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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2011 calendar year, or tax year beginning **JUL 1, 2011** and ending **JUN 30, 2012**

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ALLEGHENY COLLEGE		D Employer identification number 25-0965212
	Doing Business As		E Telephone number (814) 332-4788
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 520 NORTH MAIN STREET		G Gross receipts \$ 151,036,165.
	City or town, state or country, and ZIP + 4 MEADVILLE, PA 16335		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
F Name and address of principal officer: JAMES H. MULLEN, JR. SAME AS C ABOVE		H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ WWW.ALLEGHENY.EDU			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: 1817 M State of legal domicile: PA	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: FOUR YEAR INSTITUTION OF HIGHER EDUCATION.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	34
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	33
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	2386
	6 Total number of volunteers (estimate if necessary)	6	0
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	<113,712.>
b Net unrelated business taxable income from Form 990-T, line 34	7b	<113,712.>	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	10,303,642.	11,390,298.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	89,757,504.	92,927,107.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	28,854,949.	<5,384,335.>
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,674,900.	1,951,502.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	130,590,995.	100,884,572.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	34,250,503.	36,627,641.
	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)	36,795,724.	38,981,951.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,229,846.	0.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	36,125,868.	35,081,622.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	107,172,095.	110,691,214.
19 Revenue less expenses. Subtract line 18 from line 12	23,418,900.	<9,806,642.>	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	330,646,067.	322,934,038.
	22 Net assets or fund balances. Subtract line 21 from line 20	76,315,108.	78,409,721.
		254,330,959.	244,524,317.

Part II Signature Block

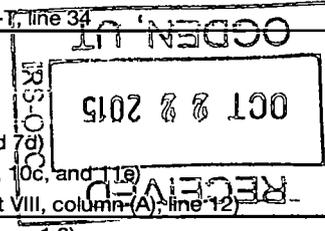
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer 	Date 10-15-15
	Type or print name and title JAMES H. MULLEN, JR., PRESIDENT	

Paid Preparer Use Only	Print/Type preparer's name SUSAN M. KIRSCH	Preparer's signature 	Date 10/9/15	Check if self-employed <input type="checkbox"/>	PTIN P00341397
	Firm's name ▶ SCHNEIDER DOWNS & CO., INC.	Firm's EIN ▶ 25-1408703		Phone no. (412) 261-3644	
Firm's address ▶ ONE PPG PLACE SUITE 1700 PITTSBURGH, PA 15222					

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

SCANNED NOV 10 2015



644 A

Part III Statement of Program Service Accomplishments

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

X

1 Briefly describe the organization's mission: ALLEGHENY'S UNDERGRADUATE RESIDENTIAL EDUCATION PREPARES YOUNG ADULTS FOR SUCCESSFUL, MEANINGFUL LIVES BY PROMOTING STUDENTS' INTELLECTUAL, MORAL AND SOCIAL DEVELOPMENT, AND ENCOURAGING PERSONAL AND CIVIC RESPONSIBILITY. ALLEGHENY'S FACULTY AND STAFF COMBINE HIGH ACADEMIC

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 [X] 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 [X] 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 \$ 56,266,555. including grants of \$) (Revenue \$ 75,675,380.) INSTRUCTION: PROVIDED LIBERAL ARTS, PRIVATE 4-YEAR HIGHER EDUCATION TO STUDENTS AND SUPPORTED THAT EFFORT WITH LIBRARY AND MEDIA RESOURCES AND REMEDIAL AND SPECIAL INTEREST CLASSES.

4b (Code) (Expenses \$ 36,562,641. including grants of \$ 36,562,641.) (Revenue \$) SCHOLARSHIP: FROM GIFTS, GRANTS, ENDOWMENT INCOME, AND COLLEGE RESOURCES ASSISTED STUDENTS TO ATTAIN THEIR DEGREE BY HELPING TO FINANCE THE COST.

4c (Code) (Expenses \$ 6,768,448. including grants of \$) (Revenue \$ 17,251,727.) AUXILIARY ENTERPRISES: PROVIDED HOUSING AND DINING SERVICES AND FACILITIES TO STUDENTS AS A RESIDENTIAL INSTITUTION.

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$ 2,062,165.)

4e Total program service expenses 99,597,644.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
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? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>	X	
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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
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)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
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>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>	X	
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b 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>		X
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>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	X	
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):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	X	
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
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>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
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>		X
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>		X
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>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b 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>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
4b	If "Yes," enter the name of the foreign country: BERMUDA, CAYMAN ISLANDS See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	N/A	
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	N/A	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?	N/A	
9b	Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	
10	Section 501(c)(7) organizations. Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12	N/A	
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
11a	Gross income from members or shareholders	N/A	
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	N/A	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	N/A	
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
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		X

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?		X
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	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?		X
16b	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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **LINDA WETSELL, ASSOCIATE VP FINANCE - 814-332-4790**
520 NORTH MAIN STREET, MEADEVILLE, PA 16335

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) EDDIE TAYLOR, JR. CHAIR	2.00	X					0.	0.	0.	
(2) ROBERT L. SMITH JR. CO-CHAIR	2.00	X					0.	0.	0.	
(3) EARL W. ADAMS JR., PHD TRUSTEE	2.00	X					0.	0.	0.	
(4) CHRISTIAN L. ALLISON TRUSTEE/PT FACULTY	18.00	X					7,528.	0.	0.	
(5) BISHOP THOMAS J. BICKERTON TRUSTEE	2.00	X					0.	0.	0.	
(6) ALICE S. BIERER TRUSTEE	2.00	X					0.	0.	0.	
(7) EDWARD JOSEPH BORKOWSKI TRUSTEE	2.00	X					0.	0.	0.	
(8) WILLOW WILCOX BROST TRUSTEE	2.00	X					0.	0.	0.	
(9) WILLIAM H. BROWN, JR TRUSTEE	2.00	X					0.	0.	0.	
(10) MARK R. CAMPBELL TRUSTEE	2.00	X					0.	0.	0.	
(11) JANE MIRIAM EARLL, ESQ. TRUSTEE	2.00	X					0.	0.	0.	
(12) GARY M. ELLIOTT TRUSTEE	2.00	X					0.	0.	0.	
(13) MARY J. FEELEY TRUSTEE	2.00	X					0.	0.	0.	
(14) KIMBERLY T. FLEMING TRUSTEE	2.00	X					0.	0.	0.	
(15) JUDITH THOMAS HORGAN TRUSTEE	2.00	X					0.	0.	0.	
(16) STEVEN D. LEVINSKY TRUSTEE	2.00	X					0.	0.	0.	
(17) RICHARD W. MAINE TRUSTEE	2.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ISABELLA MOSS TRUSTEE	2.00	X						0.	0.	0.
(19) HERBERT H. MYERS TRUSTEE	2.00	X						0.	0.	0.
(20) JEROME V. NELSON TRUSTEE	2.00	X						0.	0.	0.
(21) JAMES C. NEW TRUSTEE	2.00	X						0.	0.	0.
(22) JOHN HERBERT NILES, JR., M.D. TRUSTEE	2.00	X						0.	0.	0.
(23) MARTIN PFINGRAFF TRUSTEE	2.00	X						0.	0.	0.
(24) TIMOTHY L. REEVES TRUSTEE	2.00	X						0.	0.	0.
(25) MARY E. SCEIFORD, PH.D. TRUSTEE	2.00	X						0.	0.	0.
(26) YVONNE K. SEON, PH.D. TRUSTEE	2.00	X						0.	0.	0.
1b Sub-total								7,528.	0.	0.
c Total from continuation sheets to Part VII, Section A								1,602,750.	0.	371,259.
d Total (add lines 1b and 1c)								1,610,278.	0.	371,259.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **9**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

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
PARKHURST DINING SERVICES, INC. P O BOX 644091, PITTSBURGH, PA 15264-4091	FOOD SERVICE	5,535,372.
MASSARO, INC 120 DELTA DRIVE, PITTSBURGH, PA 15238	CONSTRUCTION MANAGERS	2,441,401.
ST. MORITZ BUILDING SERVICES C/O S&T BANK, INDIANA, PA 15701	CLEANING SERVICE	1,871,885.
DATATEL 43 75 FAIR LAKES COURT, FAIRFAX, VA 22033	SOFTWARE SUITE FOR EDUCATIONAL AND ADMI	226,467.
LYRASIS P.O. BOX 116179, ATLANTA, GA 30309	BROKERAGE FOR LIBRARY DATABASE SER	208,147.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **13**

SEE PART VII, SECTION A CONTINUATION SHEETS

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	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	22,270.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	1201789.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	10,166,239.				
	g Noncash contributions included in lines 1a-1f \$		119,419.				
	h Total. Add lines 1a-1f		11,390,298.				
Program Service Revenue	2 a TUITION & FEES	Business Code 611710	75,675,380.	75,675,380.			
	b OTHER AUXILIARY	611710	17,251,727.	17,251,727.			
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		92,927,107.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		8031241.			8,031,241.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	(i) Real	82,900.				
		(ii) Personal					
		b Less: rental expenses	70,790.				
	c Rental income or (loss)	12,110.					
	d Net rental income or (loss)		12,110.			12,110.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	35,687,980.				
		(ii) Other					
		b Less: cost or other basis and sales expenses	49,103,556.				
	c Gain or (loss)	<13,415,576.>					
	d Net gain or (loss)		<13,415,576.>			<13,415,576.>	
	8 a Gross income from fundraising events (not including \$ 22,270. of contributions reported on line 1c). See Part IV, line 18	a	22,785.				
		b Less: direct expenses	31,846.				
c Net income or (loss) from fundraising events			<9,061.>			<9,061.>	
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses						
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	1,284,099.					
	b Less: cost of goods sold	945401.					
	c Net income or (loss) from sales of inventory		338,698.	338,698.			
Miscellaneous Revenue		Business Code					
11 a OTHER REVENUE	611710	1723467.	1723467.				
b PARTNERSHIP LOSS	900003	<113,712.>		<113712.>			
c							
d All other revenue							
e Total. Add lines 11a-11d		1609755.					
12 Total revenue. See instructions.		100,884,572.	94,989,272.	<113712.>	<5,381,286.>		

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	65,000.	65,000.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	36,562,641.	36,562,641.		
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	1,062,716.	251,983.	595,858.	214,875.
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	27,215,921.	22,821,117.	2,425,130.	1,969,674.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	2,038,744.	1,646,248.	239,349.	153,147.
9 Other employee benefits	6,563,758.	5,242,169.	811,840.	509,749.
10 Payroll taxes	2,100,812.	1,739,018.	201,793.	160,001.
11 Fees for services (non-employees):				
a Management	6,768,448.	6,500,575.	18,618.	249,255.
b Legal	58,859.		58,859.	
c Accounting	169,680.	5,000.	164,680.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	834,428.	834,428.		
12 Advertising and promotion	191,462.	94,386.	97,076.	
13 Office expenses	3,211,997.	2,944,163.	202,414.	65,420.
14 Information technology	1,243,008.	976,754.	263,014.	3,240.
15 Royalties				
16 Occupancy	3,333,478.	3,277,149.	39,957.	16,372.
17 Travel	1,503,964.	1,213,436.	76,888.	213,640.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	709,475.	309,996.	111,469.	288,010.
20 Interest	2,111,345.	2,111,345.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,277,654.	5,838,218.	439,436.	
23 Insurance	569,418.	260,110.	309,308.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER EXPENSE	3,168,977.	2,872,246.	296,731.	
b STUDENT WAGES	2,504,216.	2,376,054.	86,365.	41,797.
c POSTAGE, PUBLICATIONS,	1,546,120.	932,934.	268,520.	344,666.
d LIBRARY BOOKS & PERIODI	722,674.	722,674.		
e All other expenses	156,419.		156,419.	
25 Total functional expenses. Add lines 1 through 24e	110691214.	99,597,644.	6,863,724.	4,229,846.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	7,782,364.	1	7,404,923.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	2,030,946.	3	2,985,520.
	4 Accounts receivable, net	434,132.	4	596,208.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net	6,445,971.	7	6,857,022.
	8 Inventories for sale or use	541,622.	8	534,562.
	9 Prepaid expenses and deferred charges	451,623.	9	421,485.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 224,442,330.		
	b Less: accumulated depreciation	10b 96,143,064.	10c	128,299,266.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	178,452,575.	12	169,238,633.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	6,948,034.	15	6,596,419.
16 Total assets. Add lines 1 through 15 (must equal line 34)	330,646,067.	16	322,934,038.	
Liabilities	17 Accounts payable and accrued expenses	6,818,715.	17	7,918,735.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities	57,584,448.	20	56,472,864.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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	11,911,945.	25	14,018,122.
	26 Total liabilities. Add lines 17 through 25	76,315,108.	26	78,409,721.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	100,642,754.	27	98,173,645.
	28 Temporarily restricted net assets	77,274,019.	28	67,540,039.
	29 Permanently restricted net assets	76,414,186.	29	78,810,633.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	254,330,959.	33	244,524,317.
	34 Total liabilities and net assets/fund balances	330,646,067.	34	322,934,038.

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)	100,884,572.
2	Total expenses (must equal Part IX, column (A), line 25)	110,691,214.
3	Revenue less expenses. Subtract line 2 from line 1	<9,806,642.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	254,330,959.
5	Other changes in net assets or fund balances (explain in Schedule O)	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	244,524,317.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- 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	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2011)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 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. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2011

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 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 section 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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

ALLEGHENY COLLEGE

Employer identification number

25-0965212

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

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

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

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	

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

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	153,772,505.	133,943,713.	125,126,189.	157,401,480.	
b Contributions	2,866,881.	1,298,944.	1,254,779.	6,151,586.	
c Net investment earnings, gains, and losses	<467,028.>	26,441,351.	15,684,406.	<30,571,292.>	
d Grants or scholarships				2,829,985.	
e Other expenditures for facilities and programs	7,324,910.	7,911,503.	8,091,000.	4,666,987.	
f Administrative expenses	706,331.		30,661.	358,613.	
g End of year balance	148,141,117.	153,772,505.	133,943,713.	125,126,189.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ▶ 15.00 %
- b Permanent endowment ▶ 48.00 %
- c Temporarily restricted endowment ▶ 37.00 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		15,112,266.		15,112,266.
b Buildings		165,949,373.	96,143,064.	69,806,309.
c Leasehold improvements				
d Equipment		43,380,691.		43,380,691.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				128,299,266.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) SHORT TERM INVESTMENTS	10,080,720.	END-OF-YEAR MARKET VALUE
(B) EQUITY INVESTMENTS	2,815,561.	END-OF-YEAR MARKET VALUE
(C) MUTUAL FUNDS - EQUITY	69,068,387.	END-OF-YEAR MARKET VALUE
(D) MUTUAL FUNDS - FIXED		
(E) INCOME	27,833,693.	END-OF-YEAR MARKET VALUE
(F) VENTURE CAP/PRIVATE EQ	18,764,560.	END-OF-YEAR MARKET VALUE
(G) PRIVATE REAL ESTATE	9,770,385.	END-OF-YEAR MARKET VALUE
(H) HEDGE FUNDS	24,043,575.	END-OF-YEAR MARKET VALUE
(I) REAL ASSETS	6,861,752.	END-OF-YEAR MARKET VALUE
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	169,238,633.	

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

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

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) TRUST, ANNUITY AND LOANS PAYABLE	3,824,146.
(3) TRUSTS HELD FOR OTHERS	300,209.
(4) REFUNDABLE GOVERNMENT ADVANCES FOR	
(5) STUDENT LOANS	4,948,109.
(6) SWAP LIABILITY	2,043,893.
(7) TRUSTS PAYABLE	2,901,765.
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	14,018,122.

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	100,884,572.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	110,691,214.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	<9,806,642.>
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	<9,806,642.>

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

1	Total revenue, gains, and other support per audited financial statements	1	65,369,968.
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	1,048,037.
e	Add lines 2a through 2d	2e	1,048,037.
3	Subtract line 2e from line 1	3	64,321,931.
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	36,562,641.
c	Add lines 4a and 4b	4c	36,562,641.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	100884572.

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

1	Total expenses and losses per audited financial statements	1	75,176,610.
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	1,048,037.
e	Add lines 2a through 2d	2e	1,048,037.
3	Subtract line 2e from line 1	3	74,128,573.
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	36,562,641.
c	Add lines 4a and 4b	4c	36,562,641.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	110691214.

Part XIV Supplemental Information

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

PART III, LINE 1A: " AFS NOTE 4: THE COLLEGE MAINTAINS VARIOUS

COLLECTIONS OF INEXHAUSTIBLE ASSETS TO WHICH NO VALUE CAN BE DETERMINED.

SUCH COLLECTIONS COULD INCLUDE CONTRIBUTED WORKS OF ART, HISTORICAL

TREASURES, LITERATURE, AND THE LIKE, THAT ARE HELD FOR EXHIBITION AND

PUBLIC SERVICE. THESE COLLECTIONS ARE NEITHER DISPOSED OF FOR FINANCIAL

GAIN NOR ENCUMBERED IN ANY MEANS. ACCORDINGLY SUCH COLLECTIONS ARE NOT

CAPITALIZED OR RECOGNIZED FOR FINANCIAL STATEMENT PURPOSES."

Part XIV Supplemental Information (continued)

PART III, LINE 4: CONTRIBUTED WORKS OF ART, HISTORICAL TREASURES, AND LITERATURE ARE USED BY THE STUDENTS AND FACULTY FOR EDUCATIONAL PURPOSES.

PART V, LINE 4: THE COLLEGE HAS A 5% SPENDING FORMULA BASED ON A TRAILING 12 QUARTER AVERAGE. THE ENDOWMENT SUPPORT FOR OPERATIONS IS ABOUT 12% OF THE BUDGET. THE FUNDS SUPPORT OPERATIONS THROUGH SCHOLARSHIPS, STUDENT SERVICES, LIBRARY MATERIALS, BUILDING AND GROUNDS, ACADEMIC SALARIES AND OTHER EXPENSES. THE CURRENT YEAR ALSO INCLUDES DRAW FROM THE ENDOWMENT TO SUPPORT ADMINISTRATIVE EXPENSES IN THE FUND RAISING AREA (NOTED ON "F" ABOVE)

PART X, LINE 2: THE COLLEGE ADOPTED THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) GUIDANCE FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH PROVIDES CRITERIA FOR THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS. THIS GUIDANCE REQUIRES THAT AN UNCERTAIN TAX POSITION SHOULD BE RECOGNIZED ONLY IF IT IS "MORE LIKELY THAN NOT" THAT THE POSITION IS SUSTAINABLE BASED ON ITS TECHNICAL MERITS. RECOGNIZABLE TAX POSITIONS SHOULD THEN BE MEASURED TO DETERMINE THE AMOUNT OF BENEFIT RECOGNIZED IN THE FINANCIAL STATEMENTS. THE COLLEGE FILES U.S. FEDERAL, STATE AND LOCAL INFORMATION RETURNS, AND NO RETURNS ARE CURRENTLY UNDER EXAMINATION. THE STATUTE OF LIMITATIONS ON THE COLLEGE'S U.S. FEDERAL TAX RETURNS REMAINS OPEN FOR THE YEARS ENDED JUNE 30, 2009 THROUGH THE PRESENT. THE COLLEGE CONTINUES TO EVALUATE ITS TAX POSITIONS PURSUANT TO THE PRINCIPLES OF FASB GUIDANCE AND HAS DETERMINED THAT THERE IS NO MATERIAL IMPACT ON THE COLLEGE'S FINANCIAL STATEMENTS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF SALES

Part XIV Supplemental Information (continued)

RENTAL EXPENSE

FUNDRAISING EXPENSE

PART XII, LINE 4B - OTHER ADJUSTMENTS:

FINANCIAL AID

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

COST OF SALES

RENTAL EXPENSE

FUNDRAISING EXPENSE

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

FINANCIAL AID

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2011

Open to Public Inspection

▶ **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.**

Department of the Treasury
Internal Revenue Service

Name of the organization

ALLEGHENY COLLEGE

Employer identification number

25-0965212

Part I

- 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?
- 2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?
- 3 Has the organization publicized its racially nondiscriminatory policy through newspaper or 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

THE COLLEGE PUBLISHES ITS NONDISCRIMINATION POLICY IN LOCAL AND REGIONAL NEWSPAPERS. IN ADDITION, THE POLICY IS INCLUDED IN THE COLLEGE CATALOGS AND RECRUITING MATERIALS.

- 4 Does the organization maintain the following?
 - a Records indicating the racial composition of the student body, faculty, and administrative staff?
 - b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?
 - c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?
 - d Copies of all material used by the organization or on its behalf to solicit contributions?

If you answered "No" to any of the above, please explain. If you need more space, use Part II.

- 5 Does the organization discriminate by race in any way with respect to:

- a Students' rights or privileges?
- b Admissions policies?
- c Employment of faculty or administrative staff?
- d Scholarships or other financial assistance?
- e Educational policies?
- f Use of facilities?
- g Athletic programs?
- h Other extracurricular activities?

If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.

- 6a Does the organization receive any financial aid or assistance from a governmental agency?

- b Has the organization's right to such aid ever been revoked or suspended?

If you answered "Yes" to either line 6a or line 6b, explain on Part II.

- 7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II

	YES	NO
1	X	
2	X	
3	X	
4a	X	
4b	X	
4c	X	
4d	X	
5a		X
5b		X
5c		X
5d		X
5e		X
5f		X
5g		X
5h		X
6a	X	
6b		X
7	X	

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

Schedule E (Form 990 or 990-EZ) (2011)

Part II **Supplemental Information.** Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information.

SCHEDULE E, LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

THE COLLEGE RECEIVES GRANTS UNDER VARIOUS STATE AND FEDERAL PROGRAMS.

Multiple horizontal lines for supplemental information.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

Employer identification number

ALLEGHENY COLLEGE

25-0965212

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	STUDY ABROAD PROGRAMS; 3 STUDENTS PARTICIPATING	56,694.
SOUTH ASIA			PROGRAM SERVICES	STUDY ABROAD PROGRAMS; 3 STUDENTS PARTICIPATING	51,684.
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	STUDY ABROAD PROGRAMS; 16 STUDENTS PARTICIPATING	286,261.
CENTRAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICES	STUDY ABROAD PROGRAMS; 7 STUDENTS PARTICIPATING	122,610.
EUROPE (INCLUDING ICELAND & GREENLAND)			PROGRAM SERVICES	STUDY ABROAD PROGRAMS; 13 STUDENTS PARTICIPATING	234,821.
SOUTH AMERICA			PROGRAM SERVICES	STUDY ABROAD PROGRAMS; 1 STUDENTS PARTICIPATING	12,600.
3 a Sub-total	0	0			764,670.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			764,670.

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

Schedule F (Form 990) 2011

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* Yes No

Schedule F (Form 990) 2011

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: THE COLLEGE DOES NOT ISSUE GRANTS OUTSIDE THE US, BUT IT DOES INCUR EXPENSES FOR STUDENTS STUDYING ABROAD. STUDENTS PAY THEIR REGULAR ALLEGHENY COLLEGE TUITION, AND THE COLLEGE IN TURN PAYS THEIR TUITION TO THE FOREIGN INSTITUTION THAT THEY WILL BE ATTENDING. THOSE EXPENSES ARE TRACKED IN THE STUDY ABROAD OFFICE AND IN THE GENERAL LEDGER.

Multiple horizontal lines for supplemental information.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		ATHLETIC GOLF OUTING		NONE	
Revenue		(event type)	(event type)	(total number)	
1	Gross receipts	45,055.			45,055.
2	Less: Chantable contributions	22,270.			22,270.
3	Gross income (line 1 minus line 2)	22,785.			22,785.
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	31,846.		
10	Direct expense summary. Add lines 4 through 9 in column (d)				(31,846)
11	Net income summary. Combine line 3, column (d), and line 10				<9,061.>

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	Noncash 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	<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 line 1, column d, and line 7				

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: _____

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ALLEGHENY AID	1188	8,649,339.	0.		
ENDOWED AID	651	3,517,293.	0.		
FEDERAL GRANTS	279	445,539.	0.		
MERIT SCHOLARSHIPS	1806	21,603,639.	0.		
PELL GRANTS	592	2,346,831.	0.		

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

SCHEDULE I, PART I, LINE 2: THE COLLEGE'S FINANCIAL AID OFFICE MAINTAINS ELIGIBILITY REQUIREMENTS AND MONITORS GRANTING OF AWARDS TO STUDENTS AND FOLLOWS U S. FEDERAL AID REGULATIONS AND ALL STATES' REGULATIONS FOR GRANTS TO ITS STUDENTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization

ALLEGHENY COLLEGE

Employer identification number

25-0965212

Part I Questions Regarding Compensation

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

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

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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III.

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

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

- a** Receive a severance payment or change-of-control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

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

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

If "Yes" to line 5a or 5b, describe in Part III.

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

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

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

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

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

	Yes	No
1b	X	
2		X
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2011

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts 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 as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	JAMES H. MULLEN, JR.	(i) 298,153.	(ii) 18,000.	(iii) 2,441.	22,275.	43,498.	384,367.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
2	DAVID W. MCINALLY	(i) 201,046.	0.	552.	18,020.	90,342.	309,960.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
3	LINDA C. DEMERITT	(i) 191,780.	0.	1,032.	18,020.	16,353.	227,185.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
4	MARJORIE S. KLEIN	(i) 171,465.	0.	360.	16,049.	15,353.	203,227.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
5	JAMES C. BULLMAN	(i) 151,122.	0.	1,407.	13,950.	2,137.	168,616.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
6	LLOYD MICHAELS	(i) 142,611.	0.	2,570.	13,414.	15,110.	173,705.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
7	BRUCE J. SMITH	(i) 138,063.	0.	2,341.	12,482.	13,151.	166,037.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
8	LARRY K. LEE	(i) 140,538.	0.	303.	13,307.	17,484.	171,632.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
9	JOSEPH J. DICHRISTINA	(i) 138,683.	0.	283.	12,600.	17,714.	169,280.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
10		(i) 0.	0.	0.	0.	0.	0.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
11		(i) 0.	0.	0.	0.	0.	0.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
12		(i) 0.	0.	0.	0.	0.	0.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
13		(i) 0.	0.	0.	0.	0.	0.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
14		(i) 0.	0.	0.	0.	0.	0.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
15		(i) 0.	0.	0.	0.	0.	0.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.
16		(i) 0.	0.	0.	0.	0.	0.	0.
		(ii) 0.	0.	0.	0.	0.	0.	0.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

PART I, LINE 1A: THE PRESIDENT OF THE COLLEGE RECEIVED A HOUSING ALLOWANCE IN THE AMOUNT OF \$24,500, AND HAD OTHER REPORTABLE COMPENSATION RELATED TO AUTO AND CLUB USAGE IN THE AMOUNT OF \$1,889.

Multiple horizontal lines for supplemental information.

SCHEDULE K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds
Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2011
Open to Public Inspection

Name of the organization

ALLEGHENY COLLEGE

Employer identification number
25-0965212

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
PA HIGHER EDUCATION FACILITIES	23-2243852	NONE	02/23/06	14,000,000.	CONSTRUCT STUDENT HOUSING		X		X		X
CRAWFORD CO INDUSTRIAL DEVELOPMENT AUTHORITY	23-7115736	NONE	05/08/09	10,295,000.	CONSTRUCT STUDENT HOUSING		X		X		X
CRAWFORD CO INDUSTRIAL DEVELOPMENT AUTHORITY	23-7115736	NONE	05/08/09	8000000.	CONSTRUCT STUDENT HOUSING		X		X		X
CRAWFORD CO INDUSTRIAL DEVELOPMENT AUTHORITY	23-7115736	NONE	12/15/10	26,386,313.	REFUND 1998 BONDS		X		X		X

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired		290,000.		200,451.
2 Amount of bonds legally defeased				
3 Total proceeds of issue	13,913,293.	10,179,186.	8,000,000.	26,260,000.
4 Gross proceeds in reserve funds	1,315,987.	836,400.		
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows				
7 Issuance costs from proceeds	189,625.	190,015.	147,889.	126,313.
8 Credit enhancement from proceeds				
9 Working capital expenditures from proceeds				
10 Capital expenditures from proceeds	12,294,183.	9,152,771.	7,852,111.	
11 Other spent proceeds				
12 Other unspent proceeds				
13 Year of substantial completion				

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

Part III Private Business Use

1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
		X		X		X		X

2 Are there any lease arrangements that may result in private business use of bond-financed property?	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
		X		X		X		X

132121
01-23-12

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

25-0965212

ALLEGHENY COLLEGE

Part III Private Business Use (Continued)

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

Part IV Arbitrage

	A		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		X		X	
2 Is the bond issue a variable rate issue?		X		X		X		X
3a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider	PNC BANK							
c Term of hedge	20.0000000							
d Was the hedge superintergrated?								X
e Was the hedge terminated?								X
4a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		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?		X		X		X		X
5 Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
6 Did the bond issue qualify for an exception to rebate?		X		X		X		X

Part V Procedures To Undertake Corrective Action

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K.

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
N. SMITH	OFFICER'S FAMILY ME	40,588.	EMPLOYMENT		X
J. MCINALLY	OFFICER'S FAMILY ME	45,272.	EMPLOYMENT		X
G. BYRNES	OFFICER'S FAMILY ME	17,478.	EMPLOYMENT		X
T. REEVES	TRUSTEE	112,253.	MARKET GROU		X
E. TAYLOR	BOARD CHAIR	59,750.	BOARD CHAIR		X

Part V Supplemental Information

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

SCH L, PART III, GRANTS OR ASSISTANCE BENEFITTING INTERESTED PERSONS:

(A) NAME OF PERSON: FAMILY MEMBER

(C) AMOUNT OF GRANT \$ 14,000.

(C) TYPE OF ASSISTANCE: MERIT SCHOLARSHIP

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: N. SMITH

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

OFFICER'S FAMILY MEMBER

(C) AMOUNT OF TRANSACTION \$ 40,588.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: J. MCINALLY

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

OFFICER'S FAMILY MEMBER

(C) AMOUNT OF TRANSACTION \$ 45,272.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION REVENUES? = NO

Part V Supplemental Information

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

(A) NAME OF PERSON: G. BYRNES

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

OFFICER'S FAMILY MEMBER

(C) AMOUNT OF TRANSACTION \$ 17,478.

(D) DESCRIPTION OF TRANSACTION: EMPLOYMENT

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: T. REEVES

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

TRUSTEE

(C) AMOUNT OF TRANSACTION \$ 112,253.

(D) DESCRIPTION OF TRANSACTION: MARKET GROUP

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: E. TAYLOR

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD CHAIR

(C) AMOUNT OF TRANSACTION \$ 59,750.

(D) DESCRIPTION OF TRANSACTION: BOARD CHAIR

(E) SHARING OF ORGANIZATION REVENUES? = NO

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2011

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Name of the organization **ALLEGHENY COLLEGE** Employer identification number **25-0965212**

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	26	119,419.	FAIR MARKET VALUE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (_____)				
26	Other ▶ (_____)				
27	Other ▶ (_____)				
28	Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **0**

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2011)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011
Open to Public
Inspection

Name of the organization

ALLEGHENY COLLEGE

Employer identification number
25-0965212

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

STANDARDS AND A COMMITMENT TO THE EXCHANGE OF KNOWLEDGE WITH A
SUPPORTIVE APPROACH TO LEARNING. GRADUATES ARE EQUIPPED TO THINK
CRITICALLY, SPEAK PERSUASIVELY, AND MEET CHALLENGES IN A DIVERSE
INTERCONNECTED WORLD.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

STUDENT SERVICES: PROVIDING ADDITIONAL STUDENT SERVICES SUCH AS
COUNSELING, CAREER SERVICES, INTRAMURAL AND INTERCOLLEGIATE ATHLETICS,
STUDENT GOVERNMENT ACTIVITIES, HEALTH SERVICES, SOCIAL ACTIVITIES AND
ORGANIZATIONS.

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 2,062,165.

FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF TRUSTEES AUDIT
COMMITTEE IS CHARGED BY THE FULL BOARD WITH THE RESPONSIBILITY OF REVIEWING
THE FORM 990 AND CALLING IN OUTSIDE EXPERTS TO ANSWER ANY QUESTIONS OF THE
BOARD IN ORDER TO COME TO FULL UNDERSTANDING OF WHAT IS BEING REPORTED.
THIS REVIEW IS HELD JUST PRIOR TO THE SUBMISSION OF THE FORM 990

FORM 990, PART VI, SECTION B, LINE 12C: THE COLLEGE REGULARLY AND
CONSISTENTLY MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY
THROUGH COMPLETION OF AN ANNUAL DISCLOSURE STATEMENT, WHICH IS COMPLETED BY
ALL TRUSTEES. IF A CONFLICT IS DETERMINED TO BE PRESENT, THEN MANAGEMENT
AND BOARD LEADERSHIP ADDRESS IT WITH THE APPROPRIATE INDIVIDUAL(S). NO
CONFLICTS OR POTENTIALLY CONFLICTING BUSINESS OR FAMILY RELATIONSHIPS WERE
NOTED FOR THE FISCAL YEAR. AS A PART OF NEW TRUSTEE ORIENTATION, BOARD

Name of the organization

ALLEGHENY COLLEGE

Employer identification number

25-0965212

MEMBERS ARE INFORMED THAT THE BOARD OF TRUSTEES HAS AUTHORITY ONLY AS A CORPORATE BODY. NO INDIVIDUAL TRUSTEE HAS AUTHORITY OVER ANY ASPECT OF COLLEGE OPERATIONS.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF TRUSTEES COMPENSATION COMMITTEE REVIEWS ANNUALLY THE PRESIDENT'S WORK ACCOMPLISHMENTS FOR THE PAST YEAR AND COMBINES THAT INFORMATION WITH A COMPARISON OF COMPENSATION OF PRESIDENTS OF SIMILAR COLLEGES TO SET THE PRESIDENT'S ANNUAL SALARY INCREASE. DOCUMENTATION IS KEPT ON FILE CONCERNING THESE DELIBERATIONS AND MEASUREMENTS. THE SAME BOARD OF TRUSTEES COMPENSATION COMMITTEE ALSO REVIEWS AND APPROVES THE PRESIDENT'S RECOMMENDATION FOR SALARY INCREASES AND FOR THE CRITERIA USED FOR THOSE RECOMMENDATIONS; DOCUMENTATION IS ALSO KEPT ON FILE CONCERNING THIS REVIEW AND APPROVAL.

FORM 990, PART VI, SECTION C, LINE 19: DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, REASON FOR AMENDED RETURN

THE RETURN IS BEING AMENDED TO REFLECT THE FOLLOWING CHANGES:

PART VII - REPORTABLE COMPENSATION FOR AN EMPLOYEE WAS CORRECTED; OTHER COMPENSATION FOR ALL EMPLOYEES LISTED WAS CORRECTED TO INCLUDE RETIREMENT CONTRIBUTIONS (PREVIOUSLY NOT REPORTED), INCLUDE CERTAIN NONTAXABLE BENEFITS SUCH AS EMPLOYER PROVIDED HOUSING AND TUITION REMISSION, AND TO ELIMINATE THE EMPLOYER'S PORTION OF SOCIAL SECURITY AND MEDICARE TAX WHICH WAS PREVIOUSLY INCLUDED AS A NONTAXABLE EMPLOYEE BENEFIT. WHERE APPROPRIATE, SCHEDULE J, PART II WAS REVISED TO REFLECT THESE CORRECTIONS.

132212
01-23-12

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization

ALLEGHENY COLLEGE

Employer identification number

25-0965212

SCHEDULE B WAS CHANGED TO REFLECT REPORTING ON THE ACCRUAL METHOD. THE SPECIAL RULE WAS UTILIZED.

SCHEDULE F, PART II - QUESTIONS 1 AND 3 WERE CHANGED TO REFLECT TRANSFERS AND INVESTMENT IN A FOREIGN CORPORATION.

SCHEDULE J, PART I - QUESTION 7 WAS CHANGED TO YES.

SCHEDULE L, PART III WAS CHANGED TO EXCLUDE THE SPECIFIC NAMES OF INDIVIDUALS PER INSTRUCTIONS. PART IV WAS MODIFIED FOR THE SAME REASONS. PART III - A TRANSACTION FROM THE ORIGINAL SCHEDULE L WAS REMOVED AS IT SHOULD NOT HAVE BEEN REPORTED.

SCHEDULE M - METHOD OF DETERMINING VALUE WAS REVISED.

A FORM 926 IS ATTACHED, WHICH WAS NOT INCLUDED IN THE ORIGINAL RETURN.