges Scholarship - 1 Wesbanco		3,200
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Method of valuation

Description of non-cash assistance

Type of grant	Hanzely Scholarship	2	3,293
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Method of valuation

Description of non-cash assistance

Type of grant	St Patrick Weston Scholarship	1	3,297
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Method of valuation

Description of non-cash assistance

Type of grant	Buckius/Loyola Scholarship	1	3,391
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Method of valuation

Description of non-cash assistance

Type of grant	T Eick Memorial Scholarship	4	3,450
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Method of valuation

Description of non-cash assistance

Type of grant	Merlo Scholarship	1	3,461
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Method of valuation

Description of non-cash assistance

Type of grant	Robert & Mimie O'Hara Helm 2	3,850
Method of valuation	Scholarship	
Description of non-cash assistance		
Type of grant	Cogan Memorial Scholarship 5	3,949
Method of valuation		
Description of non-cash assistance		
Type of grant	Board of Directors 2	3,950
Method of valuation	Scholarship	
Description of non-cash assistance		
Type of grant	Florence Irene Nesbitt 4	4,192
Method of valuation	Scholarship	
Description of non-cash assistance		
Type of grant	Room Remission 1	4,240
Method of valuation		
Description of non-cash assistance		
Type of grant	Hearst Scholarship 4	4,380
Method of valuation		
Description of non-cash assistance		
Type of grant	Schenk Scholarship 3	4,840
Method of valuation		
Description of non-cash assistance		
Type of grant	Bernard McDonough 2	5,000
Method of valuation	Scholarship	
Description of non-cash assistance		
Type of grant	McShain Minority 1	5,082
Method of valuation	Scholarship	
Description of non-cash assistance		
Type of grant	Werner Ritz Pre-Med 1	5,136
Method of valuation	Scholarship	
Description of non-cash assistance		
Type of grant	Carnigan Alumni Scholarship 4	5,200
Method of valuation		
Description of non-cash assistance		
Type of grant	Admission Award I 7	5,428
Method of valuation		
Description of non-cash assistance		
Type of grant	Rev James A O'Brien, SJ, 3	5,898
Method of valuation	PhD	
Description of non-cash assistance		

assistance

Type of grant	Margaret Hess Scholarship	5	5,915
Method of valuation			
Description of non-cash assistance			
Type of grant	Berthold/Neal Family Endowed Scholarship	6	5,980
Method of valuation			
Description of non-cash assistance			
Type of grant	Graduate Tuition Discount	2	6,240
Method of valuation			
Description of non-cash assistance			
Type of grant	WV Emulation Scholarship	3	6,400
Method of valuation			
Description of non-cash assistance			
Type of grant	Lidano DiTrapano Scholarship	3	6,490
Method of valuation			
Description of non-cash assistance			
Type of grant	Admission Award	3	6,500
Method of valuation			
Description of non-cash assistance			
Type of grant	Mary M Szitar Scholarship	4	6,728
Method of valuation			
Description of non-cash assistance			
Type of grant	Summit 2000	4	6,750
Method of valuation			
Description of non-cash assistance			
Type of grant	Federal TEACH Grant	2	8,000
Method of valuation			
Description of non-cash assistance			
Type of grant	Admission Award III	5	8,250
Method of valuation			
Description of non-cash assistance			
Type of grant	Edouard S & Simone J Ziegler Scholarship	6	8,594
Method of valuation			
Description of non-cash assistance			
Type of grant	Cardinal Athletic Club Scholarship	11	9,000
Method of valuation			
Description of non-cash assistance			
Type of grant	Sarah & Pauline Maier Foundation, Inc	9	9,000
Method of valuation			
Description of non-cash assistance			

Type of grant	Benedum Scholarship	6	9,787
Method of valuation			
Description of non-cash assistance			
Type of grant	RN/BSN/MSN On-Line Scholarship	8	9,804
Method of valuation			
Description of non-cash assistance			
Type of grant	M Virginia Greene Scholarship	8	10,190
Method of valuation			
Description of non-cash assistance			
Type of grant	Choral Award	11	10,500
Method of valuation			
Description of non-cash assistance			
Type of grant	Rev Edward Gannon Scholarship	5	10,646
Method of valuation			
Description of non-cash assistance			
Type of grant	Bishop Hodges Scholarship - 4 BB&T		10,960
Method of valuation			
Description of non-cash assistance			
Type of grant	WV Space Grant Scholarship 14		11,000
Method of valuation			
Description of non-cash assistance			
Type of grant	Troy Memorial Scholarship	11	11,200
Method of valuation			
Description of non-cash assistance			
Type of grant	Evening Division Scholarship	11	12,690
Method of valuation			
Description of non-cash assistance			
Type of grant	James Chambers Scholarship	4	12,693
Method of valuation			
Description of non-cash assistance			
Type of grant	Cary Foundation and Kanawha County Area	1	14,000
Method of valuation			
Description of non-cash assistance			
Type of grant	Arrupe Scholarship	11	16,500
Method of valuation			
Description of non-cash assistance			
Type of grant	Joseph J & Virginia R Murphy Scholarship	7	18,429
Method of valuation			
Description of non-cash assistance			

assistance

Type of grant	HRSA Traineeship Grant	4	18,945
Method of valuation			
Description of non-cash assistance			
Type of grant	Wood County/McDonough Scholarship	6	19,547
Method of valuation			
Description of non-cash assistance			
Type of grant	McConnell Scholarship	8	20,780
Method of valuation			
Description of non-cash assistance			
Type of grant	George E Stifel Scholarship	10	22,018
Method of valuation			
Description of non-cash assistance			
Type of grant	Alumni Award	24	24,000
Method of valuation			
Description of non-cash assistance			
Type of grant	McCune/Greene County Scholarship	10	27,662
Method of valuation			
Description of non-cash assistance			
Type of grant	Diocesan Scholarship	48	28,500
Method of valuation			
Description of non-cash assistance			
Type of grant	Yellow Ribbon Program - VA	6	27,979
Method of valuation			
Description of non-cash assistance			
Type of grant	International Scholarship	3	30,000
Method of valuation			
Description of non-cash assistance			
Type of grant	Guy & Mane Paull Biery Scholarship	13	30,067
Method of valuation			
Description of non-cash assistance			
Type of grant	Joseph H Hodges Scholarship	14	31,676
Method of valuation			
Description of non-cash assistance			
Type of grant	Kirby Scholarship	12	33,211
Method of valuation			
Description of non-cash assistance			
Type of grant	Music Ministry Award	21	40,102
Method of valuation			
Description of non-cash assistance			

Schedule I, Part IV, Statement 1

WHEELING JESUIT UNIVERSITY INC

Type of grant	Arrupe Award	30	42,750
Method of valuation			
Description of non-cash assistance			
Type of grant	Schenk Foundation Scholarship	12	43,450
Method of valuation			
Description of non-cash assistance			
Type of grant	Hawk Scholarship	25	52,000
Method of valuation			
Description of non-cash assistance			
Type of grant	Wheeling Jesuit Tuition Rebate	135	65,250
Method of valuation			
Description of non-cash assistance			
Type of grant	Ignatian Award	9	67,500
Method of valuation			
Description of non-cash assistance			
Type of grant	Catholic High School Scholarship	129	124,200
Method of valuation			
Description of non-cash assistance			
Type of grant	Laut Scholarship	7	163,594
Method of valuation			
Description of non-cash assistance			
Type of grant	Federal SEOG Grant	145	195,443
Method of valuation			
Description of non-cash assistance			
Type of grant	Jesuit Distinction Award	29	248,985
Method of valuation			
Description of non-cash assistance			
Type of grant	Magis Scholarship	31	366,000
Method of valuation			
Description of non-cash assistance			
Type of grant	Campion Grant	250	1,002,113
Method of valuation			
Description of non-cash assistance			
Type of grant	Wheeling Jesuit Grant	344	1,341,326
Method of valuation			
Description of non-cash assistance			
Type of grant	WJU Award	229	1,772,740
Method of valuation			
Description of non-cash assistance			
Type of grant	Dean's Award	196	1,965,857
Method of valuation			
Description of non-cash assistance			

Schedule I, Part IV, Statement 1

WHEELING JESUIT UNIVERSITY INC

assistance

Type of grant	Presidential Scholarship	291	3,423,122
Method of valuation			
Description of non-cash assistance			

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

WHEELING JESUIT UNIVERSITY INC

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number

55-0394213

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.

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?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations 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:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- 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.

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

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

	(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	Davitt Mcateer	(i) 214,158	0	0	16,500	0	230,658	230,658
		(ii) 0	0	0	0	0	0	0
2	William J Van Horn	(i) 165,342	0	0	0	0	165,342	0
		(ii) 0	0	0	0	0	0	0
3		(i)						
		(ii)						
4		(i)						
		(ii)						
5		(i)						
		(ii)						
6		(i)						
		(ii)						
7		(i)						
		(ii)						
8		(i)						
		(ii)						
9		(i)						
		(ii)						
10		(i)						
		(ii)						
11		(i)						
		(ii)						
12		(i)						
		(ii)						
13		(i)						
		(ii)						
14		(i)						
		(ii)						
15		(i)						
		(ii)						
16		(i)						
		(ii)						

Part III Supplemental Information

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

Schedule J, Part I, Line 1a - Richard Beyer received a Housing allowance of \$3600.00 Stephan Stahl received a Housing allowance of \$2700.00 William Van Horn received a Housing allowance of \$875.00

Schedule J, Part I, Line 4 - William J Van Horn received \$52,900 severance payment

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

WHEELING JESUIT UNIVERSITY INC

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
County Commission of Ohio County West Virginia A	55-6009203	677318BD8	12/05/2006	11,986,149	Restructure Debt		✓		✓		✓
Ohio County West Virginia Building Commission B	55-6009203	677309BK1	12/05/2006	1,194,600	Restructure Debt		✓		✓		✓
C											
D											

Employer identification number
55-0394213

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 Part V.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Part II Proceeds

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Amount of bonds retired		0		535,000				
2 Amount of bonds legally defeased		0		0				
3 Total proceeds of issue		11,986,149		1,194,600				
4 Gross proceeds in reserve funds		0		0				
5 Capitalized interest from proceeds		0		0				
6 Proceeds in refunding escrows		10,240,683		1,175,883				
7 Issuance costs from proceeds		245,466		18,717				
8 Credit enhancement from proceeds		0		0				
9 Working capital expenditures from proceeds		0		0				
10 Capital expenditures from proceeds		1,500,000		0				
11 Other spent proceeds		0		0				
12 Other unspent proceeds		0		0				
13 Year of substantial completion		2009						

14 Were the bonds issued as part of a current refunding issue?

15 Were the bonds issued as part of an advance refunding issue?

16 Has the final allocation of proceeds been made?

17 Does the organization maintain adequate books and records to support the final allocation of proceeds?

Part III Private Business Use

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

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

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Schedule K (Form 990) 2010

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		✓		✓				
b Are there any research agreements that may result in private business use of bond-financed property?		✓		✓				
c Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		✓		✓				
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		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 %				%
6 Total of lines 4 and 5		0 %		0 %				%
7 Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	✓		✓					

Part IV Arbitrage

	A		B		C		D	
	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?		✓		✓				
2 Is the bond issue a variable rate issue?		✓		✓				
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		✓		✓				
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
4a Were gross proceeds invested in a GIC?		✓		✓				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5 Were any gross proceeds invested beyond an available temporary period?		✓		✓				
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).

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 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

WHEELING JESUIT UNIVERSITY INC

Employer identification number

55-0394213

Form 990, Part VI, Section B, Line 11a - The University uses a software program to prepare the 990 which runs a series of edit checks on the return. The return is then reviewed by the Controller and the Chief Financial Officer. The University reviews the form 990 with the Audit Committee and the Board of Directors for approval prior to submission to the Internal Revenue Service.

Form 990, Part VI, Section B, Line 12c - The University obtains conflict of interests statements annually from all trustees and Board members. It also obtains conflict of interests statements from Officers and key employees upon hiring. All employees working in sponsored research sign a conflict of interest statement upon hiring.

Form 990, Part VI, Section B, Line 15 - Salary ranges are determined by a comparability study performed by the Human Resources Department. All positions are graded upon respective job description to ensure the respective jobs are properly classified per the University's policies. Salaries for officers and key employees are determined and approved by the President and Chief Financial Officer for the University. The salary for the President is approved by the Board of Directors.

Form 990, Part VI, Section C, Line 19 - The University submits its financial statements to the Municipal Securities Rulemaking board for posting to their Electronic Municipal Market Access for public viewing on a quarterly basis. A Code of Ethics statement is posted to the University's website. The Code of Ethics statement contains verbiage that addresses our position with the appearance of conflict between personal and institutional interests.

Form 990, Part XI, Line 5 - Unrealized Gains