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Form 990 Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012

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

C Name of organization
York College of Pennsylvania

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
441 Country Club Road

City or town, state or country, and ZIP + 4
York, PA 17403

D Employer identification number
23-1352698

E Telephone number
(717) 815-6579

G Gross receipts $ 125,413,814

F Name and address of principal officer
George Waldner
441 Country Club Road
York, PA 17403

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

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

H(c) Group exemption number ▶

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

J Website: ▶ www ycp edu

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation 1873 | M State of legal domicile PA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
POST-SECONDARY AND PRE-SCHOOL THROUGH GRADE 12 EDUCATION

2 Check this box ▶☐ 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	31
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	27
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	2,305
6	Total number of volunteers (estimate if necessary)	6	239
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	12,841
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	17,399,543	5,901,614
	9	Program service revenue (Part VIII, line 2g)	99,742,443	107,298,577
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	458,866	853,367
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	821,371	842,539
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	118,422,223	114,896,097
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	12,542,779	13,778,618
	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)	51,909,851	54,474,647
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	66,250	67,027
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,140,242		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	34,033,149	37,101,012
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	98,552,029	105,421,304
	19	Revenue less expenses Subtract line 18 from line 12	19,870,194	9,474,793

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	383,447,237	391,537,825
	21	Total liabilities (Part X, line 26)	123,289,676	122,995,208
	22	Net assets or fund balances Subtract line 21 from line 20	260,157,561	268,542,617

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

****** | 2013-04-23
Signature of officer | Date

C MATTHEW SMITH CHIEF FINANCIAL OFFICER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Frank Giardini	Date	Check if self-employed ▶ ☐	Preparer's taxpayer identification number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ GRANT THORNTON LLP 2001 MARKET STREET SUITE 3100 PHILADELPHIA, PA 19103			EIN ▶ Phone no ▶ (215) 561-4200

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

YORK COLLEGE WILL MAKE AVAILABLE, AT THE BACCALAUREATE AND ASSOCIATE DEGREE LEVELS, HIGH-QUALITY ACADEMIC PROGRAMS, WHICH INCLUDE GENERAL EDUCATION COMPONENTS APPROPRIATE FOR THE PROGRAM'S DEGREE LEVEL AND WHICH COVER A BROAD RANGE OF MAJORS IN PROFESSIONAL AND CAREER FIELDS AS WELL AS THE ARTS AND SCIENCES, AND WILL OFFER CAREFULLY SELECTED MASTER'S AND DOCTORAL DEGREE PROGRAMS, WHICH REFLECT THE ENROLLMENT EMPHASIS OF THE UNDERGRADUATE CURRICULUM AND THE PROFESSIONAL DEVELOPMENT NEEDS OF THE REGION YORK COUNTRY DAY SCHOOL IS A COLLEGE PREPATORY SCHOOL DEDICATED TO THE INTELLECTUAL, CREATIVE, AND PERSONAL DEVELOPMENT OF EACH OF OUR STUDENTS IN PREPARATION FOR A LIFETIME OF LEARNING, SERVICE AND LEADERSHIP

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 organization's program service accomplishments for each of its three largest program services, as measured 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 $ 85,450,385 including grants of $ 13,180,594) (Revenue $ 111,273,637)

YORK COLLEGE OF PENNSYLVANIA TRACES ITS FOUNDING BACK TO 1787 WHEN IT WAS KNOWN AS YORK COUNTY ACADEMY IN 1929, THE INSTITUTION MERGED WITH YORK COLLEGIATE INSTITUTE, A NON-DENOMINATIONAL SISTER INSTITUTION WHICH WAS FOUNDED IN 1873 IN 1941, THE INSTITUION'S CHARTER WAS AMENDED TO PROVIDE FOR A TWO-YEAR LIBERAL ARTS PROGRAM AT THE JUNIOR COLLEGE LEVEL AND ADOPTED THE NAME YORK JUNIOR COLLEGE IN 1968, THE CURRICULUM GREW TO A FULL BACHELOR'S DEGREE PROGRAM AND THE INSTITUTION'S NAME WAS CHANGED TO YORK COLLEGE OF PENNSYLVANIA TODAY THE COLLEGE OFFERS MORE THAN 50 BACCALAUREATE MAJORS IN PROFESSIONAL PROGRAMS, THE SCIENCES AND HUMANITIES TO ITS 4,600 FULL-TIME UNDERGRADUATE STUDENTS YORK COLLEGE IS FULLY ACCREDITED BY THE MIDDLE STATES COMMISSION ON HIGHER EDUCATION AND ALSO WITH NATIONAL ACCREDITING AGENCIES IN NURSING, RECREATION, HEALTH EDUCATION, BUSINESS, ENGINEERING AND TECHNOLOGY, NURSE ANESTHESIA, MUSIC, AND SPORT MANAGEMENT THE COLLEGE ALSO OFFERS MASTER'S PROGRAMS IN BUSINESS, EDUCATION, AND NURSING AND BEGAN OFFERING A DOCTORATE IN NURSING PRACTICE IN FALL 2011 YORK COLLEGE HAS THRIVED BECAUSE IT HAS EMBRACED INNOVATION AND CHANGE, AND HAS DEDICATED ITSELF TO THE SERVICE OF ITS STUDENTS LITTLE KNOWN OUTSIDE SOUTH-CENTRAL PENNSYLVANIA THIRTY YEARS AGO, THE COLLEGE IS NOW RATED ONE OF THE BEST VALUES IN HIGHER EDUCATION IN THE NORTHEAST AND HAS GROWN TO BE THE EIGHTH LARGEST PRIVATE COLLEGE IN PENNSYLVANIA YORK COLLEGE ATTRACTS THE 162 FULL-TIME FACULTY FROM THE BEST GRADUATE SCHOOLS IN THE COUNTRY OUTSTANDING STUDENTS SELECT YORK COLLEGE FROM A GEOGRAPHICAL AREA THAT GROWS LARGER EACH PASSING YEAR THE COMPEITITVE TUITION COMBINED WITH SCHOLARSHIPS THAT AVERAGE 15 9% OF TUITION MAKE THE COLLEGE COST EFFECTIVE FOR MOST STUDENTS THE AVERAGE INCOMING FRESHMAN AWARD FROM INSTITUTIONAL FUNDS WAS $4,236 THE COLLEGE ALSO PRODUCES EXTRAORDINARY GRADUATES WHO ARE MAKING REAL CONTRIBUTIONS TO COMMUNITIES ALL ACROSS THE COUNTRY AND INCREASINGLY AROUND THE WORLD THE 2011-2012 ALUMNI SURVEY INDICATES THAT WITHIN ONE YEAR OF GRADUATION, 89% OF THE COLLEGE'S GRADUATES ARE WORKING FULL-TIME OR ARE ENROLLED IN A GRADUATE SCHOOL PROGRAM DURING 2011-2012, 100% OF NURSING GRADUATES PASSED THE ANCC FOR CNS CERTIFICATION AND 80% OF EDUCATION GRADUATES PASSED THE PRE-SERVICE ACADEMIC PERFORMANCE ASSESSMENT YORK COLLEGE CONTINUES TO RECEIVE VERY POSITIVE RANKINGS IN NATIONAL PUBLICATIONS INCLUDING BARRON'S BEST BUYS IN COLLEGE EDUCATION AND US NEWS AND WORLD REPORT'S TOP TIER OF THE BEST REGIONAL UNIVERSITIES IN THE NORTH YORK COLLEGE RANKS AS A "TOP REGIONAL SCHOOL", "NATIONAL BEST BUY", "BEST VALUE", AND "HIDDEN GEM " THE YORK COLLEGE CENTER FOR PROFESSIONAL EXCELLENCE CONTINUES TO EMPHASIZE PROFESSIONALISM FOR ALL CAREER OPPORTUNITIES AND HELP ITS' STUDENTS DEVELOP A CONCRETE PLAN TO ATTAIN ACADEMIC GROWTH AND CAREER SUCCESS YORK COLLEGE ENCOURAGES ITS' STUDENTS TO APPLY WHAT THEY LEARN IN THE CLASSROOM IN THE "REAL WORLD" AND PREPARES THEM TO BE PROFESSIONALS REGARDLESS OF THE CAREER THEY PURSUE

4b (Code) (Expenses $ 2,903,070 including grants of $ 598,024) (Revenue $ 3,622,457)

YORK COUNTRY DAY SCHOOL IS A COEDUCATION, COLLEGE PREPATORY DAY SCHOOL, ENROLLING STUDENTS FROM PRESCHOOL THROUGH TWELFTH GRADE THE SCHOOL WAS FOUNDED IN 1953 BY A GROUP OF PARENTS AND CIVIC LEADERS WHO SOUGHT A CHALLENGING ACADEMIC PROGRAM IN A PRIVATE SETTING FOR THE CHILDREN OF YORK COUNTY IN 1956, THE SCHOOL WAS MOVED TO A SEVENTTEN ACRE TRACT IN THE SUBURBS SOUTHWEST OF YORK, AND IN THE FOLLOWING YEARS THE SCHOOL GREW TO INCLUDE PRESCHOOL CLASSES THROUGH GRADE TWELVE IN 1975, THE SCHOOL BECAME A PART OF YORK COLLEGE OF PENNSYLVANIA, AND THE ACADEMIC PROGRAM WAS ENRICHED THROUGH THE USE OF COLLEGE FACILITIES SUCH AS THE LIBRARY, THE SWIMMING POOL AND THE INCLUSION OF QUALIFIED YORK COUNTRY DAY STUDENTS IN COLLEGE COURSES IN 1985, THE SECOND PHASE OF THE PLAN FOR EXCELLENCE BEGAN WITH THE INAUGURATION OF A NEW CURRICULUM, STRESSING NEW ACADEMIC PROGRAMS AND EXPANDED ACTIVITIES AND AHTLETIC OPPORTUNITIES CALLING FOR THE SCHOOL TO PREPARE STUDENTS FOR ADMISSION TO THE MOST DEMANDING INSTITUTIONS OF HIGHER LEARNING, THE BOARD OF TRUSTEES INCREASED THE SCHOOL'S GRADUATION REQUIREMENTS AND ADDED ADDITIONAL LANGUAGE ELECTIVES, NEW READING, SOCIAL STUDIES AND SCIENCE CURRICULUMS, AND A NEW PROGRAM FOR TWO- AND THREE-YEAR-OLDS AS PART OF GRADUATION REQUIREMENTS, ALL SENIORS TRADITIONALLY TAKE ONE FULL SEMESTER-LENGTH COURSE AT YORK COLLEGE EACH SEMESTER, AND MAY TAKE UP TO THREE COURSES PER SEMESTER AT THE DISCRETION OF THE UPPER SCHOOL HEAD THE SENIORS' CLASS SCHEDULE IS DESIGNED WITH TIME BUILT IN FOR COLEGE COURSES TAKING THESE COURSES ALLOWS THE STUDENTS TO STUDY A BROADER RANGE OF SUBJECTS AND HAVE SOME "PRACTICE" IN THE COLLEGE ARENA BEFORE THEY ARRIVE ON THEIR CHOSEN CAMPUSES AS FRESHMEN YORK COLLEGE TREATS YORK COUNTRY DAY SCHOOL STUDENTS AS COLLEGE STUDENTS AND THE FACULTY HOLDS YORK COUNTRY DAY STUDENTS TO THE SAME ACADEMIC STANDARDS AS FULL-TIME STUDENTS UNDERCLASSMEN WHO HAVE DEMONSTRATED ACADEMIC EXCELLENCE MAY ALSO TAKE CLASSES AT YORK COLLEGE WITH THE PERMISSION OF THE UPPER SCHOOL HEAD YORK COUNTRY DAY SCHOOL HAS A LONG TRADITION OF PLACING GRADUATES IN HIGHLY REGARDED COLLEGES AND UNIVERSITIES

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services (Describe in Schedule O)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶$ 88,353,455

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
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 owner? *If "Yes," complete Schedule L, Part IV*	28c	Yes	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	7,020			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	2a	2,305			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
	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	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ▶BD , CJ , LU , AA 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
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		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		No
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? **Note.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state			13a		
b	Enter the aggregate 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 aggregate amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
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 lines 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** 31			
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		**5**		No
6	Did the organization have members or stockholders?		**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		**9**		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**	Yes	

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made 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 made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

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

C MATTHEW SMITH
441 COUNTRY CLUB ROAD
YORK, PA 17403
(717) 815-6579

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

☐ Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	1,887,028	0	535,840

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶68

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
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? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
Kinsley Construction 2700 Water St PO Box 2886 YORK, PA 174052886	General Contractor	15,335,158
Chartwells Compass Group PO Box 91337 CHICAGO, IL 606931337	Food Service	4,902,824
Reese Lower Patrick Scott 1910 Harrington Drive LANCASTER, PA 17601	Architect	1,159,797
Royall Company 1920 East Parham Road RICHMOND, VA 23228	Recruit Fulfillment	838,895
LSC Design 1110 E Princess St YORK, PA 17403	Design	309,964

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶22

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					
	b	Membership dues 1b					
	c	Fundraising events 1c	30,044				
	d	Related organizations . . . 1d	50,000				
	e	Government grants (contributions) 1e	1,376,141				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	4,445,429				
	g	Noncash contributions included in lines 1a-1f $ 524,021					
	h	**Total.** Add lines 1a-1f . . . . ▶		5,901,614			
Program Service Revenue			Business Code				
	2a	TUITION & FEES		84,459,162	84,459,162		
	b	AUXILLARY- ROOM, BOARD, BOOKS	611710	22,839,415	22,806,053	33,362	
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		107,298,577			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶		559,061		-20,521	579,582
	4	Income from investment of tax-exempt bond proceeds . . ▶		103,708			103,708
	5	Royalties . . . . ▶		0			
			(i) Real / (ii) Personal				
	6a	Gross rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss) . . . . ▶					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	7,086,250 /				
	b	Less cost or other basis and sales expenses	6,895,652 /				
	c	Gain or (loss)	190,598 /				
	d	Net gain or (loss) . . . . ▶		190,598			190,598
	8a	Gross income from fundraising events (not including $ 30,044 of contributions reported on line 1c) See Part IV, line 18 . . . a	74,025				
	b	Less direct expenses . . . b	66,070				
	c	Net income or (loss) from fundraising events . . ▶		7,955			7,955
	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 . . . ▶		0			
	10a	Gross sales of inventory, less returns and allowances . a	3,676,641				
	b	Less cost of goods sold . . b	3,555,995				
	c	Net income or (loss) from sales of inventory . . ▶		120,646	120,646		
		Miscellaneous Revenue	Business Code				
	11a	PARKING REVENUE	812930	270,174	270,174		
	b	CENTERS FOR EXCELLENCE, ENTREPRENEURIAL STUDIES	611710	86,237	86,237		
	c	LAUNDARY AND MISC VENDING	812300	357,527	357,527		
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . . . ▶		713,938			
	12	**Total revenue.** See Instructions . . . ▶		114,896,097	108,099,799	12,841	881,843

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)
Check if Schedule O contains a response to any question in this Part IX . . . . ☐

	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 United States See Part IV, line 21	321,778	321,778		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	13,456,840	13,456,840		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,379,350		1,379,350	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	38,893,263	31,635,047	6,199,393	1,058,823
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,699,847	2,200,975	424,124	74,748
9	Other employee benefits	8,661,745	7,054,728	1,368,844	238,173
10	Payroll taxes	2,840,442	2,309,655	453,637	77,150
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	165,648		165,648	
c	Accounting	93,385		93,385	
d	Lobbying	0			
e	Professional fundraising *See Part IV, line 17* . .	67,027			67,027
f	Investment management fees	117,030		117,030	
g	Other	1,208,266	705,911	413,872	88,483
12	Advertising and promotion	966,742	16,264	760,820	189,658
13	Office expenses	4,244,654	2,528,265	1,667,310	49,079
14	Information technology	2,593,868	2,143,202	446,664	4,002
15	Royalties . .	0			
16	Occupancy	5,900,506	5,682,441	135,592	82,473
17	Travel	753,159	632,760	65,195	55,204
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	3,596	897		2,699
20	Interest	3,700,304	3,699,839	465	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	9,966,542	9,676,994	174,996	114,552
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	MEAL PLAN EXPENSES	4,250,753	4,250,753		
b	ACADEMIC PROGRAMMING EXPENSES	965,911	965,911		
c	MISCELLANEOUS EXPENSES	2,170,648	1,071,195	1,061,282	38,171
d					
e					
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	105,421,304	88,353,455	14,927,607	2,140,242
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		11,498	1	11,729
	2	Savings and temporary cash investments		12,319,126	2	11,177,807
	3	Pledges and grants receivable, net		12,963,985	3	10,079,421
	4	Accounts receivable, net		1,192,115	4	1,247,677
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		229,387	7	230,698
	8	Inventories for sale or use		784,755	8	803,582
	9	Prepaid expenses and deferred charges		2,381,949	9	2,319,617
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 324,471,738			
	b	Less accumulated depreciation	10b 83,789,070	228,761,404	10c	240,682,668
	11	Investments—publicly traded securities		22,626,953	11	22,468,348
	12	Investments—other securities See Part IV, line 11		96,463,100	12	97,132,732
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		5,712,965	15	5,383,546
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		383,447,237	16	391,537,825
Liabilities	17	Accounts payable and accrued expenses		9,575,121	17	9,272,609
	18	Grants payable		0	18	0
	19	Deferred revenue		0	19	0
	20	Tax-exempt bond liabilities		96,796,404	20	95,152,353
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*		0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		150,620	23	230,653
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		16,767,531	25	18,339,593
	26	**Total liabilities.** Add lines 17 through 25		123,289,676	26	122,995,208
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		216,565,988	27	227,914,894
	28	Temporarily restricted net assets		18,747,366	28	15,680,914
	29	Permanently restricted net assets		24,844,207	29	24,946,809
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		260,157,561	33	268,542,617
	34	Total liabilities and net assets/fund balances		383,447,237	34	391,537,825

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	114,896,097
2	Total expenses (must equal Part IX, column (A), line 25)	2	105,421,304
3	Revenue less expenses Subtract line 2 from line 1	3	9,474,793
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	260,157,561
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-1,089,737
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	268,542,617

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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	2c	Yes	
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 ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b	Yes	

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SCHEDULE A
(Form 990 or 990EZ)

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

2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

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 **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?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

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	
Total									

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) | 12 |

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f)) | 14 |

15 Public Support Percentage for 2010 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2010.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

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

Part III **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I 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)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(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)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(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 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	**15**	
16 Public support percentage from 2010 Schedule A, Part III, line 15	**16**	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2011** (line 10c column (f) divided by line 13 column (f))	**17**	
18 Investment income percentage from **2010** Schedule A, Part III, line 17	**18**	

19a **33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

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

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

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

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

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

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶________

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, 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 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

(ii) Assets included in Form 990, Part X ▶ $ ________

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
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	63,525,903	53,896,242	49,107,450	67,798,781	
b Contributions	485,749	1,090,964	1,600,226	814,511	
c Investment earnings or losses	46,719	11,434,269	6,239,662	-16,149,873	
d Grants or scholarships	2,761,439	2,895,572	3,051,096	3,355,969	
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	61,296,932	63,525,903	53,896,242	49,107,450	

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

a Board designated or quasi-endowment ▶ 59 900 %

b Permanent endowment ▶ 40 100 %

c Term endowment ▶

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

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

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 property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		12,013,742		12,013,742
b Buildings		260,221,910	52,973,173	207,248,737
c Leasehold improvements				
d Equipment		44,014,895	30,815,897	13,198,998
e Other		8,221,191		8,221,191
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				240,682,668

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) DIVERSIFYING EQUITY	33,580,475	F
(B) US EQUITY SECURITIES	26,229,153	F
(C) NON US EQUITY SECURITIES	9,573,006	F
(D) US GOVERNMENT OBLIGATIONS	15,952,593	F
(E) PRIVATE EQUITY AND VENTURE CAP	7,508,126	F
(F) REAL ESTATE SECURITIES	3,987,211	F
(G) MONEY MARKET	162,141	F
(H) OTHER	140,027	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	97,132,732	

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
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

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

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

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

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	0
DEFERRED COMPENSATION	9,319,633
STUDENT ADVANCE PAYMENTS AND DEPOSITS	8,048,189
ADVANCES FROM FEDERAL GOVERNMENT	389,339
ANNUITIES PAYABLE	570,976
DEPOSITS HELD IN CUSTODY FOR OTHERS	11,456
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	18,339,593

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 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	114,896,097
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	105,421,304
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	9,474,793
4	Net unrealized gains (losses) on investments	4	-1,089,737
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-1,089,737
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	8,385,056

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	103,971,585
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-1,089,737		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	3,622,065		
e	Add lines **2a** through **2d**			2e	2,532,328
3	Subtract line **2e** from line **1**			3	101,439,257
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	13,456,840		
c	Add lines **4a** and **4b**			4c	13,456,840
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	114,896,097

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

1	Total expenses and losses per audited financial statements			1	95,586,529
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	3,622,065		
e	Add lines **2a** through **2d**			2e	3,622,065
3	Subtract line **2e** from line **1**			3	91,964,464
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	13,456,840		
c	Add lines **4a** and **4b**			4c	13,456,840
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	105,421,304

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
Intended Uses of Endowment Funds	Schedule D, Part V, Line 4	THE COLLEGE'S ENDOWMENT CONSISTS OF APPORXIMATELY 300 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING BOTH DONOR-RESRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS AS REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR IMPOSED RESTRICTIONS THE COLLEGE CLASSIFIES AS PERMANENTLY RESTRICTED NET ASSETS (A) THE ORIGINAL VALUE OF GIFTS DONATED TO THE PERMANENT ENDOWMENT, (B) THE ORIGINAL VALUE OF SUBSEQUENT GIFTS TO THE PERMANENT ENDOWMENT AND (C) ACCUMULATIONS TO THE PERMANENT ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR GIFT INSTRUMENT AT THE TIME THE ACCUMULATION IS ADDED TO THE FUND THE REMAINING PORTION OF THE DONOR RESTRICTED ENDOWMENT FUND THAT IS NOT CLASSIFIED IN THE PERMANENTLY RESTRICED NET ASSETS IS CLASSIFIED AS EITHER TEMPORARILY RESTRICTED OR UNRESTRICTED NET ASSETS BASED ON THE EXISTENCE OF DONOR RESTRICTIONS OR BY LAW SCHEDULE D, PART V, LINE 1C An adjustment of $66,716 for the fiscal year-ended June 30, 2012 (Column a) and an adjustment of $-104,229 for the fiscal year-ended June 30, 2011 (Column b) were added to the Endowment Funds' Net investment earnings, gains and losses to reflect the value of certain securities held by the Endowments that have values below cost
FIN 48 (ASC 740) FOOTNOTE INCOME TAXES	Schedule D, Part X, Line 2	The College is organized under Internal Revenue Code Section 501(c)(3), and therefore is exempt from income taxes on activities related to its exempt purpose In addition, the College has been determined by the Internal Revenue Service not to be a "private foundation" within the meaning of Section 509(a) of the Code The College accounts for uncertainty in income taxes using a recognition threshold of more-likely-than-not to be sustained upon examination by the appropriate taxing authority Measurement of the tax uncertainty occurs if the recognition threshold is met Management determined that there were no tax uncertainties that met the recognition threshold in 2012 and 2011 The College's policy is to recognize interest related to unrecognized tax benefits in interest expense and penalties in operating expenses No interest or penalties were recognized in 2012 or 2011 The College's federal Exempt Organization Business Income Tax Returns for the fiscal years ended June 30, 2011, 2010, and 2009 remain subject to examination by the Internal Revenue Service
Reconciliation of Revenue	Part XII Line 2d	Excluded from revenue is the cost of goods sold relating to the Bookstore of $3,555,995 and event revenue less event expense of $66,070
Reconciliation of Revenue	Part XII Line 4b	Amounts awarded to students for financial aid which were excluded from Revenues per the audited financial statements Total amount of revenue (offset) was $ 13,456,840
Reconciliation of Expenses	Part XIII Line 2d	Excluded from revenue is the cost of goods sold relating to the Bookstore of $3,555,995 and event revenue less event expense of $66,070
Reconciliation of Expenses	Part XIII Line 4b	Amounts awarded to students for financial aid which were excluded from revenues per the audited financial statements Total amount of revenue (offset) was $13,456,840

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

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**	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	**2**	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	**3**	Yes	
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	**4a**	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	**4b**	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	**4c**	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	**4d**	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	**5a**		No
b	Admissions policies?	**5b**		No
c	Employment of faculty or administrative staff?	**5c**		No
d	Scholarships or other financial assistance?	**5d**		No
e	Educational policies?	**5e**		No
f	Use of facilities?	**5f**		No
g	Athletic programs?	**5g**		No
h	Other extracurricular activities?	**5h**		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	**6a**	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	**6b**		No
	If you answered "Yes" to either line 6a or line 6b, explain on Part II			
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**	Yes	

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)

Identifier	Return Reference	Explanation
Racially Nondiscriminatory Policy	Schedule E Part I Line 3	All communications written and verbal affirm the nondiscrimination policy of the College
Financial aid or assistance from a governmental agency	Schedule E Part I Line 6	The College receives Federal and State grants that are normally available to an institution including Federal Workstudy, SEOG, National TEACH, National Science, HRSA Nursing, and Pennsylvania grants IAG, PHEAA, National Guard, Byrd, New Economy, Chafee, Path, Wage and others

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

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

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

a ☑ Mail solicitations
b ☑ Internet and e-mail solicitations
c ☑ Phone solicitations
d ☑ In-person solicitations
e ☑ Solicitation of non-government grants
f ☑ Solicitation of government grants
g ☑ Special fundraising events

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

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
WILSON BENNETT 206 Plaza Blvd Cabot, AR 72023	Phonathon		No	165,790	66,250	99,540
Total . . . . ▶				165,790	66,250	99,540

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

PA

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 Horse Show (event type)	(b) Event #2 (event type)	(c) Other Events 35 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	13,701		90,368	104,069
	2 Less Charitable contributions	3,500		26,544	30,044
	3 Gross income (line 1 minus line 2)	10,201		63,824	74,025
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	3,415		62,655	66,070
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(66,070)
	11 Net income summary Combine lines 3 and 10 in column (d) ▶				7,955

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ________ ☐ No	☐ Yes ________ ☐ No	☐ Yes ________ ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				( )
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities ____________

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain ____________

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain ____________

11 Does the organization operate gaming activities with nonmembers? . . . . Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . Yes No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

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

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________

c If "Yes," enter name and address

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Complete this part to provide additional information for responses to quuestion on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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.
▶ Attach to Form 990

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2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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) York City Police Department50 West King Street York,PA 17405	23-6001908		112,500		FMV		Partner with Campus Police to provide safety
(2) York Suburban School District1800 Hollywood Drive York,PA 17403	23-6005956		100,000		FMV		Donation in-lieu of tax for exempt property
(3) York City School District 50 West King Street York,PA 17405	23-6004284		55,625		FMV		Donation in-lieu of tax for exempt property
(4) Spring Garden Township 558 South Ogontz Street York,PA 17403	23-6003037		31,700		FMV		Donation in-lieu of tax for exempt property
(5) City of York50 West King Street York,PA 17405	23-6001908		21,953		FMV		Donation in-lieu of tax for exempt property

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 5

3 Enter total number of other organizations listed in the line 1 table . . . . ▶

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** 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) Unfunded merit and need based	4853	9,414,947		FMV	
(2) Permanent and Quasi-endowed	1601	2,348,792		FMV	
(3) Federal and State grants	286	631,096		FMV	
(4) York Country Day School	60	598,024		FMV	
(5) External sources	1760	418,909		FMV	
(6) Miscellaneous	245	45,072		FMV	

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

Identifier	**Return Reference**	**Explanation**
Monitoring the use of grant funds	Schedule I Part I Line 2	The assistance provided to governmental entities is in the form of donations in-lieu of real estate taxes The amounts are intended to help fund services normally provided by the entities

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

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2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

Part I Questions Regarding Compensation

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

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(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) DR GEORGE W WALDNER	(i)	381,147	0	34,490	147,250	65,116	628,003	0
	(ii)	0	0	0	0	0	0	0
(2) C MATTHEW SMITH	(i)	193,461	0	5,576	33,950	18,733	251,720	0
	(ii)	0	0	0	0	0	0	0
(3) KENNETH MARTIN	(i)	179,512	0	1,524	18,150	7,619	206,805	0
	(ii)	0	0	0	0	0	0	0
(4) NATHANIEL COFFMAN	(i)	149,436	0	2,355	15,475	46,203	213,469	0
	(ii)	0	0	0	0	0	0	0
(5) DOMINIC DELLICARPINI	(i)	146,210	0	276	14,863	22,870	184,219	0
	(ii)	0	0	0	0	0	0	0
(6) STACEY DAMMANN	(i)	179,424	0	134	8,271	240	188,069	0
	(ii)	0	0	0	0	0	0	0
(7) DANIEL HELWIG	(i)	167,061	0	2,415	16,900	18,644	205,020	0
	(ii)	0	0	0	0	0	0	0
(8) SARDARI KHANNA	(i)	152,549	0	1,928	12,660	20,769	187,906	0
	(ii)	0	0	0	0	0	0	0
(9) SMITH BRUCE	(i)	145,175	0	1,813	12,225	16,456	175,669	0
	(ii)	0	0	0	0	0	0	0
(10) FRANK MUSSANO	(i)	141,750	0	792	38,300	1,146	181,988	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
HOUSING ALLOWANCE	Schedule J Part I Line 1a	The PRESIDENT OF THE COLLEGE, DR GEORGE WALDNER, AND THE HEADMASTER OF YORK COUNTRY DAY SCHOOL, NATHANIEL COFFMAN, ARE REQUIRED BY EMPLOYMENT AGREEMENT TO LIVE ON CAMPUS IN HOMES PROVIDED BY THE COLLEGE Accordingly, the value of this housing is not included in the computation of taxable compensation pursuent to I R C Section 119
TRAVEL FOR COMPANIONS	Schedule J Part I Line 1a	THE BOARD OF DIRECTORS APPROVED IN ADVANCE TRAVEL FOR THE PRESIDENT'S SPOUSE WHEN THE PRESIDENT TRAVELED ON OFFICIAL COLLEGE BUSINESS
TAX INDEMNIFICATION AND GROSS-UP PAYMENTS	Schedule J Part I Line 1a	THE PRESIDENT OF THE COLLEGE HAS USE OF A CAR THE PERSONAL USE OF THE VEHICLE AND RELATED TAX REIMBURSMENT IS INCLUDED IN THE PRESIDENT'S taxable amounts on FORM W-2
HEALTH & SOCIAL CLUB DUES/INITATION FEES	Schedule J Part I Line 1a	THE COLLEGE MAINTAINS A MEMBERSHIP IN A COUNTRY CLUB, ITS USE BY THE COLLEGE IS PRIMARILY FOR BUSINESS PURPOSES
WRITTEN POLICY	Schedule J Part I Line 1b	ALL BENEFITS LISTED IN ITEM 1 ARE DETAILED IN THE EMPLOYMENT CONTRACT
PROCESS OF DETERMINING COMPENSATION	Schedule J, Part I, Line 3	THE METHODS THAT YORK COLLEGE OF PENNSYLVANIA USES TO DETERMINE COMPENSATION INCLUDE COMPENSATION COMMITTEE, WRITTEN EMPLOYMENT CONTRACT, COMPENSATION SURVEY/STUDY, AND APPROVAL BY THE BOARD OR COMPENSATION COMMITTEE PLEASE REFER TO SCHEDULE O FOR A MORE DETAILED DESCRIPTION OF THE COLLEGE'S PROCESS OF DETERMINING COMPENSATION
NONQUALIFIED RETIREMENT PLAN	SCHEDULE J PART I LINE 4	THE PRESIDENT OF THE COLLEGE, DR GEORGE W WALDNER, PARTICIPATES IN A SUPPLEMENTAL NONQUALIFIED 457(F) RETIREMENT PLAN DURING FISCAL YEAR 2012, $100,750 OF THE PRESIDENT'S COMPENSATION WAS DEFERRED INTO THE 457(F) PLAN ALL SENIOR ADMINISTRATORS ARE ELIGIBLE TO PARTICIPATE IN A SUPPLEMENTAL NONQUALIFIED 457(B) DEFERRED COMPENSATION PLAN DURING FISCAL YEAR 2012, THE PRESIDENT, CFO (C MATTHEW SMITH) AND DEAN OF ADMINISTRATIVE SERVICES (FRANK MUSSANO) DEFERRED $22,000, $13,100 AND $22,000, RESPECTIVELY, OF THEIR COMPENSATION INTO THE 457(B) PLAN

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

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2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased Yes	(g) Defeased No	(h) On Behalf of Issuer Yes	(h) On Behalf of Issuer No	(i) Pool financing Yes	(i) Pool financing No
A	PENNSYLVANIA HIGHER EDUCATION FACILITIES AUTHORITY	23-2243852	70917NC28	02-12-2004	10,721,841	NEW HEALTH AND FITNESS CENTER		X		X		X
B	PENNSYLVANIA HIGHER EDUCATION FACILITIES AUTHORITY	23-2243852	70917NC51	03-01-2004	9,200,000	NEW HEALTH AND FITNESS CENTER		X		X		X
C	PENNSYLVANIA HIGHER EDUCATION FACILITIES AUTHORITY	23-2243852	70917N8U1	11-22-2005	32,689,842	NEW DORMITORIES, NEW HEALTH AND FI		X		X		X
D	GENERAL AUTHORITY OF SOUTH EASTERN PA	23-2982233	84129NFD6	06-05-2007	17,061,253	HUMANITIES/THEATER/DORM		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	1,860,000	600,000	2,805,000	260,000
2	Amount of bonds defeased	0	0	0	0
3	Total proceeds of issue	10,916,771	9,421,100	34,614,128	17,647,556
4	Gross proceeds in reserve funds	805,972	0	2,188,378	1,609,135
5	Capitalized interest from proceeds	32,334	0	89,021	0
6	Proceeds in refunding escrow	0	0	0	0
7	Issuance costs from proceeds	153,193	133,226	354,892	221,357
8	Credit enhancement from proceeds	221,471	39,721	451,505	227,003
9	Working capital expenditures from proceeds	0	0	0	0
10	Capital expenditures from proceeds	9,687,773	9,248,153	31,530,335	15,591,004
11	Other spent proceeds	0	0	0	0
12	Other unspent proceeds	0	0	0	0
13	Year of substantial completion	2004	2005	2007	2008

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

Part III Private Business Use

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

Part III **Private Business Use** *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
3a	Are there any management or service contracts that may result in private business use?		X		X		X		X
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any 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 %		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 ▶								
6	Total of lines 4 and 5								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X		X	

Part IV **Arbitrage**

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D 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?		X		X	X			X
2	Is the bond issue a variable rate issue?		X	X			X		X
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X		X		X		X
b	Name of provider	0		0		0			
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?	X			X	X		X	
b	Name of provider	AIG-redeemed		0		TrinityPlus		Citigroup-redeemed	
c	Term of GIC	25 7				27 9		29 9	
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X				X		X	
5	Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
6	Did the bond issue qualify for an exception to rebate?	X		X			X	X	

Part V **Procedures To Undertake Corrective Action**

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations . . . . ☐ Yes ☑ No

Part VI **Supplemental Information**

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

Identifier	Return Reference	Explanation

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

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

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

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

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

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

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

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

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	No
(1) Robert A Kinsley	Principal & YCP Trustee	15,645,123	Independent contractor		No
(2) Laura T Wand	VP JCI & YCP Trustee	2,443,398	JCI supplies HVAC equip		No
(3) John D Brown	Principal & YCP Trustee	328,379	Independent contractor		No
(4) Jeffrey Hines	Principal & YCP Trustee	174,500	President of water utility		No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	SCHEDULE L, PART V	DURING THE YEARS ENDED JUNE 30, 2012 AND 2011, THE COLLEGE PAID APPROXIMATELY $16,000,000 AND $23,000,000 RESPECTIVELY, TO CONSTRUCTION AND ARCHITECTURAL DESIGN COMPANIES OWNED BY A BOARD MEMBER OF THE COLLEGE AS OF JUNE 30, 2012 AND 2011, APPROXIMATELY $1,482,000 AND $3,091,000 RESPECTIVELY, WERE PAYABLE TO THESE COMPANIES
ROBERT KINSLEY		ROBERT KINSLEY IS THE CHAIRMAN OF KINSLEY CONSTRUCTION AND A MEMBER OF YORK COLLEGE OF PENNSYLVANIA'S BOARD OF TRUSTEES KINSLEY CONSTRUCTION IS AN INDEPENDENT BUILDING CONTRACTOR WHICH SERVED AS THE GENERAL CONTRACTOR FOR SEVERAL PROJECTS INCLUDING THE RENOVATION OF THE BUSINESS ADMINISTRATION AND NURSING BUILDINGS DURING FISCAL YEAR 2012
LAURA WAND		LAURA WAND IS THE VICE PRESIDENT OF PRODUCT MANAGEMENT AT JOHNSON CONTROLS, INC AND A MEMBER OF YORK COLLEGE OF PENNSYLVANIA'S BOARD OF TRUSTEES JOHNSON CONTROLS, INC PROVIDED HVAC EQUIPMENT AND SERVICE ON SEVERAL ACADEMIC AND RESIDENTIAL BUILDINGS AT YORK COLLEGE DURING FISCAL YEAR 2012
JOHN BROWN		JOHN BROWN IS THE CHIEF EXECUTIVE OFFICER OF BLOCKHOUSE COMPANY, INC AND A MEMBER OF YORK COLLEGE OF PENNSYLVANIA'S BOARD OF TRUSTEES BLOCKHOUSE IS AN INDEPENDENT CONTRACTOR THAT SUPPLIED DORMITORY RELATED FURNITURE TO YORK COLLEGE DURING FISCAL YEAR 2012
JEFFREY HINES		JEFFREY HINES IS THE PRESIDENT OF YORK WATER COMPANY AND A MEMBER OF YORK COLLEGE OF PENNSYLVANIA'S BOARD OF TRUSTEES DURING FISCAL YEAR 2012, YORK WATER COMPANY PROVIDED WATER UTILITY TO THE COLLEGE

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art				
2 Art—Historical treasures .				
3 Art—Fractional interests . .				
4 Books and publications . .				
5 Clothing and household goods				
6 Cars and other vehicles . .				
7 Boats and planes				
8 Intellectual property . . .				
9 Securities—Publicly traded .	X	9	453,419	FMV
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous . .				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . . .				
15 Real estate—Residential .				
16 Real estate—Commercial . .				
17 Real estate—Other . . .				
18 Collectibles	X	1	6,268	FMV
19 Food inventory . . .				
20 Drugs and medical supplies .				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens . .				
24 Archeological artifacts . . .				
25 Other ▶ (NOTE FORGIVENESS)	X	1	53,000	FMV
26 Other ▶ (EQUIPMENT)	X	1	11,334	FMV
27 Other ▶(____________)				
28 Other ▶ (____________)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . **29** 23

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

Part II

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

Identifier	Return Reference	Explanation

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

Identifier	Return Reference	Explanation
Preparation of Form 990	Form 990, Part VI, Line 11b	THE IRS Form 990 IS PREPARED INTERNALLY AND REVIEWED BY THE CHIEF FINANCIAL OFFICER (CFO) THE CFO THEN FORWARDS THE FORM 990 TO ITS INDEPENDENT AUDIT FIRM FOR REVIEW THE FORM 990 IS DISTRIBUTED TO MEMBERS OF THE FINANCE & AUDIT COMMITTEE FOR REVIEW AND IS DISCUSSED AND APPROVED FOR FILING THE COMPLETED FORM 990 IS MADE AVAILABLE TO THE ENTIRE BOARD OF TRUSTEES FOR A ONE-WEEK COMMENT PERIOD PRIOR TO FILING SIGNIFICANT CHANGES MADE AS A RESULT OF THE REVIEW PROCESS ARE APPROVED BY THE FINANCE AND AUDIT COMMITTEE AND THE INDEPENDENT AUDIT FIRM PRIOR TO SIGNING AND FILING

Identifier	Return Reference	Explanation
Conflict of Interest Policy Monitoring & Enforcement	Form 990, Part VI, Line 12c	THE COLLEGE'S CONFLICT OF INTEREST POLICY INCLUDES A REQUIREMENT THAT NO TRUSTEE, OFFICER, OR KEY EMPLOYEE SHALL BECOME INVOLVED DIRECTLY OR INDIRECTLY IN ANY BUSINESS RELATIONSHIP OR TRANSACTION WITH THE COLLEGE OR RECEIVE A SUBSTANTIAL BENEFIT (5% OR MORE OWNERSHIP IN AN ORGANIZATION THAT RECEIVES $10,000 OR MORE ANNUALLY) FROM THE COLLEGE, WITHOUT DISCLOSING THE INTEREST IN SUCH RELATIONSHIP EACH TRUSTEE, OFFICER, OR KEY EMPLOYEE SHALL HAVE THE OBLIGATION TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST THAT SUCH INDIVIDUAL MAY HAVE DURING HIS OR HER TENURE IN OFFICE THIS OBLIGATION INCLUDES RELATIONSHIPS MAINTAINED BY MEMBERS OF THE INDIVIDUAL'S FAMILIES THE COLLEGE REQUIRES EACH TRUSTEE, OFFICER, OR KEY EMPLOYEE COMPLETE AN ANNUAL CONFLICT OF INTEREST STATEMENT THESE STATEMENTS ARE REVIEWED TO IDENTIFY POTENTIAL CONFLICTS THE BACKGROUNDS AND ORGANIZATIONAL AFFILIATIONS OF EACH INDIVIDUAL ARE WELL KNOWN AND UNDERSTOOD BY INDIVIDUALS RESPONSIBLE FOR PROCUREMENT AND REPORTING TRUSTEES AND OFFICERS ARE NOT ALLOWED TO VOTE ON THE APPROVAL OF CONTRACTS WITH ORGANIZATIONS TO WHICH THEY ARE AFFILIATED THE COLLEGE-WIDE CONFLICT OF INTEREST POLICY COVERS ALL FACULTY, ADMINISTRATION AND STAFF THIS POLICY EMPHASIZES AMONGST OTHER REQUIREMENTS, "THE FUNDAMENTAL OBLIGATION OF DISCLOSING IN WRITING (TO HIS/HER SUPERVISOR OR DEPARTMENT CHAIRPERSON) ANY RELATIONSHIP WHICH MAY BE OR APPEAR TO BE A CONFLICT OF INTEREST" EACH EMPLOYEE IS REQUIRED TO PERIODICALLY ACKNOWLEDGE, UNDERSTAND, ACCEPT AND AGREE TO COMPLY WITH THE INFORMATION CONTAINED IN THE CONFLICT OF INTEREST POLICY FAILURE TO COMPLY WITH THE COLLEGE'S POLICY CONSTITUTES GROUNDS FOR DISCIPLINARY ACTION, UP TO AND INCLUDING DISCHARGE OF EMPLOYMENT THE COLLEGE PERIODICALLY REVIEWS VENDOR PURCHASING DATA TO PROPERLY ACCUMULATE AND REPORT TRANSACTIONS THAT OCCUR WITH RELATED PARTIES

Identifier	Return Reference	Explanation
Process for Determining Compensation	Form 990, Part VI, Line 15b	THE COMPENSATION OF THE PRESIDENT OF THE COLLEGE IS DETERMINED BY THE GOVERNANCE COMMITTEE OF THE BOARD OF TRUSTEES THE GOVERNANCE COMMITTEE IS RESPONSIBLE FOR, AMONG OTHER THINGS, "AN ANNUAL EVALUATION OF THE PRESIDENT, REPORTING THE CONCLUSIONS OF THAT EVALUATION TO THE BOARD OF TRUSTEES, ALONG WITH ITS RECOMMENDATION REGARDING REAPPOINTMENT AND COMPENSATION" THE GOVERNANCE COMMITTEE EVALUATES THE PERFORMANCE OF THE PRESIDENT BY REVIEWING SUCCESS IN ACHIEVING ANNUAL GOALS SET AT THE BEGINNING OF THE FISCAL YEAR THE COMMITTEE CONSULTS COMPARABILITY DATA OF THE COMPENSATION COMPONENTS AND RANGES OF OTHER COLLEGE PRESIDENTS IN SIMILAR SIZED COLLEGES AND UNIVERSITIES IN SIMILAR GEOGRAPHIC AREAS THE RESULTS OF THIS REVIEW ARE DOCUMENTS IN COMMITTEE MINUTES AND THE RESULTING RECOMMENDATION IS APPROVED BY THE ENTIRE BOARD OF TRUSTEES THE PRESIDENT EVALUATES THE PERFORMANCE OF OTHER KEY EMPLOYEES OF THE COLLEGE. THE PRESIDENT EVALUATES THE PERFORMANCE OF EACH KEY EMPLOYEE BY REVIEWING SUCCESS IN ACHIEVING ANNUAL GOALS SET AT THE BEGINNING OF EACH FISCAL YEAR THE PRESIDENT CONSULTS COMPARABILITY DATA OF THE COMPENSATION COMPONENTS AND RANGES OF OTHER INDIVIDUALS WITH SIMILAR RESPONSIBILITIES IN SIMILAR SIZED COLLEGES AND UNIVERSITIES IN SIMILAR GEOGRAPHIC AREAS COMPENSATION OF KEY EMPLOYEES IS EFFECTIVELY APPROVED BY THE BOARD OF TRUSTEES AS PART OF THE ANNUAL BUDGETING PROCESS

Identifier	Return Reference	Explanation
How Documents are Made Available to the Public	Form 990, Part VI, Line 19	THE COLLEGE WILL MAKE THE GOVERNING DOCUMENT, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
Other Changes in Net Assets or Fund Balances	Form 990, Part XI, Line 5	UNREALIZED LOSS ON INVESTMENT $ (1,089,737) ------------- TOTAL OTHER CHANGES IN NET ASSETS $ (1,089,737) =============

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
York College of Pennsylvania

Employer identification number
23-1352698

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization Yes	No
(1) THE HUBER FOUNDATION 441 COUNTRY CLUB ROAD YORK, PA 17403 36-7514239	BENEFIT YCP	PA	501(C)(3)	11	NA		No

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

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

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	**(b)** Transaction type(a-r)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1) THE HUBER FOUNDATION	c	50,000	Check
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 23-1352698
Name: York College of Pennsylvania

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

(A) Name and Title	(B) Average hours per week	(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			
JOHN BARTMAN BOARD MEMBER	15	X						0	0	0
JOHN D BROWN BOARD MEMBER	15	X						0	0	0
ANTHONY P CAMPISI BOARD MEMBER	15	X						0	0	0
JOSEPH R CROSSWHITE BOARD MEMBER	15	X						0	0	0
ROBERT A DELP BOARD MEMBER	10	X						0	0	0
CYRIL C DUNMIRE JR BOARD MEMBER	10	X						0	0	0
DOROTHY FISCHER BOARD MEMBER	10	X						0	0	0
DEBRA A GOODLING KIME BOARD MEMBER	10	X						0	0	0
RICHARD C HOGENTOGLER BOARD MEMBER	15	X						0	0	0
ROBERT A KINSLEY BOARD MEMBER	10	X						0	0	0
KENNETH KOCHENOUR BOARD MEMBER	10	X						0	0	0
DEBORAH MCMILLAN MD BOARD MEMBER	15	X						0	0	0
ROBERT E MEHMET JR BOARD MEMBER	10	X						0	0	0
J CHRISTOPHER MICHAEL BOARD MEMBER	10	X						0	0	0
SHARON E MYERS BOARD MEMBER	10	X						0	0	0
SCOTT W RINEHART BOARD MEMBER	10	X						0	0	0
JOHN M SCHRANTZ BOARD MEMBER	10	X						0	0	0
GEORGE A SHORB BOARD MEMBER	10	X						0	0	0
ROBERT L SIMPSON BOARD MEMBER	10	X						0	0	0
CARL J VIZZI BOARD MEMBER	10	X						0	0	0
LAURA WAND BOARD MEMBER	10	X						0	0	0
BRIAN K WELKER BOARD MEMBER	10	X						0	0	0
CONSTANCE L WOLF BOARD MEMBER	10	X						0	0	0
EDWARD D YATES BOARD MEMBER	10	X						0	0	0
MORTON F ZIFFERER JR BOARD MEMBER	15	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
GEORGE H GLATFELTER II CHAIRMAN	1 5	X		X				0	0	0
WILLIAM S SHIPLEY III VICE CHAIRMAN	1 5	X		X				0	0	0
JEFFREY R HINES SECRETARY	1 5	X		X				0	0	0
ROBERT S FREED TREASURER	1 5	X		X				0	0	0
DR GEORGE W WALDNER PRESIDENT	37 5			X				415,637	0	212,366
C MATTHEW SMITH CFO	37 5			X				199,037	0	52,683
KENNETH MARTIN DEAN OF CAMPUS OPERATIONS	37 5				X			181,036	0	25,769
NATHANIEL COFFMAN HEADMASTER	37 5				X			151,791	0	61,678
DOMINIC DELLICARPINI ACADEMIC DEAN	37 5				X			146,486	0	37,733
STACEY DAMMANN PROFESSOR	37 5					X		179,558	0	8,511
DANIEL HELWIG DEAN OF ADVANCEMENT	37 5					X		169,476	0	35,544
SARDARI KHANNA PROFESSOR	37 5					X		154,477	0	33,429
SMITH BRUCE PROFESSOR	37 5					X		146,988	0	28,681
FRANK MUSSANO DEAN OF ADMIN SERVICES	37 5					X		142,542	0	39,446

Additional Data

Software ID:
Software Version:
EIN: 23-1352698
Name: York College of Pennsylvania

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

(a) Description of security or cateory (including name of security)	**(b)**Book value	**(c)** Method of valuation Cost or end-of-year market value
DIVERSIFYING EQUITY	33,580,475	F
US EQUITY SECURITIES	26,229,153	F
NON US EQUITY SECURITIES	9,573,006	F
US GOVERNMENT OBLIGATIONS	15,952,593	F
PRIVATE EQUITY AND VENTURE CAP	7,508,126	F
REAL ESTATE SECURITIES	3,987,211	F
MONEY MARKET	162,141	F
OTHER	140,027	F