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# Form **990**

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

2012

OMB No 1545-0047

Open to Public Inspection

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

A Fo	r the :	2012 cal		9 07-01-2012 ,2012, and ending 06	-30-2013			
B Ch	eck ıf a	pplicable	C Name of organization York College of Pennsylvania			D Employ	er iden	ntification number
☐ Add	lress ch	nange	Doing Business As			23-13	52698	3
∏ Na	me cha	nge	Doing business as					
_	ıal retu		Number and street (or P O box if m 441 Country Club Road	all is not delivered to street address) Room/	suite	E Telepho	ne numb	ber
	mınate		Suite			(717)	815-6	579
_	ended		City or town, state or country, and Z York, PA 17403	TIP + 4				
J App	olication	n pending				<b>G</b> Gross re	ceipts \$	138,486,863
			<b>F</b> Name and address of prin Pamela Gunter-Smith	icipal officer		s this a group ffiliates?	return	for
			441 Country Club Road			illiaces.		1 1631 110
			York,PA 17403					ded? Tyes No
Ta	x-exem	npt status	<b>▽</b> 501(c)(3) <b>┌</b> 501(c)( ) <b>◄</b> (1	nsert no ) 4947(a)(1) or 527	ı ۱۱	"No," attach	a list (	(see instructions)
J W	ebsite	e: F ww	w ycp edu		H(c) (	Group exempti	on num	nber 🕨
<b>K</b> For	n of or	ganızatıon	Corporation Trust Association	n	<b>L</b> Year	of formation 187	73 <b>M</b>	State of legal domicile PA
Pa	rt I	Sum	mary					
a)			escribe the organization's missio ECONDARY EDUCATION AND	n or most significant activities PRE-SCHOOL THROUGH GRADE 1	2 EDUCATI	ION		
Š	-							
	_ :	C    - +  -			1 . 6	2 F 0/ f - h		
Governance		C neck tr	nis box 🞮 - if the organization dis	scontinued its operations or disposed	or more tha	an 25% of its	net ass	sets
	3	Number	of voting members of the govern	ng body (Part VI, line 1a)			3	30
60	4	Number	of independent voting members o	of the governing body (Part VI, line 1	b)	[	4	27
Activities &	5	Total nu	mber of individuals employed in o	calendar year 2012 (Part V, line 2a)		[	5	2,329
۲ کو	6	Total nu	mber of volunteers (estimate if n	ecessary)			6	239
-				art VIII, column (C), line 12			7a	35,328
	Ь	Net unre	lated business taxable income fr	rom Form 990-T, line 34			7b	20,772
	_					Prior Year		Current Year
<u>a</u>	8			ne 1h)	•	5,901,6 107,298,5		6,265,585
Ravenue	9	_		ne 2g)	), lines 3, 4, and 7d )			108,936,400
ř	10 11			(A), lines 3, 4, and 7d )	•	853,3 842,5		1,156,069
	12			(must equal Part VIII, column (A), li	ne ——	042,5	39	900,404
						114,896,0	97	117,258,538
	13			IX, column (A), lines 1-3)		13,778,6	18	15,393,422
	14			X, column (A), line 4)			0	0
8	15	Saları 5-10)		e benefits (Part IX, column (A), lines	;	54,474,6	47	56,997,620
Expenses	16a	Profes	sional fundraising fees (Part IX,	column (A), line 11e)		67,0	27	66,000
ਡੋ	b	Total fu	ndraising expenses (Part IX, column (D)	, line 25) • 2,185,635				
	17	Other	expenses (Part IX, column (A), l	ınes 11a-11d, 11f-24e)		37,101,0	12	37,204,698
	18			st equal Part IX, column (A), line 25)		105,421,3		109,661,740
	19	Reven	ue less expenses Subtract line	18 from line 12		9,474,7	-	7,596,798
Not Assets or Fund Balances					Begin	ning of Curren Year	ıt	End of Year
25 e	20	Totala	assets (Part X, line 16)			391,537,8	25	412,693,232
절	21	Total I	liabilities (Part X, line 26)			122,995,2	08	121,938,878
<u> ŽZ</u>	22	Netas	sets or fund balances Subtract	line 21 from line 20		268,542,6	17	290,754,354
Pai	rt II	Sign	ature Block					
my ki	nowled irer ha	dge and las any kr	belief, it is true, correct, and com nowledge **	imined this return, including accompa iplete Declaration of preparer (other		) is based on a		
Sign		l'.	ature of officer			Date		
Here	е		ATTHEW SMITH CFO or print name and title					
		<u> </u>	Print/Type preparer's name	Preparer's signature	Date	Chack T	PTIN	
Paid	4		Frank Giardini	Sparot o organical o	20.0	Check If self-employed	411	
	a pare		imm's name 🕩 GRANT THORNTON LLP			Firm's EIN 🕨		
	ραι σ · Onl		rım's address ► 2001 MARKET STREET	SLITTE 700		Phone no (215)	561_42	100

PHILADELPHIA, PA 19103

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

✓ Yes 厂No

orm	990 (2	2012)			Page 2
Part	1111		rvice Accomplishments esponse to any question in this Part II	т	
1	Briefl	y describe the organization's missi		1	
- YORK PROG WHIC DFFE THE G	COLI GRAMS H CO R CAR JNDEF	LEGE WILL MAKE AVAILABLE, AT S, WHICH INCLUDE GENERAL ED VER A BROAD RANGE OF MAJOR REFULLY SELECTED MASTER'S A RGRADUATE CURRICULUM AND S A COLLEGE PREPATORY SCHO	THE BACCALAUREATE AND ASSOUCATION COMPONENTS APPROPR S IN PROFESSIONAL AND CAREER ND DOCTORAL DEGREE PROGRAMS THE PROFESSIONAL DEVELOPMEN	CIATE DEGREE LEVELS, HIGH-QUAL IATE FOR THE PROGRAM'S DEGREE I FIELDS AS WELL AS THE ARTS AND S I, WHICH REFLECT THE ENROLLMENT T NEEDS OF THE REGION YORK COU TUAL, CREATIVE, AND PERSON DEVE ERVICE AND LEADERSHIP	LEVEL AND SCIENCES, TO EMPHASIS OF JNTRY DAY
2	the pr	or Form 990 or 990-EZ?	ficant program services during the yea		Yes 🗸 No
3	Did th	ces?	r make significant changes in how it c		Yes V No
4	Desci expen		vice accomplishments for each of its t )(4) organizations are required to repo	hree largest program services, as meas rt the amount of grants and allocations t	
4a	WITH AMEN CURR COLLE UNDE IN NU SERV. REGIO YORK FROM PRIVA AVER. ARE N NURS TO RE AMER FOR H EMPH CARE	COLLEGE OF PENNSYLVANIA TRACES ITS I YORK COLLEGIATE INSTITUTE, A NON-DEI DED TO PROVIDE FOR A TWO-YEAR LIBER LICULUM GREW TO A FULL BACHELOR'S DE GEOFFERS MORE THAN 50 BACCALAUREA GRADUATE STUDENTS THE COLLEGE ALS IRSING PRACTICE IN FALL 2011 YORK COLLEGE OF ITS STUDENTS LITTLE KNOWN OUT DIVING THE STUDENTS LITTLE KNOWN OUT DIVING THE ACT OF THE 160 FULL-TIME IN A GEOGRAPHIC AREA THAT GROWS LARG INCOMING FRESHMAN AWARD FROM MAKING REAL CONTRIBUTIONS TO COMMULING GRADUATES PASSED THE ANCC FOR CECEIVE VERY POSITIVE RANKINGS IN NATIONAL CASES TO THE STOPLESSIONAL EXCELLENCE IN EARLY 2011 ASIZES PROFESSIONALISM FOR ALL CAREE	NOMINATIONAL SISTER INSTITUTION WHICH WAL ARTS PROGRAM AT THE JUNIOR COLLEGE LEGREE PROGRAM AND THE INSTITUTION'S NAM ATTE MAJORS IN PROFESSIONAL PROGRAMS, THE SO OFFERS MASTER'S PROGRAMS IN BUSINESS LLEGE HAS THRIVED BECAUSE IT HAS EMBRACESTIDE SOUTH-CENTRAL PENNSYLVANIA THIRTY US NEWS AND WORLD REPORT AND HAS GROWED FACULTY FROM THE BEST GRADUATE SCHOOLS EACH PASSING YEAR YORK COLLEGE'S CONTRAINED THAT AVERAGE 17 6% OF TUITION INSTITUTIONAL FUNDS WAS \$4,313 THE COLL NITIES ALL ACROSS THE COUNTRY- AND INCRUMS CERTIFICATION AND 80% OF EDUCATION DNAL PUBLICATIONS INCLUDING BARRON'S BEST OF REGIONAL SCHOOL", "NATIONAL BEST BUT RELEASED THE RESULTS OF TIS SECOND AND REPORTUNITIES AND HELPS ITS' STUDENTS SITS' STUDENTS TO APPLY WHAT THEY LEARN	14,617,317 ) (Revenue \$ 107, VN AS YORK COUNTY ACADEMY IN 1929, THE IN AS FOUNDED IN 1873 IN 1941, THE INSTITUTION FOR AS CHANGED TO YORK COLLEGE OF PENNSY E SCIENCES AND HUMANITIES TO ITS 4,600 FULO, EDUCATION, AND NURSING AND BEGAN OFFER ED INNOVATION AND CHANGE, AND HAS DEDICATED IN THE COLLEGE IS NOW RANKE OF THE EIGHTH LARGEST PRIVATE COLLEGE IN THE COULTY OUTSTANDING STUDENTS OF THE COLLEGE COST EFFECTIVE FOR MOST EGE HAS PRODUCED OVER 31,000 EXTRAORDING STUDENTS OF THE COLLEGE COST EFFECTIVE FOR MOST EGE HAS PRODUCED OVER 31,000 EXTRAORDING STUDENTS OF THE COLLEGE COST EFFECTIVE FOR MOST EGE HAS PRODUCED OVER 31,000 EXTRAORDING STUDENTS PASSED THE PRAXIX PSST YORK COST BUYS IN HIGHER COLLEGES AND US NEWS AN INT, "BEST VALUE", AND "HIDDEN GEM "THE YOR IULD NATIONAL POLL RESULTS ON PROFESSIONAD DEVELOP A CONCRETE PLAN TO ATTAIN ACADEM IN THE CLASSROOM IN THE "REAL WORLD" AND	ON'S CHARTER WAS DILEGE IN 1968, THE LLYANIA TODAY THE L-TIME LING A DOCTORATE TED ITSELF TO THE DE AS THE 98TH BEST SE IN PENNSYLVANIA STUDENTS THE ARY ALUMNI WHO 2013, 100% OF OLLEGE CONTINUES D WORLD REPORT'S R COLLEGE CENTER LISM THE COLLEGE MIC GROWTH AND
4b	SCHO THE C FOLLC PENN INCLL INAUC SCHO NEW COUR SENIC RANG TREA STANI THE F	COUNTRY DAY SCHOOL IS A COEDUCATIC OL WAS FOUNDED IN 1953 BY A GROUP O CHILDREN OF YORK COUNTY IN 1956, THI DWING YEARS THE SCHOOL GREW TO INCLUSYLVANIA, AND THE ACADEMIC PROGRAM USION OF QUALIFIED YORK COUNTRY DAY GURATION OF A NEW CURRICULUM, STRESOL TO PREPARE STUDENTS FOR ADMISSIC OL'S GRADUATION REQUIREMENTS AND AI PROGRAM FOR TWO AND THREE YEAR OLL ISE AT YORK COLLEGE EACH SEMESTER, A ORS' CLASS SCHEDULE IS DESIGNED WITH DIE OF SUBJECTS AND HAVE SOME "PRACTIC TO YORK COUNTRY DAY SCHOOL STUDENT DARDS AS FULL-TIME STUDENTS UNDERCO	F PARENTS AND CIVIC LEADERS WHO SOUGHT ESCHOOL WAS MOVED TO A SEVENTEEN ACREUDE PRESCHOOL CLASSES THROUGH GRADE TWAS ENRICHED THROUGH THE USE OF COLLEGE COURSES IN 1985, THE SING NEW ACADEMIC PROGRAMS AND EXPANION TO THE MOST DEMANDING INSTITUTIONS OF COLORY AND THE MOST DEMANDING INSTITUTIONS OF COLORY AND TAKE OF THE MOST DEMANDING PROGREMENTS, NEW AS PART OF GRADUATION REQUIREMENTS, ND MAY TAKE UP TO THREE COURSES PER SEIFTIME BUILT IN FOR COLLEGE COURSES TAKING THE FACULTY FOR COLLEGE STUDENTS AND THE FACULTY FOR SAS COLLEGE STUDENTS AND THE FACULTY LASSMEN WHO HAVE DEMONSTRATED ACADEM	776,105 ) (Revenue \$ 3, LING STUDENTS FROM PRESCHOOL THROUGH TO A CHALLENGING ACADEMIC PROGRAM IN A PRINTRACT IN THE SUBURBS SOUTHWEST OF YORK, WELVE IN 1975, THE SCHOOL BECAME A PARTY OF FOR EXCELLENCY OF THE PLAN FOR EXCELLENCY OF THE PLAN FOR EXCELLENCY OF THE PLAN FOR EXCELLENCY OF THE BOARD OF TRUSTEES FREADING, SOCIAL STUDIES AND SCIENCE CURFORM ALL SENIORS TRADITIONALLY TAKE ONE FULL SINGESTER AT THE DISCRETION OF THE UPPER SCHIGTHESE COURSES ALLOWS THE STUDENTS TO SENIOR ON THEIR CHOSEN CAMPUSES AS FRESHME HOLDS YORK COUNTRY DAY STUDENTS TO THE SENIORS OF PLACING GRADUATES IN HIGHLY RESTAUTED OF PLACING GRADUATES IN HIGHLY RESTAUTED TO THE SENIOR OF PLACING GRADUATES IN HIGHLY RESTAUTED.	VATE SETTING FOR , AND IN THE OF YORK COLLEGE OF MINING POOL AND THE EE BEGAN WITH THE CALLING FOR THE INCREASED THE RICULUMS, AND A EMESTER-LENGTH HOOL HEAD THE STUDY A BROADER N YORK COLLEGE AME ACADEMIC RK COLLEGE WITH
<b>4</b> c	(Code	e ) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Othe	er program services (Describe in So	rhedule O )		
			ncluding grants of \$	) (Revenue \$	)

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	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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 $IV^{\square}$	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			
а	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		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, 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? <i>If</i> " <i>Yes," complete Schedule F, Parts III and IV</i>	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		

Par	t 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	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, 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		Νo
С	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part  IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	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		No
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?	38	Yes	

Fai	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   6,898		1 00	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	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)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶BD , CJ , LU , EI , UC			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5с		
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?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			NI -
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	_	1	
		8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	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	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
L4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Page 6 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. Section A. Governing Rody and Management

	ection A. Governing body and Hanagement					
					Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year	1a	30			
	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	1b	27			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management cor			3		Νo
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		Νo
5	Did the organization become aware during the year of a significant diversion of the or	rganız	ation's assets? .	5		Νo
6	Did the organization have members or stockholders?			6		No
	Did the organization have members, stockholders, or other persons who had the pow		elect or appoint one or	7a		No
	3 ,					
	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ur	ndertaken during the			
а	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, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
				_		
Se	ection B. Policies (This Section B requests information about policies not	reaui		Reveni	ue Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not in	requi		Revent		
		•	ired by the Internal I		ue Cod Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		ired by the Internal I	10a		
10a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization	 ivities on's e	ired by the Internal I   s of such chapters, exempt purposes?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov	s of such chapters, exempt purposes? erning body before filing	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activa ffiliates, and branches to ensure their operations are consistent with the organization than the organization provided a complete copy of this Form 990 to all members of it	ivities on's e s gov	s of such chapters, exempt purposes? erning body before filing	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov orm 9	ired by the Internal I	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov  form 9	ired by the Internal I	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov orm 9 ivities ly inte	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov orm 9 ivities ly inte	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activa filiates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Ford the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?	ivities on's e s gov form 9 y inte the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activation and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?  Describe in Schedule O the process, if any, used by the organization to review this Form Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?	ivities on's e s gov form 9 form 9 the p	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov form 9 the p the p ewan e deli	s of such chapters, exempt purposes? erning body before filing	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov form 9 y inte the p ewan e deli	s of such chapters, exempt purposes? erning body before filing on the could give on the could give of	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov form 9 y inte the p ewan e deli	s of such chapters, exempt purposes? erning body before filing on the could give on the could give of	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov form 9 y inte the p ewan e deli	s of such chapters, exempt purposes? erning body before filing on the could give on the could give of	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov form 9 ivities the p the p ewan e deli	s of such chapters, exempt purposes? erning body before filing on the series of the se	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	ivities on's e s gov form 9 ty inte the p ewan e deli	s of such chapters, exempt purposes? erning body before filing or some content of the content of	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No

#### **Section C. Disclosure**

- 17 List the States with which a copy of this Form 990 is required to be filed▶PA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website Upon request Other (explain in Schedule O)
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►C MATTHEW SMITH 441 COUNTRY CLUB ROAD YORK, PA (717) 815-6579

Form	990	(2012)
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#### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

	1	1								
(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and	han o	one l both ector	box, an o	officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-M13C)	MISC)	organization and related organizations
See Additional Data Table										
	•	•	•							Form <b>990</b> (2012)

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

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more t	tion ( han d on is	ne l both	box, an	heck unless officer stee)		( <b>D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W	_	(F) Estima amount o compens from t	ited f other ation :he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	0	rganizati relate organiza	ed
											_		
											+		
											+		
											_		
											+		
											+		
											$\dagger$		
1b c	Sub-Total	s to Part VII. S	 ection A	٠.	•			<b>+</b>					
d	Total (add lines 1b and 1c) .							٠	1,974,254		0		595,236
2	Total number of individuals (in \$100,000 of reportable compe	•					d abov	e) wl	ho received more th	an			
												Yes	No
3	Did the organization list any <b>fo</b> on line 1a? <i>If</i> " <i>Yes,"</i> complete S					key •	emplo	yee, •	or highest compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ								<del>-</del>	or individual for	5		No
S	ection B. Independent Co	ntractors											
1	Complete this table for your five	ve highest comp										tay year	

(A) Name and business address	(B) Description of services	(C) Compensation
KINSLEY CONSTRUCTION , 2700 WATER STREET PO BOX 2886 YORK PA 174052886	GENERAL CONTRACTOR	8,612,628
CHARTWELLS COMPASS GROUP , PO BOX 91337 CHICAGO IL 606931337	FOOD SERVICE	5,056,459
ROYALL COMPANY , 1920 EAST PARHAM ROAD RICHMOND VA 23228	RECRUIT FULFILLMENT	1,020,018
LSC DESIGN , 1110 E PRINCESS ST YORK PA 17403	DESIGN	999,024
RLPS ARCHITECTS , 250 VALLEYBROOK DRIVE LANCASTER PA 176014618	ARCHITECT	195,305
3. Total number of independent centractors (including but not limited to those li	stad above) who reserved more than	

Part V			ule O contains a respor	se to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
ts Es	1a	Federated cam	paigns 1a					
rani	Ь	Membership du	ies <b>1b</b>					
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising eve	ents <b>1c</b>	40,913				
iffs ar /	d	Related organiz	zations 1d	100,000				
s, G mil	e	Government grant	s (contributions) <b>1e</b>	1,285,716				
ons - Si	f	All other contribution	ons, gifts, grants, and <b>1f</b>	4,838,956				
outi the		sımılar amounts no						
ıtril 1 O	g	noncash contribution 1a-1f \$	ons included in lines	610,868				
Col	h	Total. Add lines	s 1a-1f	· · ·	6,265,585			
e e				Business Code				
Program Service Revenue	2a	TUITION & FEES		611310	85,438,233	85,438,233		
Ре∨	ь	AUXILLARY- ROOM	, BOARD, BOOKS	611710	23,498,167	23,461,316	36,851	
931	С							
λerγ	d							
<u> </u>	e							
ogra	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a-2f	►	108,936,400			
	3		ome (including dividen		483,549		-1,523	485,072
	4		ar amounts)		112,294		1,323	112,29
	5			· · · · · F	0			<u> </u>
		•	(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental income or (loss)			0	0		
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	18,185,075					
	b	Less cost or other basis and sales expenses	17,624,849					
	C	Gain or (loss)  Net gain or (los	560,226 ss)		560,226	560,226		
	d 8a		from fundraising	· · · · •	300,220	300,220		
Other Revenue		events (not inc \$40	luding 0,913 s reported on line 1c)	65,986				
1er	ь	Less direct ex	penses <b>b</b>	90,614				
ᅙ	С	Net income or (	(loss) from fundraising	events 🛌	-24,628			-24,628
	9a	Gross income f See Part IV, lin	from gaming activities ne 19 a					
	ь		penses b					
	С 10а	Net income or of Gross sales of returns and allo			0			
	ь	less costof-	a oods sold b	3,583,882				
	C		oods sold	3,512,862 entory <b>b</b>	71,020	71,020		
	٦	Miscellaneous		Business Code	·	·		
	11a	LAUNDRY AND	D MISC VENDING	812300	477,193	477,193		
	ь	PARKING REV	ENUE	812930	339,500	339,500		
	C		URIAL STUDIES	611710	37,399	37,399		
	d e		ue   s 11a-11d	▶				
	12		See Instructions	_	854,092			
	**	rocar revenué.	See Instructions .	· · · · •	117,258,538	110,384,887	35,328	572,73

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 (D) (B) (C) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 339,986 339,986 Grants and other assistance to individuals in the United States See Part IV, line 22 15,053,436 15,053,436 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 0 0 Benefits paid to or for members Compensation of current officers, directors, trustees, and 1,584,909 1,584,909 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 39,869,043 Other salaries and wages 32,556,086 6,246,226 1,066,731 Pension plan accruals and contributions (include section 401(k) 2,810,565 2,298,893 435,189 and 403(b) employer contributions) . . . . 76.483 9,802,754 8,018,434 1,517,460 Other employee benefits . . . . 266,860 10 2,930,349 2,392,707 459,286 78,356 11 Fees for services (non-employees) Ω Management . . . . 218,021 218,021 Legal . . . . . . . . Accounting . . . . . . . . . . . . 122,266 122,266 0 66,000 Professional fundraising services See Part IV, line 17 66,000 Investment management fees . . . . . 120,018 120,018 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 1,239,034 841,542 375,871 Schedule O) . . . . . . . 21.621 Advertising and promotion . . 1,453,165 19,512 1,278,120 12 155,533 13 Office expenses . . . 4,471,927 2,363,687 2,008,637 99,603 1,812,312 412,295 14 Information technology . . 2,254,683 30,076 15 0 Royalties . 5,100,562 4,916,171 116,346 68,045 16 Occupancy . . . . . . **17** 791,371 681,377 42,170 67,824 Travel . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 19 Conferences, conventions, and meetings . 32,648 16,766 11,398 4,484 20 Interest . . . . . . . . . . . . 3,821,059 3,821,059 Payments to affiliates . . . . . . 21 0 10,514,240 22 Depreciation, depletion, and amortization . 10,315,958 122,086 76,196 23 25,774 25,774 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) MEAL PLAN EXPENSES 4,426,619 4,426,619 ACADEMIC PROGRAMMING EXPENSES 1,330,514 1,330,514 C MISCELLANEOUS EXPENSES 1,282,797 1,006,524 168,450 107,823 d All other expenses е Total functional expenses. Add lines 1 through 24e 25 109,661,740 92,211,583 15,264,522 2,185,635 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Pal	rt X	Check if Schedule O contains a response to any question in th	ıs Pa	rt X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			11,729	1	12,329
	2	Savings and temporary cash investments			11,177,807	2	10,633,299
	3	Pledges and grants receivable, net			10,079,421	3	8,460,797
	4	Accounts receivable, net			1,247,677	4	1,169,739
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete P Schedule L	art II	of	0	5	0
4ssets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	ibuting employers			0	
	7	Notes and loans receivable, net			230,698		218,955
ď	8	Inventories for sale or use			803,582		740,524
	9	Prepaid expenses and deferred charges			2,319,617		2,452,268
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	341,232,462	, ,		2, 102,233
	Ь	Less accumulated depreciation	10b	94,272,993	240,682,668	10c	246,959,469
	11	Investments—publicly traded securities			22,468,348	11	27,565,927
	12	Investments—other securities See Part IV, line 11	97,132,732	12	108,804,355		
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			5,383,546	15	5,675,570
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .			391,537,825		412,693,232
	17	Accounts payable and accrued expenses			9,272,609	17	10,113,478
	18	Grants payable			0	18	0
	19	Deferred revenue			0	19	0
	20	Tax-exempt bond liabilities			95,152,353	20	93,443,401
φ.	21	Escrow or custodial account liability Complete Part IV of Sch			0	21	0
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqual	tors,				
аę		persons Complete Part II of Schedule L			О	22	0
	23	Secured mortgages and notes payable to unrelated third partie	es .		230,653	23	117,053
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	art X		40,000,500		40.004.040
		D			18,339,593		18,264,946
	26	Total liabilities. Add lines 17 through 25			122,995,208	26	121,938,878
Fund Balances	27	lines 27 through 29, and lines 33 and 34.  Unrestricted net assets			227,914,894	27	248,080,806
<u>ନ</u>				• •	15,680,914	28	15,901,346
<u> </u>	28	Temporarily restricted net assets		• •	24,946,809	29	26,772,202
Ĭ	29	Organizations that do not follow SFAS 117 (ASC 958), check h			24,940,009	29	20,112,202
7 T		complete lines 30 through 34.	icic F	-   and			
S	30	Capital stock or trust principal, or current funds				30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ASS	32	Retained earnings, endowment, accumulated income, or other				32	
Net .	33	Total net assets or fund balances			268,542,617	33	290,754,354
Z	34	Total liabilities and net assets/fund balances			391,537,825	34	412,693,232
		,					Form 000 (2012)

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		117,2	258,538
2	Total expenses (must equal Part IX, column (A), line 25)	2		109.6	61,740
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		7,5	96,798
-	Let assets of faile salarites at segiming of year (mast equal) arex, mile ss, column (17),	4		268,5	42,617
5	Net unrealized gains (losses) on investments	5		14,6	514,939
6	Donated services and use of facilities				<u> </u>
7	Investment expenses	6			
-	·	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		290,7	754,354
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII				<u>. ୮</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ed on			
	Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both	ate			
	▼ Separate basis			1	
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re	quired	3b	Yes	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493017006214

**Employer identification number** 

OMB No 1545-0047

# **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

York College of Pennsylvania

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.

Inspection

									23-135				
	rt I			blic Charity Sta				•	<u> </u>	instruction	ns.		
The c	rganı			te foundation becaus									
1			•	on of churches, or a				section 170	(b)(1)(A)(i)	•			
2	굣	A scho	ol described	in <b>section 170(b)(1</b>	L <b>)(A)(ii).</b> (A	ttach Sched	dule E)						
3	Γ	A hosp	ital or a coo	perative hospital se	rvice organi:	zatıon desc	rıbed ın <b>sect</b> i	ion 170(b)(	1)(A)(iii).				
4	Γ			h organization opera	ted ın conjur	nction with a	a hospital de	scribed in <b>s</b>	ection 170(b	)(1)(A)(iii).	. Enter the		
_	_			ty, and state									
5	J	_	<u>.</u>	erated for the benefi	_	e or univers	ity owned or	operated by	/ a governme	ntal unit des	scribed in		
_	_			(A)(iv). (Complete P									
6	<u> </u>			local government or	=								
7	ı			at normally receives			s support from	n a governn	nental unit or	from the ge	neral public		
8	$\vdash$			on 170(b)(1)(A)(vi). : described in <b>sectio</b> i			mnlete Part	π,					
9	,		-	at normally receives			-	-	ihiitions me	mhershin fe	es and dross		
_	'			ities related to its e									
				oss investment inco									
				ganızatıon after June						1 (4) 1101111	Justiliesses		
10	$\vdash$			ganized and operated									
11	<u>'</u>	_		ganized and operated ganized and operated							t the nurneses of		
	'			ly supported organiz									
				bes the type of supp									
		a	Type I	<b>b</b>	Type II	I - Functio	nally integrat	ed <b>d</b>	Type III - I	Non-functioi	nally integrated		
e	Γ			ox, I certify that the									
				on managers and ot	her than one	or more pu	blicly suppoi	ted organız	ations descr	ıbed ın sectı	on 509(a)(1) or		
f			1 509(a)(2)	received a written de	etermination	from the II	RS that it is a	TVDAI TV	ne II or Tyn	a III sunno	rting organization		
•			this box	received a written a	ccciiiiiacioi	i iioiii tiit 1i	NS that it is t	1 1 ypc 1, 1 y	pc 11, 01 1 yp	с тт зарро			
g				2006, has the organ	ızatıon acce	pted any gif	ft or contribu	tion from an	y of the		,		
			ng persons?										
				irectly or indirectly o				h persons d	escribed in (		Yes No		
				governing body of th		_	on?				lg(i)		
				er of a person descr							.g(ii)		
				lled entity of a perso						11	g(iii)		
h		Provide	e the followi	ng information about	the support	ed organıza	tion(s)						
			ı	Γ	Т				1				
_	) Nan		(ii) EIN	(iii) Type of	(iv) Is		( <b>v)</b> Did yo		(vi) I		(vii) A mount of		
	uppoi			organization (described on	organızat col <b>(i)</b> lıs		the organ		organiza col (i) oi		monetary support		
organizatio		acion		lines 1- 9 above	your gove		suppo	'	in the		Зарроге		
				or IRC section	docume	_							
				(see									
				instructions))	Yes	No	Yes	No	o Yes I		<b>D</b>		
Total													

Sch	edule A (Form 990 or 990-EZ) 2012							Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2	312	(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	<b>Total.</b> 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							
6	(f) <b>Public support.</b> Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 20	)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	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							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	<b>First five years.</b> If the Form 990 is this box and <b>stop here</b>							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and <b>stop here.</b> The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	<b>►</b> □
b	<b>33</b> 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and <b>stop here.</b> The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	<b>▶</b> □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							<b>▶</b> ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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						
3	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 )						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	<b>(b)</b> 2009	(c) 2010	( <b>d)</b> 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	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						
11	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)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,	<del>                                     </del>	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

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 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493017006214

OMB No 1545-0047

**SCHEDULE D** 

(Form 990)

Department of the Treasury

**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

Open to Public

lema	Revenue Service P- Attach to For	m 990. F See separate instructions.		Inspection
<b>Na</b> Yor	<b>me of the organization</b> k College of Pennsylvanıa			loyer identification number
г.	Ouraniantic of Material 1	Seed Francis - Other City		1352698
Pe	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990		unds	or Accounts. Complete if the
	organization anomored fee to form 550	(a) Donor advised funds		(b) Funds and other accounts
L	Total number at end of year			
<u> </u>	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
ļ	Aggregate value at end of year			
;	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		nor advi	sed Yes No
	Did the organization inform all grantees, donors, and doused only for charitable purposes and not for the benef	onor advisors in writing that grant funds		r purpose
	conferring impermissible private benefit?			Yes No
a	rt II Conservation Easements. Complete if		to Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation	or education) Preservation of a		· ·
	Protection of natural habitat	Preservation of a	certifie	d historic structure
	Preservation of open space			
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in	the forn	n of a conservation
	easement on the last day of the tax year			Held at the End of the Year
а	Total number of conservation easements		2a	neid at the Elid Of the Year
b	Total acreage restricted by conservation easements		2b	
C	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
	Number of conservation easements included in (c) acq	• •	<u>ZC</u>	
d	historic structure listed in the National Register	uned alter 6/17/00, and not on a	2d	
	Number of conservation easements modified, transferr	ed, released, extinguished, or terminat	ed by th	ne organization during
	the tax year 🛌			
	Number of states where property subject to conservati	on easement is located ▶		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	ndling of	violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments o	luring the year
	<b>-</b>			
	Amount of expenses incurred in monitoring, inspecting  \$ \blue{5}\$	i, and enforcing conservation easement	ts during	g the year
	Does each conservation easement reported on line 2(of and section $170(h)(4)(B)(H)$ ?	d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the			
	the organization's accounting for conservation easeme			
aı	Complete if the organization answered "Y	es" to Form 990, Part IV, line 8.		
а	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or rese	arch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>►</b> \$
	If the organization received or held works of art, histor following amounts required to be reported under SFAS			
a	Revenues included in Form 990, Part VIII, line 1	· -		<b>▶</b> \$
	I			· +

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Co	ilections of Ar	t, His	torica	<u>I Ir</u>	<u>eası</u>	ires, or U	tne	<u>r Similar As</u>	sets (co	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, ch	heck any	oft	he fol	lowing that a	are a	significant use	e of its	
а	Public exhibition		d	L r	oan	orexc	hange progr	ams			
b	Scholarly research		e	$\Gamma$ 0	ther	-					
С	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expl	aın hov	w they fu	ırthe	erthe	organızatıon	ı's ex	kempt purpose	ın	
5	During the year, did the organization solicit								nılar	_	_
	assets to be sold to raise funds rather than t		-							Yes	│ No
Par	<b>Escrow and Custodial Arrang</b> Part IV, line 9, or reported an ar						n answere	a "Y	es" to Form S	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other ass	ets		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	e follov	wing tabl	e		_				
									Ar	nount	
С	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, Iır	ne 21?	,						┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anation h	nas I	been r	rovided in P	art )	XIII		Г
Pa	rt V Endowment Funds. Complete										
		(a)Current year	(b)	Prior year	$\overline{}$	<b>b (c)</b> T			Three years back	<b>(e)</b> Four y	
1a	Beginning of year balance	61,619,823		63,525			53,896,242	_	49,107,450		57,798,781
b	Contributions	1,572,259		485,	,749		1,090,964	_	1,600,226		814,511
С	Net investment earnings, gains, and losses	7,662,254		46,	719		11,434,269	,	6,239,662	-:	16,149,873
d	Grants or scholarships	2,922,634		2,761	,439		2,895,572		3,051,096		3,355,969
e	Other expenditures for facilities										
_	and programs										
r	Administrative expenses	67,931,702		61,296	022		63,525,903	,	53,896,242		19,107,450
g	End of year balance							<u>'</u>	33,690,242		+9,107,430
2	Provide the estimated percentage of the cur		ice (lin	ne 1g, co	lum	n (a))	held as				
а	Board designated or quasi-endowment	57 600 %									
b	Permanent endowment ► 31 300 %										
С	Temporarily restricted endowment ► 11 The percentages in lines 2a, 2b, and 2c sho	100 % uld equal 100%									
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	zation	that are	held	danda	administere	d for	the	Vac	N-
	(i) unrelated organizations								3a	(i) Yes	No
	(ii) related organizations								3a(		No
b	If "Yes" to 3a(II), are the related organization	ns listed as require	ed on S	Schedule	R?				3	b	
4	Describe in Part XIII the intended uses of the										
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	90, Pa							1 (1) 5	
	Description of property			(a) Cos basis (in			( <b>b)</b> Cost or of basis (othe		(c) Accumulated depreciation	(d) Bo	ok value
1a	Land						12,013	,742		1	2,013,742
b	Buildings		•				265,509	,941	59,808,35	0 20	5,701,591
c	Leasehold improvements										
d I	Equipment						47,336	,118	34,464,64	3 1	2,871,475
							16,372	,661			6,372,661
Tota	<b>I.</b> Add lines 1a through 1e <i>(Column (d) must e</i>	equal Form 990, Part	X, colu	ımn (B),	lıne	10(c).	)		🕨	24	6,959,469

Part VII Investments—Other Securities. See F		
(a) Description of security or category (including name of security)	(b)Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
(1)Financial derivatives		Cost of end-of-year market value
(2)Closely-held equity interests		
(3)Other	26.740.600	_
(A) DIVERSIFYING EQUITY	36,748,688	F
(B) US EQUITY SECURITIES	32,962,284	F
(C) NON US EQUITY SECURITIES	12,181,967	F
(D) US GOVERNMENT OBLIGATIONS	13,224,573	F
(E) PRIVATE EQUITY AND VENTURE CAP	8,493,277	F
(F) REAL ESTATE SECURITIES	4,931,578	F
(G) MONEY MARKET	115,418	F
(H)OTHER	146,570	F
(I) DIVERSIFYING BOND FUNDS  Total, (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII  Investments—Program Related. See	108,804,355	
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		·
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )		
	2 1 F	
		(I-) Dealers les
(a) Descript	ion	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		
Part X Other Liabilities. See Form 990, Part X,	line 25.	
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
DEFERRED COMPENSATION	9,901,421	
STUDENT ADVANCE PAYMENTS AND DEPOSITS	7,292,621	
ADVANCES FROM FEDERAL GOVERNMENT	389,339	
ANNUITIES PAYABLE	664,448	
DEPOSITS HELD IN CUSTODY FOR OTHERS	17,117	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	18,264,946	
2 Fin 49 (ASC 740) Footnote In Part VIII provide the text		

	ule D (Form 990) 2012		Page <b>4</b>
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	120,423,519
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	18,218,417
3	Subtract line <b>2e</b> from line <b>1</b>	3	102,205,102
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
C	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	15,053,436
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12 )	5	117,258,538
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	98,211,782
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII )		
e	Add lines 2a through 2d	2e	3,603,478
3	Subtract line <b>2e</b> from line <b>1</b>	3	94,608,304
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	15,053,436
	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	109,661,740
5	rotal expenses. Add lines 3 and 4c. (This must equal Form 990, Part 1, line 18)	_	

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
RESTATEMENT OF ENDOWMENT FUNDS BEGINNING BALANCE	Schedule D, Part V, Line 1A	BEGINNING OF THE YEAR ENDOWMENT FUND BALANCE WAS CHANGED DUE TO A CORRECTION OF PRIOR YEAR BALANCE CAUSED BY THE UNDERWATER ENDOWMENT'S PRESENTATION IN FY2012 2012 AUDITED FINANCIAL STATEMENTS AND FORM 990 AMOUNT WAS \$61,296,932 AND IS RESTATED FOR FY13 BEGINNING BALANCE AS \$61,619,823 Intended Uses of Endowment Funds Schedule D, Part V, Line 4 THE COLLEGE'S ENDOWMENT CONSISTS OF APPROXIMATELY 300 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS AS REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR IMPOSED RESTRICTIONS THE COLLEGE CLASSIFIES AS PERMANENTLY RESTRICTED NET ASSETS (A) THE ORIGINAL VALUE OF FUNCTION AND (C) ACCUMULATIONS TO THE PERMANENT ENDOWMENT AND (C) ACCUMULATIONS TO THE PERMANENT ENDOWMENT AND (C) ACCUMULATIONS TO THE PERMANENT ENDOWMENT AND ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR GIFT INSTRUMENT AT THE TIME THE ACCUMULATION IS ADDED TO THE FUND THE REMAINING PORTION OF THE DONOR RESTRICTED ENDOWMENT FUND THAT IS NOT CLASSIFIED IN THE PERMANENTLY RESTRICTED NET ASSETS BASED ON
FIN 48 (ASC 740) FOOTNOTE INCOME TAXES	Schedule D, Part X, Line 2	THE EXISTENCE OF DONOR RESTRICTIONS OR BY LAW  The College is organized under Internal Revenue Code Section 501(c)(3), and therefore is exempt from income taxes on activities related to its exempt purpose. In addition, the College has been determined by the Internal Revenue Service not to be a "private foundation" within the meaning of Section 509(a) of the Code. The College accounts for uncertainty in income taxes using a recognition threshold of more-likely-than-not to be sustained upon examination by the appropriate taxing authority. Measurement of the tax uncertainty occurs if the recognition threshold is met. Management determined there were no tax uncertainties that met the recognition threshold in 2013 and 2012. The College's policy is to recognize interest related to unrecognized tax benefits in interest expense and penalties in operating expenses. No interest or penalties were recognized in 2013 or 2012. The College's federal Exempt Organization. Business Income Tax Returns for the fiscal years ended June 30, 2012, 2011, and 2010 remain subject to examination by the Internal Revenue Service.
Reconciliation of Revenue	Part XI Line 2d	Excluded from revenue is the cost of goods sold relating to the Bookstore of \$3,512,864 and event revenue less event expense of \$90,614
Reconciliation of Revenue	Part XI Line 4b	A mounts awarded to students for financial aid were excluded from Revenues per the audited financial statements Total amount of revenue (offset) was \$ 15,053,436
Reconciliation of Expenses	Part XII Line 2d	Excluded from revenue is the cost of goods sold relating to the Bookstore of \$3,512,864 and event revenue less event expense of \$90,614
Reconciliation of Expenses	Part XII Line 4b	A mounts awarded to students for financial aid were excluded from Revenues per the audited financial statements Total amount of revenue (offset) was \$ 15,053,436

# **Additional Data**

(I) DIVERSIFYING BOND FUNDS

Software ID: Software Version:

**EIN:** 23-1352698

Name: York College of Pennsylvania

(a) Description of security or cateory (including name of security)	(b)Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
(3)Other (A) DIVERSIFYING EQUITY	36,748,688	F
(B) US EQUITY SECURITIES	32,962,284	F
(C) NON US EQUITY SECURITIES	12,181,967	F
(D) US GOVERNMENT OBLIGATIONS	13,224,573	F
(E) PRIVATE EQUITY AND VENTURE CAP	8,493,277	F
(F) REAL ESTATE SECURITIES	4,931,578	F
(G) MONEY MARKET	115,418	F
(H) OTHER	146,570	F

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As Filed Data -

DLN: 93493017006214

# 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 York College of Pennsylvania

**SCHEDULE E** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

	23-1352698			
Pa	rt 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?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II	_		
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	- 5a		No
	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
е	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		No
	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		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II  Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

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

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

Schedule E (Form 990 or 990-EZ) 2012

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As Filed Data -

DLN: 93493017006214

SCHEDULE F (Form 990)

Department of the Treasury

## **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

Open to Public Inspection

Internal	Revenue Service					Inspection
	e of the organization College of Pennsylvania				Employer ident	ification number
					23-1352698	
Pa	rt I General Informatio "Yes" to Form 990, Pa			ne United States. Co	omplete if the organiz	ation answered
1	<b>For grantmakers.</b> Does the dassistance, the grantees' eligible the grants or assistance?	gibility for the q	grants or assis	stance, and the selection	on criteria used to awa	ard
2	For grantmakers. Describe in the United States.	n Part V the or	ganızatıon's p	rocedures for monitori	ng the use of grant fu	ınds outsıde
3	Activites per Region (The follow	ving Part I, line 3	table can be d	uplicated if additional spa	ice 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
3a	Sub-total					
	Total from continuation sheets to Part I					
С	: <b>Totals</b> (add lines 3a and 3b)	1				1

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2				ted above that are r e or counsel has pro					
3	Enter total nu	mher of other or	nanizations or en	tities					

Schedule F (Form 990) 2012

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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		+ +		'	+		+
		+		'	+		+
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			<del> </del>		<u> </u>	<del> </del>	
						1	

# Part IV Foreign Forms

1	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)	<b>~</b>	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	Γ	Yes	্য	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)	Г	Yes	굣	Νo
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)	Γ	Yes	굣	Νo
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)	Г	Yes	굣	Νo
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).	Г	Yes	্	Νo

Schedule F (Form 990) 2012

Part V	Supplementa	al Information
Part v	Supplementa	ai intormatio

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).

Identifier	ReturnReference	Explanation

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DLN: 93493017006214

**SCHEDULE G** (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Supplemental Information Regarding** 

Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public **Inspection** 

Name of the organization York College of Pennsylvania

**Employer identification number** 

to be compensated at least \$5,000 by the organization  (i) Name and address of individual or entity (fundraiser have or entity (fundraiser)  (ii) Activity or entity (fundraiser)  (iii) Activity or entity (fundraiser)  (iii) Activity or control of control of control browns 2 No 140,981 66,000 74,99.  (iv) Gross receipts from activity or entity (or retained by) fundraiser listed in col (i)  (i) Remaind the fundraiser is to be compensated at least \$5,000 by the organization or entity (fundraiser)  (iii) Activity organization  (iv) Gross receipts from activity organization or entity (or retained by) fundraiser listed in col (i)  (iv) Amount paid to (or retained by) organization  (iv) Amount paid to (or retained by) fundraiser listed in col (i)  (or Retained by) organization  (iv) Amount paid to (or retained by) fundraiser listed in col (i)  (or Retained by) organization  (iv) Amount paid to (or retained by) fundraiser listed in col (i)  (or Retained by) organization  (iv) Amount paid to (or retained by) fundraiser listed in col (i)  (or Retained by) organization  (iv) Amount paid to (or retained by) fundraiser listed in col (i)  (or Retained by) organization	one ge of remistrating					23-1352698	
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   c   ▼ Phone solicitations   d   ▼ In-person solicitations   d   ▼ Individual of control in the person of key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?   ▼ Yes   □	Part I Fundraising Act	t <b>ivities.</b> Complete	ıf the oı	rganızatı	on answered "Yes" to	o Form 990, Part IV,	line 17.
a	Indicate whether the organ	nızatıon raısed funds t	hrough ar	ny of the f	ollowing activities Che	ck all that apply	
d					=		
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?  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) with a custody or control of contributions?  WILSON BENNETT 140 PROFESSIONAL DR SUITE 2  CABOT, AR 720238675  PHONATHON  No 140,981 66,000 74,99.	<b>b</b> 🔽 Internet and email soli	citations		f	Solicitation of gove	ernment grants	
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?  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 have custody or control of contributions?  WILSON BENNETT 140 PROFESSIONAL DR SUITE 2  CABOT, AR 720238675  PHONATHON  No 140,981 66,000 74,99  CABOT, AR 720238675	c 🔽 Phone solicitations			g	Special fundraising	g events	
or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?    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 entities (fundraiser)    (ii) Activity    (iii) Did fundraiser have custody or control of contributions?  WILSON BENNETT 140 PROFESSIONAL DR SUITE 2    CABOT, AR 720238675    No 140,981    66,000    74,9:	d 🔽 In-person solicitations	5					
(ii) Name and address of individual or entity (fundraiser)  WILSON BENNETT 140 PROFESSIONAL DR SUITE 2  CABOT, AR 720238675  (ii) Activity (iii) Did fundraiser have custody or control of							ר Yes Γι
Individual or entity (fundraiser)  Individual or en				undraiser	s) pursuant to agreeme	nts under which the fun	draiser is
WILSON BENNETT 140 PROFESSIONAL DR SUITE 2  CABOT, AR 720238675  No 140,981 66,000 74,9.	ındıvıdual	(ii) Activity	fundrais custo cont contrib	ser have ody or crol of		(or retained by) fundraiser listed in	
140 PROFESSIONAL DR SUITE 2 No 140,981 66,000 74,9.  CABOT, AR 720238675 No 140,981 66,000 74,9.	WILCON BENNETT	DHONATHON	Yes	No			
	140 PROFESSIONAL DR	PHONATHON		No	140,981	66,000	74,98:
otal	CABOT, AR 720238675						
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				<b>&gt;</b>	140,981	66,000	74,98
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	licensing	organization is regist	ered or li	censed to	solicit funds or has bee	en notified it is exempt	from registration or
A	<del>1</del>						

Sche	dule	e G (Form 990 or 990-EZ) 2012				Page 2
Pai	rt I	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
			(a) Event #1  Horse Show	<b>(b)</b> Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	15,03	6	91,863	106,899
9,6	2	Less Contributions	7,80		33,113	40,913
~ 	3	Gross income (line 1 minus line 2)	7,23	5	58,750	65,986
	4	Cash prizes				
မှာ ()	5	Noncash prizes				
Expenses	6	Rent/facility costs				
	7	Food and beverages .				
Direct	8	Entertainment				
Δ	9	Other direct expenses .	8,67	5	81,939	90,614
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	n (d)		(90,614)
	11	Net income summary Combine I	ine 3, column (d), and line	e 10		-24,628
Par	t II	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	irt IV, line 19, or repo	rted more than
Revenue		\$13,000 OH TOTHI 330-LZ, II	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rei	1	Gross revenue				
es S	2	Cash prizes				
sesued	3	Non-cash prizes				
ம	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	☐ Yes	☐ Yes	☐ Yes	
	7	Direct expense summary Add line	s 2 through 5 in column (	(d)		
	8	Net gaming income summary Com	nbine lines 1 and 7 in coli	umn (d)	•	
9 a b	Is	ter the state(s) in which the organiz the organization licensed to operate 'No," explain	gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming	licenses revoked, suspei	nded or terminated during		

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
<b>.6</b>	Gaming manager information			
	Name 🟲			
	Gaming manager compensation <b>I</b>	<b>\$</b> \$		
	Description of services provided	<b>&gt;</b>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г <sub>Yes</sub> Г <sub>No</sub>
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	<b>mation.</b> Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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Part I General Information on Grants and Assistance

Schedule I (Form 990)

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

als in the United States
s." to Form 990, Part IV, line 21 or 22.

2012

OMB No 1545-0047

DLN: 93493017006214

pen to Public

Department of the Treasury Internal Revenue Service Name of the organization

York College of Pennsylvania

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

Attach to Form 990

Inspection
Employer identification number

23-1352698

		Governments and recipient that receive					l "Yes" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grar or assistance
.) YORK CITY POLICE EPARTMENT D WEST KING STREET ORK,PA 17405	23-6001908		112,500		FMV		PARTNER WITH CAMPUS POLICE FORCE OFFHOURS
P) YORK SUBURBAN CHOOL DISTRICT 800 HOLLYWOOD DRIVE ORK,PA 17403	23-6005956		100,000		FMV		Donation in-lieu of real-estate tax for exempt property
B) YORK CITY SCHOOL ISTRICT D WEST KING STREET ORK,PA 17405	23-6004284		55,625		FMV		Donation in-lieu of real-estate tax for exempt property
) SPRING GARDEN OWNSHIP 58 SOUTH OGONTZ ST ORK,PA 17403	23-6003037		50,000		FMV		Donation in-lieu of real-estate tax for exempt property
S) CITY OF YORK D WEST KING STREET ORK,PA 17405	23-6001908	1	21,861		FMV I		Donation in-lieu of real-estate tax for exempt property

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>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) UNFUNDED MERIT AND NEED BASED SCHOLARSHIPS	3092	10,713,348		FMV	
(2) PERMANENT AND QUASI-ENDOWED SCHOLARSHIPS	1601	2,468,714		FMV	
(3) FEDERAL AND STATE GRANT RECIPIENTS	279	654,524		FMV	
(4) YORK COUNTRY DAY SCHOOL	73	776,105		FMV	
(5) EXTERNAL SOURCES	1719	379,606		FMV	
(6) MISCELLANEOUS	243	61,139		FMV	

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

complete this part to provide the information required in rate 1, the 2,1 are 111, column (5), and any other additional information									
Identifier	Return Reference	Explanation							
Monitoring the use of grant funds		The assistance provided to governmental entities is in the form of donations in-lieu of real estate taxes. The amounts are intended to help fund services normally provided by the entities							

Schedule I (Form 990) 2012

DLN: 93493017006214

OMB No 1545-0047

**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.

Open to Public Inspection

Name of the organization York College of Pennsylvania

**Employer identification number** 

23-1352698

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

## Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use 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)(1)-(111) 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	( <b>D)</b> Nontaxable	<b>(E)</b> Total of	(F) Compensation	
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990	
See Additional Data Table								

Schedule J (Form 990) 2012

#### Part III Supplemental Information

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

Also complete this part for any additional information

A 150 Complete this part for any addi	וווטווומנוטוו	
<b>Identifier</b>	Return Reference	Explanation
HOUSING ALLOWANCE	Schedule J Part I Line 1a	The PRESIDENT OF THE COLLEGE, DR GEORGE WALDNER, AND THE HEADMASTER OF YORK COUNTRY DAY SCHOOL, NATHANIEL COFFMAN, ARE REQUIRED BY EMPLOYMENT AGREEMENT TO LIVE ON CAMPUS IN HOMES PROVIDED BY THE COLLEGE Accordingly, the value of this housing is not included in the computation of taxable compensation pursuant to I R C Section 119
TAX INDEMNIFICATION AND GROSS-UP PAYMENTS	Schedule J Part I Line 1a	THE PRESIDENT OF THE COLLEGE HAS USE OF A CAR THE PERSONAL USE OF THE VEHICLE AND RELATED TAX REIMBURSMENT IS INCLUDED IN THE PRESIDENT'S taxable amounts on FORM W-2
HEALTH & SOCIAL CLUB DUES/INITATION FEES	Schedule J Part I Line 1a	COUNTRY CLUB DUES ARE IN SOME PART REIMBURSED FOR THE PRESIDENT, DEAN OF ACADEMIC AFFAIRS, DEAN OF ADVANCEMENT, HEADMASTER AND CFO TO FACILITATE THE OPERATIONS OF THE COLLEGE AND DAY SCHOOL
WRITTEN POLICY	Schedule J Part I Line 1b	ALL BENEFITS LISTED IN ITEM 1 ARE DETAILED IN THE EMPLOYMENT CONTRACT
PROCESS OF DETERMINING COMPENSATION	Schedule J, Part I, Line 3	THE METHODS THAT YORK COLLEGE OF PENNSYLVANIA USES TO DETERMINE COMPENSATION INCLUDE COMPENSATION COMMITTEE, WRITTEN EMPLOYMENT CONTRACT, COMPENSATION SURVEY/STUDY, AND APPROVAL BY THE BOARD OR COMPENSATION COMMITTEE PLEASE REFER TO SCHEDULE O FOR A MORE DETAILED DESCRIPTION OF THE COLLEGE'S PROCESS OF DETERMINING COMPENSATION
NONQUALIFIED RETIREMENT PLAN	SCHEDULE J PART I LINE 4	THE PRESIDENT OF THE COLLEGE, DR GEORGE W WALDNER, PARTICIPATES IN A SUPPLEMENTAL NONQUALIFIED 457(F) RETIREMENT PLAN DURING CALENDAR YEAR 2012, \$136,250 OF THE PRESIDENT'S COMPENSATION WAS DEFERRED INTO THE 457(F) PLAN ALL SENIOR ADMINISTRATORS ARE ELIGIBLE TO PARTICIPATE IN A SUPPLEMENTAL NONQUALIFIED 457(B) DEFERRED COMPENSATION PLAN DURING CALENDAR YEAR 2012, THE PRESIDENT, CFO (C MATTHEW SMITH) AND DEAN OF ADMINISTRATIVE SERVICES (FRANK MUSSANO) DEFERRED \$16,500, \$22,500 AND \$22,500, RESPECTIVELY, OF THEIR COMPENSATION INTO THE 457(B) PLAN

Schedule J (Form 990) 2012

Software ID: Software Version:

**EIN:** 23-1352698

Name: York College of Pennsylvania

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

Torm 330, Schedule 3, Part II Officers, Directors, Trustees, Key Employees, and Tilghest compensated Employees								
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	( <b>F)</b> Compensation reported in prior Form
	_	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
DR GEORGE W WALDNER	(I) (II)	(l _ l	0	33,477	178,750 0	76,027 0	7 688,851 0 0	0
C MATTHEW SMITH	(ı) (ıı)	191,442	0	2,808	44,100 0	19,105	5 257,455 0 0	0
KENNETH MARTIN	(ı) (ıı)	192,221	0	1,524	19,400 0	5,380 0	218,525	0
NATHANIEL COFFMAN	(ı) (ıı)	164,693 0	0	2,652	16,675 0	46,570 0	230,590	0
DOMINIC DELLICARPINI	(ı) (ıı)	156,843 0	0	5,978 0	16,038 0	23,223	202,082	0
STACEY DAMMANN	(ı) (ıı)	181,703 0	0	143	8,590 0	233	190,669	0
DANIEL HELWIG	(ı) (ıı)	.	0	2,712	18,100 0	19,009	216,863	0
SARDARI KHANNA	(ı) (ıı)	.	0	948	13,035 0	21,192	192,086	0
LINDA PUGH	(ı) (ıı)	1	0	1,524	12,090 0	17,114	183,125	0
FRANK MUSSANO	(I) (II)	147,847 0	0	792	39,450 0	1,155	189,244	, O

DLN: 93493017006214

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OMB No 1545-0047

Schedule K (Form 990)

**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.

Department of the Treasury Internal Revenue Service

**Inspection** Employer identification number

23-1352698

Χ

Name of the organization York College of Pennsylvania

#### Part I Bond Issues (h) On (i) Pool (g) Defeased behalf of financing (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (a) Issuer name ıssuer Yes No Yes No Yes No PENNSYLVANIA HIGHER **EDUCATION FACILITIES** NEW HEALTH AND FITNESS 23-2243852 70917NC28 10,721,841 Χ 02-12-2004 Χ Χ AUTHORITY CENTER PENNSYLVANIA HIGHER NEW HEALTH AND FITNESS **EDUCATION FACILITIES** 70917NC51 9,200,000 Χ Х Χ 23-2243852 03-01-2004 AUTHORITY CENTER PENNSYLVANIA HIGHER **EDUCATION FACILITIES** NEW DORMITORIES, NEW Х С 23-2243852 70917N8U1 11-22-2005 32,689,842 Χ Χ **AUTHORITY** HEALTH AND FI

Pai	t III Proceeds	•				<u> </u>	•	<u>'</u>	<u>'</u>
			A		В	ı	С		D
1	A mount of bonds retired		2,180,000				3,580,000		
2	A mount of bonds legally defeased		0		0		0		
3	Total proceeds of issue		10,916,771		9,421,100		34,614,128		
4	Gross proceeds in reserve funds		805,750		0		2,188,375		
5	Capitalized interest from proceeds		32,334 0 89,				89,021		
6	Proceeds in refunding escrows		0 0				0		
7	Issuance costs from proceeds		153,193 133,226				354,892		
8	Credit enhancement from proceeds		221,471		39,721		451,505		
9	Working capital expenditures from proceeds		0		0		0		
10	Capital expenditures from proceeds		9,687,773		9,248,153		31,530,335		
11	O ther spent proceeds		0		0		0		
12	O ther unspent proceeds		0	0 0			0		
13	Year of substantial completion	20	04	20	05	20	07		
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		x		X		X		
15	Were the bonds issued as part of an advance refunding issue?		Х		Х		Х		
16	Has the final allocation of proceeds been made?	Х		Х		Х			

#### Part III **Private Business Use**

allocation of proceeds?

		/	4	İ	В	•	С	I	0
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×		×		×		
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		Х		Х		

Χ

Does the organization maintain adequate books and records to support the final

Χ

Schedule K (Form 990) 2012

Part III Private Business Use (Continued)

				4		В		С		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a 	Are there any management or service contracts that may result in private of bond-financed property?			х		×		Х		
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
с	Are there any research agreements that may result in private business use financed property?	e of bond-		Х		Х		Х		
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed propert									
4	Enter the percentage of financed property used in a private business use by other than a section $501(c)(3)$ organization or a state or local government		0%			0%		0 %	/0	%
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 5 (c)(3) organization, or a state or local government			%		%		o,	/o	%
6	Total of lines 4 and 5			%		%		0,	/o	%
7	Does the bond issue meet the private security or payment test?			Х		Х		Х		
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?			Х		х		х		
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of			%		%		0,	/6	%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?			Х		Х		Х		
9	Has the organization established written procedures to ensure that all none bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?			х		×		х		
Pari	t IV Arbitrage		l				<u> </u>	1		
		А			В		С		D	
		Yes	No	Yes	No	Ye	s	No	Yes	No
1	Has the Issuer filed Form 8038-T?		X		Х	Х				
2	If "No" to line 1, did the following apply?									
a	Rebate not due yet?									
b	Exception to rebate?									
С	No rebate due?	Х		Х						
	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	Х				Х		
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х			Х		
b	Name of provider	0		0		0				
С	Term of hedge									
d	Was the hedge superintegrated?									
<u>е</u>	Was a hedge terminated?									

	•								
Pai	rt IV Arbitrage (Continued)								
		Į.	1	В	В			D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	X			Х	Х			
b	Name of provider	AIG-REDEEMED		0		TRINITYPLUS			
С	T erm of GIC		25 7			27 9			
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	Х				Х			
6	Were any gross proceeds invested beyond an available temporary period?		Х		Х		Х		
7	Has the organization established written procedures to monitor								

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#### Part V Procedures To Undertake Corrective Action

the requirements of section 148?

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?

Α		В		С		D		
Yes	No	Yes	No	Yes	No	Yes	No	
	x		X		x			
	,,		,,		,			

Χ

Χ

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).										
Ident if ier	Return Reference	Explanation								
Part IV, Column A, Line 2c	0	PHEFA Bonds issued 2/12/2004 - Rebate comparison was performed December 3, 2012								
Part IV, Column B, Line 2c	1	PHEFA Bonds issued 3/1/2004 - rebate comparison was performed effective May 1, 2006, no additional rebate calculations neccessary as no funds are held in reserve funds								
Part III (9), Part IV (7) and Part V	1	Subsequent to June 30, 2013, the college formally adopted written procedures addressing each of these areas Procedures had previously been in place but had not been formally documented								

Schedule K (Form 990) 2012

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2012

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OMB No 1545-0047

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.

**Inspection** Employer identification number

Name of the organization

York	College of Pennsylvania								23-	135269	8			
Pa	rt I Bond Issues								I					
	(a) Issuer name	(b) Issuer EIN	<b>(c)</b> CUSIP #	(d) Date issued	<b>(e)</b> Issue pri	ce (1	<b>f)</b> Descriptio	n of purpose	( <b>g</b> ) De	feased	beh	On alf of uer		Pool ncing
									Yes	No	Yes	No	Yes	No
A	GENERAL AUTHORITY OF SOUTH EASTERN PA	23-2982233	84129NFD6	06-05-2007	17,061,2	.7,061,253 HUMANITIES/THEATER/DORM			×		×		Х	
В	GENERAL AUTHORITY OF SOUTH EASTERN PA	23-2982233	369013AM9	03-10-2011	19,652,0	19,652,078 LIFE SCIENCES RENOVATION AND NEW D				Х		x		х
Part II Proceeds														
	A mount of bonds retired						1	В		С			D	
1	Amount of bonds legally defea	asad				330,000	)	0						
3	Total proceeds of issue					0 0					-			
4	Gross proceeds in reserve ful	nds				17,647,556 19,666,395 1,608,192 0					-			
<del></del>						1,608,192	2	0						
6							1	0						
7	Issuance costs from proceed				+	221,357	7	211,287						
8	Credit enhancement from pro-					227,003								
9	Working capital expenditures	from proceeds				0 0								
10	Capital expenditures from pro	ceeds				15,591,004 19,455,108								
11	O ther spent proceeds							0						
12	O ther unspent proceeds					(		0						
13	Year of substantial completio	n			20	08	2.0	12						
-					Yes	No	Yes	No	Yes	No.	<u> </u>	Yes		No
14	Were the bonds issued as par	t of a current refun	ding issue?			Х		Х						
15	Were the bonds issued as part of an advance refunding issue?				Х		Х							
16	6 Has the final allocation of proceeds been made?			Х		Х								
17	allocation of proceeds?				х		Х							
Pai	TETTE Private Business l	Jse												
					You A		+	B l		C N		V	D	No.
					Yes	No	Yes	No	Yes	No	<b>'</b>	Yes	-	No

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Χ

Χ

Sche	dule K (Form 990) 2012									Page <b>2</b>
Par	Private Business Use (Continued)									
				A		В		<u>C</u>		D
3a	Are there any management or service contracts that may result in private	husiness use	Yes	No	Yes	No	Yes	No	Yes	No
<b>J</b> a	of bond-financed property?			Х		Х				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х		х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed proper									
4	Enter the percentage of financed property used in a private business use bother than a section $501(c)(3)$ organization or a state or local government			0%		0%		%	%	
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth (c)(3) organization, or a state or local government			%		%		9/0		%
6	Total of lines 4 and 5			%		%		%		%
7	Does the bond issue meet the private security or payment test?			Х		Х				
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?			х		х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of			%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	es" to line 8a, was any remedial action taken pursuant to Regulations sections				х				
9	Has the organization established written procedures to ensure that all non bonds of the issue are remediated in accordance with the requirements und			x		x				
D	Regulations sections 1 141-12 and 1 145-2?									
Par	t IV Arbitrage	Α			В		С		D	
		Yes	No	Yes	No	Yes		No	Yes	No
1	Has the Issuer filed Form 8038-T?		Х		Х					
2	If "No" to line 1, did the following apply?				<u> </u>	I	I	<u> </u>	I	
a	Rebate not due yet?									
b	Exception to rebate?	×		Х						
С	No rebate due?	×								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed			<b>-</b>	_	· ·	'	<u> </u>		
3	Is the bond issue a variable rate issue?		Х		Х					
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х					
b	Name of provider	0		0						
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was a hedge terminated?									
		1	I							

Pa	rt IV Arbitrage (Continued)								
	<u> </u>	А		В	}	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	X			Х				
b	Name of provider	CITIGROUP REDEEMED	-	0					
С	Term of GIC		29 9						
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	Х							
6	Were any gross proceeds invested beyond an available temporary period?		Х		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?		Х		Х				
Pa	rt V Procedures To Undertake Corrective Action								
		Α		В	1	С		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				

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).									
Identifier	Return Reference	Explanation							
Part IV, Column A, Line 2c	0	GASP Bonds issued 6/5/2007 - rebate comparison was performed June 19, 2013							
Part III (9), Part IV (7) and Part V		Subsequent to June 30, 2013, the college formally adopted written procedures addressing each of these areas Procedures had previously been in place but had not been formally documented							

Schedule K (Form 990) 2012

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Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. 2012

Open to Public Inspection

Name of the orga York College of Penn								Em	nploye	r identi	fication	numbe	r
	<u>,                                      </u>								-135				
Part I Exces													
					Form 990, l between di		25a or 25b, or (c) Descri						octod?
1 (a) Name of disqualified person					d organizat		(c) Descrip	ption o	ı trans	saction		<b>d)</b> Corr <b>/es</b>	No No
				<u>'</u>								- ES	140
2 Enter the am	ount of ta	x incurre	d by organiza	ation mana	igers or dis	qualified pers	ons during the	yearι	ınder	ection			
4958									•	<b>-</b> \$			
3 Enter the am	ount of ta	ix, if any,	on line 2, ab	ove, reimb	ursed by th	ne organizatio	on		•	<b>&gt;</b> \$			
Part III Loa	ns to ar	nd/or F	rom Inter	ested Po	ersons.								
						O-EZ, Part V,	line 38a, or Fo	rm 99	0, Par	t IV, lın	ie 26, o	r ıf the	
			n amount on I										
(a) Name of Interested		itionship anization	(c) Purpose of loan			(e)Origina principal		(g) In (h) default? Approve			-	(i)Writte d agreemen	
person	With org	amzacion	or loan	f loan or from the organization?		amount	due	1		by board or		agreer	nenc.
					_					committee?		l l	
				То	From			Yes	No	Yes	No	Yes	No
											<u> </u>	_	
	1										-	_	
												_	
	1					+	-				-	_	
											1	_	
otal				<u> </u>						<del> </del>	<u> </u>	٦ .	
	ts or A	ssistan	ce Benefit		erested	Persons.				1			
							rt IV, line 27.	<u></u>					
(a) Name of inte		<b>(b)</b> Rel	atıonshıp bet	ween (		of assistance			tance	(e)	Purpose	e of ass	ıstance
person		1	ted person ar	nd the									
		<del>                                     </del>	organization										
							_						
		<u> </u>											
							_						

Part IV Business Transactions Involving Interested Persons.

Complete if the	organization	answered	"Yes"	on F	orm 9	<del>9</del> 90,	Part IV,	line	e 28a,	28b,	or	28c.
								- 1				

Complete ii the organiza	tion answered res on	TOTTI 220, Part IV, III	ie 20a, 20b, 01 20c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh organiz reven	f zation's	
				Yes	No	
(1) ROBERT A KINSLEY	PRINCIPAL & YCP TRUSTEE	12,247,988	INDEPENDENT CONTRACTOR		No	
(2) LAURA T WAND	VP JCI & YCP TRUSTEE	608,406	JCI SUPPLIES HVAC EQUIPMENT		No	
(3) JEFFREY HINES	PRINCIPAL & YCP TRUSTEE	148,389	PRESIDENT OF WATER UTILITY		No	

### Part V Supplemental Information

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

Identifier	Return Reference	Explanation
BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	SCHEDULE L, PART V	DURING THE YEARS ENDED JUNE 30, 2013 AND 2012, THE COLLEGE PAID APPROXIMATELY \$12,250,000 AND \$16,000,000 RESPECTIVELY, TO CONSTRUCTION AND ARCHITECTURAL DESIGN COMPANIES OWNED BY A BOARD MEMBER OF THE COLLEGE AS OF JUNE 30, 2013 AND 2012, APPROXIMATELY \$2,038,000 AND \$1,482,000, RESPECTIVELY, WERE PAYABLE TO THESE COMPANIES
ROBERT KINSLEY		ROBERT KINSLEY IS THE CHAIRMAN OF KINSLEY CONSTRUCTION AND A MEMBER OF YORK COLLEGE OF PENNSYLVANIA'S BOARD OF TRUSTEES KINSLEY CONSTRUCTION IS AN INDEPENDENT BUILDING CONTRACTOR WHICH SERVED AS THE GENERAL CONTRACTOR FOR SEVERAL PROJECTS INCLUDING THE RENOVATION OF THE BUSINESS ADMINISTRATION AND NURSING BUILDINGS DURING FISCAL YEAR 2013
LAURA WAND		LAURA WAND IS THE VICE PRESIDENT OF PRODUCT MANAGEMENT AT JOHNSON CONTROLS, INC AND A MEMBER OF YORK COLLEGE OF PENNSYLVANIA'S BOARD OF TRUSTEES JOHNSON CONTROLS, INC PROVIDED HVAC EQUIPMENT AND SERVICE ON SEVERAL ACADEMIC AND RESIDENTIAL BUILDINGS AT YORK COLLEGE DURING FISCAL YEAR 2013
JEFFREY HINES		JEFFREY HINES IS THE PRESIDENT OF YORK WATER COMPANY AND A MEMBER OF YORK COLLEGE OF PENNSYLVANIA'S BOARD OF TRUSTEES DURING FISCAL YEAR 2013, YORK WATER COMPANY PROVIDED WATER UTILITY TO THE COLLEGE

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OMB No 1545-0047

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Department of the Treasury

Internal Revenue Service

**SCHEDULE M** 

(Form 990)

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

**Noncash Contributions** 

Name of the organization York College of Pennsylvania

**Employer identification number** 

					23-1352698		
Pa	TT Types of Property	1		T			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		<b>i)</b> letermining bution amou	ınts
1	Art—Works of art						
2	Art—Historical treasures .						
3	Art—Fractional interests						
1	Books and publications						
	Clothing and household						
	goods						
5	Cars and other vehicles						
7	Boats and planes						
В	Intellectual property						
9	Securities—Publicly traded .	Х	9	783,635	FMV		
0	Securities—Closely held stock .						
1	Securities—Partnership, LLC, or trust interests						
2	Securities—Miscellaneous						
3	Qualified conservation contribution—Historic structures						
1	Qualified conservation contribution—Other						
5	Real estate—Residential .						
,	Real estate—Commercial						
,	Real estate—O ther						
3	Collectibles						
•	Food inventory	Х	1	18,121	FMV		
)	Drugs and medical supplies .						
L	Taxıdermy						
2	Historical artifacts						
3	Scientific specimens						
1	Archeological artifacts						
	GIFT IN KIND -						
	NOTE Other►(FORGIVENESS)	x	1	50,000	EM\/		
	,		1	30,000	V		
	Other►()						
	O ther ► ()						
	Other ► ()	hu the even	nization dispine the tax was	r for contributions			
,	Number of Forms 8283 received for which the organization comple				29		1
n-	During the year, did the organiza	ation roco	a hu cantribution and re-	arty reported in Dort I lines	1 20 that it	Yes	No.
va							
	must hold for at least three year				a to be used		ļ <u>.</u>
_	for exempt purposes for the enti					30a	No
b	If "Yes," describe the arrangem	ent in Part I	I				
1	Does the organization have a gif	·		•		<b>31</b> Yes	; <u> </u> 
			es or related organizations		· · ·	32a	No
b	If "Yes," describe in Part II						
3	If the organization did not report describe in Part II	t an amount	ın column (c) for a type of	property for which column (	a) is checked,		

Page 2

Schedule M	(Form 990) (201:
Part II	Supplem

**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

Schedule M (Form 990) (2012)

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SCHEDULE O

(Form 990 or 990-EZ)

York College of Pennsylvania

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493017006214

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

Employer identification number

23-1352698

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

ldentifier Return Reference	Explanation
Conflict of Interest Policy Monitoring & Enforcement I2c	THE COLLEGE'S CONFLICT OF INTEREST POLICY INCLUDES A REQUIREMENT THAT NO TRUSTEE, OFFICER, OR KEY EMPLOYEE SHALL BECOME INVOLVED DIRECTLY OR INDIRECTLY IN ANY BUSINESS RELATIONSHIP OR TRANSACTION WITH THE COLLEGE OR RECEIVE A SUBSTANTIAL BENEFIT (5% OR MORE OWNERSHIP IN AN ORGANIZATION THAT RECEIVES \$10,000 OR MORE ANNUALLY) FROM THE COLLEGE, WITHOUT DISCLOSING THE INTEREST IN SUCH RELATIONSHIP EACH TRUSTEE, OFFICER, OR KEY EMPLOYEE SHALL HAVE THE OBLIGATION TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST THAT SUCH INDIVIDUAL MAY HAVE DURING HIS OR HER TENURE IN OFFICE. THIS OBLIGATION INCLUDES RELATIONSHIPS MAINTAINED BY MEMBERS OF THE INDIVIDUAL'S FAMILIES THE COLLEGE REQUIRES EACH TRUSTEE, OFFICER, OR KEY EMPLOYEE COMPLETE AN ANNUAL CONFLICT OF INTEREST STATEMENT THESE STATEMENTS ARE REVIEWED TO IDENTIFY POTENTIAL CONFLICTS THE BACKGROUNDS AND ORGANIZATIONAL AFFILIATIONS OF EACH INDIVIDUAL ARE WELL KNOWN AND UNDERSTOOD BY INDIVIDUALS RESPONSIBLE FOR PROCUREMENT AND REPORTING TRUSTEES AND OFFICERS ARE NOT ALLOWED TO VOTE ON THE APPROVAL OF CONTRACTS WITH ORGANIZATIONS TO WHICH THEY ARE AFFILIATED THE COLLEGE-WIDE CONFLICT OF INTEREST POLICY COVERS ALL FACULTY, ADMINISTRATION AND STAFF THIS POLICY EMPHASIZES AMONGST OTHER REQUIREMENTS, "THE FUNDAMENTAL OBLIGATION OF DISCLOSING IN WRITING (TO HIS/HER SUPERVISOR OR DEPARTMENT CHAIRPERSON) ANY RELATIONSHIP WHICH MAY BE OR APPEAR TO BE A CONFLICT OF INTEREST POLICY FOLICY ON THE APPEAR TO BE A CONFLICT OF INTEREST." EACH EMPLOYEE IS REQUIRED TO PERIODICALLY ACKNOWLEDGE, UNDERSTAND, ACCEPT AND AGREE TO COMPLY WITH THE INFORMATION CONTAINED IN THE CONFLICT OF INTEREST POLICY FAILURE TO COMPLY WITH THE COLLEGES POLICY CONSTITUTES GROUNDS FOR DISCIPLINARY ACTION, UP TO AND INCLUDING DISCHARGE OF EMPLOYMENT THE COLLEGE PERIODICALLY REVIEWS VENDOR PURCHASING DATA TO PROPERLY ACCUMULATE AND REPORT TRANSACTIONS THAT OCCUR WITH RELATED PARTIES

ldentifier	Return Reference	Explanation
Process for Determining Compensation- Executives/Top Management	Form 990, Part VI, Line 15B	THE PRESIDENT EVALUATES THE PERFORMANCE OF OTHER KEY EMPLOYEES OF THE COLLEGE. THE PRESIDENT EVALUATES THE PERFORMANCE OF EACH KEY EMPLOYEE BY REVIEWING SUCCESS IN ACHIEVING ANNUAL GOALS SET AT THE BEGINNING OF EACH FISCAL YEAR THE PRESIDENT CONSULTS COMPARABILITY DATA OF THE COMPENSATION COMPONENTS AND RANGES OF OTHER INDIVIDUALS WITH SIMILAR RESPONSIBILITIES IN SIMILAR SIZED COLLEGES AND UNIVERSITIES IN SIMILAR GEOGRAPHIC AREAS COMPENSATION OF KEY EMPLOYEES IS EFFECTIVELY APPROVED BY THE BOARD OF TRUSTEES AS PART OF THE ANNUAL BUDGETING PROCESS

ldentifier	Return Reference	Explanation
Process for Determining Compensation- Other Officers/Key Employees	Form 990, Part VI, Line 15A	THE COMPENSATION OF THE PRESIDENT OF THE COLLEGE IS DETERMINED BY THE GOVERNANCE COMMITTEE OF THE BOARD OF TRUSTEES THE GOVERNANCE COMMITTEE IS RESPONSIBLE FOR, AMONG OTHER THINGS, "AN ANNUAL EVALUATION OF THE PRESIDENT, REPORTING THE CONCLUSIONS OF THAT EVALUATION TO THE BOARD OF TRUSTEES, ALONG WITH ITS RECOMMENDATION REGARDING REAPPOINTMENT AND COMPENSATION." THE GOVERNANCE COMMITTEE EVALUATES THE PERFORMANCE OF THE PRESIDENT BY REVIEWING SUCCESS IN ACHIEVING ANNUAL GOALS SET AT THE BEGINNING OF THE FISCAL YEAR THE COMMITTEE CONSULTS COMPARABILITY DATA OF THE COMPENSATION COMPONENTS AND RANGES OF OTHER COLLEGE PRESIDENTS IN SIMILAR SIZED COLLEGES AND UNIVERSITIES IN SIMILAR GEOGRAPHIC AREAS THE RESULTS OF THIS REVIEW ARE DOCUMENTS IN COMMITTEE MINUTES AND THE RESULTING RECOMMENDATION IS APPROVED BY THE ENTIRE BOARD OF TRUSTEES

ldentifier	Return Reference	Explanation
How Documents are Made Available to the Public	1 ' '	THE COLLEGE WILL MAKE THE GOVERNING DOCUMENT, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493017006214

OMB No 1545-0047

2012

# **Related Organizations and Unrelated Partnerships**

Department of the Treasury Internal Revenue Service

(Form 990)

**SCHEDULE R** 

Name of the organization

York College of Pennsylvania

▶ 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.

Open to Public Inspection **Employer identification number** 

				23-13526	98			
Part I Identification of Disregarded Entities (Comple	te if the organizatio	n answered "Yes" t	o Form 990, Pa	art IV, line 33.)				
<b>(a)</b> Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	С	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organiz	ations (Complete ı	f the organization a	answered "Yes'	' to Form 990, P	art IV,	line 34 because it	t had o	ne
or more related tax-exempt organizations during th	e tax year.)		_					
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	tion Public charity : (if section 501)	status (c)(3))	<b>(f)</b> Direct controlling entity	Section (13) co en	ontrolle itity?
(1) THE HUBER FOUNDATION	BENEFIT YCP	PA	501(C)(3)	11A		NA	Yes	No No
441 COUNTRY CLUB ROAD								
YORK, PA 17403 36-7514239							$\perp$	$\perp$
							$\perp$	
							<u> </u>	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y			Schedule R (Forr	n 990) 2	2012

(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-	<b>(f)</b> Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentae ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust ( poration or	Complete if t	he organı the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domıcıle (state or foreign country)		( <b>d)</b> Direct controlli entity	(e) Type of enti (C corp, S corp, or trust)	(f) Share of to income	total Share e of	(g) e of end- year ssets		<b>(h)</b> ercentage wnership	Section (b) conti	(13)	
		,,			,						Yes		No

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

Yes

<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transactions with one or more r	elated organizations li	sted in Parts II-IV?							
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
b	Gift, grant, or capital contribution to related organization(s)				1b		No			
c	Gift, grant, or capital contribution from related organization(s)				<b>1</b> c	Yes				
d	Loans or loan guarantees to or for related organization(s)				1d		No			
e	e Loans or loan guarantees by related organization(s)									
f	Dividends from related organization(s)				1f		No			
g	Sale of assets to related organization(s)				1g		No			
h	Purchase of assets from related organization(s)				1h		No			
i	Exchange of assets with related organization(s)				1i		No			
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)  g Sale of assets to related organization(s) g Sale of assets to related organization(s) g Sale of assets to related organization(s) g Sale of assets to related organization(s) g Exchange of assets with		1j		No						
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No			
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)  it Exchange of assets to related organization(s)  it Exchange of assets with related organization(s)  it Performance of services or membership or fundraising solicitations for related organization(s)  in Performance of services or membership or fundraising solicitations by related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing of facilities, equipment, analing lists, or other assets with related organization(s)  in Sharing			No							
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		No			
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No			
0	Sharing of paid employees with related organization(s)				10		No			
р	Reimbursement paid to related organization(s) for expenses				1p		No			
q	Reimbursement paid by related organization(s) for expenses				1q		No			
r	O ther transfer of cash or property to related organization(s)				1r		No			
s	Other transfer of cash or property from related organization(s)				1s		No			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	e this line, including co	overed relationships	and transaction thresholds						
		Transaction	Amount involved	Method of determining amo	ount II	nvolved				
1) T	he Huber Foundation	С	100,000	FMV						

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

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross)

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	section t		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate r allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

Software ID: Software Version:

**EIN:** 23-1352698

Name: York College of Pennsylvania

Schedule R (Form 990) 2012

Page **5** 

## Part VII Supplemental Information

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

#### Software ID: Software Version:

**EIN:** 23-1352698

Name: York College of Pennsylvania

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors												
<b>(A)</b> Name and Title	(B) Average hours per week (list	dıre	than	o not one son is er and trust	box s bot d a tee)	th		( <b>D)</b> Reportable compensation from the organization (W- 2/1099-MISC)	( <b>E)</b> Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and		
	any hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated	Former			related organizations		
JOHN BARTMAN BOARD MEMBER	1 5	х						0	0	0		
JOHN D BROWN BOARD MEMBER	1 5	х						0	0	0		
ANTHONY P CAMPISI BOARD MEMBER	1 5	х						0	0	0		
JOSEPH R CROSSWHITE BOARD MEMBER	1 5	х						0	0	0		
ROBERT A DELP BOARD MEMBER	1 0	х						0	0	0		
CYRIL C DUNMIRE JR BOARD MEMBER	1 0	х						0	0	0		
DOROTHY FISCHER BOARD MEMBER	1 0	х						0	0	0		
DEBRA A GOODLING KIME BOARD MEMBER	1 0	х						0	0	0		
RICHARD C HOGENTOGLER BOARD MEMBER	1 5	х						0	0	0		
ROBERT A KINSLEY BOARD MEMBER	1 0	х						0	0	0		
KENNETH KOCHENOUR BOARD MEMBER	1 0	х						0	0	0		
DEBORAH MCMILLAN MD BOARD MEMBER	1 5	х						0	0	0		
ROBERT E MEHMET JR BOARD MEMBER	1 0	х						0	0	0		
J CHRISTOPHER MICHAEL BOARD MEMBER	1 0	х						0	0	0		
SHARON E MYERS BOARD MEMBER	1 0	х						0	0	0		
W SCOTT RHINEHART BOARD MEMBER	1 0	х						0	0	0		
JOHN M SCHRANTZ BOARD MEMBER	1 0	х						0	0	0		
GEORGE A SHORB BOARD MEMBER	1 0	х						0	0	0		
ROBERT L SIMPSON BOARD MEMBER	1 0	х						0	0	0		
STEPHEN TANSEY BOARD MEMBER	1 0	х						0	0	0		
CARL J VIZZI BOARD MEMBER	1 0	х						0	0	0		
LAURA WAND BOARD MEMBER	1 0	х						0	0	0		
BRIAN K WELKER BOARD MEMBER	1 0	х						0	0	0		
CONSTANCE L WOLF BOARD MEMBER	1 0	х						0	0	0		
EDWARD D YATES BOARD MEMBER	1 0	x						0	0	0		

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

Compensated Employees, and Indepen		ictors						<b>I</b>		
<b>(A)</b> Name and Title	(B) Average hours per week (list any	CC    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
	hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	=ormer			organizations
MORTON F ZIFFERER JR BOARD MEMBER	15	х						0	0	0
GEORGE H GLATFELTER II CHAIRMAN	1 5	Х		х				0	0	0
WILLIAM S SHIPLEY III VICE CHAIRMAN	1 5	Х		х				0	0	0
JEFFREY R HINES SECRETARY	1 5	х		х				0	0	0
ROBERT S FREED TREASURER	1 5	Х		х				0	0	0
DR GEORGE W WALDNER PRESIDENT	37 5			х				434,074	0	254,777
C MATTHEW SMITH CFO	37 5			х				194,250	0	63,205
KENNETH MARTIN DEAN OF CAMPUS OPERATIONS	37 5				х			193,745	0	24,780
NATHANIEL COFFMAN HEADMASTER	37 5				х			167,345	0	63,245
DOMINIC DELLICARPINI ACADEMIC DEAN	37 5				х			162,821	0	39,261
STACEY DAMMANN PROFESSOR	37 5					х		181,846	0	8,823
DANIEL HELWIG DEAN OF ADVANCEMENT	37 5					х		179,754	0	37,109
SARDARI KHANNA PROFESSOR	37 5					х		157,859	0	34,227
LINDA PUGH PROFESSOR	37 5					х		153,921	0	29,204
FRANK MUSSANO DEAN OF ADMIN SERVICES	37 5					х		148,639	0	40,605