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Form 990

Return of Organization Exempt From Income Tax

2012

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

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

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07-01-2012, 2012, and ending 06-30-2013

B Check if applicable	C Name of organization ALVERNIA UNIVERSITY		D Employer identification number 23-1522643
<input type="checkbox"/> Address change	Doing Business As		
<input type="checkbox"/> Name change			
<input type="checkbox"/> Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number (610) 796-5600
<input type="checkbox"/> Terminated			
<input type="checkbox"/> Amended return	City or town, state or country, and ZIP + 4 READING, PA 19607		
<input type="checkbox"/> Application pending			G Gross receipts \$ 84,345,656

F Name and address of principal officer
DOUGLAS F SMITH
400 SAINT BERNARDINE STREET
READING, PA 19607H(a) Is this a group return for affiliates?
 Yes NoH(b) Are all affiliates included?
 Yes No
If "No," attach a list (see instructions)

H(c) Group exemption number ►

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

J Website: ► WWW ALVERNIA EDU

K Form of organization Corporation Trust Association Other ► L Year of formation 1958 M State of legal domicile PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities A FAST GROWING FRANCISCAN UNIVERSITY, GROUNDED IN THE CATHOLIC AND LIBERAL ARTS TRADITIONS		
2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets		
3 Number of voting members of the governing body (Part VI, line 1a)	3	37
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	35
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	1,307
6 Total number of volunteers (estimate if necessary)	6	400
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	97,336
b Net unrelated business taxable income from Form 990-T, line 34	7b	-136,364

8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
9 Program service revenue (Part VIII, line 2g)	2,685,803	2,802,626
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	60,921,738	63,598,894
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-15,005	1,737,707
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,084,399	982,144
	64,676,935	69,121,371

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	Prior Year	Current Year
14 Benefits paid to or for members (Part IX, column (A), line 4)	13,690,987	14,705,940
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0	0
16a Professional fundraising fees (Part IX, column (A), line 11e)	27,619,024	28,389,009
b Total fundraising expenses (Part IX, column (D), line 25) ► 1,400,101	0	0
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	20,297,287	22,018,126
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	61,607,298	65,113,075
19 Revenue less expenses Subtract line 18 from line 12	3,069,637	4,008,296

20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
21 Total liabilities (Part X, line 26)	119,097,971	128,884,709
22 Net assets or fund balances Subtract line 21 from line 20	70,076,813	75,410,551
	49,021,158	53,474,158

Part II Signature Block

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

Sign Here	***** Signature of officer DOUGLAS SMITH VICE PRESIDENT FOR FINANCE & ADMIN Type or print name and title	2014-04-03 Date
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Paid Preparer Use Only	Print/Type preparer's name JULIUS C GREEN CPA JD	Preparer's signature	Date 2014-04-03	Check <input type="checkbox"/> if self-employed	PTIN P00350393
	Firm's name ► PARENTEBEARD LLC		Firm's EIN ► 23-2932984		
	Firm's address ► 2609 KEISER BOULEVARD READING, PA 19603		Phone no (215) 972-0701		

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

Statement of Program Service Accomplishments

Statement of Program Service Accomplishments
Check if Schedule Q contains a response to any question in this Part II

they describe the organization's mission

GUIDED BY FRANCISCAN VALUES AND THE IDEAL OF "KNOWLEDGE JOINED WITH LOVE", AND ROOTED IN THE CATHOLIC AND LIBERAL ARTS TRADITIONS, ALVERNIA IS A RIGOROUS, CARING, AND INCLUSIVE LEARNING COMMUNITY COMMITTED TO ACADEMIC EXCELLENCE AND TO BEING AND FOSTERING BROADLY EDUCATED, LIFE-LONG LEARNERS, REFLECTIVE PROFESSIONALS AND ENGAGED CITIZENS, AND ETHICAL LEADERS WITH MORAL COURAGE

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

Yes No

If "Yes," describe these new services on Schedule C.

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

Yes No

If "Yes," describe these changes on Schedule C.

Describe the organization's program service accomplishments for each of its three largest program services, as measured by Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, total expenses, and revenue, if any, for each program service reported

) (Expenses \$ 51,761,135 including grants of \$ 14,705,940) (Revenue \$ 63,598,894

CONDUCT, OPERATE AND MAINTAIN A UNIVERSITY FOR THE EDUCATION, TRAINING AND SPIRITUAL GUIDANCE OF MEN AND WOMEN THROUGH A COLLEGE OF ARTS AND SCIENCES AND A COLLEGE OF PROFESSIONAL STUDIES, ALVERNIA HAS THE POWER TO CONFER UPON STUDENTS, WHO HAVE SUCCESSFULLY COMPLETED THE REQUIRED COURSES, BACHELOR OF ARTS AND BACHELOR OF SCIENCE DEGREES IN MORE THAN 50 UNDERGRADUATE MAJORS AND MINORS ALVERNIA ALSO PROVIDES A BROAD RANGE OF GRADUATE PROGRAMS AT THE MASTER'S AND DOCTORAL LEVELS THROUGH ITS SCHOOL OF GRADUATE AND ADULT EDUCATION ALL DEGREES AWARDED ARE APPROVED AND AUTHORIZED BY THE DEPARTMENT OF EDUCATION OF THE COMMONWEALTH OF PENNSYLVANIA THE UNIVERSITY HAS APPROXIMATELY 3,000 STUDENTS WHO ARE PRIMARILY RESIDENTS OF THE COMMONWEALTH OF PENNSYLVANIA THE UNIVERSITY'S MAIN CAMPUS IS LOCATED IN READING, PENNSYLVANIA, WITH SATELLITE SITES IN THE PHILADELPHIA AND SCHUYLKILL COUNTY AREAS ALVERNIA SUPPORTS A STIMULATING AND CARING LEARNING COMMUNITY THAT IS WELCOMING TO STUDENTS WHO HAIL FROM DIVERSE GEOGRAPHICAL, CULTURAL AND RELIGIOUS BACKGROUNDS THEY BENEFIT FROM FACULTY WHO ARE ACCOMPLISHED SCHOLARS AND SUPPORTIVE MENTORS ALVERNIA STUDENTS ENJOY THE PERSONAL ATTENTION AFFORDED BY SMALL CLASS SIZES AND REAL WORLD APPLICATION OF THEIR STUDIES VIA AN EXTENSIVE NETWORK OF FIELD EXPERIENCES, INTERNSHIPS AND SERVICE PROJECTS THAT DEVELOP SUCCESSFUL PROFESSIONALS AND ENGAGED CITIZENS THROUGH A CUTTING EDGE PARTNERSHIP WITH THE ONLINE CONSORTIUM OF INDEPENDENT COLLEGES AND UNIVERSITIES, ALVERNIA OFFERS ACCESS TO MORE THAN 700 WEB-BASED COURSES AND PROVIDES A BOUNDARY-FREE APPROACH TO LEARNING ALVERNIA IS A GREAT VALUE AMONG PRIVATE UNIVERSITIES, AND WORKS HARD TO KEEP COSTS AFFORDABLE FOR FAMILIES IN FACT, WHEN COMPARED TO OTHER LEADING PRIVATE COLLEGES, THE UNIVERSITY'S UNDERGRADUATE TUITION COST IS LESS THAN THE NATIONAL AVERAGE THE SCHOOL ALSO OFFERS GENEROUS SCHOLARSHIPS AND FINANCIAL AID TO HELP STUDENTS REALIZE THEIR HIGHER EDUCATION GOALS AS ONE OF ONLY 22 FRANCISCAN INSTITUTIONS IN THE UNITED STATES, ALVERNIA'S VALUES-BASED LEARNING PHILOSOPHY IS GUIDED BY THE IDEAL OF "KNOWLEDGE JOINED WITH LOVE" THAT SHAPES BOTH ITS EDUCATIONAL PHILOSOPHY AND STRONG CAMPUS COMMUNITY THE UNIVERSITY'S EMPHASIS ON DEVELOPING ETHICAL LEADERS WITH MORAL COURAGE IS BLENDED WITH A COMMITMENT TO SERVICE IN A CAMPUS ENVIRONMENT THAT PROVIDES STUDENTS THE IDEAL SETTING TO GROW AND DEVELOP THE UNIVERSITY'S ATHLETIC TEAMS, THE CRUSADERS, COMPETE UNDER THE NATIONAL COLLEGIATE ATHLETIC ASSOCIATION DIVISION III AND ARE MEMBERS OF THE FREEDOM CONFERENCE OF THE MIDDLE ATLANTIC STATES ATHLETIC CORPORATION, AS WELL AS MEMBERS OF THE EASTERN COLLEGE ATHLETIC CONFERENCE ATHLETIC PROGRAMS INCLUDE MEN'S BASEBALL AND ICE HOCKEY, MEN'S AND WOMEN'S BASKETBALL, CROSS COUNTRY, GOLF, LACROSSE, SOCCER, TENNIS AND TRACK AND FIELD, AND WOMEN'S CHEERLEADING, DANCE, FIELD HOCKEY, SOFTBALL AND VOLLEYBALL ALVERNIA'S FRANCISCAN HERITAGE INCLUDES A STRONG INTELLECTUAL TRADITION THAT RECOGNIZES AND VALUES THE IMPORTANCE OF DIVERSITY OF THOUGHT, FAITHS AND CULTURES THE UNIVERSITY CHALLENGES STUDENTS TO SHAPE THE WORLD AND TRANSFORM IT AS WORKING PROFESSIONALS, CONCERNED CITIZENS AND CARING COMMUNITY MEMBERS, CONSISTENT WITH THE PRINCIPLES AND TEACHINGS OF SAINT FRANCIS OF ASSISI THE BERNARDINE FRANCISCAN SISTERS, WHO FOUNDED ALVERNIA IN 1958, ARE MEMBERS OF THE THIRD ORDER REGULAR OF ST FRANCIS THE THIRD ORDER WAS A SPONTANEOUS PENITENTIAL LAY MOVEMENT INFLUENCED BY ST FRANCIS AND THE EARLY BROTHERS AS THEY WORKED AND PREACHED IN CITIES AND TOWNS OF ITALY, ENCOURAGING PEOPLE TO LIVE THE GOSPEL AND EMBRACE A LIFE OF PENANCE IN THEIR OWN HOMES SOME OF THESE PENITENTS EVENTUALLY DECIDED TO TAKE PUBLIC VOWS AND LIVE A COMMON LIFE, AND THE BERNARDINE FRANCISCAN SISTERS ARE ONE OF MANY RELIGIOUS CONGREGATIONS SHARING THIS THIRD ORDER CHARISM AS A FRANCISCAN UNIVERSITY, ALVERNIA'S IDENTITY IS BASED ON LIFE CHANGING IDEALS THAT STRESS UNCONDITIONAL LOVE FOR ALL PEOPLE, COMPASSION, HUMILITY AND FORGIVENESS THROUGH AN UNDERSTANDING OF THE GOSPELS OF JESUS CHRIST CORE TO ITS MISSION IS THE BELIEF IN THE SANCTITY OF HUMAN LIFE AND THE PROTECTION OF HUMAN RIGHTS THROUGH ACTIVE PARTICIPATION IN THE ECONOMIC, POLITICAL, LEGAL AND SOCIAL POLICY DIALOG THAT AFFECTS HUMAN DIGNITY SERVICE, HUMILITY, PEACEMAKING, CONTEMPLATION AND COLLEGIALITY ARE THE CORE VALUES OF ALVERNIA AND THE BERNARDINE FRANCISCAN SISTERS THESE BASIC VALUES ARE INTENDED TO INFORM A WAY OF LIFE, A VIEW OF THE WORLD AND A DEFINITION OF MEN'S AND WOMEN'S RELATIONSHIPS TO THEIR CREATOR THAT IS MORE RELEVANT TODAY THAN EVER BEFORE ALVERNIA'S FRANCISCAN MISSION INFLUENCES ALL THAT IT DOES - ITS CURRICULUM AND CULTURE, WHAT THE UNIVERSITY TEACHES AND HOW IT IS TAUGHT THIS CREATES A LEARNING ENVIRONMENT THAT ENCOURAGES STUDENTS TO FOLLOW THEIR INDIVIDUAL GIFTS TO TRANSFORM THEMSELVES AND THE WORLD AROUND THEM

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

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

or program services (Describe in Schedule O)

Other programs
(Expenses \$)

including grants of \$

) (Revenue

1

4e Total program service expenses

51.761.135

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, *Schedule of Contributors* (see instructions)?

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

4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

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

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

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

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

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

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

11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

- a** Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
- 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
- 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
- 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
- e** Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
- f** Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part XI

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

12b 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

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States?

- 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

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

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV

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)

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

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

- b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
1	Yes	
2	Yes	
3		No
4	Yes	
5		No
6		No
7		No
8		No
9		No
10	Yes	
11a	Yes	
11b		No
11c		No
11d		No
11e	Yes	
11f	Yes	
12a	Yes	
12b		No
13	Yes	
14a		No
14b		No
15		No
16		No
17		No
18	Yes	
19		No
20a		No
20b		

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 79		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c Yes		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 1,307		
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		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a Yes		
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b Yes		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a No		
b If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a No		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b No		
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible 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).	7a Yes		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b Yes		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c No		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d		
d If "Yes," indicate the number of Forms 8282 filed during the year	7e No		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f No		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	9a		
9 Sponsoring organizations maintaining donor advised funds.	9b		
a Did the organization make any taxable distributions under section 4966?			
b Did the organization make a distribution to a donor, donor advisor, or related person?			
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12	10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders	11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state? Note. 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	13b		
c Enter the amount of reserves on hand	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	No	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

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

Section A. Governing Body and Management

			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	37		
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	35		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	Yes		
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No	
6 Did the organization have members or stockholders?	6	Yes		
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes		
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	8a	Yes		
a The governing body?	8b	Yes		
b Each committee with authority to act on behalf of the governing body?	9		No	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				

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

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

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed PA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 DOUGLAS F SMITH 400 SAINT BERNARDINE STREET READING, PA (610) 796-5600

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table					

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

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **11**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ASSOCIATED CONSTRUCTION 1003 MORGANTOWN ROAD SHILLINGTON PA 19607	CONSTRUCTION	15,882,717
ALADDIN 21 ARMORY DRIVE WHEELING WV 26003	FOOD SERVICE	2,581,914
SECURITY GUARDS INC PO BOX 6283 WYOMISSING PA 19610	CAMPUS SECURITY	884,618
FOLLETT 3146 SOLUTIONS CENTER CHICAGO IL 60677	BOOKSTORE	311,775
MOSTELLER & ASSOCIATES 2433 MORGANTOWN ROAD SUITE 100 READING PA 19607	HUMAN RESOURCES SERVICE	299,603
2 Total number of independent contractors (including but not limited to those listed above) who received more than		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **53**

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 7,500			
	b Membership dues	1b			
	c Fundraising events	1c 31,690			
	d Related organizations	1d			
	e Government grants (contributions)	1e 901,741			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,861,695			
	g Noncash contributions included in lines 1a-1f \$				
	h Total. Add lines 1a-1f		2,802,626		
Program Service Revenue	2a TUITION AND FEES	Business Code 611710	54,470,497	54,470,497	
	b AUXILIARY ENTERPRISES	611710	9,128,397	9,128,397	
	c				
	d				
	e				
	f All other program service revenue				
	g Total. Add lines 2a-2f		63,598,894		
	3 Investment income (including dividends, interest, and other similar amounts)		609,316		609,316
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					
6a Gross rents	(i) Real 261,672				
b Less rental expenses	(ii) Personal 204,855				
c Rental income or (loss)	56,817				
d Net rental income or (loss)		56,817	-109,727	166,544	
7a Gross amount from sales of assets other than inventory	(i) Securities 16,120,438				
b Less cost or other basis and sales expenses	(ii) Other 14,992,047				
c Gain or (loss)	1,128,391				
d Net gain or (loss)		1,128,391		1,128,391	
8a Gross income from fundraising events (not including \$ 31,690 of contributions reported on line 1c) See Part IV, line 18					
b Less direct expenses	a 20,855 b 27,383				
c Net income or (loss) from fundraising events		-6,528		-6,528	
9a Gross income from gaming activities See Part IV, line 19					
b Less direct expenses	a				
c Net income or (loss) from gaming activities					
10a Gross sales of inventory, less returns and allowances	a				
b Less cost of goods sold	a				
c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code			
11a STUDENT FEES AND FINES	900099	364,578		364,578	
b EVENT INCOME	900099	197,323		197,323	
c COMMISSIONS AND REBATES	900099	159,136		159,136	
d All other revenue		210,818	9,740	201,078	
e Total. Add lines 11a-11d		931,855			
12 Total revenue. See Instructions		69,121,371	63,598,894	97,336	2,622,515

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2 Grants and other assistance to individuals in the United States See Part IV, line 22	14,705,940	14,705,940		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,960,946	1,202,570	758,376	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	20,037,849	16,295,700	3,127,001	615,148
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	6,390,214	5,007,508	1,151,419	231,287
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal	233,722		233,722	
c Accounting	79,350		79,350	
d Lobbying	96,000	96,000		
e Professional fundraising services See Part IV, line 17				
f Investment management fees	197,264		197,264	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	5,700,933	3,606,903	1,883,522	210,508
12 Advertising and promotion	432,208	8,415	423,793	
13 Office expenses	1,938,846	1,329,325	528,672	80,849
14 Information technology	638,203	239,921	398,282	
15 Royalties				
16 Occupancy	1,610,064	1,320,934	272,122	17,008
17 Travel	286,989	173,648	65,630	47,711
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	161,382	139,346	19,844	2,192
20 Interest	2,026,067	1,715,651	291,457	18,959
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,401,667	3,734,676	626,256	40,735
23 Insurance	399,548	340,015	55,897	3,636
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a REPAIRS & MAINTENANCE	1,274,827	762,967	504,739	7,121
b BAD DEBTS	1,070,913	452,392	617,421	1,100
c CATERING	519,902	211,255	292,529	16,118
d PROGRAMMING	286,152	226,201	59,941	10
e All other expenses	664,089	191,768	364,602	107,719
25 Total functional expenses. Add lines 1 through 24e	65,113,075	51,761,135	11,951,839	1,400,101
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 SheetCheck if Schedule O contains a response to any question in this Part X

		(A) Beginning of year	(B) End of year
Assets			
1	Cash—non-interest-bearing	1,090	1 1,090
2	Savings and temporary cash investments	1,545,395	2 2,537,265
3	Pledges and grants receivable, net	1,389,945	3 1,265,720
4	Accounts receivable, net	1,552,157	4 1,377,633
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6
7	Notes and loans receivable, net	688,735	7 601,354
8	Inventories for sale or use		8
9	Prepaid expenses and deferred charges	575,674	9 359,738
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 138,548,731	
b	Less accumulated depreciation	10b 35,818,882	93,951,962 10c 102,729,849
11	Investments—publicly traded securities	17,818,149	11 18,482,031
12	Investments—other securities See Part IV, line 11	1,037,716	12 1,005,569
13	Investments—program-related See Part IV, line 11		13
14	Intangible assets		14
15	Other assets See Part IV, line 11	537,148	15 524,460
16	Total assets. Add lines 1 through 15 (must equal line 34)	119,097,971	16 128,884,709
Liabilities			
17	Accounts payable and accrued expenses	5,191,889	17 4,344,393
18	Grants payable		18
19	Deferred revenue		19
20	Tax-exempt bond liabilities	52,437,130	20 56,393,749
21	Escrow or custodial account liability Complete Part IV of Schedule D		21
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22
23	Secured mortgages and notes payable to unrelated third parties	9,443,058	23 11,405,017
24	Unsecured notes and loans payable to unrelated third parties		24
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	3,004,736	25 3,267,392
26	Total liabilities. Add lines 17 through 25	70,076,813	26 75,410,551
Net Assets or Fund Balances			
27	Unrestricted net assets	39,767,159	27 43,112,514
28	Temporarily restricted net assets	680,092	28 1,235,472
29	Permanently restricted net assets	8,573,907	29 9,126,172
Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30
31	Paid-in or capital surplus, or land, building or equipment fund		31
32	Retained earnings, endowment, accumulated income, or other funds		32
33	Total net assets or fund balances	49,021,158	33 53,474,158
34	Total liabilities and net assets/fund balances	119,097,971	34 128,884,709

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	69,121,371
2	Total expenses (must equal Part IX, column (A), line 25)	2	65,113,075
3	Revenue less expenses Subtract line 2 from line 1	3	4,008,296
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	49,021,158
5	Net unrealized gains (losses) on investments	5	444,704
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	53,474,158

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

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

Additional Data

Software ID:
Software Version:
EIN: 23-1522643
Name: ALVERNIA UNIVERSITY

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Or director	Individual trustee	Institutional Trustee	Officer	Key employee			
JOANNE M JUDGE ESQ CHAIR	1 00	X		X			0	0	0
KEVIN F STCYR VICE CHAIR	1 00	X		X			0	0	0
SR DANIELLE MARIE KUBELSKY OSF SECRETARY	1 00	X		X			0	0	0
FRANCES A AITKEN CPA TRUSTEE	1 00	X					0	0	0
CARL G ANDERSON JR TRUSTEE	1 00	X					0	0	0
CHARLES BARBERA MD TRUSTEE	1 00	X					0	0	0
MOST REV JOHN O BARRES STD JCL DD TRUSTEE	1 00	X					0	0	0
CYNTHIA BOSCOV TRUSTEE	1 00	X					0	0	0
SR MARGARET CARNEY OSF STD TRUSTEE	1 00	X					0	0	0
WILLIAM H COMBS III TRUSTEE	1 00	X					0	0	0
MICHELLE M DAVIS TRUSTEE	1 00	X					0	0	0
ROBERT DAVIS TRUSTEE	1 00	X					0	0	0
SR MARILISA DASILVA OSF TRUSTEE	1 00	X					0	0	0
TIMOTHY DIETRICH TRUSTEE	1 00	X					0	0	0
STEVE ELMARZOUKY TRUSTEE	1 00	X					0	0	0
MICHAEL FROMM TRUSTEE	1 00	X					0	0	0
KEVIN GEORGETTI ESQ TRUSTEE	1 00	X					0	0	0
CARL HERBEIN TRUSTEE	1 00	X					0	0	0
CAROL L HINDS PHD TRUSTEE	1 00	X					0	0	0
SR MARY MARGARET JACKSON OSF TRUSTEE	1 00	X					0	0	0
SR ANTOINETTE KEISER OSF TRUSTEE	1 00	X					0	0	0
STEVEN S KEISER TRUSTEE	1 00	X					0	0	0
KATHLEEN W KLEPPINGER TRUSTEE	1 00	X					0	0	0
THOMAS W MARTELL TRUSTEE	1 00	X					0	0	0
ROBERT J MCCORMACK TRUSTEE	1 00	X					0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Or director	Individual trustee	Institutional Trustee	Officer	Key employee			
MICHAEL A MULLEN TRUSTEE	1 00	X					0	0	0
STEPHEN NAJARIAN TRUSTEE	1 00	X					0	0	0
CHRIS PRUITT TRUSTEE	1 00	X					0	0	0
DEANNA REUBEN TRUSTEE	1 00	X					0	0	0
GEORGE RICE TRUSTEE	1 00	X					0	0	0
DONALD SCHALK TRUSTEE	1 00	X					0	0	0
JAMES C SWEENEY TRUSTEE	1 00	X					0	0	0
JOHN D WANNER TRUSTEE	1 00	X					0	0	0
ALFRED J WEBER TRUSTEE	1 00	X					0	0	0
SR SHAUN KATHLEEN WILSON OSF TRUSTEE	1 00	X					0	0	0
BENJAMIN J ZINTAK III TRUSTEE	1 00	X					0	0	0
THOMAS F FLYNN PHD PRESIDENT	37 50	X	X				277,750	0	55,383
THOMAS F FLYNN PHD PRESIDENT (BONUS)	37 50	X	X				13,650	0	0
THOMAS F FLYNN PHD PRESIDENT (VESTED DEFERRED COMP)	37 50	X	X				343,086	0	0
JOSEPH J CICALA PHD VP OF UNIVERSITY LIFE	37 50		X				118,301	0	19,806
BRADLEY M DREXLER AVP OF MARKETING	37 50		X				139,164	0	32,308
JOHN R MCCLOSKEY MBA VP OF ENROLLMENT	37 50		X				121,714	0	34,407
J MICHAEL PRESSIMONE MA VP OF ADVANCEMENT	37 50		X				157,157	0	120,669
DOUGLAS F SMITH MBA VP OF FINANCE & ADMINISTRA	37 50		X				161,197	0	68,284
SHIRLEY J WILLIAMS EDD PROVOST	37 50		X				153,754	0	29,058
BETH BERRET EDD ASSOCIATE PROFESSOR OF BUSINESS	37 50			X			100,713	0	41,388
STEVEN MELNICK PHD PROFESSOR OF EDUCATION	37 50			X			100,723	0	10,212
THOMAS G PORRAZO PHD ASSOCIATE PROFESSOR OF ATHLETIC TRAINING	37 50			X			100,661	0	52,692
KAREN S THACKER PHD DEAN, COLLEGE OF PROFESSIONAL PROGRAMS	37 50			X			103,202	0	23,759

SCHEDULE A
(Form 990 or 990EZ)**Public Charity Status and Public Support****2012****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

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.

Name of the organization
ALVERIA UNIVERSITY**Employer identification number**

23-1522643

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

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

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

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

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

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

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

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

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

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

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

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

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

e a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated

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

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

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

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

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

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

i Provide the following information about the supported organization(s)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?	(v) Did you notify the organization in col (i) of your support?	(vi) Is the organization in col (i) organized in the U S ?	(vii) Amount of monetary support
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15
16 Public support percentage from 2011 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization	
b 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	

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

Facts And Circumstances Test

Explanation

SCHEDULE C
(Form 990 or 990-EZ)**Political Campaign and Lobbying Activities****2012****Open to Public
Inspection****For Organizations Exempt From Income Tax Under section 501(c) and section 527**

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization
ALVERNIA UNIVERSITY

Employer identification number

23-1522643

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ► \$ _____
- 3 Volunteer hours _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount Enter the amount from the following table in both columns			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000	\$1,000,000		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a If zero or less, enter -0-			
i Subtract line 1f from line 1c If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes	<input type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a)	(b)	
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		96,000
j	Total Add lines 1c through 1i			96,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4
5 Taxable amount of lobbying and political expenditures (see instructions)	5

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information

Identifier	Return Reference	Explanation
EXPLANATION OF LOBBYING ACTIVITIES	PART II-B, LINE 1	ALVERNIA WORKS WITH AN ORGANIZATION THAT HELPS THE UNIVERSITY OBTAIN EARMARKS THROUGH THE FEDERATION APPROPRIATIONS PROCESS. THIS ORGANIZATION ALSO HAS A GRANT DEPARTMENT THAT WORKS WITH ALVERNIA TO SEARCH FOR FUNDING SOURCES FROM PRIVATE FOUNDATIONS AND GOVERNMENT AGENCIES

SCHEDULE D
(Form 990)**Supplemental Financial Statements****2012****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

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

Name of the organization
ALVERNIA UNIVERSITY**Employer identification number**

23-1522643

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

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

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)	<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of an historically important land area
	<input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure
	<input type="checkbox"/> Preservation of open space
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	Held at the End of the Year
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____	2d
4 Number of states where property subject to conservation easement is located ► _____	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1	► \$ _____
(ii) Assets included in Form 990, Part X	► \$ _____
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a Revenues included in Form 990, Part VIII, line 1	► \$ _____
b Assets included in Form 990, Part X	► \$ _____

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

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

a <input type="checkbox"/> Public exhibition	d <input type="checkbox"/> Loan or exchange programs
b <input type="checkbox"/> Scholarly research	e <input type="checkbox"/> Other
c <input type="checkbox"/> Preservation for future generations	

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	19,663,518	18,210,790	14,505,142	12,952,472	14,428,519
b Contributions	747,998	2,821,891	1,443,793	887,655	1,122,759
c Net investment earnings, gains, and losses	1,985,147	-248,528	2,589,835	957,548	-1,798,098
d Grants or scholarships	721,776	480,551	178,050	186,750	233,381
e Other expenditures for facilities and programs	935,345	480,000	12,547	8,292	475,000
f Administrative expenses	166,919	160,084	137,383	97,491	92,327
g End of year balance	20,572,623	19,663,518	18,210,790	14,505,142	12,952,472

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

a Board designated or quasi-endowment ► 55 500 %

b Permanent endowment ► 44 400 %

c Temporarily restricted endowment ► 0 100 %

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

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

(i) unrelated organizations

Yes	No
3a(i)	No

(ii) related organizations

Yes	No
3a(ii)	No

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

Yes	No
3b	No

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

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

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		5,369,579			5,369,579
b Buildings		103,074,406	23,485,037		79,589,369
c Leasehold improvements					
d Equipment		14,747,420	8,325,132		6,422,288
e Other		15,357,326	4,008,713		11,348,613
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)					102,729,849

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

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

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

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

(a) Description of liability	(b) Book value
Federal income taxes	
AGENCY FUNDS	1,402,720
FEDERAL LOAN PROGRAM ADVANCES	486,672
STUDENT DEPOSITS	1,378,000
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	3,267,392

2. Fin 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

1	Total revenue, gains, and other support per audited financial statements	1	54,895,109
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	444,704
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	-14,705,940
e	Add lines 2a through 2d	2e	-14,261,236
3	Subtract line 2e from line 1	3	69,156,345
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	197,264
b	Other (Describe in Part XIII)	4b	-232,238
c	Add lines 4a and 4b	4c	-34,974
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	69,121,371

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

1	Total expenses and losses per audited financial statements	1	50,442,109
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	232,238
e	Add lines 2a through 2d	2e	232,238
3	Subtract line 2e from line 1	3	50,209,871
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	197,264
b	Other (Describe in Part XIII)	4b	14,705,940
c	Add lines 4a and 4b	4c	14,903,204
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	65,113,075

Part XIII Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	ALVERNIA UNIVERSITY'S ENDOWMENT FUNDS ARE USED FOR STUDENT SCHOLARSHIPS AND CAPITAL PURCHASES INCLUDING TECHNOLOGY AND DEFERRED MAINTENANCE
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE UNIVERSITY ACCOUNTS FOR UNCERTAINTIES IN INCOME TAXES IN ACCORDANCE WITH AUTHORITATIVE GUIDANCE, WHICH PRESCRIBES 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 HAS BEEN MET. MANAGEMENT DETERMINED THERE WERE NO TAX UNCERTAINTIES THAT MET THE RECOGNITION THRESHOLD AT JUNE 30, 2013 AND 2012. THE UNIVERSITY'S FEDERAL EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURNS REMAIN SUBJECT TO EXAMINATION BY THE IRS FOR THE YEARS SUBSEQUENT TO JUNE 30, 2009.
PART XI, LINE 2D - OTHER ADJUSTMENTS		STUDENT FINANCIAL AID -14,705,940
PART XI, LINE 4B - OTHER ADJUSTMENTS		RENTAL EXPENSE -204,855 FUNDRAISING EVENTS EXPENSE -27,383
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE 204,855 FUNDRAISING EVENTS EXPENSE 27,383
PART XII, LINE 4B - OTHER ADJUSTMENTS		STUDENT FINANCIAL AID 14,705,940

SCHEDULE E
(Form 990 or 990-EZ)**Schools**

OMB No 1545-0047

2012Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceName of the organization
ALVERNIA UNIVERSITY

Employer identification number

23-1522643

Part I

1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space use Part II

	YES	NO
1	Yes	
2	Yes	
3	Yes	

4 Does the organization maintain the following?

a Records indicating the racial composition of the student body, faculty, and administrative staff?

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

d Copies of all material used by the organization or on its behalf to solicit contributions?

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

4a	Yes	
4b	Yes	
4c	Yes	
4d	Yes	

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

a Students' rights or privileges?

b Admissions policies?

c Employment of faculty or administrative staff?

d Scholarships or other financial assistance?

e Educational policies?

f Use of facilities?

g Athletic programs?

h Other extracurricular activities?

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

5a	No	
5b	No	
5c	No	
5d	No	
5e	No	
5f	No	
5g	No	
5h	No	

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

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

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

7 Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev. Proc. 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

6a	Yes	
6b	No	
7	Yes	

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

Identifier	Return Reference	Explanation
EXPLANATION OF NONDISCRIMINATORY POLICY PUBLICATION	SCHEDULE E, PART I, LINE 3	THE UNIVERSITY'S POLICY OF NON DISCRIMINATION IS INCLUDED IN ITS "UNIVERSITY CATALOG", FINANCIAL AID LITERATURE, BROCHURES, AND GENERAL ADVERTISING
EXPLANATION OF GOVERNMENT FINANCIAL ASSISTANCE	SCHEDULE E, PART I, LINE 6	THE UNIVERSITY RECEIVES AN INSTITUTIONAL ASSISTANCE GRANT FROM THE COMMONWEALTH OF PENNSYLVANIA. IT RECEIVES FUNDS FROM THE FEDERAL DEPARTMENT OF EDUCATION UNDER STUDENT FINANCIAL ASSISTANCE PROGRAMS. THE UNIVERSITY ALSO RECEIVES OTHER FEDERAL FUNDS DIRECTLY OR INDIRECTLY FROM THE U.S. DEPARTMENT OF LABOR, THE U.S. DEPARTMENT OF JUSTICE, AND THE HEALTH RESOURCE AND SERVICE ADMINISTRATION

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

2012

Open to Public Inspection

Employer identification number

23-1522643

Name of the organization
ALVERNIA UNIVERSITY

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

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

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

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

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
		SCHLAGER GOLF TOURNAMENT (event type)	BASKETBALL GOLF OUTING (event type)	(total number)	
Revenue	1 Gross receipts . . .	43,800	8,745		52,545
	2 Less Contributions . . .	27,650	4,040		31,690
	3 Gross income (line 1 minus line 2) . . .	16,150	4,705		20,855
Direct Expenses	4 Cash prizes . . .				
	5 Noncash prizes . . .	5,122	4,372		9,494
	6 Rent/facility costs . . .	15,914	1,975		17,889
	7 Food and beverages . . .				
	8 Entertainment . . .				
	9 Other direct expenses . . .				
	10 Direct expense summary Add lines 4 through 9 in column (d)				► (27,383)
	11 Net income summary Combine line 3, column (d), and line 10				► -6,528

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

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

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

a Is the organization licensed to operate gaming activities in each of these states? Yes No
b If "No," explain _____

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

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? Yes No

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

13 Indicate the percentage of gaming activity operated in

13a	
13b	

- a** The organization's facility
- b** An outside facility

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

Name ► _____

Address ► _____

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

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

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

Name ► _____

Address ► _____

16 Gaming manager information

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

Director/officer

Employee

Independent contractor

17 Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

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

Identifier	Return Reference	Explanation
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Schedule I (Form 990)

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

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

► Attach to Form 990

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ALVERNIA UNIVERSITY

Employer identification number

Part I General Information on Grants and Assistance

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

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

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

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

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

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

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) INSTITUTIONAL DISCOUNTS	771	946,655	FMV		
(2) INSTITUTIONAL SCHOLARSHIPS	1488	13,584,506	FMV		
(3) ENDOWED SCHOLARSHIPS	74	174,779	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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 ALL STUDENTS APPLYING FOR FEDERAL FUNDS ARE REQUIRED TO SUBMIT THE FREE APPLICATION FOR FEDERAL STUDENT AID ("FAFSA") THE FINANCIAL AID OFFICE REVIEWS THE RESULTS OF THE FAFSA, WHICH DICTATES WHAT AND HOW MUCH FEDERAL FUNDING THE INDIVIDUAL STUDENT IS ELIGIBLE TO RECEIVE IF THE STUDENT IS DETERMINED TO BE IN COMPLIANCE WITH ALL FEDERAL REGULATIONS, AS DETERMINED BY THE US DEPARTMENT OF EDUCATION, THE FINANCIAL AID OFFICE AWARDS THE STUDENT THE APPROPRIATE FUNDING STUDENT FILES REGARDING ELIGIBILITY ARE MAINTAINED BY THE STUDENT FINANCIAL AID OFFICE INSTITUTIONAL SCHOLARSHIPS AND DISCOUNTS AWARDED BY THE FINANCIAL AID OFFICE ARE RECONCILED BY THE ACCOUNTING DEPARTMENT TO VERIFY THAT THE APPROPRIATE AMOUNT WAS CREDITED TO THE CORRECT STUDENT'S ACCOUNT

Schedule J
(Form 990)**Compensation Information**

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

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.

2012**Open to Public Inspection**Name of the organization
ALVERNIA UNIVERSITY

Employer identification number

23-1522643

Part I Questions Regarding Compensation

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

<input type="checkbox"/> First-class or charter travel	<input checked="" type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> 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?

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

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

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

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

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

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

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

a The organization?

b Any related organization?

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

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

a The organization?

b Any related organization?

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

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

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

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

	Yes	No
1b	Yes	
2	Yes	
4a		No
4b	Yes	
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
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)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) THOMAS F FLYNN PHD PRESIDENT	(i) 277,750 (ii) 0	(i) 0 (ii) 0	(i) 0 (ii) 0	(C) 37,246 0	(D) 18,137 0	(E) 333,133 0	(F) 0 0
(2) THOMAS F FLYNN PHD PRESIDENT (BONUS)	(i) 0 (ii) 0	(i) 13,650 (ii) 0	(i) 0 (ii) 0	(C) 0 0	(D) 0 0	(E) 13,650 0	(F) 0 0
(3) THOMAS F FLYNN PHD PRESIDENT (VESTED DEFERRED COMP)	(i) 0 (ii) 0	(i) 0 (ii) 0	(i) 343,086 (ii) 0	(C) 0 0	(D) 0 0	(E) 343,086 0	(F) 191,610 0
(4) BRADLEY M DREXLER AVP OF MARKETING	(i) 131,164 (ii) 0	(i) 8,000 (ii) 0	(i) 0 (ii) 0	(C) 14,435 0	(D) 17,873 0	(E) 171,472 0	(F) 0 0
(5) JOHN R MCCLOSKEY MBA VP OF ENROLLMENT	(i) 117,714 (ii) 0	(i) 4,000 (ii) 0	(i) 0 (ii) 0	(C) 12,690 0	(D) 21,717 0	(E) 156,121 0	(F) 0 0
(6) J MICHAEL PRESSIMONE MA VP OF ADVANCEMENT	(i) 151,157 (ii) 0	(i) 6,000 (ii) 0	(i) 0 (ii) 0	(C) 16,234 0	(D) 104,435 0	(E) 277,826 0	(F) 0 0
(7) DOUGLAS F SMITH MBA VP OF FINANCE & ADMINISTRA	(i) 155,197 (ii) 0	(i) 6,000 (ii) 0	(i) 0 (ii) 0	(C) 16,693 0	(D) 51,591 0	(E) 229,481 0	(F) 0 0
(8) SHIRLEY J WILLIAMS EDD PROVOST	(i) 150,754 (ii) 0	(i) 3,000 (ii) 0	(i) 0 (ii) 0	(C) 16,102 0	(D) 12,956 0	(E) 182,812 0	(F) 0 0
(9) THOMAS G PORRAZO PHD ASSOCIATE PROFESSOR OF ATHLETIC TRAI	(i) 84,631 (ii) 0	(i) 0 (ii) 0	(i) 16,030 (ii) 0	(C) 10,156 0	(D) 42,536 0	(E) 153,353 0	(F) 0 0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	THE ABOVE BENEFITS ARE PROVIDED TO THE UNIVERSITY'S PRESIDENT (DR. THOMAS FLYNN) HOUSING AND SOCIAL CLUB MEMBERSHIP IS OWNED BY THE UNIVERSITY AND THE PRESIDENT USES THEM AS PART OF HIS RESPONSIBILITIES
	PART I, LINE 4B	DR. THOMAS FLYNN PARTICIPATES IN 457(F) AND 457(B) RETIREMENT PLANS. DR. FLYNN RECEIVED \$343,086 FROM THE PLAN DURING THE YEAR AS HIS VESTED PAYMENT OF THE DEFERRED COMPENSATION PLAN

Software ID:**Software Version:****EIN:** 23-1522643**Name:** ALVERNIA UNIVERSITY**Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
THOMAS F FLYNN PHD	(i) 277,750 (ii) 0	0 0	0 0	37,246 0	18,137 0	333,133 0	0 0
THOMAS F FLYNN PHD	(i) 0 (ii) 0	13,650 0	0 0	0 0	0 0	13,650 0	0 0
THOMAS F FLYNN PHD	(i) 0 (ii) 0	0 0	343,086 0	0 0	0 0	343,086 0	191,610 0
BRADLEY M DREXLER	(i) 131,164 (ii) 0	8,000 0	0 0	14,435 0	17,873 0	171,472 0	0 0
JOHN R MCCLOSKEY MBA	(i) 117,714 (ii) 0	4,000 0	0 0	12,690 0	21,717 0	156,121 0	0 0
J MICHAEL PRESSIMONE MA	(i) 151,157 (ii) 0	6,000 0	0 0	16,234 0	104,435 0	277,826 0	0 0
DOUGLAS F SMITH MBA	(i) 155,197 (ii) 0	6,000 0	0 0	16,693 0	51,591 0	229,481 0	0 0
SHIRLEY J WILLIAMS EDD	(i) 150,754 (ii) 0	3,000 0	0 0	16,102 0	12,956 0	182,812 0	0 0
THOMAS G PORRAZO PHD	(i) 84,631 (ii) 0	0 0	16,030 0	10,156 0	42,536 0	153,353 0	0 0

**Schedule K
(Form 990)****Supplemental Information on Tax Exempt Bonds****2012****Open to Public
Inspection**Department of the Treasury
Internal Revenue Service

► 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.

Name of the organization
ALVERNIA UNIVERSITYEmployer identification number
23-1522643**Part I Bond Issues**

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG	36-4597945		04-01-2011	9,945,000	REFUNDING OF 12-23-08 REVENUE NOTE		X		X		X
B	MUNICIPAL AUTHORITY OF SOUTH HEIDELBERG	36-4597945		12-20-2007	10,000,000	CONSTRUCTION AND CAPITAL RENOVATIONS		X		X		X
C	REDEVELOPMENT AUTHORITY OF COUNTY OF BERKS	23-1719387		11-01-2012	7,337,481	REFUNDING OF 5-17-06 REVENUE NOTE		X		X		X
D	ROBESON TOWNSHIP MUNICIPAL AUTHORITY	23-6844459		05-26-2011	8,995,000	REFUNDING 04-22-04 REVENUE NOTE		X		X		X

Part II Proceeds

			A	B	C	D
			295,000	100,000	785,299	501,841
1	Amount of bonds retired					
2	Amount of bonds legally defeased					
3	Total proceeds of issue		9,945,000	10,000,000	7,337,481	8,995,000
4	Gross proceeds in reserve funds					
5	Capitalized interest from proceeds					
6	Proceeds in refunding escrows					
7	Issuance costs from proceeds		76,574	76,574		
8	Credit enhancement from proceeds					
9	Working capital expenditures from proceeds					
10	Capital expenditures from proceeds		9,923,426	9,923,426		
11	Other spent proceeds		9,945,000		7,337,481	8,995,000
12	Other unspent proceeds					
13	Year of substantial completion		2011	2009	2012	2011
			Yes	No	Yes	No
			X		X	
14	Were the bonds issued as part of a current refunding issue?					
15	Were the bonds issued as part of an advance refunding issue?		X		X	
16	Has the final allocation of proceeds been made?		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?		X		X	

Part III Private Business Use

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

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X		X		X
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		X
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ►	0 00000%		0 00000%		0 00000%		0 00000%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ►	0 00000%		0 00000%		0 00000%		0 00000%	
6 Total of lines 4 and 5	0 00000%		0 00000%		0 00000%		0 00000%	
7 Does the bond issue meet the private security or payment test?		X		X		X		X
8a Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X		X		X
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		X		X		X		X

Part IV Arbitrage

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

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		X
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?		X		X		X		X

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X		X		X		X

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

Identifier	Return Reference	Explanation
SCHEDULE K, PART III LINE 9, PART IV LINE 7 AND PART V		THE UNIVERSITY HAS PROCEDURES IN PLACE TO MONITOR COMPLIANCE WITH BOND REGULATIONS BUT DOES NOT HAVE A FORMAL WRITTEN POLICY. THE UNIVERSITY IS WORKING WITH BOND COUNSEL TO FORMALIZE A WRITTEN POLICY FOR THE CURRENT YEAR

**Schedule K
(Form 990)****2012****Open to Public
Inspection**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.

Name of the organization
ALVERNIA UNIVERSITYEmployer identification number
23-1522643**Part I Bond Issues**

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	MUNICIPAL AUTHORITY OF CUMRU	23-6000288		10-20-2011	10,000,000	CONSTRUCTION AND CAPITAL RENOVATIONS		X		X		X
B	REDEVELOPMENT AUTHORITY OF READING	23-6050281		04-09-2012	10,000,000	CONSTRUCTION AND CAPITAL RENOVATIONS		X		X		X

Part II Proceeds

		A	B	C	D			
					1	2	3	4
1	Amount of bonds retired	150,000						
2	Amount of bonds legally defeased							
3	Total proceeds of issue	10,000,000	10,000,000					
4	Gross proceeds in reserve funds							
5	Capitalized interest from proceeds							
6	Proceeds in refunding escrows							
7	Issuance costs from proceeds	96,660	97,500					
8	Credit enhancement from proceeds							
9	Working capital expenditures from proceeds							
10	Capital expenditures from proceeds	9,903,340	4,902,500					
11	Other spent proceeds							
12	Other unspent proceeds	5,000,000	5,000,000					
13	Year of substantial completion	2012	2014					
14	Were the bonds issued as part of a current refunding issue?	Yes	No	Yes	No	Yes	No	Yes
15	Were the bonds issued as part of an advance refunding issue?		X		X			
16	Has the final allocation of proceeds been made?	X			X			
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X				

Part III Private Business Use

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

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X		X				
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ►	0 00000%		0 00000%		%		%	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ►	0 00000%		0 00000%		%		%	
6 Total of lines 4 and 5	0 00000%		0 00000%		%		%	
7 Does the bond issue meet the private security or payment test?		X		X				
8a Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X		X				
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	%		%		%		%	
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		X		X				

Part IV Arbitrage

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

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X		X				
7 Has the organization established written procedures to monitor the requirements of section 148?		X		X				

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X		X				

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

Identifier	Return Reference	Explanation

Schedule L

Transactions with Interested Persons

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

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

OMB No 1545-0047

2012

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization
ALVERNIA UNIVERSITY

Employer identification number

23-1522643

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

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

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

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

Part II Loans to and/or From Interested Persons.

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

Part III Grants or Assistance Benefitting Interested Persons.

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

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ROBERT DAVIS	BOARD TRUSTEE	173,639	ROBERT DAVIS WAS THE PRESIDENT OF VIST BANK DURING CALENDAR YEAR 2012. ALVERNIA UNIVERSITY HAS MORTGAGE LOANS WITH THE BANK AND MADE MORTGAGE INTEREST PAYMENTS DURING THE YEAR OF \$173,639		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
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2012

Open to Public
Inspection**SCHEDULE O**
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**

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

Name of the organization
ALVERNA UNIVERSITY

Employer identification number

23-1522643

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 3	
	FORM 990, PART VI, SECTION A, LINE 6	THE MEMBERS OF THE CORPORATION SHALL SERVE IN AN EX-OFFICIO CAPACITY AND SHALL CONSIST OF THE GENERAL MINISTER AND COUNCIL OF THE CONGREGATION OF BERNARDINE SISTERS OF THE THIRD ORDER OF ST. FRANCIS OF READING, PA
	FORM 990, PART VI, SECTION A, LINE 7B	MEMBERS HAVE THE POWER TO DO THE FOLLOWING - DETERMINE AND MAINTAIN THE IDENTITY, PURPOSE , AND FRANCISCAN AFFILIATION OF THE CORPORATION - ADOPT, AMEND, REPEAL, OR ALTER THE ARTICLES OF INCORPORATION AND BYLAWS OF THE CORPORATION - APPROVE THE SALE, PURCHASE, AND MOR TGAGE OF ENCUMBRANCE OF ANY REAL PROPERTY TRANSACTION GREATER THAN \$5,000,000 - MERGE, CO NSOLIDATE, DISSOLVE, OR EFFECT ANY FUNDAMENTAL CORPORATE REORGANIZATION OF THE CORPORATION - DETERMINE DISTRIBUTION OF ASSETS UPON DISSOLUTION OF THE CORPORATION - PARTICIPATE IN THE HE NOMINATING OF THE PRESIDENT OF THE BOARD OF TRUSTEES - APPROVE THE USE OF THE NAMES "AL VERNIA," "BERNARDINE," AND "FRANCISCAN" - APPROVE THE ARTICLES OF INCORPORATION AND BYLAWS OF ANY SUBSIDIARY OR RELATED CORPORATION
	FORM 990, PART VI, SECTION B, LINE 11	A DRAFT OF THE FORM 990 IS PRESENTED TO THE ADMINISTRATION FOR REVIEW AND DISCUSSION ITEM S THAT NEED CLARIFICATION ARE THEN DISCUSSED WITH MANAGEMENT AND THE UNIVERSITY'S TAX ADVISORS / LEGAL COUNSEL ONCE ITEMS ARE CLARIFIED AND ANSWERED, THE DRAFT FORM 990 IS PRESENTED TO THE FULL BOARD OF TRUSTEES, WHERE THERE IS A DISCUSSION OF THE ENTIRE FORM, QUESTION S ANSWERED, AND A VOTE TO APPROVE IS CAST ONCE THE BOARD OF TRUSTEES HAS APPROVED THE FORM 990, IT IS FILED WITH THE IRS
	FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY, THE BOARD OF TRUSTEES, OFFICERS, AND KEY EMPLOYEES ARE REQUIRED TO SIGN A CONFLICT OF INTEREST STATEMENT THE VICE PRESIDENT FOR FINANCE AND ADMINISTRATION REVIEWS ALL OF THE STATEMENTS ANYONE NOTED WITH A CONFLICT IS REQUIRED TO ABSTAIN FROM VOTING ON SUCH TRANSACTIONS
	FORM 990, PART VI, SECTION B, LINE 15	ALVERNIA HAS AN EXECUTIVE COMPENSATION COMMITTEE THAT IS A SUB-COMMITTEE OF ITS EXECUTIVE COMMITTEE. MEMBERS ARE THE CHAIR AND VICE CHAIR OF THE BOARD, THE SPONSORING RELIGIOUS ORDER'S CONGREGATIONAL MINISTER OR HER DESIGNEE, THE CHAIRS OF THE EDUCATIONAL AFFAIRS AND FINANCIAL COMMITTEES, AND AN AT-LARGE MEMBER APPOINTED BY THE BOARD CHAIR WHO CHAIRS THE COMMITTEE. THE UNIVERSITY'S LEGAL COUNSEL SERVES AS STAFF TO THE COMMITTEE. THE COMMITTEE ENGAGES COMPENSATION CONSULTANTS BIANNUALLY TO REVIEW NATIONAL TRENDS AND TO PROVIDE DATA FROM THEIR PROPRIETARY DATA BASE AND FROM IRS 990 FORMS FOR THE BOARD-APPROVED LIST OF PEER INSTITUTIONS. THE STUDY INCLUDES THE PRESIDENT AND ALL VICE PRESIDENTS. THE COMMITTEE CONDUCTS AN IN-DEPTH EVALUATION OF THE PRESIDENT'S PERFORMANCE ANNUALLY - BASED ON HIS SELF-EVALUATION AND REPORT ON GOALS, THE ANNUAL SURVEY OF TRUSTEES, AND THEIR OWN APPRaisal. THE COMMITTEE REVIEWS THE PRESIDENT'S PERFORMANCE IN AN ANNUAL EXECUTIVE SESSION. THE COMMITTEE DETERMINES THE PRESIDENT'S COMPENSATION BASED ON THE RESULTS OF THEIR REVIEW, THE CONSULTANT'S REPORT OF PEER INSTITUTIONS, AND BROADER TRENDS IN EXECUTIVE COMPENSATION. THE COMMITTEE THEN MAKES A REPORT, WITH RECOMMENDATIONS, TO THE FULL BOARD, WHICH THEN APPROVES THE PRESIDENT'S COMPENSATION. THE COMMITTEE ALSO DISCUSSES THE PRESIDENT'S ANNUAL EVALUATIONS OF ALL THE VICE PRESIDENTS AND REVIEWS DECISIONS ON THEIR COMPENSATION IN LIGHT OF THEIR PERFORMANCE EVALUATION AND THE PEER DATA. ALL COMPENSATION DECISIONS ARE DOCUMENTED AND DISCUSSED IN THE COMMITTEE'S MINUTES.
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2012

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization
ALVERNIA UNIVERSITY

Employer identification number

23-152264

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

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

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

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

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

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

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

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

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k	Yes	
1l		No
1m	Yes	
1n		No
1o		No
1p		No
1q		No
1r		No
1s		No

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

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

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.

Software ID:**Software Version:****EIN:** 23-1522643**Name:** ALVERNIA UNIVERSITY**Part VII Supplemental Information**

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

Identifier	Return Reference	Explanation
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