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Form 990

Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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  
KING'S COLLEGE

Doing Business As

Number and street (or P O box if mail is not delivered to street address)  
133 NORTH RIVER STREET

Room/suite

City or town, state or country, and ZIP + 4  
WILKESBARRE, PA 18711

F Name and address of principal officer  
JOHN J RYAN CSC  
133 NORTH RIVER STREET  
WILKESBARRE,PA 18711

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.KINGS.EDU

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1946

M State of legal domicile PA

Part I	Summary																																																								
Activities & Governance	<div><div>1</div><div>Briefly describe the organization's mission or most significant activities PROVIDES STUDENTS WITH A LIBERAL ARTS EDUCATION ENABLING THEM TO LEAD MEANINGFUL &amp; SATISFYING LIVES</div></div>																																																								
Revenue	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>																																																								
	<table><tr><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td>3</td><td>40</td></tr><tr><td>4</td><td>Number of independent voting members of the governing body (Part VI, line 1b)</td><td>4</td><td>37</td></tr><tr><td>5</td><td>Total number of individuals employed in calendar year 2011 (Part V, line 2a)</td><td>5</td><td>1,597</td></tr><tr><td>6</td><td>Total number of volunteers (estimate if necessary)</td><td>6</td><td>0</td></tr><tr><td>7a</td><td>Total unrelated business revenue from Part VIII, column (C), line 12</td><td>7a</td><td>169,844</td></tr><tr><td>7b</td><td>Net unrelated business taxable income from Form 990-T, line 34</td><td>7b</td><td>-7,940</td></tr></table>	3	Number of voting members of the governing body (Part VI, line 1a)	3	40	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	37	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	1,597	6	Total number of volunteers (estimate if necessary)	6	0	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	169,844	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	-7,940																																
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Expenses	<table><tr><td>8</td><td>Contributions and grants (Part VIII, line 1h)</td><td>Prior Year</td><td>Current Year</td></tr><tr><td>9</td><td>Program service revenue (Part VIII, line 2g)</td><td>3,273,777</td><td>7,613,673</td></tr><tr><td>10</td><td>Investment income (Part VIII, column (A), lines 3, 4, and 7d )</td><td>70,407,280</td><td>73,018,972</td></tr><tr><td>11</td><td>Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>3,554,825</td><td>2,355,339</td></tr><tr><td>12</td><td>Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td>66,953</td><td>94,062</td></tr><tr><td>13</td><td>Grants and similar amounts paid (Part IX, column (A), lines 1–3 )</td><td>77,302,835</td><td>83,082,046</td></tr><tr><td>14</td><td>Benefits paid to or for members (Part IX, column (A), line 4)</td><td>24,295,903</td><td>26,344,159</td></tr><tr><td>15</td><td>Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td><td>0</td><td>0</td></tr><tr><td>16a</td><td>Professional fundraising fees (Part IX, column (A), line 11e)</td><td>33,917,858</td><td>36,117,296</td></tr><tr><td>b</td><td>Total fundraising expenses (Part IX, column (D), line 25) ▶1,345,018</td><td>22,299</td><td>2,356</td></tr><tr><td>17</td><td>Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)</td><td></td><td></td></tr><tr><td>18</td><td>Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</td><td>19,439,915</td><td>19,035,423</td></tr><tr><td>19</td><td>Revenue less expenses Subtract line 18 from line 12</td><td>77,675,975</td><td>81,499,234</td></tr><tr><td></td><td></td><td>-373,140</td><td>1,582,812</td></tr></table>	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	9	Program service revenue (Part VIII, line 2g)	3,273,777	7,613,673	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d )	70,407,280	73,018,972	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,554,825	2,355,339	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	66,953	94,062	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3 )	77,302,835	83,082,046	14	Benefits paid to or for members (Part IX, column (A), line 4)	24,295,903	26,344,159	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0	16a	Professional fundraising fees (Part IX, column (A), line 11e)	33,917,858	36,117,296	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,345,018	22,299	2,356	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)			18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	19,439,915	19,035,423	19	Revenue less expenses Subtract line 18 from line 12	77,675,975	81,499,234			-373,140	1,582,812
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Net Assets or Fund Balances		Beginning of Current Year	End of Year																																																						
	20	Total assets (Part X, line 16)	147,006,226	145,642,545																																																					
	21	Total liabilities (Part X, line 26)	47,807,016	48,760,736																																																					
	22	Net assets or fund balances Subtract line 21 from line 20	99,199,210	96,881,809																																																					

Part II

Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

JOHN J RYAN CSC PRESIDENT

Date

2013-04-17

Preparer's signature

EDWARD A KOLLAR CPA EA

Firm's name (or yours if self-employed), address, and ZIP + 4

PARENTEBEARD LLC  
46 PUBLIC SQUARE SUITE 400  
WILKESBARRE, PA 18701

Date

2013-04-17

Check if self-employed

☐

Preparer's taxpayer identification number (see instructions)

P00012018

EIN

▶ 23-2932984

Phone no

▶ (570) 820-0100

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)

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

KING'S COLLEGE, A CATHOLIC COLLEGE IN THE HOLY CROSS TRADITION, PROVIDES STUDENTS WITH A BROAD-BASED LIBERAL ARTS EDUCATION WHICH OFFERS THE INTELLECTUAL, MORAL, AND SPIRITUAL PREPARATION THAT ENABLES THEM TO LEAD MEANINGFUL AND SATISFYING LIVES

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 \$ 72,119,483 including grants of \$ 26,344,159 ) (Revenue \$ 72,886,001 )

KING'S COLLEGE IS A NOT-FOR-PROFIT EDUCATIONAL INSTITUTION WHICH PROVIDES UNDERGRADUATE, GRADUATE AND PROFESSIONAL EDUCATION TO ITS STUDENTS THE COLLEGE WAS FOUNDED IN 1946 AND WELCOMES STUDENTS INTO ITS COMMUNITY WITHOUT REGARD TO GENDER, RACE, RELIGION, DISABILITY OR NATIONAL ORIGIN, AND SEEKS TO ASSIST TALENTED STUDENTS OF MODEST FINANCIAL MEANS THE COLLEGE HAS APPROXIMATELY 2,600 STUDENTS, OF WHOM 2,020 ARE FULL-TIME UNDERGRADUATES APPROXIMATELY 93% OF THE COLLEGE'S PRESENT FULL-TIME UNDERGRADUATE STUDENT BODY IS COMPRISED OF RESIDENTS FROM PENNSYLVANIA, NEW YORK, AND NEW JERSEY DURING THE YEAR ENDED JUNE 30, 2012, THE COLLEGE PROVIDED STUDENT FINANCIAL AID FROM INTERNAL RESOURCES OF APPROXIMATELY \$25,228,000

4b

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

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 \$ 72,119,483

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 	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	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		No
4	<b>Section 501(c)(3) organizations.</b> 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		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		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 		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 		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 		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 		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 	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, line 10? If "Yes," complete Schedule D, Part VI. 	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. 	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. 		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. 		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	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. 	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 	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 		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?		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		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		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		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		No
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	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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements		

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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	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? <i>If "Yes," complete Schedule J</i> . . . . .	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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i> . . . . .	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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34		No
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

<b>Part V</b> <b>Statements Regarding Other IRS Filings and Tax Compliance</b>					
Check if Schedule O contains a response to any question in this Part V <input checked="" type="checkbox"/>					
		<b>Yes</b>	<b>No</b>		
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	<b>1a</b>	45		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	<b>1b</b>	0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>1c</b>			
<b>2a</b>	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return. .	<b>2a</b>	1,597		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	<b>2b</b>	Yes		
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	Yes		
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	<b>3b</b>	Yes		
<b>4a</b>	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)?	<b>4a</b>	Yes		
<b>b</b>	If "Yes," enter the name of the foreign country: <u>    EI , SW , CJ , BD    </u> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>			No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>			No
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>			
<b>6a</b>	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?	<b>6a</b>			No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b>	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?	<b>7a</b>	Yes		
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	Yes		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>			No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year.	<b>7d</b>			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>			No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>			No
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>			No
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>			No
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			<b>8</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b>	Did the organization make any taxable distributions under section 4966?	<b>9a</b>			
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter				
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12.	<b>10a</b>			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	<b>10b</b>			
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter				
<b>a</b>	Gross income from members or shareholders.	<b>11a</b>			
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	<b>11b</b>			
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?			<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>12b</b>			
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> 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.	<b>13a</b>			
<b>b</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.	<b>13b</b>			
<b>c</b>	Enter the aggregate amount of reserves on hand.	<b>13c</b>			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>			No
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	<b>14b</b>			

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	40		
b	Enter the number of voting members included in line 1a, above, who are independent . . . . .	1b	37
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	Yes
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	Yes
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	Yes
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	Yes
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	No
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	

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed <b>PA</b> . . . . .
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. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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. <b>THOMAS GRABER CPA 133 NORTH RIVER STREET WILKESBARRE, PA 187110801 (570) 208-5837</b>

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

**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 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

[illegible]



## Part VII

<b>1b</b>	<b>Sub-Total</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A</b>			
<b>d</b>	<b>Total (add lines 1b and 1c)</b>	1,065,150	0	175,852

**2** Total number of individuals (including but not limited to those listed in Item 1) who received or accrued more than \$100,000 of reportable compensation from the organization. 16

<b>3</b>	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>3</b>		No
<b>4</b>	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b>	Yes	
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>		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
SORDONI CONSTRUCTION SERVICES 45 OWEN STREET FORTY FORT, PA 18704	CONSTRUCTION SERVICES	4,541,973
PANZITTA ENTERPRISES 72 GEORGE AVENUE WILKESBARRE, PA 18705	CONSTRUCTION SERVICES	587,600
EASTERN PROVINCE OF HOLY CROSS 835 CLINTON AVENUE BRIDGEPORT, CT 06604	ADMINISTRATIVE & FACULTY	570,240
ELITE UNDERWRITING SERVICES 191 SHEREE BLVD EXTON, PA 19341	INSURANCE PLAN/CONSULTING	388,499
SODEXHO 4880 PAYSHERE CIRCLE CHICAGO, IL 60674	FACILITIES AND DINING SERVICE MANAGEMENT	343,668
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization <b>17</b>		

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	35,375				
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e	3,031,235				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	4,547,063				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f . . . . .		7,613,673				
Program Service Revenue			Business Code					
	2a	STUDENT TUITION & FEES	611600	61,083,394	61,083,394			
	b	AUXILIARY (ROOM/BOARD)	721310	11,923,314	11,776,718	146,596		
	c	SPORTS TEAM INCOME	711210	9,142	9,142			
	d	THEATRE ADMISSION	711110	3,122	3,122			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .		73,018,972				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .		2,134,981			2,134,981	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties . . . . .						
	6a	(i) Real		(ii) Personal				
		Gross rents	223,743					
		b Less rental expenses	139,237					
		c Rental income or (loss)	84,506					
	d	Net rental income or (loss) . . . . .		84,506		23,248	61,258	
	7a	(i) Securities		(ii) Other				
		Gross amount from sales of assets other than inventory	14,051,756					
		b Less cost or other basis and sales expenses	13,831,398					
		c Gain or (loss)	220,358					
	d	Net gain or (loss) . . . . .		220,358			220,358	
	8a	Gross income from fundraising events (not including \$ 35,375 of contributions reported on line 1c) See Part IV, line 18 . . . . .						
	a		10,425					
	b	Less direct expenses . . . . .	b	14,494				
	c	Net income or (loss) from fundraising events . .		-4,069			-4,069	
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .						
	a							
	b	Less direct expenses . . . . .	b					
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances . . . . .	a					
a								
b	Less cost of goods sold . . . . .	b						
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue		Business Code						
11a	MISCELLANEOUS	900009	10,688	10,688				
b	FINES (LIBRARY & PRKG)	812930	2,937	2,937				
c								
d	All other revenue . . . . .							
e	Total. Add lines 11a-11d . . . . .		13,625					
12	Total revenue. See Instructions . . . . .		83,082,046	72,886,001	169,844	2,412,528		

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				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	26,344,159	26,344,159		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	221,727		221,727	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	26,247,225	21,995,563	3,593,794	657,868
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,951,868	1,628,916	274,233	48,719
9	Other employee benefits	5,900,448	4,998,128	613,110	289,210
10	Payroll taxes	1,796,028	1,498,860	252,338	44,830
11	Fees for services (non-employees)				
a	Management				
b	Legal	44,286		44,286	
c	Accounting	92,815		92,815	
d	Lobbying				
e	Professional fundraising See Part IV, line 17	2,356			2,356
f	Investment management fees				
g	Other	1,563,176	905,164	645,880	12,132
12	Advertising and promotion	372,649	360,721	9,878	2,050
13	Office expenses	3,010,470	2,267,919	640,463	102,088
14	Information technology	889,795	657,757	210,363	21,675
15	Royalties				
16	Occupancy	3,524,456	3,044,040	442,056	38,360
17	Travel	706,735	656,912	36,151	13,672
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	126,273	102,017	20,498	3,758
20	Interest	1,202,166	1,186,446	15,720	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,536,777	3,147,732	353,678	35,367
23	Insurance	431,163	131,085	300,078	
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	FOOD	2,028,312	1,921,277	56,519	50,516
b	ATHLETIC TEAM EXPENSES	364,837	364,837		
c	DUES AND SUBSCRIPTIONS	312,241	174,915	125,791	11,535
d	REPAIRS AND MAINTENANCE	262,646	249,811	12,727	108
e					
f	All other expenses	566,626	483,224	72,628	10,774
25	Total functional expenses. Add lines 1 through 24f	81,499,234	72,119,483	8,034,733	1,345,018
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			130,866	1	115,961
	2	Savings and temporary cash investments . . . . .			1,607,522	2	571,837
	3	Pledges and grants receivable, net . . . . .			5,132,588	3	5,288,107
	4	Accounts receivable, net . . . . .			2,111,596	4	3,683,408
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .				6	
	7	Notes and loans receivable, net . . . . .			2,585,777	7	2,534,066
	8	Inventories for sale or use . . . . .			29,474	8	36,639
	9	Prepaid expenses and deferred charges . . . . .			354,334	9	42,029
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a	134,695,779			
	b	Less: accumulated depreciation . . . . .	10b	51,205,899	79,012,186	10c	83,489,880
	11	Investments—publicly traded securities . . . . .			34,169,292	11	1,079,349
	12	Investments—other securities. See Part IV, line 11 . . . . .			15,000,835	12	42,354,802
	13	Investments—program-related. See Part IV, line 11 . . . . .				13	
	14	Intangible assets . . . . .				14	
	15	Other assets. See Part IV, line 11 . . . . .			6,871,756	15	6,446,467
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .			147,006,226	16	145,642,545
Liabilities	17	Accounts payable and accrued expenses . . . . .			3,885,115	17	4,338,835
	18	Grants payable . . . . .				18	
	19	Deferred revenue . . . . .			1,671,500	19	2,026,008
	20	Tax-exempt bond liabilities . . . . .			33,480,000	20	31,995,000
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .				22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .			180,000	23	120,000
	24	Unsecured notes and loans payable to unrelated third parties . . . . .			3,000,000	24	2,735,545
	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 . . . . .			5,590,401	25	7,545,348
	26	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .			47,807,016	26	48,760,736
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>						
	27	Unrestricted net assets . . . . .			53,141,048	27	50,595,044
	28	Temporarily restricted net assets . . . . .			17,273,966	28	16,103,442
	29	Permanently restricted net assets . . . . .			28,784,196	29	30,183,323
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>						
	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	<b>Total net assets or fund balances</b> . . . . .			99,199,210	33	96,881,809
	34	<b>Total liabilities and net assets/fund balances</b> . . . . .			147,006,226	34	145,642,545

Part XI Reconciliation 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	83,082,046
2	Total expenses (must equal Part IX, column (A), line 25)	2	81,499,234
3	Revenue less expenses Subtract line 2 from line 1	3	1,582,812
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	99,199,210
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-3,900,213
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	96,881,809

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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	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	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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> 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?	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	Yes	

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 KING'S COLLEGE	Employer identification number 24-0804602
--	--

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 Se**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

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

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(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	<b>33 1/3% support test—2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	<b>33 1/3% support test—2010.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization	<input type="checkbox"/>
17a	<b>10%-facts-and-circumstances test—2011.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>
b	<b>10%-facts-and-circumstances test—2010.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization	<input type="checkbox"/>
18	<b>Private Foundation</b> If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions	<input type="checkbox"/>

Part IIIPart 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)

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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.

Name of the organization  
KING'S COLLEGE

Employer identification number  
24-0804602

Part I

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

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

Part II

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)  
☐ Preservation of land for public use (e g , recreation or 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
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

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
1c	
1d	
1e	
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 . . . . .	55,315,775	48,432,886	44,686,604	61,779,947	
b Contributions . . . . .	3,560,210	1,085,136	1,508,921	1,610,755	
c Investment earnings or losses . . . . .	-75,944	7,869,667	4,500,781	-16,834,873	
d Grants or scholarships . . . . .	1,596,142	2,071,914	2,263,420	1,869,225	
e Other expenditures for facilities and programs . . . . .	7,500,000				
f Administrative expenses . . . . .					
g End of year balance . . . . .	49,703,899	55,315,775	48,432,886	44,686,604	

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

- a

Board designated or quasi-endowment ▶ 16 000 %
- b

Permanent endowment ▶ 84 000 %
- 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 . . . . .		16,448,335		16,448,335
b Buildings . . . . .		83,227,377	33,432,953	49,794,424
c Leasehold improvements . . . . .				
d Equipment . . . . .		28,120,900	17,213,773	10,907,127
e Other . . . . .		6,899,167	559,173	6,339,994
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .				83,489,880



Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	83,082,046
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	81,499,234
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,582,812
4	Net unrealized gains (losses) on investments	4	-1,590,009
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-2,310,204
9	Total adjustments (net) Add lines 4 - 8	9	-3,900,213
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,317,401

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements . . . . .	1	57,993,292
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	-25,227,990
e	Add lines 2a through 2d . . . . .	2e	-25,227,990
3	Subtract line 2e from line 1 . . . . .	3	83,221,282
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	-139,236
c	Add lines 4a and 4b . . . . .	4c	-139,236
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	83,082,046

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements . . . . .	1	60,310,693
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	4,039,449
e	Add lines 2a through 2d . . . . .	2e	4,039,449
3	Subtract line 2e from line 1 . . . . .	3	56,271,244
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	25,227,990
c	Add lines 4a and 4b . . . . .	4c	25,227,990
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	81,499,234

Part XIVSupplemental 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
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	PART V, LINE 4 THE COLLEGE'S ENDOWMENT IS USED TO PROVIDE SCHOLARSHIPS TO STUDENTS AND PROVIDE FUNDS TO OFFSET FACULTY SALARIES AND DEVELOPMENT COSTS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	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 WHEN THE RECOGNITION THRESHOLD IS MET. MANAGEMENT HAS DETERMINED THAT THERE WERE NO TAX UNCERTAINTIES THAT MET THE RECOGNITION THRESHOLD IN FISCAL YEAR 2012 AND 2011. THE COLLEGE'S POLICY IS TO RECOGNIZE INTEREST RELATED TO UNRECOGNIZED TAX BENEFITS IN INTEREST EXPENSE AND PENALTIES IN OPERATING EXPENSES. THE COLLEGE'S FEDERAL EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURNS FOR THE YEARS ENDED JUNE 30, 2011, 2010, AND 2009 REMAIN SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE.
PART XI, LINE 8 - OTHER ADJUSTMENTS		UNREALIZED LOSSES ON INTEREST RATE SWAPS - 1,913,918. CHANGES IN BENEFICIAL INTEREST IN PERPETUAL TRUSTS -396,286. TOTAL TO SCHEDULE D, PART XI, LINE 8 -2,310,204
PART XII, LINE 2D - OTHER ADJUSTMENTS		INSTITUTIONALLY FUNDED FINANCIAL AID -25,227,990
PART XII, LINE 4B - OTHER ADJUSTMENTS		RENTAL EXPENSES -139,236
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSES 139,236. UNREALIZED LOSS ON INTEREST RATE SWAPS 1,913,918. CHANGES IN BENEFICIAL INTEREST IN PERPETUAL TRUSTS 396,286. NET UNREALIZED LOSSES ON INVESTMENTS 1,590,009
PART XIII, LINE 4B - OTHER ADJUSTMENTS		INSTITUTIONALLY FUNDED FINANCIAL AID 25,227,990

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  
KING'S COLLEGE

Employer identification number  
24-0804602

Part I		YES	NO
<div>1</div> 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	Yes	
	3		No
	4a	Yes	
<div>2</div> 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?	4b	Yes	
	4c	Yes	
	4d	Yes	
	5a		No
<div>3</div> 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			

**Part III 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
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE COLLEGE'S BROADCAST ADVERTISEMENTS DO NOT SPECIFICALLY INCLUDE ITS NONDISCRIMINATION POLICIES. THESE POLICIES ARE EXPLICITLY STATED IN ALL PRINTED BROCHURES, CATALOGS, AND ON THE COLLEGE'S WEBSITE.
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	KING'S COLLEGE RECEIVES OPERATING FUNDS DESIGNATED BY GOVERNMENT FUNDING AGENCIES FOR PARTICULAR OPERATING PURPOSES. CERTAIN STUDENTS OF THE COLLEGE WERE RECIPIENTS OF GRANTS UNDER THE PENNSYLVANIA HIGHER EDUCATION ASSISTANCE ACT. THE COLLEGE ACTS AS THE CUSTODIAN AND DISBURSING AGENT FOR THESE FUNDS.

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  
KING'S COLLEGE

Employer identification number  
24-0804602

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?		(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
		Yes	No			
Total . . . . . ▶						

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.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2011



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	(b) Event #2	(c) Other Events	(d) Total Events
		FATHER FARBER GOLF TOURNAMENT (event type)	(event type)	(total number)	(Add col (a) through col (c))
Revenue	1	Gross receipts . . . .	45,800		45,800
	2	Less Charitable contributions . . . .	35,375		35,375
	3	Gross income (line 1 minus line 2) . . . .	10,425		10,425
Direct Expenses	4	Cash prizes . . . .	0		
	5	Non-cash prizes . . .	3,588		3,588
	6	Rent/facility costs . .	7,897		7,897
	7	Food and beverages . .			
	8	Entertainment . . . .			
	9	Other direct expenses .	3,009		3,009
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶			
	11	Net income summary Combine lines 3 and 10 in column (d) . . . . . ▶			

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 . . . .	<input type="checkbox"/> Yes _____ <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ <input type="checkbox"/> 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 question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
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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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
KING'S COLLEGE

Employer identification number  
24-0804602

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

2

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

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) COLLEGE ENDOWED SCHOLARSHIPS	2015	26,227,159			
(2) EPAT GRANT, SCHOLARSHIP	5	110,000			
(3) HOLY CROSS MISSION DEVELOPMENT SCHOLARSHIP	7	7,000			

**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
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE COLLEGE'S FINANCIAL AID OFFICE EVALUATES EACH STUDENT'S FINANCIAL NEED, AS DETERMINED THROUGH INFORMATION PROVIDED ON THE STUDENT FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) MANAGEMENT AWARDS MERIT SCHOLARSHIPS TO INDIVIDUALS THAT QUALIFY, BASED ON DONOR STIPULATIONS (I E SPECIFIC MAJORS, LOCALITY, ETC ) AND AWARDS FEDERAL, STATE, AND PRIVATE NEED BASED AWARDS TO PROVIDE ADDITIONAL RESOURCES TO STUDENTS FOR THEIR HIGHER EDUCATION INDIVIDUALS RECEIVING AWARDS ARE ON CAMPUS AND MEET WITH FINANCIAL AID COUNSELORS TO ENSURE STUDENTS ARE IN FACT WITHIN THE U S

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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.

Name of the organization  
KING'S COLLEGE

Employer identification number  
24-0804602

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div> <div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision 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		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div></div> <div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
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	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued 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) LISA MARIE MCCAULEY	(i)	152,332	0	0	15,701	7,156	175,189	0
	(ii)	0	0	0	0	0	0	0
(2) DR BERNARD HEALEY	(i)	159,971	0	0	10,205	3,834	174,010	0
	(ii)	0	0	0	0	0	0	0
(3) NICHOLAS HOLODICK EDD	(i)	157,338	0	0	14,512	3,831	175,681	0
	(ii)	0	0	0	0	0	0	0
(4) BARRY WILLIAMS CPA JD	(i)	131,761	0	0	11,657	6,687	150,105	0
	(ii)	0	0	0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**Part III**   **Supplemental Information**

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	THE COLLEGE PAID THE INITIATION FEES AND MONTHLY DUES MEMBERSHIPS FOR FR JOHN RYAN, C S C , DR NICHOLAS HOLODICK, AND DR LISA MARIE MCCAULEY TO THE WESTMORELAND CLUB. THE WESTMORELAND CLUB IS A NON-PROFIT SOCIAL CLUB USED BY MEMBERS OF MANAGEMENT TO HOST MEETINGS WITH BUSINESS PARTNERS OF THE COLLEGE, BOARD MEMBERS, POTENTIAL DONORS, FACULTY AND STAFF. FR JOHN RYAN, C S C , DR NICHOLAS HOLODICK, AND DR LISA MARIE MCCAULEY WERE NOT TAXED ON THE MEMBERSHIP DUES PAID BY THE COLLEGE ON THEIR BEHALF.
	PART I, LINE 1B	THE EXPENSES INCURRED AT THE WESTMORELAND CLUB ARE SUBJECT TO THE DOCUMENTATION REQUIREMENTS OF THE COLLEGE.

<b>Schedule K (Form 990)</b>	<b>Supplemental Information on Tax Exempt Bonds</b> ▶ <b>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).</b> ▶ <b>Attach to Form 990. ▶ See separate instructions.</b>	OMB No 1545-0047
		<b>2011</b>
		<b>Open to Public Inspection</b>

Name of the organization KING'S COLLEGE	<b>Employer identification number</b> 24-0804602
--	---

Part I Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A PA HIGHER EDUCATIONAL FACILITIES AUTHORITY	23-2243852	70917NVQ4	06-01-2003	10,500,000	TO FINANCE CLOSNG OF N FRNKLN ST, MISC CAPITAL PROJ, PAY ISS COSTS, ADV RFND		X		X		X
B CITY OF WILKES-BARRE FINANCE AUTHORITY	20-5684698	968250AA8	05-01-2007	12,000,000	TO FINANCE RENOV OF STUDENT RES HALLS & GYM, ACQ OF CAP EQPT, SITE IMPRVMTS		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds defeased								
3	Total proceeds of issue	11,036,340		12,000,000					
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrow	9,893,131							
7	Issuance costs from proceeds	120,606		167,205					
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	1,024,962		12,018,547					
11	Other spent proceeds								
12	Other unspent proceeds								
13	Year of substantial completion	2003		2008		YesNoYesNo			
		Yes	No	Yes	No				
14	Were the bonds issued as part of a current refunding issue?	X			X				
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?	X		X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use

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



Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?	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?	X		X					
c	Are there any research agreements that may result in private business use of bond-financed property?		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								
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					

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?	X		X					
2	Is the bond issue a variable rate issue?	X		X					
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		X		X				
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		X		X				
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X		X				
6	Did the bond issue qualify for an exception to rebate?	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
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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  
KING'S COLLEGE

Employer identification number  
24-0804602

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?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	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
See Additional Data Table					

Part V

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

Identifier	Return Reference	Explanation
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Additional Data

Software ID:  
Software Version:  
EIN: 24-0804602  
Name: KING'S COLLEGE

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(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
CHARLES PARENTE	DIRECTOR	193,912	LACKAWANNA AMERICAN INSURANCE (LAI) MAINTAINS THE COLLEGE'S WORKERS COMPENSATION POLICY LAI IS A WHOLLY OWNED SUBSIDIARY OF LACKAWANNA CASUALTY COMPANY (LCC) LCC IS OWNED BY PAGNOTTI ENTERPRISES MR PARENTE IS A MINORITY OWNER AND OFFICER OF PAGNOTTI ENTERPRISES ALL TRANSACTIONS WITH LACKAWANNA CASUALTY COMPANY AND PAGNOTTI ENTERPRISES WERE CONDUCTED AT ARM'S LENGTH		No
GERTRUDE C MCGOWAN ESQ	DIRECTOR	149,204	MS MCGOWAN IS A VICE PRESIDENT OF FIRST PRIORITY HEALTH FIRST PRIORITY PROCESSES MEDICAL CLAIMS ON BEHALF OF THE COLLEGE THE PAYMENT AMOUNT REPRESENTS AN ADMINISTRATIVE FEE PAID THE COLLEGE IS SELF INSURED AND PAYS ALL MEDICAL CLAIMS ALL TRANSACTIONS WITH FIRST PRIORITY HEALTH WERE CONDUCTED AT ARM'S LENGTH		No
SCOTT HENRY	DIRECTOR	118,000	MR HENRY IS THE OWNER OF MARTZ TRAILWAYS THE COLLEGE PAID MARTZ TRAILWAYS FOR TRANSPORTATION SERVICES ALL TRANSACTIONS WITH MARTZ TRAILWAYS WERE CONDUCTED AT ARM'S LENGTH		No
CHARLES PARENTE	DIRECTOR	4,541,973	MR PARENTE IS A MINORITY OWNER OF SORDONI CONSTRUCTION SERVICES, INC THE COLLEGE PAID CONSTRUCTION RELATED COSTS TO SORDONI CONSTRUCTION SERVICES, INC IN CONNECTION WITH THE CONSTRUCTION OF A NEW AUXILIARY GYMNASIUM ALL TRANSACTIONS WITH SORDONI CONSTRUCTION SERVICES, INC WERE CONDUCTED AT ARM'S LENGTH		No
CHARLES PARENTE	DIRECTOR	1,660,451	MR PARENTE IS A LIMITED PARTNER OF FRIENDS OF KING'S, LLP, WHICH IS A PARTNER OF RPG KING'S, LP THE COLLEGE ENTERED INTO A LEASE AGREEMENT WITH RPG KING'S, LP, IN CONJUNCTION WITH A MULTIUSE BUILDING ADJACENT TO THE COLLEGE'S CAMPUS THE BUILDING CONSISTS PRIMARILY OF STUDENT HOUSING AND VARIOUS RETAIL SUITES THE DISCLOSED AMOUNT REFLECTS THE CASH PAID BY THE COLLEGE TO RPG KING'S, LP IN CONJUNCTION WITH THE STATED LEASE AGREEMENT, INCLUDING REIMBURSABLE COSTS THE ORIGINAL LEASE TERM IS THIRTY YEARS, WITH A PURCHASE OPTION AVAILABLE AFTER SEVEN YEARS		No
MARK DECESARIS	VICE CHAIRMAN	1,660,451	MR DECESARIS IS A LIMITED PARTNER OF FRIENDS OF KING'S, LLP, WHICH IS A PARTNER OF RPG KING'S, LP THE COLLEGE ENTERED INTO A LEASE AGREEMENT WITH RPG KING'S, LP, IN CONJUNCTION WITH A MULTIUSE BUILDING ADJACENT TO THE COLLEGE'S CAMPUS THE BUILDING CONSISTS PRIMARILY OF STUDENT HOUSING AND VARIOUS RETAIL SUITES THE DISCLOSED AMOUNT REFLECTS THE CASH PAID BY THE COLLEGE TO RPG KING'S, LP IN CONJUNCTION WITH THE STATED LEASE AGREEMENT, INCLUDING REIMBURSABLE COSTS THE ORIGINAL LEASE TERM IS THIRTY YEARS, WITH A PURCHASE OPTION AVAILABLE AFTER SEVEN YEARS		No
MICHAEL MOLEWSKI	DIRECTOR	1,660,451	MR MOLEWSKI IS A LIMITED PARTNER OF FRIENDS OF KING'S, LLP, WHICH IS A PARTNER OF RPG KING'S, LP THE COLLEGE ENTERED INTO A LEASE AGREEMENT WITH RPG KING'S, LP, IN CONJUNCTION WITH A MULTIUSE BUILDING ADJACENT TO THE COLLEGE'S CAMPUS THE BUILDING CONSISTS PRIMARILY OF STUDENT HOUSING AND VARIOUS RETAIL SUITES THE DISCLOSED AMOUNT REFLECTS THE CASH PAID BY THE COLLEGE TO RPG KING'S, LP IN CONJUNCTION WITH THE STATED LEASE AGREEMENT, INCLUDING REIMBURSABLE COSTS THE ORIGINAL LEASE TERM IS THIRTY YEARS, WITH A PURCHASE OPTION AVAILABLE AFTER SEVEN YEARS		No
RICHARD PINOLA	DIRECTOR	1,660,451	MR PINOLA IS A LIMITED PARTNER OF FRIENDS OF KING'S, LLP, WHICH IS A PARTNER OF RPG KING'S, LP THE COLLEGE ENTERED INTO A LEASE AGREEMENT WITH RPG KING'S, LP, IN CONJUNCTION WITH A MULTIUSE BUILDING ADJACENT TO THE COLLEGE'S CAMPUS THE BUILDING CONSISTS PRIMARILY OF STUDENT HOUSING AND VARIOUS RETAIL SUITES THE DISCLOSED AMOUNT REFLECTS THE CASH PAID BY THE COLLEGE TO RPG KING'S, LP IN CONJUNCTION WITH THE STATED LEASE AGREEMENT, INCLUDING REIMBURSABLE COSTS THE ORIGINAL LEASE TERM IS THIRTY YEARS, WITH A PURCHASE OPTION AVAILABLE AFTER SEVEN YEARS		No
EBERHARD FABER	DIRECTOR	1,660,451	MR FABER IS A LIMITED PARTNER OF FRIENDS OF KING'S, LLP, WHICH IS A PARTNER OF RPG KING'S, LP THE COLLEGE ENTERED INTO A LEASE AGREEMENT WITH RPG KING'S, LP, IN CONJUNCTION WITH A MULTIUSE BUILDING ADJACENT TO THE COLLEGE'S CAMPUS THE BUILDING CONSISTS PRIMARILY OF STUDENT HOUSING AND VARIOUS RETAIL SUITES THE DISCLOSED AMOUNT REFLECTS THE CASH PAID BY THE COLLEGE TO RPG KING'S, LP IN CONJUNCTION WITH THE STATED LEASE AGREEMENT, INCLUDING REIMBURSABLE COSTS THE ORIGINAL LEASE TERM IS THIRTY YEARS, WITH A PURCHASE OPTION AVAILABLE AFTER SEVEN YEARS		No
JAMES GETZ	DIRECTOR	1,660,451	MR GETZ IS A LIMITED PARTNER OF FRIENDS OF KING'S, LLP, WHICH IS A PARTNER OF RPG KING'S, LP THE COLLEGE ENTERED INTO A LEASE AGREEMENT WITH RPG KING'S, LP, IN CONJUNCTION WITH A MULTIUSE BUILDING ADJACENT TO THE COLLEGE'S CAMPUS THE BUILDING CONSISTS PRIMARILY OF STUDENT HOUSING AND VARIOUS RETAIL SUITES THE DISCLOSED AMOUNT REFLECTS THE CASH PAID BY THE COLLEGE TO RPG KING'S, LP IN CONJUNCTION WITH THE STATED LEASE AGREEMENT, INCLUDING REIMBURSABLE COSTS THE ORIGINAL LEASE TERM IS THIRTY YEARS, WITH A PURCHASE OPTION AVAILABLE AFTER SEVEN YEARS		No
Y JUDD SHOVAL	DIRECTOR EMERITUS	1,660,451	MR SHOVAL IS A LIMITED PARTNER OF FRIENDS OF KING'S, LLP, WHICH IS A PARTNER OF RPG KING'S, LP THE COLLEGE ENTERED INTO A LEASE AGREEMENT WITH RPG KING'S, LP, IN CONJUNCTION WITH A MULTIUSE BUILDING ADJACENT TO THE COLLEGE'S CAMPUS THE BUILDING CONSISTS PRIMARILY OF STUDENT HOUSING AND VARIOUS RETAIL SUITES THE DISCLOSED AMOUNT REFLECTS THE CASH PAID BY THE COLLEGE TO RPG KING'S, LP IN CONJUNCTION WITH THE STATED LEASE AGREEMENT, INCLUDING REIMBURSABLE COSTS THE ORIGINAL LEASE TERM IS THIRTY YEARS, WITH A PURCHASE OPTION AVAILABLE AFTER SEVEN YEARS		No
JOHN O'BRIEN	DIRECTOR	1,660,451	MR O'BRIEN IS A LIMITED PARTNER OF FRIENDS OF KING'S, LLP, WHICH IS A PARTNER OF RPG KING'S, LP THE COLLEGE ENTERED INTO A LEASE AGREEMENT WITH RPG KING'S, LP, IN CONJUNCTION WITH A MULTIUSE BUILDING ADJACENT TO THE COLLEGE'S CAMPUS THE BUILDING CONSISTS PRIMARILY OF STUDENT HOUSING AND VARIOUS RETAIL SUITES THE DISCLOSED AMOUNT REFLECTS THE CASH PAID BY THE COLLEGE TO RPG KING'S, LP IN CONJUNCTION WITH THE STATED LEASE AGREEMENT, INCLUDING REIMBURSABLE COSTS THE ORIGINAL LEASE TERM IS THIRTY YEARS, WITH A PURCHASE OPTION AVAILABLE AFTER SEVEN YEARS		No

**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  
KING'S COLLEGE**Employer identification number**

24-0804602

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	ATTY JOE KLUGER (DIRECTOR) AND ATTY ALLAN KLUGER (DIRECTOR EMERITUS) HAVE A FAMILY RELATIONSHIP MARK DECESARIS (VICE CHAIRMAN), EBERHARD FABER (DIRECTOR), AND CHARLES PARENTE (DIRECTOR) HAVE BUSINESS RELATIONSHIPS REV DAVID TYSON, C S C IS THE PROVINCIAL OF THE U S PROVINCE OF HOLY CROSS THE PRESIDENT OF KING'S COLLEGE, FR JOHN J RYAN, C S C (ALONG WITH ALL OTHER PRIESTS AND BROTHERS ON CAMPUS) ARE MEMBERS OF THE EASTERN PROVINCE OF HOLY CROSS THE PRIESTS THAT ARE MEMBERS OF THE BOARD OF DIRECTORS MAY ALSO BE MEMBERS OF THE EASTERN PROVINCE MR BENJAMIN SHOVAL (DIRECTOR) AND Y JUDD SHOVAL (DIRECTOR EMERITUS) HAVE A FAMILY RELATIONSHIP

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 3	THE MANAGEMENT OF THE DINING SERVICES AND FACILITIES DEPARTMENTS ARE CONTRACTED OUT TO SODEXO THE RESPECTIVE MANAGERS FROM SODEXO REPORT TO THE COLLEGE'S CFO AND ULTIMATE DECISION MAKING RESTS WITH THE CFO, INCLUDING PERSONNEL DECISIONS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE MEMBERS OF THE CORPORATION OF KING'S COLLEGE INCLUDE ALL FULL-FLEDGED MEMBERS OF THE CONGREGATION OF HOLY CROSS WHOSE OFFICIAL ASSIGNMENT IS DIRECTLY RELATED TO KING'S COLLEGE. THE MEMBERS MEET AT LEAST ANNUALLY AND AS OFTEN AS DEEMED NECESSARY BY THE MEMBERS, CORPORATE OFFICERS OR BOARD OF DIRECTORS.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS OF THE CORPORATION, THROUGH CONSULTATION WITH VARIOUS BOARD COMMITTEES, ELECT THE BOARD OF DIRECTORS. THE BOARD OF DIRECTORS ACTS AS THE GOVERNING BODY OF THE COLLEGE.



Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PROVIDED TO THE COLLEGE'S AUDIT COMMITTEE, IN DRAFT FORM, DURING A REGULARLY SCHEDULED MEETING. THE INFORMATION PRESENTED TO THE COMMITTEE MEMBERS IS PROVIDED TO THEM ONE WEEK PRIOR TO THE MEETING DATE. THE COMMITTEE MEMBERS REVIEW THE 990 INDIVIDUALLY AND RAISE QUESTIONS AND CONCERNS REGARDING THE INFORMATION PRESENTED TO MANAGEMENT DURING THE MEETING. FOLLOWING DISCUSSION, MEMBERS OF THE COMMITTEE VOTE TO AUTHORIZE THE COLLEGE'S MANAGEMENT TO SUBMIT THE FORM 990, AS PRESENTED OR WITH IDENTIFIED CHANGES. FOLLOWING THE APPROVAL BY THE AUDIT COMMITTEE THE FINAL FORM 990 IS DISTRIBUTED TO EACH BOARD MEMBER AND ANY CONCERNS ARE ADDRESSED AS NECESSARY.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE ASSISTANT SECRETARY OF THE BOARD DISTRIBUTES, EXPLAINS, AND COLLECTS COMPLETED CONFLICT OF INTEREST STATEMENTS. THESE STATEMENTS ARE REVIEWED BY THE BUSINESS OFFICE WHO OBTAINS ADDITIONAL INFORMATION, IF REQUIRED. THE CHAIRMAN OF THE BOARD ATTENDS ALL BOARD MEETINGS WHERE ACTIONS ARE VOTED ON TO ENSURE INDIVIDUALS WITH POTENTIAL CONFLICTS OF INTEREST DO NOT PROVIDE COMMENTARY OR PARTICIPATE IN THE EVALUATION OF THE TRANSACTION. THESE INDIVIDUALS ARE ALSO FORBIDDEN TO VOTE ON ACTIONS WHERE POTENTIAL CONFLICTS ARE PRESENT.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE COLLEGE'S BOARD OF DIRECTORS CONTAINS AN EXECUTIVE COMPENSATION COMMITTEE TO DETERMINE THE COMPENSATION OF THE CEO AND VARIOUS VICE PRESIDENTS. COMPENSATION IS BASED ON AN EVALUATION OF SALARIES PAID TO INDIVIDUALS AT COMPARABLE INSTITUTIONS OF HIGHER EDUCATION, WITHIN SIMILAR GEOGRAPHICAL REGIONS. THIS INFORMATION IS ACCUMULATED THROUGH DATA PUBLISHED BY THE EASTERN ASSOCIATION OF COLLEGE AND UNIVERSITY BUSINESS OFFICERS (EACUBO). FOLLOWING REVIEW OF COMPARABLE DATA, THE CEO PREPARES PERFORMANCE EVALUATIONS ON THE VARIOUS VICE PRESIDENTS WITHIN THE COLLEGE, BASED ON ESTABLISHED CRITERIA. THE CEO SUBMITS SALARY RECOMMENDATIONS FOR THESE POSITIONS TO THE BOARD'S EXECUTIVE COMPENSATION COMMITTEE FOR ULTIMATE APPROVAL. THE CEO PERFORMANCE EVALUATION IS PERFORMED BY THE EXECUTIVE COMPENSATION COMMITTEE AND A SALARY RECOMMENDATION IS PRESENTED AND APPROVED FOLLOWING THAT PROCESS.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 18	FORM 990, PART VI, SECTION C, LINE 18 THE COLLEGE MAINTAINS PUBLIC INSPECTION COPIES OF FORMS 990 AND FORM 990-T IN THE COLLEGE'S BUSINESS OFFICE DURING REGULARLY SCHEDULED HOURS FURTHER, A COPY OF THE FORM 990 IS AVAILABLE ON THE WORLD WIDE WEB AT WWW GUIDESTAR.ORG

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	FORM 990, PART VI, SECTION C, LINE 19 THE COLLEGE DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY , OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -1,590,009 UNREALIZED LOSSES ON INTEREST RATE SWAPS -1,913,918 CHANGES IN BENEFICIAL INTEREST IN PERPETUAL TRUSTS -396,286 TOTAL TO FORM 990, PART XI, LINE 5 -3,900,213

Identifier	Return Reference	Explanation
	FORM 990, PART XI, LINE 2C	THERE HAS BEEN NO CHANGE IN THE SELECTION OR OVERSIGHT OF THE INDEPENDENT AUDITORS. THE COLLEGE PUBLICLY BID THEIR AUDIT SERVICES DURING THE SPRING OF 2006. AT THAT TIME, THE EXISTING AUDITOR WAS RETAINED AS THE INDEPENDENT AUDITORS OF THE COLLEGE BASED ON RECOMMENDATION OF THE COMMITTEE. THE AUDIT COMMITTEE MEETS THREE TIMES A YEAR.

Form

4562

Depreciation and Amortization  
(Including Information on Listed Property)

OMB No 1545-0172

2011

Attachment  
Sequence No 179

Department of the Treasury  
Internal Revenue Service (99)

See separate instructions. Attach to your tax return.

Name(s) shown on return KING'S COLLEGE	Business or activity to which this form relates  FORM 990 PAGE 10	Identifying number  24-0804602
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Part I Election to Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	500,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7 Listed property Enter the amount from line 29	7		
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8		
9 Tentative deduction Enter the smaller of line 5 or line 8	9		
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10		
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11		
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12		
13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12	13		

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions )

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A		
17 MACRS deductions for assets placed in service in tax years beginning before 2011	17	3,536,777
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System						
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System					
20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year			40 yrs	MM	S/L

Part IV Summary (see instructions)

21 Listed property Enter amount from line 28	21	
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	3,536,777
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	



Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)  
**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input type="checkbox"/> No						24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No			
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost	
25Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)							25		
26 Property used more than 50% in a qualified business use									
		%							
		%							
		%							
27 Property used 50% or less in a qualified business use									
		%			S/L -				
		%			S/L -				
		%			S/L -				
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1						28			
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29		

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person  
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year ( <b>do not</b> include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions )		
<b>Note:</b> If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2011 tax year (see instructions)					
43 Amortization of costs that began before your 2011 tax year				43	
44 <b>Total.</b> Add amounts in column (f) See the instructions for where to report				44	

Additional Data

Software ID:  
Software Version:  
EIN: 24-0804602  
Name: KING'S COLLEGE

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			
MR THOMAS R SMITH CHAIRMAN	1 00	X		X				0	0	0
MR MARK DECESARIS VICE-CHAIRMAN	1 00	X		X				0	0	0
MRS KAREN KEEFER SECRETARY	1 00	X		X				0	0	0
MR RICHARD A ALLEY MD DIRECTOR	1 00	X						0	0	0
MRS MADGE BENOVITZ DEC'D DIRECTOR	1 00	X						0	0	0
REV THOMAS E CHAMBERS DIRECTOR	1 00	X						0	0	0
BRO RICHARD DALY CSC DIRECTOR	1 00	X						0	0	0
REV JOHN F DENNING DIRECTOR	1 00	X						0	0	0
MR EBERHARD FABER DIRECTOR	1 00	X						0	0	0
MRS JANE B FEINSTEIN DIRECTOR	1 00	X						0	0	0
MR JAMES F GETZ DIRECTOR	1 00	X						0	0	0
MR SCOTT HENRY DIRECTOR	1 00	X						0	0	0
DR JONATHAN P HOSEY DIRECTOR	1 00	X						0	0	0
JOSEPH E KLUGER ESQ DIRECTOR	1 00	X						0	0	0
MS KATHLEEN MCCARTHY LAMBERT DIRECTOR	1 00	X						0	0	0
GERTRUDE C MCGOWAN ESQ DIRECTOR	1 00	X						0	0	0
MR MICHAEL D MOLEWSKI DIRECTOR	1 00	X						0	0	0
MR TIMOTHY J MORRIS DIRECTOR	1 00	X						0	0	0
MR JOHN G NACKLEY DIRECTOR	1 00	X						0	0	0
MR JOHN D O'BRIEN DIRECTOR	1 00	X						0	0	0
MR JAMES T O'HARA ESQ DIRECTOR	1 00	X						0	0	0
MR CHARLES E PARENTE DIRECTOR	1 00	X						0	0	0
MR RICHARD J PINOLA DIRECTOR	1 00	X						0	0	0
REV MARK L POORMAN CSC PHD DIRECTOR	1 00	X						0	0	0
MR DONALD B POPE-DAVIS PHD DIRECTOR	1 00	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)						(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			
REV JAMES L REBETA DIRECTOR	1 00	X						0	0	0
MRS VIRGINIA S ROSE DIRECTOR	1 00	X						0	0	0
MR DAVID SCHANKWEILER DIRECTOR	1 00	X						0	0	0
MR JAMES V SCHNEIDER DIRECTOR	1 00	X						0	0	0
MS CATHERINE J SERAFIN ESQ DIRECTOR	1 00	X						0	0	0
MR BENJAMIN W SHOVAL DIRECTOR	1 00	X						0	0	0
MS PATRICIA E SINEX DIRECTOR	1 00	X						0	0	0
REV KEVIN P SPICER CSC PHD DIRECTOR	1 00	X						0	0	0
BRO DONALD STABROWSKI CSC DIRECTOR	1 00	X						0	0	0
MR WALTER TISCHER DIRECTOR	1 00	X						0	0	0
MR GLENN W TYRANSKI DIRECTOR	1 00	X						0	0	0
REV DAVID T TYSON CSC DIRECTOR	1 00	X						0	0	0
DR BARBARA E WALL DIRECTOR	1 00	X						0	0	0
REV OLIVER F WILLIAMS CSC DIRECTOR	1 00	X						0	0	0
REV JOHN L YOUNG CSC MD DIRECTOR	1 00	X						0	0	0
MR JOSEPH A FRANK SR DIRECTOR EMERITUS	1 00	X						0	0	0
MR ALLEN M KLUGER ESQ DIRECTOR EMERITUS	1 00	X						0	0	0
JAMES L PURCELL ESQ DIRECTOR EMERITUS	1 00	X						0	0	0
MR JOHN M RANDOLPH JR DIRECTOR EMERITUS	1 00	X						0	0	0
MR Y JUDD SHOVAL DIRECTOR EMERITUS	1 00	X						0	0	0
MR JESSE J WATKINS DIRECTOR EMERITUS	1 00	X						0	0	0
JOHH J RYAN CSC PRESIDENT	40 00			X				0	0	27,762
LISA MARIE MCCAULEY VP FINANCE/TREASURER	40 00			X				152,332	0	22,857
DR BERNARD HEALEY PROFESSOR	40 00				X			159,971	0	14,039
NICHOLAS HOLODICK EDD VP - ACADEMIC AFFAIRS	40 00				X			157,338	0	18,343

**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			
BARRY WILLIAMS CPA JD DEAN - BUSINESS SCHOOL	40 00					X		131,761	0	18,344
MS JANET MERCINCAVAGE VP OF STUDENT AFFAIRS	40 00					X		119,247	0	18,903
TERESA PECK ASSOCIATE VP - ENROLLMENT MANAGEMENT	40 00					X		116,297	0	15,026
MARC MARCHESE PROFESSOR	40 00					X		114,281	0	24,681
WILLIAM LUTES PROFESSOR	40 00					X		113,923	0	15,897