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Part III

Statement of Program Service Accomplishments

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

☐

1

Briefly describe the organization’s mission

PLEASE SEE SCHEDULE O FOR DETAIL TO CONTINUE THE WILKES TRADITION OF LIBERALLY EDUCATING OUR STUDENTS FOR LIFELONG LEARNING AND SUCCESS IN A CONSTANTLY EVOLVING AND MULTICULTURAL WORLD THROUGH A COMMITMENT TO INDIVIDUALIZED ATTENTION, EXCEPTIONAL TEACHING, SCHOLARSHIP AND ACADEMIC EXCELLENCE, WHILE CONTINUING THE UNIVERSITY’S COMMITMENT TO COMMUNITY ENGAGEMENT

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If “Yes,” describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations 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 \$ 31,380,148 including grants of \$) (Revenue \$ 89,298,480)

INSTRUCTION INCLUDES ALL EXPENDITURES FOR ACTIVITIES THAT ARE PART OF THE INSTITUION'S INSTRUCTIONAL PROGRAMS THIS INCLUDES CREDIT AND NON-CREDIT COURSES, ACADEMIC, VOCATIONAL, AND TECHNICAL INSTRUCTION THE UNIVERSITY OFFERS 37 UNDERGRADUATE MAJORS, 13 GRADUATE PROGRAMS AND SEVERAL PRE-PROFESSIONAL PROGRAMS ENROLLMENT INCLUDES 2,181 FULL-TIME UNDERGRADUATE STUDENTS FROM OVER 17 STATES AND 11 FOREIGN COUNTIRES CLASS SIZES ARE KEPT SMALL TO ENABLE GREATER ACCESS TO PROFESSORS AND MORE INDIVUALIZED ATTENTION IN THE CLASSROOM UNDERGRADUATE FRESHMAN CLASS SIZES AVERAGE 24 STUDENTS WITH 20 STUDENTS FOR UPPER LEVEL CLASSES WILKES IS DEDICATED TO BEING A LEADER IN HIGHER EDUCATION THROUGHOUT THE NORTHEASTERN UNITED STATES AND IS DEDICATED TO ACADEMIC EXCELLENCE THROUGH MENTORING

4b

(Code) (Expenses \$ 30,726,990 including grants of \$ 28,672,127) (Revenue \$)

SCHOLARSHIP- INCLUDES EXPENDITURES FOR GENERAL, NEED BASED, AND ENDOWMENT SCHOLARSHIPS AND FELLOWSHIPS FROM RESTRICTED OR UNRESTRICTED CURRENT FUNDS IN THE FORM OF GRANTS TO STUDENTS, RESULTING FROM SELECTION BY DIVISION OF ENROLLMENT MANAGEMENT AT LEAST 90% OF STUDENTS RECEIVED SOME SORT OF FINANCIAL AID GRANTS AWARDED INCLUDE PENNSYLVANIA STATE GRANTS (PHEAA) AND WILKES NEED BASED GRANTS ALSO INCLUDED IS TUITION REMISSION FOR OTHER LOCAL COLLEGES AND PROGRAMS

4c

(Code) (Expenses \$ 9,714,981 including grants of \$) (Revenue \$ 9,611,354)

STUDENT SERVICES INCLUDES FUNDS EXPENDED FOR ACTIVITIES WITH THE PRIMARY PURPOSE OF CONTRIBUTING TO THE STUDENT'S EMOTIONAL AND PHYSICAL WELL-BEING AND INTELLECTUAL, CULTURAL, AND SOCIAL DEVELOPMENT OUTSIDE THE CONTEXT OF THE FORMAL INSTRUCTION PROGRAM WILKES CLASSIFIES THE FOLLOWING OFFICES INTO THIS PROGRAM OFFICES OF ENROLLMENT SERVICES (ADMISSIONS), REGISTRAR, FINANCIAL AID ADMINISTRATION, CAREER SERVICES, AND HEALTH AND WELLNESS SERVICES IN ADDITION, EXPENDITURES FOR STUDENT ACTIVITIES, CULTURAL EVENTS, INTRAMURAL AND INTERCOLLEGIATE ATHLETICS, FRESHMAN ORIENTATION, AND STUDENT CLUBS AND ORGANIZATIONS ARE CONSIDERED STUDENT SERVICES FOR FINANCIAL STATEMENT PURPOSES

(Code) (Expenses \$ 9,183,754 including grants of \$) (Revenue \$)

ACADEMIC SUPPORT INCLUDES FUNDS EXPENDED TO PROVIDE SUPPORT SERVICES FOR THE INSTITUTION'S PRIMARY MISSION OF INSTRUCTION, RESEARCH, AND PUBLIC SERVICE THE ACADEMIC ADMINISTRATION OF THE UNIVERSITY INCLUDING THE ACADEMIC DEANS BUT NOT DEPARTMENT CHAIRS THAT ARE CHARGED TO THEIR PRIMARY FUNCTION CATEGORY ARE FOUND IN THIS PROGRAM ALL SALARIES, BENEFITS, AND OTHER EXPENSES FOR THE LIBRARY ARE ALSO CONSIDERED ACADEMIC SUPPORT

(Code) (Expenses \$ 1,102,276 including grants of \$) (Revenue \$)

RESEARCH INCLUDES ALL EXPENDITURES FOR ACTIVITIES SPECIFICALLY ORGANIZED TO PRODUCE RESEARCH, WHETHER COMMISSIONED BY AN AGENCY EXTERNAL TO THE INSTITUTION OR SEPARATELY BUDGETED WITHIN THE UNIVERSITY CHARGED TO THIS PROGRAM ARE EXPENDITURES RELATED TO THE INSTITUTE FOR PUBLIC POLICY AND ECONOMIC DEVELOPMENT, A PARTNERSHIP AMONG SEVERAL LOCAL COLLEGES WITH THE FUNCTION OF PRODUCING RESEARCH TO ASSIST COMMUNITY LEADERS IN MAKING INFORMED DECISIONS IN ADDITION TO THIS, THE EXPENSES OF SEVERAL RESEARCH GRANTS ARE RECORDED TO THE RESEARCH CLASSIFICATION

(Code) (Expenses \$ 989,494 including grants of \$) (Revenue \$)

PUBLIC SERVICE INCLUDES FUNDS EXPENDED FOR ACTIVITIES ESTABLISHED PRIMARILY TO PROVIDE NON-INSTRUCTIONAL SERVICES BENEFICIAL TO INDIVIDUALS AND GROUPS EXTERNAL TO THE UNIVERSITY THE EXPENSES OF THE SMALL BUSINESS DEVELOPMENT CENTER, RADIO AND TELEVISION STUDIOS AND SEVERAL COMMUNITY LECTURE SERIES ARE AMONG THOSE POSTED TO THIS PROGRAM

4d

Other program services (Describe in Schedule O)

(Expenses \$ 11,275,524 including grants of \$) (Revenue \$)









4e

Total program service expenses

83,097,643

Part IV

Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

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? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.		
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?	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
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).	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		No
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
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)?		No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
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 as charitable contributions?		No
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?	Yes	
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
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?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12.		
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.		
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.		
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.		
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?		No
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 lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	31	
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			
b	Enter the number of voting members included in line 1a, above, who are independent	29	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

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

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

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	PA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
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	JANET KOBYLSKI84 WEST SOUTH STREET WILKES BARRE, PA (570) 408-4501

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

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

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

[illegible]

Part VIII

Statement of Revenue

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

			(A)	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns 1a				
	b	Membership dues 1b				
	c	Fundraising events 1c	18,050			
	d	Related organizations 1d				
	e	Government grants (contributions) 1e	3,507,154			
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	5,963,739			
	g	Noncash contributions included in lines 1a-1f \$	28,915			
	h	Total. Add lines 1a-1f	9,488,943			
Program Service Revenue	Business Code					
	2a	TUITION AND FEES	900099	89,298,480	89,298,480	
	b	AUXILIARY ACTIVITIES- SALES AND S	900099	9,611,354	9,611,354	
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f	98,909,834			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	1,222,023			1,222,023
	4	Income from investment of tax-exempt bond proceeds	35,548			35,548
	5	Royalties	117,000			117,000
	6a	(i) Real				
		(ii) Personal				
		Gross rents	59,376			
		Less rental expenses	38,286			
	b	Rental income or (loss)	21,090			
	c	Net rental income or (loss)	21,090			21,090
	7a	(i) Securities				
		(ii) Other				
		Gross amount from sales of assets other than inventory	30,417,906			
		Less cost or other basis and sales expenses	28,796,789	19,649		
	b	Gain or (loss)	1,621,117	-19,649		
	c	Net gain or (loss)	1,601,468			1,601,468
	8a	Gross income from fundraising events (not including \$ 18,050 of contributions reported on line 1c) See Part IV, line 18				
	a		23,477			
	b	Less direct expenses b	14,006			
	c	Net income or (loss) from fundraising events	9,471			9,471
	9a	Gross income from gaming activities See Part IV, line 19				
	a					
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances				
	a					
	b	Less cost of goods sold b				
	c	Net income or (loss) from sales of inventory				
	Miscellaneous Revenue		Business Code			
	11a	ENDOWMENT DRAWDOWNS	900099	1,440,800		1,440,800
	b	TEAM PROGRAM REVENUE	900099	113,310		113,310
	c	MISCELLANEOUS INCOME	900099	89,665		89,665
	d	All other revenue		400,808		400,808
	e	Total. Add lines 11a-11d	2,044,583			
	12	Total revenue. See Instructions	113,449,960	98,909,834	0	5,051,183

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).

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

☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	28,672,127	28,672,127		
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.	1,877,108	597,023	1,280,085	
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.	34,212,254	27,959,717	5,611,415	641,122
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	2,189,769	1,797,531	350,818	41,420
9	Other employee benefits.	4,045,494	3,773,544	218,463	53,487
10	Payroll taxes.	2,588,034	2,098,333	441,887	47,814
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	122,311	12,570	109,741	
c	Accounting.	206,608		206,608	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.	45,600			45,600
f	Investment management fees.	223,209	5,303	217,906	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	5,569,162	4,178,003	1,326,812	64,347
12	Advertising and promotion.	1,093,107	327,117	765,990	
13	Office expenses.	3,198,297	1,424,715	1,674,974	98,608
14	Information technology.	3,295,249	2,007,301	1,287,293	655
15	Royalties.				
16	Occupancy.	2,664,812	1,861,751	803,061	
17	Travel.	1,150,450	1,047,113	62,611	40,726
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	217,344	201,397	15,199	748
20	Interest.	2,639,503	1,435,829	1,203,674	
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	4,151,728	2,258,445	1,893,283	
23	Insurance.	385,563	385,563		
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	ENTERTAINMENT	1,054,894	817,117	209,618	28,159
b	PRINTING AND PUBLICATIO	954,005	587,333	313,322	53,350
c	BAD DEBTS	857,961	760,337		97,624
d	EQUIPMENT MAINTENANCE	553,951	133,329	418,167	2,455
e	All other expenses	1,070,533	756,145	270,257	44,131
25	Total functional expenses. Add lines 1 through 24e.	103,039,073	83,097,643	18,681,184	1,260,246
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		0	1	
	2	Savings and temporary cash investments		19,647,549	2	25,386,031
	3	Pledges and grants receivable, net		4,673,622	3	4,070,821
	4	Accounts receivable, net		1,875,194	4	1,638,089
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other 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) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		378,609	9	443,679
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a176,269,507			
	b	Less accumulated depreciation	10b79,171,387	72,487,873	10c	97,098,120
	11	Investments—publicly traded securities		50,217,417	11	39,472,821
	12	Investments—other securities See Part IV, line 11		15,124,316	12	16,817,203
	13	Investments—program-related See Part IV, line 11		3,123,778	13	2,968,823
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		1,518,716	15	1,565,923
	16	Total assets. Add lines 1 through 15 (must equal line 34)		169,047,074	16	189,461,510
Liabilities	17	Accounts payable and accrued expenses		7,488,807	17	10,701,105
	18	Grants payable		0	18	0
	19	Deferred revenue		1,356,936	19	835,004
	20	Tax-exempt bond liabilities		69,653,236	20	73,199,581
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other 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		24,056	23	6,137
	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		9,629,744	25	9,916,703
	26	Total liabilities. Add lines 17 through 25		88,152,779	26	94,658,530
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		40,768,677	27	48,625,141
	28	Temporarily restricted net assets		15,614,545	28	20,605,526
	29	Permanently restricted net assets		24,511,073	29	25,572,313
	Organizations that do not follow SFAS 117 (ASC 958), 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		80,894,295	33	94,802,980
	34	Total liabilities and net assets/fund balances		169,047,074	34	189,461,510

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	113,449,960
2	Total expenses (must equal Part IX, column (A), line 25)	2	103,039,073
3	Revenue less expenses Subtract line 2 from line 1	3	10,410,887
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	80,894,295
5	Net unrealized gains (losses) on investments	5	2,443,632
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,054,166
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	94,802,980

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	Yes
2c	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	2c	Yes
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes

Additional Data

Software ID:

Software Version:

EIN: 24-0795506

Name: WILKES UNIVERSITY

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
REVEREND MICHAEL BREWSTER TRUSTEE	1 00	X						0	0	0
LAURA CARDINALE TRUSTEE	3 00	X						0	0	0
TERRY CASEY TRUSTEE	2 00	X						0	0	0
DENISE S CESARE TRUSTEE	2 00	X						0	0	0
CHARLES F COHEN TRUSTEE	3 00	X						0	0	0
JEFF DAVIDOWITZ TRUSTEE	6 00	X						0	0	0
JASON GRIGGS TRUSTEE	7 00	X						0	0	0
CHRIS HACKETT TRUSTEE	3 00	X						0	0	0
DAVID HADLEY TRUSTEE	3 00	X						0	0	0
WILLIAM HANBURY TRUSTEE	3 00	X						0	0	0
JOHN KERR TRUSTEE	3 00	X						0	0	0
CAROL KEUP TRUSTEE	1 00	X						0	0	0
MILAN S KIRBY TRUSTEE	3 00	X						0	0	0
DANIEL KLEM JR TRUSTEE	4 00	X						0	0	0
DOROTHY DARLING MANGELSDORF TRUSTEE	1 00	X						0	0	0
MELANIE MASLOW LUMIA TRUSTEE	2 00	X						0	0	0
GEORGE MATZ TRUSTEE	3 00	X						0	0	0
WILLIAM R MILLER TRUSTEE	3 00	X						0	0	0
GERALD A MOFFATT TRUSTEE	7 00	X						0	0	0
GEORGE PAWLUSH TRUSTEE	6 00	X						0	0	0
THOMAS RALSTON TRUSTEE	3 00	X						0	0	0
HEDY RITTENMEYER TRUSTEE	7 00	X						0	0	0
STEVEN ROTH TRUSTEE	3 00	X						0	0	0
JAY S SIDHU TRUSTEE	3 00	X						0	0	0
VIRGINIA SIKES TRUSTEE	6 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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			
ELIZABETH SLAUGHTER TRUSTEE	3 00	X						0	0	0
MATTHEW SORDONI TRUSTEE	4 00	X						0	0	0
JOHN R MILLER TRUSTEE, CHAIR	12 00	X		X				0	0	0
DANIEL CARDELL TRUSTEE, VICE CHAIR	10 00	X		X				0	0	0
MICHAEL I GOTTDENKER TRUSTEE, TREASURER/ASST SECRETARY	6 00	X		X				0	0	0
MICHAEL J MAHONEY TRUSTEE, SECRETARY/ASST TREASURER	9 00	X		X				0	0	0
PATRICK LEAHY AS OF 7-1-12 PRESIDENT	75 00			X				197,100	0	24,941
LOREN PRESCOTT VP, FINANCE AND GENERAL COUNSEL	60 00			X				185,998	0	36,608
PAUL ADAMS VP, STUDENT AFFAIRS	50 00			X				128,119	0	20,554
MICHAEL WOOD VP, ADVANCEMENT	50 00			X				128,119	0	45,620
MELANIE WADE VP, ENROLLMENT SERVICES	50 00			X				123,565	0	13,853
TERESE WIGNOT AS OF 8-3-12 INTERIM SENIOR VP/PROVOST	60 00			X				112,295	0	14,862
BERNARD GRAHAM DEAN, PHARMACY NURSING	50 00				X			174,379	0	24,500
MICHAEL SPEZIALE VP OF STRATEGIC INITIATIVES	50 00				X			162,812	0	24,355
DALE BRUNS DEAN/CHAIR COLLEGE OF SCIENCE	50 00				X			151,692	0	21,423
MARY KROPIEWNICKI PROFESSOR/CHAIR DOCTORATE EDUCATION	50 00					X		147,121	0	12,163
RODNEY RIDLEY PROFESSOR/COLLEGE SCIENCE & ENGIN	50 00					X		142,905	0	19,914
JEFFREY ALVES DEAN BUSINESS SCHOOL	50 00					X		153,713	0	21,919
JAMAL GHORIESHI PROFESSOR/ CHAIR MECH ENGINEERING	50 00					X		136,594	0	18,365
TERI OOMS DIRECTOR,JOINT URBAN STUDIES	50 00					X		141,098	0	12,642
JOSEPH GILMOUR FORMER PRESIDENT (THROUGH 6/1/12)	75 00						X	250,599	0	79,847
C REYNOLD VERRET FORMER PROVOST (THROUGH 8/3/12)	60 00						X	155,609	0	31,636

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WILKES UNIVERSITY

Employer identification number
24-0795506

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

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

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☒

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

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

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

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

☐

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

☐

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

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

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

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

h

☐

Provide the following information about the supported organization(s)
- | | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |
- | (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1 - 9 above or IRC section (see instructions)) | (iv) Is the organization in col (i) listed in your governing document? | | (v) Did you notify the organization in col (i) of your support? | | (vi) Is the organization in col (i) organized in the U S ? | | (vii) Amount of monetary support |
|------------------------------------|----------|---|--|----|---|----|--|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |
- For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2012

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage						
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))		14				
15 Public support percentage for 2011 Schedule A, Part II, line 14		15				
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						▶
b 33 1/3% support test—2011. 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						▶
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization						▶
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization						▶
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						▶

Part IIISupport 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. 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—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

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

Facts And Circumstances Test

Explanation

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WILKES UNIVERSITY

Employer identification number
24-0795506

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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II

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

1

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

☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2

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

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

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 XIII, 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 XIII, 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

► \$ 1,446,000

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

► \$ _____

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

Cat No 52283D

Schedule D (Form 990) 2012

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 XIII

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 XIII 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 XIII. Check here if the explanation has been provided in Part XIII

☐

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back	
1a	Beginning of year balance	35,737,685	38,292,348	32,667,073	29,448,828	38,843,902
b	Contributions	238,664	229,858	551,885	906,589	964,402
c	Net investment earnings, gains, and losses	6,193,223	-1,283,157	6,619,932	4,155,073	-8,661,856
d	Grants or scholarships	1,440,800	1,317,000	1,363,000	1,675,095	1,530,321
e	Other expenditures for facilities and programs					
f	Administrative expenses	193,913	184,364	183,542	168,322	167,299
g	End of year balance	40,534,859	35,737,685	38,292,348	32,667,073	29,448,828

2

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

a

Board designated or quasi-endowment

26.580 %

b

Permanent endowment

45.730 %

c

Temporarily restricted endowment

27.690 %

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

3a(i)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
-------	------------------------------	-----------------------------

(ii)

related organizations

3a(ii)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
--------	------------------------------	-----------------------------

b

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

3b	<input type="checkbox"/> Yes	<input type="checkbox"/> No
----	------------------------------	-----------------------------

4

Describe in Part XIII 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	5,261,356		5,261,356
b	Buildings	131,043,402	46,812,399	84,231,003
c	Leasehold improvements			
d	Equipment	26,136,638	24,030,160	2,106,478
e	Other	13,828,111	8,328,828	5,499,283
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				97,098,120

Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	88,132,326
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	
a	Net unrealized gains on investments	2a	2,443,632
b	Donated services and use of facilities	2b	5,000
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	52,292
e	Add lines 2a through 2d	2e	2,500,924
3	Subtract line 2e from line 1	3	85,631,402
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	200,597
b	Other (Describe in Part XIII)	4b	27,617,961
c	Add lines 4a and 4b	4c	27,818,558
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	113,449,960

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	74,223,641
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	
a	Donated services and use of facilities	2a	5,000
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	52,292
e	Add lines 2a through 2d	2e	57,292
3	Subtract line 2e from line 1	3	74,166,349
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4c	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	200,597
b	Other (Describe in Part XIII)	4b	28,672,127
c	Add lines 4a and 4b	4c	28,872,724
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	103,039,073

Part XIII

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, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
	PART III, LINE 4	A COLLECTION OF ART WORK IS MAINTAINED BY THE UNIVERSITY PURELY FOR PUBLIC DISPLAY BOTH IN THE ART GALLERY AND ON CAMPUS. THEY ARE NOT HELD FOR SALE.
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE INTENDED USE OF THE UNIVERSITY'S ENDOWMENT FUNDS IS TO FUND SCHOLARSHIPS AS WELL AS DEPARTMENTAL CHAIRS AND TO SUPPORT OPERATING EXPENSES.
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE UNIVERSITY IS INCORPORATED IN THE COMMONWEALTH OF PENNSYLVANIA AS A NONPROFIT ORGANIZATION. THE UNIVERSITY HAS RECEIVED A DETERMINATION FROM THE INTERNAL REVENUE SERVICE THAT IT IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE UNIVERSITY AND RECOGNIZE A TAX LIABILITY (OR ASSET) IF THE UNIVERSITY HAS TAKEN AN UNCERTAIN TAX POSITION THAT MORE LIKELY THAN NOT WOULD NOT BE SUSTAINED UNDER EXAMINATION BY THE IRS. MANAGEMENT HAS ANALYZED THE TAX POSITIONS TAKEN BY THE UNIVERSITY, AND HAS CONCLUDED THAT AS OF MAY 31, 2013, THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN THAT WOULD REQUIRE RECOGNITION OF A LIABILITY (OR ASSET) OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE UNIVERSITY IS SUBJECT TO ROUTINE AUDITS BY TAXING JURISDICTIONS, HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIOD IN PROGRESS.
PART XI, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENTS 14,006 RENTALS EXPENSES 38,286
PART XI, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIP AID 28,229,649 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS -611,688
PART XII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENTS 14,006 RENTAL EXPENSES 38,286
PART XII, LINE 4B - OTHER ADJUSTMENTS		SCHOLARSHIP AID 28,229,649 STUDENT LOANS DISBURSED 442,478

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WILKES UNIVERSITY

Employer identification number
24-0795506

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1 Yes	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2 Yes	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3 Yes	
4 Does the organization maintain the following?	4a Yes	
a Records indicating the racial composition of the student body, faculty, and administrative staff?	4b Yes	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4c Yes	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4d Yes	
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	5a	No
a Students' rights or privileges?	5b	No
b Admissions policies?	5c	No
c Employment of faculty or administrative staff?	5d	No
d Scholarships or other financial assistance?	5e	No
e Educational policies?	5f	No
f Use of facilities?	5g	No
g Athletic programs?	5h	No
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?	6a Yes	
b Has the organization's right to such aid ever been revoked or suspended?	6b	No
If you answered "Yes" to either line 6a or line 6b, explain on Part II		
7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7 Yes	

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

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	ALL PUBLICATIONS IN THE AREAS OF RECRUITMENT PUBLICIZE THE UNIVERSITY'S NON-DISCRIMINATORY POLICY
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE ORGANIZATION RECEIVED ASSISTANCE THROUGH THE FOLLOWING LOAN PROGRAMS (PERKINS AND NURSING), SEOG, COLLEGE WORK STUDY, IAG (INSTITUTIONAL ASSISTANCE GRANT), PELL GRANT, MISCELLANEOUS NEED-BASED PHEAA GRANTS, NATIONAL GUARD AWARDS, AND PRIVATE SCHOLARSHIPS (ROTC PROGRAM)

SCHEDULE F
(Form 990)

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

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
WILKES UNIVERSITY

Employer identification number
24-0795506

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 the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites 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
See Add'l Data					
3a Sub-total	0	3			4,028,802
b Total from continuation sheets to Part I	0	3			117,492
c Totals (add lines 3a and 3b)	0	6			4,146,294

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶
- 3 Enter total number of other organizations or entities ▶

Part III

[illegible]

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, 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

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 (see instructions).

Schedule F (Form 990) 2012

Additional Data

Software ID:
Software Version:
EIN: 24-0795506
Name: WILKES UNIVERSITY

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
SOUTH ASIA	0	1	PROGRAM SERVICES	RECRUITMENT AND EDUCATION	6,783
EUROPE	0	0	PROGRAM SERVICES	RECRUITMENT AND EDUCATION	2,000
EAST ASIA AND THE PACIFIC	0	1	PROGRAM SERVICES	RECRUITMENT AND EDUCATION	6,719

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
NORTH AMERICA	0	1	PROGRAM SERVICES	RECRUITMENT AND EDUCATION	2,034
EUROPE	0	0	INVESTMENTS - ALTERNATIVE INVESTMENTS		571,135
CENTRAL AMERICA/ CARIBBEAN	0	0	INVESTMENTS - ALTERNATIVE INVESTMENTS		3,330,061

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, 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 region
NORTH AMERICA	0	0	INVESTMENTS - ALTERNATIVE INVESTMENTS		77,905
SUB-SAHARAN AFRICA	0	0	INVESTMENTS - ALTERNATIVE INVESTMENTS		32,165
EAST ASIA AND THE PACIFIC	0	0	INVESTMENTS - ALTERNATIVE INVESTMENTS		34,303

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
CENTRAL AMERICA/ CARIBBEAN	0	0	PROGRAM SERVICES	RECRUITMENT AND EDUCATION	5,415
SOUTH AMERICA	0	0	PROGRAM SERVICES	RECRUITMENT AND EDUCATION	21,895
SUB SAHARAN	0	0	PROGRAM SERVICES	RECRUITMENT AND EDUCATION	6,721

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
SOUTH ASIA	0	0	PROGRAM SERVICES	FOREIGN STUDY (PUNJABI 1 +1 PROGRAM EXPENDITURES)	1,033
SOUTH ASIA	0	1	PROGRAM SERVICES	RECRUTING STUDENTS	5,000
EAST ASIA AND THE PACIFIC	0	1	PROGRAM SERVICES	RECRUTING STUDENTS	6,250

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, 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 region
MIDDLE EAST AND NORTH AFRICA	0	1	PROGRAM SERVICES	RECRUTING STUDENTS	36,875

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WILKES UNIVERSITY

Employer identification number
24-0795506

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

1

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

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and email solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes

☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
JEROLD PANAS LINZY & PARTNERS 500 NORTH MICHIGAN AVENUE CHICAGO, IL 60611	CONSULTING STRATEGY		No	0	45,600	0
Total ▶					45,600	

3

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

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
		CHWALEK GOLF TOURNAMENT (event type)	ALTERNATIVE SPRING BREAK TRIP (event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	16,400	25,127	41,527
	2	Less Contributions . .	6,525	11,525	18,050
	3	Gross income (line 1 minus line 2)	9,875	13,602	23,477
Direct Expenses	4	Cash prizes			
	5	Noncash prizes . .	498		498
	6	Rent/facility costs . .	3,109		3,109
	7	Food and beverages .	2,965	536	3,501
	8	Entertainment			
	9	Other direct expenses .	1,872	5,026	6,898
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Combine line 3, column (d), and line 10 ▶			

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

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

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

a Is the organization licensed to operate gaming activities in each of these states?

Yes

No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Yes

No

b If "Yes," explain _____


Does the organization operate gaming activities with nonmembers? ☐ **Yes** ☐ **No**


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

13 Indicate the percentage of gaming activity operated in



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

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

Name 

Address 

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


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


c If "Yes," enter name and address of the third party


Name 

Address 

16 Gaming manager information

Name 


Gaming manager compensation  \$ _____

Description of services provided 

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

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

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

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
EXPLANATION OF FUNDRAISING PAYMENTS	SCHEDULE G, PART I, LINE 2B, COLUMN (V)	THE FIRM OF JEROLD, PANAS, LINZY & PARTNERS PROVIDED ON SITE COUNSEL FOR A \$20 MILLION CAPITAL CAMPAIGN AS WELL AS DEVELOPED STRATEGY FOR THE CAMPAIGN INCLUDING VOLUNTEER ORGANIZATION, PROSPECT ASSESSMENT, AND SOLICITATION SCHEDULES AND TIMELINES THEIR SERVICES ENDED IN NOVEMBER OF 2012

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
WILKES UNIVERSITY

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

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

OMB No 1545-0047

2012

Open to Public
Inspection

Employer identification number
24-0795506

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2

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

▶

3

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

▶

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) NAMED SCHOLARSHIPS	273	1,121,063			
(2) NEED BASED GRANTS AND SCHOLARSHIPS	1358	8,429,935			
(3) OTHER SCHOLARSHIPS	1740	16,198,520			
(4) REMISSIONS - UPWARD BOUND ETC	781	2,480,131			
(5) STUDENT LOANS DISBURSED	337	442,478			

Part IV

Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 WILKES UNIVERSITY MAINTAINS A COMPREHENSIVE PROGRAM OF FINANCIAL AID TO ASSIST STUDENTS IN THE FINANCING OF THEIR EDUCATIONS PROGRAMS THE UNIVERSITY AWARDS BOTH MERIT SCHOLARSHIPS AND NEED-BASED GRANTS TO UNDERGRADUATE STUDENTS MERIT AWARDS ARE BASED ON HIGH SCHOOL ACHIEVEMENT INCLUDING SAT SCORES AND HIGH SCHOOL CLASS RANK STUDENTS MUST COMPLETE THE FREE APPLICATION FOR FEDERAL STUDENT AID TO HAVE THEIR ELIGIBILITY FOR NEED-BASED AID DETERMINED

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WILKES UNIVERSITY

Employer identification number
24-0795506

Part I

Questions Regarding Compensation

	Yes	No
<div><div>1a</div><div>Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</div><div><div><div><input type="checkbox"/> First-class or charter travel</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div></div><div><div><input checked="" type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input checked="" type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div></div></div>		
<div><div>b</div><div>If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</div></div>	Yes	
<div><div>2</div><div>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?</div></div>	Yes	
<div><div>3</div><div>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, but explain in Part III</div><div><div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div></div><div><div><input type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div></div></div>		
<div><div>4</div><div>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</div></div>		
<div><div>a</div><div>Receive a severance payment or change-of-control payment?</div></div>		No
<div><div>b</div><div>Participate in, or receive payment from, a supplemental nonqualified retirement plan?</div></div>		No
<div><div>c</div><div>Participate in, or receive payment from, an equity-based compensation arrangement?</div><div>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</div></div>		No
<div><div>Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.</div></div>		
<div><div>5</div><div>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</div></div>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div><div>If "Yes," to line 5a or 5b, describe in Part III</div></div>		No
<div><div>6</div><div>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</div></div>		
<div><div>a</div><div>The organization?</div></div>		No
<div><div>b</div><div>Any related organization?</div><div>If "Yes," to line 6a or 6b, describe in Part III</div></div>		No
<div><div>7</div><div>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</div></div>		No
<div><div>8</div><div>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</div></div>		No
<div><div>9</div><div>If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?</div></div>		

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 and Title		(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				
See Additional Data Table								

Part IIISupplemental 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.

Identifier	Return Reference	Explanation
	PART I, LINE 1A	HOUSING ALLOWANCE - HOUSING WAS PROVIDED FOR THE UNIVERSITY PRESIDENT, VP OF FINANCE, AND THE UNIVERSITY'S PROVOST AS WELL AS THEIR FAMILIES. THIS INCLUDED PAYMENT OF ALL UTILITIES AND INSURANCE ON THE RESIDENCES. NO PART OF THE HOUSING ALLOWANCE WAS TREATED AS TAXABLE COMPENSATION. THE UNIVERSITY MAINTAINED WRITTEN LEASES THAT DOCUMENT THE USE OF UNIVERSITY HOUSING BY EMPLOYEES. AS OF CALENDAR YEAR END, WILKES WAS NOT PROVIDING ANY EMPLOYER HOUSING FOR THOSE LISTED IN SCHEDULE J. HOUSING HAD BEEN PROVIDED UNTIL THEIR DEPARTURE IN JULY 2012 FROM THE UNIVERSITY FOR BOTH PRESIDENT JOSEPH GILMOUR AND C. REYNOLD VERRET. LOREN PRESCOTT CHOSE TO MOVE OFF CAMPUS IN OCTOBER 2012. THEREFORE, HOUSING EXPENSES INCLUDED IN THE SCHEDULE J FIGURES WERE ONLY FOR THE MONTHS RESIDED IN UNIVERSITY HOUSING. HEALTH OR SOCIAL CLUB DUES - ALL UNIVERSITY EMPLOYEES WERE OFFERED A MEMBERSHIP AT THE LOCAL YMCA. IN ADDITION, CERTAIN MEMBERS OF THE PRESIDENT'S CABINET BELONGED TO A LOCAL SOCIAL CLUB WHICH REQUIRED DUES OF \$108 PER MONTH. THE HEALTH OR SOCIAL CLUB DUES WERE NOT TREATED AS TAXABLE COMPENSATION. CLEANING SERVICES - CLEANING SERVICES WERE PROVIDED AT THE PRESIDENT'S RESIDENCE BY A UNIVERSITY CUSTODIAN. THE CLEANING SERVICES WERE NOT TREATED AS TAXABLE COMPENSATION. TRAVEL FOR COMPANIONS - TRAVEL FOR COMPANIONS WAS FOR THE PRESIDENT'S SPOUSE. NO PART OF THE TRAVEL FOR COMPANIONS WAS TREATED AS TAXABLE COMPENSATION. THE BOARD'S CONTRACTUAL AGREEMENT WITH THE PRESIDENT AUTHORIZED REIMBURSEMENT FOR TRAVEL FOR THE SPOUSE WHEN HER PRESENCE IS DEEMED BY THE PRESIDENT TO BE IN FURTHERANCE OF THE MISSION OF THE UNIVERSITY. THE UNIVERSITY KEPT RECEIPTS TO DOCUMENT TRAVEL.

Software ID:

Software Version:

EIN: 24-0795506

Name: WILKES UNIVERSITY

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
PATRICK LEAHY AS OF 7-1-12	(i)	146,100	0	51,000	12,750	12,191	222,041	0
	(ii)	0	0	0	0	0	0	0
LOREN PRESCOTT	(i)	183,485	500	2,013	18,487	18,121	222,606	0
	(ii)	0	0	0	0	0	0	0
MICHAEL WOOD	(i)	127,040	500	579	13,143	32,477	173,739	0
	(ii)	0	0	0	0	0	0	0
BERNARD GRAHAM	(i)	173,879	500	0	17,571	6,929	198,879	0
	(ii)	0	0	0	0	0	0	0
MICHAEL SPEZIALE	(i)	161,091	500	1,221	15,572	8,783	187,167	0
	(ii)	0	0	0	0	0	0	0
DALE BRUNS	(i)	151,192	500	0	14,601	6,822	173,115	0
	(ii)	0	0	0	0	0	0	0
MARY KROPIEWNICKI	(i)	146,609	500	12	6,221	5,942	159,284	0
	(ii)	0	0	0	0	0	0	0
RODNEY RIDLEY	(i)	142,390	500	15	12,658	7,256	162,819	0
	(ii)	0	0	0	0	0	0	0
JEFFREY ALVES	(i)	138,800	500	14,413	14,601	7,318	175,632	0
	(ii)	0	0	0	0	0	0	0
JAMAL GHORIESHI	(i)	136,094	500	0	10,791	7,574	154,959	0
	(ii)	0	0	0	0	0	0	0
TERI OOMS	(i)	124,410	15,500	1,188	12,258	384	153,740	0
	(ii)	0	0	0	0	0	0	0
JOSEPH GILMOUR	(i)	250,586	0	13	24,998	54,849	330,446	0
	(ii)	0	0	0	0	0	0	0
C REYNOLD VERRET	(i)	122,353	0	33,256	12,851	18,785	187,245	0
	(ii)	0	0	0	0	0	0	0

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

2012

Open to Public Inspection

Name of the organization
WILKES UNIVERSITY

Employer identification number
24-0795506

Part I

Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	CITY OF WILKES BARRE FINANCE AUTHORITY SERIES 2007		968254AC6	05-30-2007	54,134,142	REFUNDING BONDS AND PREPAYING		X		X		X
B	NORTHEASTERN PA HOSPITAL & EDUCATION AUTHOR SERIES A	23-7394107	664556BD8	05-09-2012	16,956,391	FINANCE NEW FACILITY		X		X		X
C	NORTHEASTERN PA HOSPITAL & EDUCATION AUTHOR SERIES B	23-7394107		04-13-2012	15,000,000	FINANCE NEW FACILITY		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired								
2	Amount of bonds legally defeased								
3	Total proceeds of issue	54,134,142		16,956,391		15,000,000			
4	Gross proceeds in reserve funds	2,127,750		1,657,500					
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows	51,254,416							
7	Issuance costs from proceeds	738,963		284,230		139,234			
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds	13,013							
10	Capital expenditures from proceeds	15,014,661		15,014,661		7,999,897			
11	Other spent proceeds								
12	Other unspent proceeds	6,860,869				6,860,869			
13	Year of substantial completion	2007		2013		2013			
14	Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes	No
		X			X		X		
15	Were the bonds issued as part of an advance refunding issue?	X			X		X		
16	Has the final allocation of proceeds been made?	X			X		X		
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X			

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	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?	X							
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0%				%		%	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0%				%		%	
6	Total of lines 4 and 5	0%				%		%	
7	Does the bond issue meet the private security or payment test?		X		X		X		
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	X		X		X			

Part IV

Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		X		X		
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X		X		X		
b	Exception to rebate?		X		X		X		
c	No rebate due?	X		X		X			
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X			X	X			
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		
b	Name of provider								
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								

Part IV Arbitrage (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		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?								
6	Were any gross proceeds invested beyond an available temporary period?		X		X		X		
7	Has the organization established written procedures to monitor the requirements of section 148?		X		X		X		

Part V Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has 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?	X		X		X			

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

Identifier	Return Reference	Explanation
SCHEDULE K, PART III, LINE 1	MEMBER OF AN LLC	WILKES UNIVERSITY IS THE SOLE MEMBER OF WU REAL ESTATE, LLC, WHICH IS A DISREGARDED ENTITY OF THE UNIVERSITY WU REAL ESTATE LLC'S OWNERSHIP OF BOND FINANCED FACILITIES IS THEREFORE TREATED AS OWNERSHIP BY A 501(C)(3) ENTITY
SCHEDULE K, PART III, LINE 4	PRIVATE BUSINESS USE BY OTHER THAN 501(C)(3) ORGANIZATION	THE PERCENTAGE SHOWN ON PART III, LINE 4 REPRESENTS RENT RECEIVED FROM A HOLDOVER BUSINESS TENANT OF A BUILDING PURCHASED BY THE UNIVERSITY AND IS CALCULATED ON THE BASIS OF ONE BUILDING WHICH WAS FINANCED BY APPROXIMATELY 19 63% OF THE PROCEEDS OF THE BOND ISSUE AS OF SEPTEMBER 2012, THIS BUSINESS TENANT HAD TERMINATED THEIR LEASE
SCHEDULE K, PART III, LINE 5	PRIVATE BUSINESS USE AS A RESULT OF UNRELATED TRADE OF BUSINESS ACTIVITY	THE PERCENTAGE SHOWN ON PART III, LINE 5 REPRESENTS RENT RECEIVED FROM ELDERLY HOLDOVER TENANTS OF A BUILDING PURCHASED BY THE UNIVERSITY TO PROVIDE STUDENT HOUSING THESE NON-STUDENT TENANTS ARE PERMITTED TO STAY IN THE BUILDING UNTIL THE TENANT DECIDES TO TERMINATE THE LEASE THE PERCENTAGE IS CALCULATED ON THE BASIS OF ONE BUILDING WHICH WAS FINANCED BY APPROXIMATELY 19 63% OF THE PROCEEDS OF THE BOND ISSUE, AND OVER THE TERMS OF THE BONDS AS THESE NON-STUDENT LEASES ARE TERMINATED, THE UNIVERSITY EXPECTS THAT THE UNRELATED USE WILL DROP TO 0% AND REPRESENT A VERY SMALL PORTION OF THE USE OF THE BUILDING
SCHEDULE K, PART III, LINE 6	TOTAL PRIVATE BUSINESS USE	THIS PERCENTAGE REPRESENTS USE OF ONLY ONE BUILDING FINANCED WITH APPROXIMATELY 19 63% OF THE BOND PROCEEDS THE USE AS MEASURED OVER THE ENTIRE BOND ISSUE IS LESS THAN 1% OF THE BOND PROCEEDS FOR THE ANNUAL PERIOD COVERED BY SCHEDULE K
SCHEDULE K, PART III, LINE 7	PRACTICES AND PROCEDURES FOR TAX EXEMPT BOND LIABILITIES	ALTHOUGH WILKES HAS ADOPTED MANAGEMENT PRACTICES AND PROCEDURES TO ENSURE POST ISSUANCE COMPLIANCE OF ITS TAX EXEMPT BOND LIABILITIES, THESE PRACTICES AND PROCEDURES WERE NOT IN WRITING AT THE END OF WILKES' TAX YEAR
SCHEDULE K, PART IV, LINE 2C	REBATE COMPUTATION PERFORMANCE DATE	WITH RESPECT TO ISSUE A, THE REBATE COMPUTATION WAS PERFORMED ON 5/23/13
SCHEDULE K, PART IV, LINE 2C	REBATE COMPUTATION PERFORMANCE DATE	WITH RESPECT TO ISSUE B, THE REBATE COMPUTATION WAS PERFORMED ON 5/31/13
SCHEDULE K, PART IV, LINE 2C	REBATE COMPUTATION PERFORMANCE DATE	WITH RESPECT TO ISSUE C, THE REBATE COMPUTATION WAS PERFORMED ON 7/8/13

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2012
Open to Public Inspection

Name of the organization WILKES UNIVERSITY	Employer identification number 24-0795506
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Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

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

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$

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

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

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

Part III Grants or Assistance Benefitting Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) DENISE CESARE	TRUSTEE, SEE BELOW	1,185,345	HEALTH INSURANCE PLAN		No
(2) MATTHEW SORDONI	TRUSTEE, SEE BELOW	855,529	CONSTRUCTION SERVICES		No

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
SCHEDULE L, PART IV	EXPLANATION OF RELATIONSHIPS BETWEEN INTERESTED PERSONS AND ORGANIZATION	DENISE CESARE IS A MEMBER OF THE UNIVERSITY'S BOARD OF TRUSTEES AND IS ALSO THE PRESIDENT AND CEO OF BLUE CROSS OF NEPA MATTHEW SORDONI IS A MEMBER OF THE UNIVERSITY'S BOARD OF TRUSTEES AND ALSO HAS A FAMILY RELATIONSHIP WITH THE OWNER OF SORDONI CONSTRUCTION SERVICES, INC ALL CONTRACTS IN THE ABOVE RELATIONSHIPS ARE CONTRACTED AT ARM'S LENGTH THROUGH THE UNIVERSITY'S PROCUREMENT PROCESS WHICH INCLUDES A COMPETITIVE BID PROCESS AND THE PERSONS DISCLOSED ARE NOT PART OF THE DECISION MAKING PROCESS

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WILKES UNIVERSITY

Employer identification number
24-0795506

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	X		2,520	FAIR MARKET VALUE
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
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				
AUD/VIS				
25 Other ► (EQUIP)	X	1	4,900	APPRAISAL VALUE
ENGIN				
26 Other ► (EQUIP)	X	1	14,375	APPRAISAL VALUE
27 Other ► (FURNITURE)	X	1	4,125	APPRAISAL VALUE
28 Other ► (OTHER)	X	2	2,995	FAIR MARKET VALUE

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

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

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

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

Cat No 51227J

Schedule M (Form 990) (2012)

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization WILKES UNIVERSITY	Employer identification number 24-0795506
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	
	FORM 990, PART VI, SECTION B, LINE 12C	WILKES UNIVERSITY'S CONFLICT OF INTEREST POLICY COVERS ALL BOARD MEMBERS AND ANY INDIVIDUAL THAT HAS BUDGETARY/FINANCIAL RESPONSIBILITIES WITHIN THE UNIVERSITY. ANY CONFLICTS OF INTEREST CONCERNING BOARD MEMBERS ARE FORWARDED TO THE AUDIT COMMITTEE FOR REVIEW AND APPROVAL. ALL CONFLICT OF INTEREST STATEMENTS ARE REVIEWED UPON SUBMISSION AND FORWARDED TO THE AUDIT COMMITTEE AS APPROPRIATE. ANY UNIVERSITY ACTIVITIES THAT HAVE A POTENTIAL CONFLICT ARE USUALLY DETECTED BEFORE A CONTRACT IS EXECUTED.
	FORM 990, PART VI, SECTION B, LINE 15	THE HUMAN RESOURCES COMMITTEE OF THE BOARD OF TRUSTEES PERFORMS AN ANNUAL REVIEW OF THE COMPENSATION PROVIDED TO THE UNIVERSITY'S PRESIDENT AND VICE PRESIDENTS. BENCHMARK DATA, INCLUDING DATA FROM COLLEGES AND UNIVERSITY PROFESSIONAL ASSOCIATION FOR HUMAN RESOURCES (CUPE) IS USED FOR COMPARITIVE PURPOSES FOR EXECUTIVE POSITIONS. THE LAST BENCHMARKING COMPARISON WAS COMPLETED IN AUGUST OF 2013. THE UNIVERSITY KEEPS WRITTEN DOCUMENTATION OF THE HUMAN RESOURCES COMMITTEE'S DELIBERATION AND DECISION MAKING PROCESS.
	FORM 990, PART VI, SECTION C, LINE 19	WILKES UNIVERSITY MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	STUDENT LOANS ADVANCED 442,478. CHANGE IN LIABILITY ON SPLIT INTEREST AGREEMENTS 611,688.
AUDIT COMMITTEE REVIEW OF FINANCIAL STATEMENTS	FORM 990, PART XII, LINE 2C	THE PROCESS BY WHICH THE AUDIT COMMITTEE REVIEWS THE FINANCIAL STATEMENTS HAS NOT CHANGED FROM THE PRIOR YEAR.
ADDITIONAL INFORMATION - PRESIDENT'S SABBATICAL	FORM 990, SCHEDULE J, ADDITIONAL INFORMATION	PRESIDENT JOSEPH GILMOUR HAD BEEN ON PAID SABBATICAL DURING THE PERIOD OF JUNE 2012 THROUGH JUNE 2013.

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
WILKES UNIVERSITY

Employer identification number
24-0795506

Part I

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) WU REAL ESTATE LLC 170 S FRANKLIN STREET WILKES BARRE, PA 18766 20-5799312	STUDENT RENTAL	PA	2,380,008	12,189,593	WILKES UNIVERSITY

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III

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

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

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) HAROLD & BARBARA FLANNERY CRUT-98	ANNUITY	PA		T	2,293	308,285	100 000 %		No
(2) JOSEPH J & JANICE W SAVITZ CHARITABLE REMAINDER TRUST 620 LIBERTY AVENUE 10TH FLOOR PITTSBURGH, PA 15222 23-7964168	ANNUITY	PA		T	613	2,064	100 000 %		No
(3) GORKABARTUSKA CHARITABLE REMAINDER UNITRUST 620 LIBERTY AVENUE 10TH FLOOR PITTSBURGH, PA 15222 23-6453339	ANNUITY	PA		T	8,298	236,426	100 000 %		No
(4) GLENN F LEITER CHARITABLE REMAINDER UNITRUST 267 S FRANKLIN STREET WILKES BARRE, PA 18766 90-0285467	ANNUITY	MD		T	1,010	20,774	100 000 %		No

Part V

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

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

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

Lease of facilities, equipment, or other assets to related organization(s)

k

Lease of facilities, equipment, or other assets from related organization(s)

l

Performance of services or membership or fundraising solicitations for related organization(s)

m

Performance of services or membership or fundraising solicitations by related organization(s)

n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

Other transfer of cash or property to related organization(s)

s

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

1s

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

2

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2012

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

[illegible]

Software ID:
Software Version:
EIN: 24-0795506
Name: WILKES UNIVERSITY

Part VII **Supplemental Information**

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

Identifier	Return Reference	Explanation	
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TY 2012 Consideration Computation Statement

Name: WILKES UNIVERSITY

EIN: 24-0795506

Statement: AS PART OF THE ACQUISITION, THE SELLER AGREED TO TRANSFER THE PROFESSIONAL AND CONTRACTUAL RELATIONS WITH THREE OF ITS EMPLOYEES, KRISTIN DEGNAN-BOONIN, KARLA KOVATCH, AND SARA GRAVINE FOR CONSIDERATION OF \$3,000 INCLUDED IN THE SALE. IN ADDITION, THE SELLER AGREED TO A SEPARATE CONTRACT TO SERVE AS THE PURCHASER'S FACULTY FOR NOT LESS THAN FIVE YEARS, WHICH TERM ENDS ON AUGUST 27, 2016 FOR CONSIDERATION OF \$6,000.