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DLN: 93493081000565

Form **990** 

Department of the Treasury Internal Revenue Service

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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		<b>2013 cal</b> pplicable	C Name of organization	06-01-2013 , 2013, and ending 05-	31-2014	D Emplo	yer ider	ntification number	
_	dress ch	• •	GETTYSBURG COLLEGE			23-13	352641	L	
– Na	me cha	nge	Doing Business As						
Inıt	tıal retu	ırn		all is not delivered to street address) Room/s	suite	E Telepho	one num	ber	
Ter	rmınate	ed	300 NORTH WASHINGTON STREET Suite				337-6		
_ Am	ended	return	City or town, state or province, count GETTYSBURG, PA 17325	ry, and ZIP or foreign postal code		(/1/)	337-0	200	
App	plication	n pending	GETT13501KG, TA 17323			<b>G</b> Gross r	eceipts \$	204,164,587	
			F Name and address of prince DANIEL T KONSTALID	cipal officer		Is this a group	return		
			300 NORTH WASHINGTON	STREET		subordinates?		┌ Yes 🗸 No	
			GETTYSBURG,PA 17325			Are all subordi	nates	┌ Yes ┌ No	
г Та	x-exem	npt status	✓ 501(c)(3)	nsert no )	_	included? If "No " attach	a list	(see instructions)	
		<u> </u>	VW GETTYSBURG EDU	1301(110) 1 1317(4)(1) 01 1 327	1				
				<b>—</b>	H(c)	Group exempt			
	m of org rt I		Trust Association	Other ►	<b>L</b> Yea	r of formation 18	32 <b>M</b>	State of legal domicile PA	
Га			lescribe the organization's mission	or most significant activities					
e e	(	GETTYS	SBURG COLLEGE, A NAT'L,RESII	DENTIAL COLLEGE COMMITTED T ND PARTICIPANTS IN A CHANGIN			•	REPARES	
Governance	-								
Ĭ	:								
5- O K	2 (	Check th	his box দ if the organization dis	continued its operations or disposed	of more t	han 25% of its	net as	sets	
	3 1	Number	of voting members of the governi	ng body (Part VI, line 1a)			з	35	
Activities &				f the governing body (Part VI, line 1b			4	31	
	1			alendar year 2013 (Part V, line 2a)			5	2,785	
Į.	6	Total nu	mber of volunteers (estimate if ne	ecessary)			6	812	
				rt VIII, column (C), line 12			7a	716,407	
	ь	Net unre	elated business taxable income fro	om Form 990-T, line 34	<u></u>		7b	-371,553	
						Prior Year		Current Year	
a)	8		ibutions and grants (Part VIII, lin	17,269,					
Rayente	9			e 2g)		150,049,	9,783     152,541,908       8,297     7,460,838		
ž	10 11		revenue (Part VIII, column (A), l	(A), lines 3, 4, and 7d)	·	2,982,		3,205,429	
	12			(must equal Part VIII, column (A), lii	ne				
				<u> </u>		174,029,9		182,302,895	
	13			(X, column (A), lines 1-3)		47,517,		47,584,012	
	14			(, column (A), line 4)			0	0	
8	15	5-10)		e benefits (Part 1x, column (A), lines		67,468,	836	69,932,170	
Expenses	16a	Profes	ssional fundraising fees (Part IX, o	column (A), line 11e)			0	0	
ਡੌ	ь	Total fu	undraising expenses (Part IX, column (D),	line 25) <b>-</b> 5,406,074					
_	17			nes 11a-11d, 11f-24e)		46,734,		49,752,575	
	18			t equal Part IX, column (A), line 25)		161,720,6		167,268,757	
_ 07	19	Reven	iue less expenses Subtract line 1	8 from line 12		12,309,		15,034,138	
Net Assets of Fund Balances					Beg	inning of Curre Year		End of Year	
988 888	20	Total	assets (Part X, line 16)			476,534,9	948	505,594,077	
2 E	21	Total	liabilities (Part X, line 26)			130,570,4	404	126,306,313	
	22		ssets or fund balances Subtract I	ine 21 from line 20		345,964,	544	379,287,764	
Jnde ny ki	nowled	alties of dge and		mined this return, including accompa plete Declaration of preparer (other					
		<b>L</b>				2015-03-20			
Sign		Signa	ature of officer			Date			
Here	е		el T Konstalid VP for Fin & Admin/Treasu	rer					
		<u> 17 '                                  </u>	e or print name and title Print/Type preparer's name	Preparer's signature	Date		PTIN		
Paid	4		MARGARET A BRADSHAW	riepaiei s signature	Date	Check If self-employed	P11N P00501	222	
	<sub>u</sub> pare	ır [	Firm's name F KPMG LLP			Firm's EIN 🟲			
	Pare On		Firm's address 🕨 1676 INTERNATIONAL D	RIVE		Phone no (717	) 337-62	200	
	· • • • • • • • • • • • • • • • • • • •	• <b>y</b>				1			

MCLEAN, VA 22102

May the IRS discuss this return with the preparer shown above? (see instructions)  $\,$  .

✓ Yes No

Par	t III	Statement of Program Statement			III	
1	Brief	y describe the organization's m	ssion			
SCIE GET GET OF L EVA HER	ENCES TYSBU TYSBU EARNI LUATI ITAGE	RG COLLEGE IS A HIGHLY SE WITH A STUDENT BODY OF A RG NATIONAL MILITARY PARRE COLLEGE IS TO SERVE THOMBOT ON THE IDEAS AND ACTION OF MAND THE PROMOTION OF MAND GLOBAL COMMUNITIES	APPROXIMATELY 2 K IN PENNSYLVAN E CAUSE OF LIBE DE THE CLASSRO DNS OF HUMANKII USIC, THE ARTS, T	2,700, IT IS LOCATE NIA THE COLLEGE W RAL EDUCATION IN OM COMMITTED TO ND, AND TO THE CRI	D ON A 200-ACRE CAMPUS VAS FOUNDED IN 1832 THE CHANGING TIMES, BY PROV THE DISCOVERY, EXPLORA EATIVE EXTENSION OF THA	ADJACENT TO THE PURPOSE OF /IDING A COMMUNITY .TION, AND .T DEVELOPING
2	Dıd th the pı	e organization undertake any s ior Form 990 or 990-EZ? .	gnıfıcant program s	ervices during the yea	r which were not listed on	
	If"Y∈	s," describe these new services	on Schedule O			
3	servi	e organization cease conductines?			onducts, any program · · · · · · · · ·	
4	Desc exper	the the organization's program sees Section 501(c)(3) and 50 tal expenses, and revenue, if ar	service accomplishr L(c)(4) organization	s are required to repo		
4a	(Code	e ) (Expenses \$ RGRADUATE EDUCATION OF STUDENT		including grants of \$	47,584,012 ) (Revenue \$	155,706,047 )
4b	(Cod	e ) (Expenses \$		including grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$		including grants of \$	) (Revenue \$	)
4d		r program services (Describe ii enses \$	Schedule O ) including grants o	of \$	) (Revenue \$	)
4e	Tota	l program service expenses 🕨	146,931,459	)		

# Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part $IV^{\square}$	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
l1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $\chi^{\bullet}$	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
L4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
L5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	Yes	
L7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
L8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government 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 or 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? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		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	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
	Chook in Conceasio C Contensio a recipione of motor to any information and it and it is a first to	-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   3,601			
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
ła	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		Νo
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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		1110
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
5a	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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			N.o.
ч	file Form 8282?	7c		No
u	74   74			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			NI -
f	contract?	7e 7f		No No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<u> </u>		INO
_	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	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?			
0		8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
	Did the organization make any taxable distributions under section 4966?	9a 9b		
)	Section 501(c)(7) organizations. Enter	30		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
la	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Ves " has it filed a Form 7.20 to report these payments? If "No " provide an evaluation in Schedule O	<u>۔۔۔۔</u>		

Form 990 (2013) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			re Cod Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		
10a b	Did the organization have local chapters, branches, or affiliates?			No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?  If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  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?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No

- List the States with which a copy of this Form 990 is required to be filed▶AZ, CA, FL, KY, ME, MD, MI, MN, MO, NH, PA, TN, VΑ
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶FINANCE AND ADMINISTRATION 300 NORTH WASHINGTON ST GETTYSBURG, PA 17325 (717) 337-6200

Form 990	(2013)	
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#### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line 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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(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

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more to perso and a	tion ( han d n is l	ne b both	oox, an c	heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-		(F) Estima mount of compens	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		rganizati relate organiza	ed
											-		
											+		
41								<b>-</b>					
1b c	Sub-Total	s to Part VII, S	· · ection /	٠.									
d	Total (add lines 1b and 1c) .							F	2,688,485	1	0		615,579
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	ho received more th	an			
												Yes	
3	Did the organization list any <b>fc</b> on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highest compen	sated employee	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? If "Yes," complete Schedule J for such individual									4	Yes		
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	100	N o
	ection B. Independent Co	ntractors											
1	Complete this table for your fiv	/e highest comp											
	compensation from the organiz	zation Report co (A)	ompens	ation	for t	he c	alenda	ır ye	ar ending with or wi	thin the organization (B)	n's t	ax year (C	

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
MCNEES WALLACE NURICK, 1 S CHURCH STREET HAZLETON PA 18201	LEGAL COUNSEL	334,032
CB FLOORING LLC, 9305-Y GERWIG LANE COLUMBIA MD 21046	CONTRACTOR	300,345
JIM BARBARA ENTWISTLE, 1260 TABLE ROCK ROAD GETTYSBURG PA 17325	LANDLORD	212,398
818 CONNECTICUT LLC, 1111 14TH ST NW SUITE 200 WASHINGTON DC 20005	LANDLORD	162,440
KACHIN INTERNATIONAL LLC, 100 WEST ELM STREET PALMYRA PA 17078	DINING VENDOR	132,530

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 ►7

		Check if Schedu	<u>lle O contains a respor</u>	ise or note to any li	ne in this Part VIII	<del></del>	<u> </u>	<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(0	1a	Federated camp	paigns 1a					
nt at l	ь	Membership du	es <b>1b</b>	28,400				
Giffs, Grants ilar Amounts			ents 1c	80,081				
Z, Z								
<u>                                    </u>	d		rations 1d	931,060				
ons, Gifts, Grants Similar Amounts	е	Government grants					ļ	
utio ier	f	All other contributions similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	18,055,179				
tributio Other	g	Noncash contribution	ons included in lines	3,778,615		İ	İ	
Contributions, and Other Sim	h	Total. Add lines	s 1a-1f	🕍	19,094,720			
				Business Code				
į l	2a	TUITION AND FEES	5	900099	121,934,719	121,934,719		
34 28	ь	AUXILIARY SERVICI	ES	900099	29,337,578	29,337,578		
- è	c	CONFERENCES ANI	D CONVENTIONS	611710	693,515		693,515	
25	d	THEATER	_	711110	576,096	287,180	288,916	
જુ	e			71110	370,030	207,100	200,510	
Program Serwce Revenue	f	All other progra	ım service revenue					
Š	g	Total. Add lines	s 2a – 2f		152,541,908			
	3	Investment inc	ome (ıncludıng dıvıden	ds, interest,	3,113,861		-266,024	3,379,885
	4		ar amounts) tment of tax-exempt bond ;	l l	0		200,021	3,373,003
	5	Royalties		▶	0			
		· [	(ı) Real	(II) Personal				
	6a	Gross rents	41,290	, ,				
	b	Less rental						
	c	expenses Rental income	41,290	0				
	d	or (loss)	me or (loss)		41,290			41,290
	_	[	(ı) Securities	(II) O ther	·			·
	7a	Gross amount from sales of	24,756,638	(11) 0 11101				
		assets other than inventory	24,730,036					
	ь	Less cost or						
		other basis and sales expenses	20,271,597	138,064				
	C	Gain or (loss)	4,485,041	-138,064				
	d		s)		4,346,977			4,346,977
ů ů	8a	Gross income fi events (not incl						
듀		\$	,081					
Other Revenue		of contributions See Part IV, lin	reported on line 1c)					
<u>.</u>		,	a	52,757				
E Pe	b	Less direct exp	penses <b>b</b>	52,757				
•	c	Net income or (	loss) from fundraising (	events 🛌	0			
	9a	Gross income fi See Part IV, lin	rom gaming activities					
		200 Ture 17 ,	a					
	b	Less direct exp	penses b					
	c	Net income or (	loss) from gaming activ	/ities <b>.</b> ►	0			
	10a	Gross sales of i returns and allo		1,808,013				
	b	less costofac	oods sold <b>b</b>	1,399,274				
			(loss) from sales of inve		408,739	408,739		
		Miscellaneous		Business Code				
	11a	WORKSHOP FE	ES	900099	250,711	250,711		
	b	ADMINISTRAT	IVE FEES	900099	123,162	123,162		
	c	STUDENT LOA	N INTEREST	900099	137,279	137,279		
	d	All other revenu	ue		2,244,248	2,244,248		
	e	Total. Add lines	s 11a-11d		2,755,400			
	12	Total revenue.	See Instructions	<u></u> . •	182,302,895	154,723,616	716,407	7,768,152

Form 990 (2013) Page **10** 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 or note to any line in this Part IX (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 44,236,824 44,236,824 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 3,347,188 3,347,188 Benefits paid to or for members Compensation of current officers, directors, trustees, and 2,304,270 1,180,712 738,092 385,466 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 222,435 222,435 Other salaries and wages 49,250,223 41,489,880 5,282,285 2,478,058 Pension plan accruals and contributions (include section 401(k) 5,108,782 4,346,540 488,780 and 403(b) employer contributions) . . . . 273,462 9,471,345 8,000,288 941,739 Other employee benefits . . . . 529,318 10 3,575,115 2,905,206 465,000 204,909 11 Fees for services (non-employees) O Management . . . . 443,946 Legal . . . . . . . . 3,415 440,531 106,412 7,707 98,705 0 0 Professional fundraising services See Part IV, line 17 393,258 Investment management fees . . . . . 393,258 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 2,265,283 1,165,875 646,980 452,428 Schedule O) . . . . . . . Advertising and promotion . . 448,265 198,780 248,831 12 654 13 Office expenses . . . 9,420,786 7,671,187 1,279,067 470,532 1,765,943 624,002 1,105,795 14 Information technology . . 36,146 15 0 Royalties . 4,532,491 3,891,007 545,329 96,155 16 Occupancy . . . . . . **17** 3,291,469 2,653,425 391,141 246,903 Travel . . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 0 19 Conferences, conventions, and meetings . 606,761 413,266 153,907 39,588 20 Interest . . . . . . . . . . . . 3,610,957 3,610,957 Payments to affiliates . . . . 21 O 10,424,681 22 Depreciation, depletion, and amortization . 9,148,139 1,160,848 115,694 23 502,164 476,049 23,158 2,957 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 OFF CAMPUS STUDY 6,966,812 6,966,812 COLLEGE STORE AND DINING 3,972,281 3,719,753 201,742 50,786 SUBSCRIPTIONS AND MEMBERSHIPS 429,144 202,125 215,674 11,345 d ADMINISTRATIVE FEES 214,370 214,370 e All other expenses 357,552 235,517 110,362 11,673 Total functional expenses. Add lines 1 through 24e 25 167,268,757 146,931,459 14,931,224 5,406,074 Joint costs. Complete this line only if the organization 26

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check

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

Part X Balance Sheet

Par	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			· · ·
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	727,326	1	1,702,373
	2	Savings and temporary cash investments	75,539,062	2	76,249,900
	3	Pledges and grants receivable, net	7,136,966	3	5,475,419
	4	Accounts receivable, net	820,865	4	1,043,588
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
s	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	586	5	0
ė			0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
4	8	Inventories for sale or use	442,287	8	668,962
	9	Prepaid expenses and deferred charges	3,844,804	9	3,470,264
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  10a 322,006,937			
	Ь	Less accumulated depreciation 10b 153,710,009	164,210,005	10c	168,296,928
	11	Investments—publicly traded securities	117,602,358	11	134,426,794
	12	Investments—other securities See Part IV, line 11	70,951,301	12	72,006,513
	13	Investments—program-related See Part IV, line 11	6,319,724	13	6,205,717
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	28,939,664	15	36,047,619
	16	Total assets. Add lines 1 through 15 (must equal line 34)	476,534,948	16	505,594,077
	17	Accounts payable and accrued expenses	13,997,062	17	13,706,562
	18	Grants payable	0	18	0
	19	Deferred revenue	1,532,965	19	1,582,923
	20	Tax-exempt bond liabilities	78,285,000	20	75,300,000
Ø.	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
i		persons Complete Part II of Schedule L	298,526	22	266,115
	23	Secured mortgages and notes payable to unrelated third parties	6,380,866	23	6,163,168
	24	Unsecured notes and loans payable to unrelated third parties	401,213	24	360,118
	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	29,674,772	25	28,927,427
	26	D	130,570,404	26	126,306,313
	20	Total liabilities. Add lines 17 through 25	130,370,404	20	120,300,313
Ş	27	lines 27 through 29, and lines 33 and 34.  Unrestricted net assets	169,375,975	27	181,708,366
<u>ନ୍ତ</u>	28	Temporarily restricted net assets	44,182,154	28	53,321,249
<u> </u>	29	Permanently restricted net assets	132,406,415	29	144,258,149
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and	.32,100,110		,200,140
ō	30	complete lines 30 through 34.  Capital stock or trust principal, or current funds		30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund		31	
35	32	Retained earnings, endowment, accumulated income, or other funds		32	
¥	33	Total net assets or fund balances	345,964,544	33	379,287,764
Net	34	Total liabilities and net assets/fund balances	476,534,948		
	J 34	rotal habilities and het assets/fulld Dalances	4/0,034,948	34	505,594,077

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)				
•	Total revenue (must equal Fait VIII, column (A), mie 12)	1		182,3	802,895
2	Total expenses (must equal Part IX, column (A), line 25)	2		167,2	268,757
3	Revenue less expenses Subtract line 2 from line 1	3			34,138
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments	5			255,441
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		-9	966,359
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		379,2	287,764
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: **Software Version:** 

**EIN:** 23-1352641

Name: GETTYSBURG COLLEGE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers, pendent Cor	Direct ntracto	ors, ers	Tru	ste	es, ŀ	(ey	Employees, High	nest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor/	ox, ι an o ⁄trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2033 11200,	2,1000	related organizations
GINO ALBERTO JR	1 0	Х								
JOSEPH A BIERNAT	1 0	X								
TRUSTEE  DAVID BRENNAN	1 0									
TRUSTEE		Х								
DONALD BURDEN TRUSTEE	1 0	×								
A BRUCE CHAMBERLIN	1 0	х								
TRUSTEE  JAMES L CHEMEL	1 0	X								
TRUSTEE LORI KONO CLAPP	1 0									
TRUSTEE STEPHEN K CLOETINGH	1 0	X								
TRUSTEE		Х								
ENID WEDEMEYER CORKRAN TRUSTEE	1 0	x								
MALCOLM L COWEN II	1 0	х								
JESSE H DINER	1 0	Х								
ROBERT N DUELKS	1 0	X								
TRUSTEE GWENDOLYN JORDAN DUNGY	1 0									
TRUSTEE ALAN FUERSTMAN	1 0	X								
TRUSTEE		Х								
BOB GARTHWAIT JR TRUSTEE	1 0	×								
JAMES N HESTON TRUSTEE	1 0	х								
LYNN S HOLUBA	1 0	х								
RAYMOND M HOPKINS	1 0	X								
TRUSTEE MARY CLAIRE LAGNO	1 0	X								
TRUSTEE WILLIAM D LAUGHLIN	1 0	^								
TRUSTEE ERIC B LINT	1.0	×								
TRUSTEE	1 0	х								
STEPHEN P MAHINKA TRUSTEE	1 0	х								
HOLLY KELLER MCDEVITT	1 0	Х								
JEFFREY C OAK	1 0	Х								
TRUSTEE JOHN T O'CONNOR	1 0									
TRUSTEE	J	X								

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (B) (D) (E) (F) (C) Name and Title Position (do not check Reportable Average Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Former Highest compensated employee Individual trustee or director organizations related Institutional below organizations emplo) ee dotted line) Trustee ANDREW M PARKER 1 0 Χ TRUSTEE LYNNE A ROYER 10 Χ TRUSTEE JOAN FISCHER SCHWEIZER 10 Χ TRUSTEE CHARLES T SCOTT 1 0 Х TRUSTEE PETER G SEIDEN 1 0 Χ TRUSTEE W JEFFREY SIEGFRIED 10 Х TRUSTEE RONALD J SMITH 10 Χ TRUSTEE DOUGLAS P STUART 10 Χ TRUSTEE F KEVIN TYLUS 1 0 Х **TRUSTEE** KAYSIE UNIACKE 1 0 Χ TRUSTEE LARRY WALKER 10 Χ TRUSTEE JANET RIGGS 40 0 Χ Х 356,333 81,402 PRESIDENT CHRISTOPHER ZAPPE 40 0 Χ 212,396 0 51,326 **PROVOST** DANIEL KONSTALID 40 0 Х 234,133 0 54,445 VP FOR FINANCE & ADMIN/TREAS ROBERT KALLIN 40 0 Χ 220,073 0 52,987 VP FOR DEVELOPMENT BARBARA FRITZE 40 0 Χ 238,687 0 45,075 VP FOR ENROLLMENT & EDUC SRVS RODNEY TOSTEN 40 0 Χ 215,772 0 49,029 VP FOR INFORMATION TECHNOLOGY JULIE RAMSEY 40 0 Χ 185,287 0 45,113 VP FOR COLLEGE LIFE/DEAN STDNT JANE NORTH 40 0 Χ 170,473 0 89,226 EXECUTIVE VICE PRESIDENT SUSAN EISENHOWER 40 0 Χ 215,416 0 26,621 CHAIRMAN LDRSHP/PUBLIC POLICY DANIEL GILBERT 40 0 0 Х 168,554 24,914 **FACULTY** JEFFREY BLAVATT 40 0 Х 164,948 0 18,389 CEO EISENHOWER INSTITUTE PHILIP BOBKO 40 0 Χ 155,539 0 35,303 **FACULTY** 

40 0

Χ

150,874

0

41,749

PETER STITT

FACULTY / EDITOR FOR GB REVIEW

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OMB No 1545-0047

### **SCHEDULE A**

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

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

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection** 

Name of the organization GETTYSBURG COLLEGE

**Employer identification number** 

									23-13526		
	rt I			blic Charity Sta						nstructions	
⊺he	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	ıgh 11, check	only one b	ox)		
1	Γ	A chur	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in <b>s</b> e	ection 170(	b)(1)(A)(i).		
2	굣	A scho	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E )								
3	$\sqcap$	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descr	ıbed ın <b>sectio</b>	n 170(b)(1	)(A)(iii).		
4	$\vdash$	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in <b>se</b>	ction 170(b)(	(1)(A)(iii). E	nter the
	_	hospita	ıl's name, cı	ty, and state							
5	ı			erated for the benefi		or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in
	_	sect ion	170(b)(1)(	A)(iv). (Complete P	art II )						
6		A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b>									
7	Г	_		at normally receives			support from	a governm	ental unit or f	rom the gen	eral public
8	Г			on 170(b)(1)(A)(vi). described in <b>sectior</b>			nplete Part II	)			
9	Г	An orga	anization tha	at normally receives	(1) more th	an 331/3% c	f its support	from contri	butions, mem	bership fees	, and gross
		receipt	s from activ	ities related to its ex	xempt function	ons—subjec	t to certain e	xceptions,	and (2) no mo	re than 331,	/3% of
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from bu	ısınesses
		acquire	d by the org	janızatıon after June	30,1975 S	ee <b>section</b> !	<b>509(a)(2).</b> (C	omplete Pa	rt III )		
10	Г			ganized and operated							
11	Г			ganized and operated						o carry out	the purposes of
				ly supported organiz						ee <b>section 5</b>	<b>09(a)(3).</b> Check
				bes the type of supp							
	_			b							
е	ı	•		ox, I certify that the on managers and otl	_		,		, ,	•	•
			1411 10u11uati 1 509(a)(2)	on managers and ou	ner than one	or more put	nicly support	eu organiza	itions describ	ed III Section	11 509(a)(1)01
f			. , , ,	received a written de	etermination	from the IR	S that it is a .	Type I, Typ	e II, or Type	III support	ing organization,
			his box								
g				2006, has the organi	zation accep	ted any gift	or contributi	on from any	of the		
			ig persons? erson who di	rectly or indirectly o	ontrols eith	er alone or t	ogether with	nersons de	scribed in (ii)	١	Yes No
				governing body of th	•		-	persons de	.serisea iii (ii)	, 11g	
		-		er of a person descri		=	•			11g	<del>``</del>
				lled entity of a perso			above?			11g	
h				ng information about						[5	,
						- u - u - u - u - u - u - u - u - u - u	( . ,				
(	i) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is t	he	(v) Did you	notify	(vi) Is	the	(vii) A mount of
	suppor			organization	organizati		the organiz		organizat		monetary
0	rganiza	ation		(described on lines 1- 9 above	col (i) list your gove		ın col (i) o suppor		col (i) org		support
				or IRC section	docume	_	Suppor	( '	III tile 0	5 '	
				(see	ascame						
				instructions))	Yes	No	Yes	No	Yes	No	1
						""		110	1.00	110	
T-4-	.1								+	1	<del>                                     </del>

Sch	edule A (Form 990 or 990-EZ) 2013						Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201:	3 (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						
3	behalf The value of services or facilities						
3	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	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts 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	<b>Total support</b> (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and <b>stop here.</b> The organization qua <b>33</b> 1/3% <b>support test—2012.</b> If the				and line 15 is 33	8 1/3% or more	
	box and <b>stop here.</b> The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	<b>-2013.</b> If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	<b>-2012</b> . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	<b>▶</b> 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		<b>▶</b> □
18	<b>Private foundation.</b> If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Schedule A (Form 990 or 990-EZ) 2013 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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 ) ction B. Total Support						
	ndar year (or fiscal year beginning	( ) 2000	(1) 2010	( ) 2011	(1) 2012	( ) 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	( <b>B)</b> 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	<b>(B)</b> 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2012	(5,232	
9	in)  A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	( <b>b)</b> 2010	(6) 2011	(1) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (	on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization  ic Support Performance (line 8, column ( 2 Schedule A, Paragraphic Performance)  colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		<b>formation.</b> Provide the explanations required by Part II, line 10; Part II, ne 12. Also complete this part for any additional information. (See instru	
		Facts And Circumstances Test	
Retu	ırn Reference	Explanation	
		Schodulo A / Form 0	000 er 000 E7) 201

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493081000565

OMB No 1545-0047

**SCHEDULE D** 

(Form 990)

Department of the Treasury

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

nai Revenue Service	**************************************	Inspection
ame of the organization ETTYSBURG COLLEGE		Employer identification number  23-1352641
<b>Organizations Maintaining Donor</b> organization answered "Yes" to Form		
<del>-</del>	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate contributions to (during year)		
Aggregate grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and donor a funds are the organization's property, subject to the	<del>-</del>	onor advised <b>Yes N</b>
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the b conferring impermissible private benefit?		
art III Conservation Easements. Comple	te if the organization answered "Yes"	to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by the Preservation of land for public use (e g , recrea Protection of natural habitat Preservation of open space	ation or education)	an historically important land area a certified historic structure
Complete lines 2a through 2d if the organization heasement on the last day of the tax year	eld a qualified conservation contribution ir	n the form of a conservation
		Held at the End of the Year
Total number of conservation easements		2a
Total acreage restricted by conservation easemen	nts	2b
Number of conservation easements on a certified	historic structure included in (a)	2c
Number of conservation easements included in (c historic structure listed in the National Register	) acquired after 8/17/06, and not on a	2d
Number of conservation easements modified, tran the tax year ▶	sferred, released, extinguished, or termina	ted by the organization during
Number of states where property subject to conse	rvation easement is located 🕨	
Does the organization have a written policy regard enforcement of the conservation easements it hole	ling the periodic monitoring, inspection, ha	
Staff and volunteer hours devoted to monitoring, ii	nspecting, and enforcing conservation eas	ements during the year
Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easemer	nts during the year
<b>▶</b> \$		
Does each conservation easement reported on lin and section 170(h)(4)(B)(II)?	e 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(i)
In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation eas	of the footnote to the organization's financi	
rt IIII Organizations Maintaining Collect Complete if the organization answere		, or Other Similar Assets.
If the organization elected, as permitted under SF, works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footn	assets held for public exhibition, education	n, or research in furtherance of public
If the organization elected, as permitted under SF, works of art, historical treasures, or other similar service, provide the following amounts relating to	AS 116 (ASC 958), to report in its revenu assets held for public exhibition, educatior	e statement and balance sheet
(i) Revenues included in Form 990, Part VIII, line	e 1	<b>►</b> \$
(ii) Assets included in Form 990, Part X		<b>►</b> \$
If the organization received or held works of art, h following amounts required to be reported under S		for financial gain, provide the
Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$
		T
Assets included in Form 990, Part X		<b>F</b> ⊅

ECIL	Organizations Maintaining Co	llections of Art,	<u>Histori</u>	<u>cal Trea</u>	sures, or O	ner Similar As	<b>sets</b> (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other records	, check	,	-	-	of its
а	Public exhibition		d [	Loan or e	xchange progra	ams	
b	Scholarly research		е Г	Other			
c	Preservation for future generations						
4	Provide a description of the organization's co	ollections and explain	how the	y further th	ne organization'	s exempt purpose	n
5	During the year, did the organization solicit						
Dan	assets to be sold to raise funds rather than t						Yes No
	Part IV, line 9, or reported an an						
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ıan or other ıntermed	lary for c	ontributior	ns or other asse		┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowing	able	_		
							nount
C	Beginning balance				-	1c	
d	Additions during the year				-	1d	
e •	Distributions during the year				<del> -</del>	le l	
f	Ending balance	000 5 4 11 1	24.2			1f	
2a	Did the organization include an amount on Fo	orm 990, Part X, line	217				「Yes 「No
	If "Yes," explain the arrangement in Part XII				-		<u> '                               </u>
Pai	rt V Endowment Funds. Complete	f the organization (a)Current year	answer (b)Prior y			Part IV, line 10. (d)Three years back	(e)Four years back
1a	Beginning of year balance	261,569,952		450,602	245,889,239	215,153,173	197,908,531
ь	Contributions	10,498,020	9,	553,004	3,501,981	4,408,678	2,460,396
С	Net investment earnings, gains, and losses	25,910,780	29,	508,131	-7,974,571	33,682,075	24,185,356
d	Grants or scholarships	2,566,186	2,	169,523	2,383,867	2,546,418	2,681,973
e	Other expenditures for facilities and programs	6,113,051	6,	572,262	7,582,180	4,808,269	6,719,137
f	Administrative expenses						
g	End of year balance	289,299,515	261,	569,952	231,450,602	245,889,239	215,153,173
2	Provide the estimated percentage of the cur	•	(line 1g	, column (a	ı)) held as		
а	Board designated or quasi-endowment 🕨	33 000 %					
b	Permanent endowment ► 50 000 %						
С	Temporarily restricted endowment ► 17 to The percentages in lines 2a, 2b, and 2c sho	000 % uld equal 100%					
За	Are there endowment funds not in the posse	ssion of the organizat	ion that	are held an	d administered	for the	Yes No
	organization by						
	organization by (i) unrelated organizations					3a	(i) Yes
	<ul><li>(i) unrelated organizations</li><li>(ii) related organizations</li></ul>					3a(	
_	(i) unrelated organizations	ns listed as required					ii) No
4	(i) unrelated organizations (ii) related organizations	ns listed as required endorse endo	wment f	unds		3a( 3	ii) No
4	(i) unrelated organizations (ii) related organizations	ns listed as required one organization's endo	wment f	unds		3a( 3	ii) No
4	(i) unrelated organizations (ii) related organizations	ns listed as required one organization's endo	owment f e orgar (a)	unds	nswered 'Yes'	to Form 990, Pa	ii) No
4 Par	(i) unrelated organizations (ii) related organizations	ns listed as required one organization's endo	owment f e orgar (a)	unds IIZation ai Cost or other	(b)Cost or oth basis (other)	to Form 990, Pa	nrt IV, line  (d) Book value
Par	(i) unrelated organizations	ns listed as required one organization's endo	owment f e orgar (a)	unds IIZation ai Cost or other	nswered 'Yes'	to Form 990, Parer (c) Accumulated depreciation	nrt IV, line (d) Book value 4,491,928
Par la l b E	(i) unrelated organizations (ii) related organizations	ns listed as required one organization's endo	owment f e orgar (a)	unds IIZation ai Cost or other	(b)Cost or oth basis (other)	to Form 990, Parer (c) Accumulated depreciation	ii) No ort IV, line (d) Book value 4,491,928
1a l b E	(i) unrelated organizations	ns listed as required one organization's endo	owment f e orgar (a)	unds IIZation ai Cost or other	(b)Cost or oth basis (other)	3a(	ii) No ort IV, line (d) Book value 4,491,928 3 139,052,939
1a L b E c L d E	(i) unrelated organizations  (ii) related organizations  If "Yes" to 3a(II), are the related organization  Describe in Part XIII the intended uses of the state o	ns listed as required one organization's endo	owment f e orgar (a)	unds IIZation ai Cost or other	(b)Cost or oth basis (other) 4,491,	to Form 990, Parer (c) Accumulated depreciation 228 118,679,34:	ii) No  art IV, line  (d) Book value  4,491,928 3 139,052,939

Part VII Investments—Other Securities. Com	plete if the organization a	answered 'Yes' to For	m 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security)		Cost or end-of-year	market value
(1)Financial derivatives (2)Closely-held equity interests			
(3)Other			
(A) HEDGE FUNDS	46,544,384	F	
(B) REAL ASSETS	6,847,110	F	
		_	
(C) PRIVATE EQUITY	18,615,019	F	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	72,006,513		
Part VIII Investments—Program Related. Cor See Form 990, Part X, line 13.	nplete if the organization	answered 'Yes' to Fo	orm 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	<b>(c)</b> Method of va Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. Complete if the organization (a) Descrip		, Part IV , line 11d See l	Form 990, Part X, line 15 (b) Book value
(1) FUNDS HELD IN TRUST BY OTHERS			36,047,619
<b>Part X</b> Other Liabilities. Complete if the organ			36,047,619
Form 990, Part X, line 25.	iization answered res te	, roilli 550, raic 1 <b>v</b> , i	me rie or rin. See
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
STUDENT'S ADV PYMT & DEPOSITS	2,706,638		
ADVANCES FROM FEDERAL GOV'T	2,069,039		
DEP HELD IN CUSTODY FOR OTHERS	673,912		
ANNUITIES PAYABLE	6,849,325		
ACCRUED POST RETIREMENT COSTS	14,511,542		
BONDS PREMIUM	2,116,971		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	28,927,427		
2 Liability for uncertain tay positions In Part XIII provide		overniantion! - f.u.s	Latatamanta that

SCHEDULE D, PART XI, LINE 4B

SCHEDULE D, PART XII, LINE 2D

SCHEDULE D, PART XII, LINE 4B

Par		n of Revenue per Audited Financial Statements With Revenue pon answered 'Yes' to Form 990, Part IV, line 12a.	er R	<b>eturn</b> Complete if
1		and other support per audited financial statements	1	157,505,686
2	Amounts included on li	ine 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains or	n investments		
b	Donated services and	use of facilities		
С	Recoveries of prior yea	ar grants		
d	Other (Describe in Par	tXIII)		
e	Add lines 2a through 2	d	2e	18,374,037
3	Subtract line <b>2e</b> from li	ne <b>1</b>	3	139,131,649
4	Amounts included on F	Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses	not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Par	t XIII )		
С	Add lines 4a and 4b .		4c	43,171,246
5	Total revenue Add line	es <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	182,302,895
Part		n of Expenses per Audited Financial Statements With Expenses	per	Return. Complete
1		tion answered 'Yes' to Form 990, Part IV, line 12a.	1	124,182,466
2		ine 1 but not on Form 990, Part IX, line 25		124,182,488
		· · · · · · · · · · · · · · · · · · ·		
a		use of facilities		
Ь	Other losses			
C C				
d	•		2-	1 452 021
e	-	d	2e	1,452,031
3		Ine 1	3	122,730,435
4		Form 990, Part IX, line 25, but not on line 1:		
a		not included on Form 990, Part VIII, line 7b 4a		
b		t XIII )	4-	44.520.222
с -			4c	44,538,322
5	Supplement	nes 3 and 4c. (This must equal Form 990, Part I, line 18)	5	167,268,757
Prov Part	ıde the descriptions requ	uired for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	Return Reference	Explanation		
	DULE D, PART V, LINE WMENT FUNDS	ORGANIZATION MUST HOLD IN PERPETUITY OR FOR A DONOR-SPEAS DESIGNATED FUNDS THE COLLEGE HAS ADOPTED INVESTMENT POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHIL PURCHASING POWER OF THE ENDOWMENT ASSETS OVER TIME EN SUPPORTS OPERATIONS OF THE COLLEGE INCLUDING SCHOLARSHINSTRUCTIONAL, ACADEMIC SUPPORT AND STUDENT SERVICES A	CIFI T ANI A PRE E SEI DOWI	ED PERIOD, AS WELL D SPENDING EDICTABLE STREAM EKING TO MAINTAIN MENT SPENDING AND 'ITIES AS
SPECIFICALLY RESTRICTED BY THE DONOR OR OTHERWISE DESIGNATED  SCHEDULE D, PART X, LINE 2  THE COLLEGE IS RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS A NOT-FOR EDUCATIONAL INSTITUTION AND, THEREFORE, QUALIFIES UNDER SECTION 501(C) THE INTERNAL REVENUE CODE FOR EXEMPTION FROM FEDERAL INCOME TAX ON ACTIVITIES RELATED TO ITS EXEMPT PURPOSE MANAGEMENT ANNUALLY REVIEWS TAX POSITIONS AND HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN PROVISIONS THAT REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS				TION 501(C)(3) OF E TAX ON LLY REVIEWS ITS L UNCERTAIN TAX 1ENTS
JUILE	DULE D, PART XI, LINE	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS \$(724,517) P RELATED CHARGES (309,105) CHANGE IN NET ASSETS OF RELATE LOSS ON DEBT REFINANCING (180,158) CHANGE IN SURRENDER V	D EN	TITIES 297,424

INSURANCE 34,952 \_\_\_\_\_TOTAL SCHEDULE D, PART XI, LINE 2D \$(881,404)

FINANCIAL STATEMENTS 393,256 \_\_\_

PART XII, LINE 4B \$44,538,322

43,171,246

\$1,452,031

COST OF GOODS SOLD \$(1,399,274)FUNDRAISING EXPENSES (52,757)STUDENT AID 43,750,699 DISREGARDED ENTITY 479,322 INVESTMENT FEES OFFSETTING REVENUES IN

STUDENT AID \$43,750,699 INVESTMENT FEES OFFSETTING REVENUES IN FINANCIAL

STATEMENTS 393,256 DISGREGARDED ENTITY 394,367 \_\_\_\_\_

COST OF GOODS SOLD REPORTED IN REVENUE \$1,399,274 FUNDRAISING EXPENSES FROM EVENTS REPORTED IN REVENUE 52,757 \_\_\_\_\_\_\_ TOTAL SCHEDULE D, PART XII, LINE 2D

\_\_\_\_ TOTAL SCHEDULE D,

\_\_\_\_\_TOTAL SCHEDULE D, PART XI, LINE 4B \$

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493081000565

OMB No 1545-0047

**SCHEDULE E** 

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

# **Schools**

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

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization GETTYSBURG COLLEGE

**Employer identification number** 

23-1352641

Da	rt I		YES	NO
Ρđ			TES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4 a	Does the organization maintain the following?  Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory  basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II	-		
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h	ı	No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b		No
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II  Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II			
	of Nev Fig. 73-30, 1373-2 C B 307, covering factor hondiscrimination of 11 No, explain on Pail II	7	Yes	

Part II Supplemental Information. 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)

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	RACIALLY NONDISCRIMINATORY POLICY IS DESCRIBED IN CATALOGS, BROCHURES, RECRUITING ACTIVITIES AND WEBSITE
SCHEDULE E, PART I, LINE 6A	FEDERAL FUNDS ARE RECEIVED FOR STUDENT FINANCIAL AID PACKAGES, RESEARCH, AND OTHER PROGRAMS GETTY SBURG COLLEGE PARTICIPATES IN THE FOLLOWING FEDERAL STUDENT FINANCIAL AID PROGRAMS FEDERAL PELL, FSEOG, FEDERAL WORK STUDY, FEDERAL PERKINS LOAN, AND FEDERAL DIRECT LOAN PROGRAMS

Schedule E (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE F

Department of the Treasury

3a Sub-total

to Part I

**b** Total from continuation sheets

c Totals (add lines 3a and 3b)

Name of the organization

Internal Revenue Service

(Form 990)

As Filed Data -

DLN: 93493081000565

**Statement of Activities Outside the United States** 

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

**Employer identification number** 

GET	TTYSBURG COLLEGE									
					23-1352641					
Pa	<b>General Informatio</b> "Yes" to Form 990, Pa			<b>ne United States.</b> Co	emplete if the organiz	ation answered				
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?									
2	<b>For grantmakers.</b> Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.									
3	Activites per Region (The follow	ving Part I, line 3	table can be di	uplicated if additional spa	ce is needed )					
	(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region				
( 1	l) See Add'l Data			,						
( 2	2)									
(3	3)									
( 4	1)									
( 5	5)									

3,674,558

52,982,295

56,656,853

			ived more than \$5,0					
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
( 2)								
(3)								
(4)								
			ted above that are re or counsel has pro					
3 Enter total nu	mber of other or	ganızatıons or en	tities					

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page 3 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (c) Number of (d) A mount of (h) Method of (a) Type of grant or (b) Region (e) Manner of cash (f) A mount of (g) Description assistance recipients cash grant disbursement non-cash of non-cash valuation (book, FMV, assistance assistance appraisal, other) (1) COLLEGE GRANT 34,515 FIN AID Central America and 2 the Carıbbean

(2) COLLEGE GRANT	East Asia and the Pacific	33			395,953	FIN AID	FM∨	
(3) COLLEGE GRANT	Europe (Including Iceland and Greenland)	184			2,361,106		FMV	
(4) COLLEGE GRANT	Mıddle East and North Afrıca	12			135,443		FMV	
(5) COLLEGE GRANT	North America	3			73,162	FIN AID	FMV	
(6) COLLEGE GRANT	South America	15			258,744	FIN AID	FMV	
(7) COLLEGE GRANT	South Asia	1			9,479	FIN AID	FMV	
(8) COLLEGE GRANT	Sub-Saharan Africa	4			78,786	FIN AID	FMV	
(9)								
(10)								
(11)								
( 12)								
( 13)								
( 14)								
( 15)								
( 16)								
( 17)								
( 18)								
	Schedule F (Form 990) 2013							

### Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<u> ~</u>	Yes	Г	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	।ন	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	<u> </u>	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	দ	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	<u> </u>	Yes	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	굣	No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page 5

#### Part V Supplemental Information

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

#### 990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	GRANTS ISSUED BY GETTY SBURG COLLEGE ARE PRIMARILY IN THE FORM OF FINANCIAL AID FOR WORTHY AND PROMISING STUDENTS WHO ARE UNABLE TO FINANCE THEIR EDUCATION FROM PERSONAL AND/OR FAMI LY RESOURCES ACCESS TO SUCH AID IS CONSIDERED A PRIVILEGE, NOT A RIGHT THE QUALIFICATION S FOR ASSISTANCE, IN ADDITION TO NEED, ARE ACADEMIC ABILITY, ACADEMIC ACHIEVEMENT, AND PROMISE OF CONTRIBUTION AS A STUDENT AND CITIZEN FINANCIAL AID GRANTS TO STUDENTS ARE DIRECT LY APPLIED BY THE COLLEGE TO OFFSET BILLED AMOUNTS (I E TUITION) ON THE STUDENT'S ACCOUNT, THEREBY REDUCING THE NET BALANCE DUE TO THE COLLEGE.

## 990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3, COLUMN F	GETTY SBURG COLLEGE USES THE ACCRUAL METHOD OF ACCOUNTING FOR EXPENDITURES INVESTMENTS ARE
	REPORTED AT FAIR VALUE IN ACCORDANCE WITH ACCOUNTING STANDARDS WHENEVER AVAILABLE QUOTA
	TIONS FROM ORGANIZED SECURITY EXCHANGES ARE USED AS THE BASIS OF FAIR VALUE. FOR INVESTMEN
	TS NOT TRADED ON ORGANIZED EXCHANGES, THEIR NET ASSET VALUE (NAV) PER SHARE OR EQUIVALENT
	HAVE BEEN USED AS A PRACTICAL EXPEDIENT FOR DETERMINING FAIR VALUE AND ARE SUBJECT TO ADDI
	TIONAL UNCERTAINTY THEREFORE, VALUES REALIZED UPON DISPOSITION MAY VARY SIGNIFICANTLY FRO
	M CURRENTLY REPORTED VALUES

#### **Additional Data**

Software ID: Software Version:

**EIN:** 23-1352641

Name: GETTYSBURG COLLEGE

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Grantmakıng		34,515
East Asia and the Pacific			Grantmakıng		395,953
Europe (Including Iceland and Greenland)			Grantmakıng		2,361,106

Form 990 Schedule F	<u> Part I - Activit</u>	ties Outside T	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Middle East and North Africa			Grantmakıng		135,443
North America			Grantmakıng		73,162
South America			Grantmaking		258,744

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
South Asia			Grantmakıng		9,479			
Sub-Saharan Africa			Grantmaking		78,786			
Central America and the Caribbean			Program Services	Education	91,787			

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region				
East Asia and the Pacific			Program Services	Education	39,593				
Europe (Including Iceland and Greenland)			Program Services	Education	106,196				
Middle East and North Africa			Program Services	Education	21,652				

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Program Services	Education	23,357
South America			Program Services	Education	7,819
South Asia			Program Services	Education	25,427

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
Sub-Saharan Africa			Program Services	Education	9,945					
East Asia and the Pacific			Program Services	Recruiting	1,594					
Europe (Including Iceland and Greenland)			Program Services	Recruiting	22,720					

Form 990 Schedule F	<u>Part I - Activit</u>	<u>ties Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
North America			Program Services	Recruiting	7,334
Central America and the Caribbean			Program Services	Research	29,853
East Asia and the Pacific			Program Services	Research	26,871

Form 990 Schedule F	<u>Part I - Activit</u>	<u>ies Outside Tl</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Program Services	Research	72,794
North America			Program Services	Research	97,690
South America			Program Services	Research	13,090

Form 990 Schedule F	<u>Part I - Activit</u>	<u>ies Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South Asia			Program Services	Research	13,032
Central America and the Caribbean		1	Program Services	Study Abroad	38,199
East Asia and the Pacific			Program Services	Study Abroad	990,127

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		1	Program Services	Study Abroad	4,509,977
Middle East and North Africa			Program Services	Study Abroad	216,116
North America			Program Services	Study Abroad	35,000

Form 990 Schedule F I	Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region						
South America			Program Services	Study Abroad	327,915						
South Asia			Program Services	Study Abroad	75,440						
Sub-Saharan Africa			Program Services	Study Abroad	139,910						

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
Central America and the Caribbean			Investments		45,352,037					
Europe (Including Iceland and Greenland)			Investments		1,014,190					
Central America and the Caribbean			Fundraising							

Form 990 Schedule F	<u>Part I - Activit</u>	<u>ies Outside Tl</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
East Asia and the Pacific			Fundraising		
Europe (Including Iceland and Greenland)			Fundraising		
North America			Fundraising		

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South America			Fundraising		
South Asia			Fundraising		
Sub-Saharan Africa			Fundraising		_

DLN: 93493081000565

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

**SCHEDULE G** 

**Supplemental Information Regarding Fundraising or Gaming Activities** Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

ame of the organization						Employer iden	tification number
ETTYSBURG COLLEGE						23-1352641	
Part I Fundraising Act Form 990-EZ filers				on answered "Yes" t part.	to Form	990, Part IV	, line 17.
Indicate whether the organ	ızatıon raısed funds	through a	ny of the f	ollowing activities Che	eck all th	nat apply	
Mail solicitations		_		Solicitation of non			
Internet and email soli	citations		f	☐ Solicitation of gov			
Phone solicitations			g	Special fundraisin			
In-person solicitations							
Did the organization have a or key employees listed in	Form 990, Part VII)	or entity	ın connec	tion with professional f	undraisi	ng services?	Г Yes Г N
<ul> <li>If "Yes," list the ten highes to be compensated at least</li> </ul>			fundraisei	rs) pursuant to agreem	ents und	ler which the fui	ndraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai: cust cont	Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(or r fundra	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1		Yes	No				
±							
2							
3							
4							
5							
 6							
7							
3							
9							
0							
tal			.▶				
List all states in which the registration or licensing	organization is regis	tered or lı	censed to	solicit contributions o	r has be	en notified it is	exempt from

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contribut	on answered "Yes" to ions and gross income	Form 990, Part IV, li e on Form 990-EZ, lir	ne 18, or reported nes 1 and 6b. List			
		3 1 3	(a) Event #1  Orange & Blue (event type)	(b) Event #2	(c) O ther events  0 (total number)	(d) Total events (add col (a) through col (c))			
<b></b>	1	Gross receipts	132,833		(cocar namber)	132,838			
Revenue	2	Less Contributions	80,08			80,081			
¥	3	Gross income (line 1 minus line 2)	52,75			52,757			
	4	Cash prizes							
£O.	5	Noncash prizes							
iuse:	6	Rent/facility costs							
Expenses	7	Food and beverages .							
Direct	8	Entertainment							
à	9	Other direct expenses .	52,75	7		52,757			
	10	Direct expense summary Add lir	nes 4 through 9 ın columr	ı(d)		(52,757)			
	11	Net income summary Subtract li	ne 10 from line 3, columi	n (d)					
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	ırt IV, lıne 19, or rep	orted more than			
Revenue			(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))			
<u>~</u>	1	Gross revenue				+			
Ses	2	Cash prizes				+			
Expenses	3	Non-cash prizes							
	4	Rent/facility costs							
Direct	5	Other direct expenses							
	6	Volunteerlabor	┌ Yes % % No	┌ Yes %	☐ Yes %	_			
		Direct expense summary Add line  Net gaming income summary Subi							
9 a b	Ente Is th	er the state(s) in which the organization licensed to operate No," explain	ation operates gaming ac gaming activities in eac	tivities h of these states?					
10a b	, 1 165 1 110								

		1
Does	s the organization operate gaming activit	ties with nonmembers?
12	Is the organization a grantor, beneficia	ry or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming	g?
13	Indicate the percentage of gaming acti	vity operated in
а	The organization's facility	
b	An outside facility	
14	Enter the name and address of the pers	son 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?	
b	If "Yes," enter the amount of gaming re	evenue received by the organization 🟲 \$ and the
	amount of gaming revenue retained by	the third party 🕨 \$
C	If "Yes," enter name and address of the	e third party
	Name <b>▶</b>	
	Address ▶	
16	Gaming manager information	
	Name <b>▶</b>	
	Gaming manager compensation 🟲 \$	
	_	
	Description of services provided	
	Director/officer	Employee Independent contractor
17	Mandatory distributions	Employee I Independent contractor
1/ a	•	e law to make charitable distributions from the gaming proceeds to
u	· ·	· · · · · · · · · · · · · · · · · · ·
Ь	• •	red under state law distributed to other exempt organizations or spent
,	in the organization's own exempt activ	· · · · · · · · · · · · · · · · · · ·
Pai		on. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and
	Part III, lines 9, 9b, 10b, 15	b, 15c, 16, and 17b, as applicable. Also complete this part to provide any
	additional information (see	instructions).
	Return Reference	Explanation

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

DLN: 93493081000565

OMB No 1545-0047

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

Open to Public **Inspection** 

Schedule I (Form 990) 2013

Department of the Treasury ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **GETTYSBURG COLLEGE** 

**Employer identification number** 23-1352641

	<u>_</u>						
Part I General Information	n on Grants and	<u>Assistance</u>					
Does the organization maintain r the selection criteria used to aw Describe in Part IV the organiza	ard the grants or ass	ıstance?			the grants or assist	ance, and	✓ Yes
Part II Grants and Other As Form 990, Part IV, line							es" to
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grar or assistance
		<u> </u>					
Enter total number of section 50			ed in the line 1 table .			· · · <b>-</b>	

Cat No 50055P

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

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book FMV, appraisal, other)	(f)Description of non-cash assistance
(1) GRANTS AND SCHOLARSHIPS PAID	1603		43,750,699	FMV	FINANCIAL AID
(2) OFF CAMPUS GRANTS AND OTHER ASSISTANCE	8		99,479	FMV	FINANCIAL AID
(3) PRIZES AND AWARDS	127	122,105		FMV	
(4) FELLO WSHIPS	85	264,541		FMV	

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Return Reference **Explanation** SCHEDULE I, PART I, LINE 2

GETTYSBURG COLLEGE'S FINANCIAL AID PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS ARE DESCRIBED ON SCHEDULE F, PART IV

Schedule I (Form 990) 2013

DLN: 93493081000565

OMB No 1545-0047

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization GETTYSBURG COLLEGE

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

**Employer identification number** 

23-1352641

Pa	rt I Questions Regarding Compensation		·			
					Yes	No
1a	Check the appropriate box(es) if the organization provid 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	$\Gamma$	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement or provision of all of the expenses described.			1b	Yes	
2	Did the organization require substantiation prior to reim			_		
	directors, trustees, officers, including the CEO/Executi	ve L	riector, regarding the items checked in line 1a.	2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that used by a related organization to establish compensation	appl	y Do not check any boxes for methods			
	▼ Compensation committee	Γ	Written employment contract			
	✓ Independent compensation consultant	~	Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Par or a related organization	t VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	mer	nt?	4a		Νo
b	Participate in, or receive payment from, a supplemental	l non	qualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-base	d co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	de th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must	comi	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, lin compensation contingent on the revenues of					
а	The organization?			5a		No
b	Any related organization?			5b		No
_	If "Yes," to line 5a or 5b, describe in Part III			<del>"</del>		
6	For persons listed in Form 990, Part VII, Section A, lin compensation contingent on the net earnings of	e 1 a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, lin payments not described in lines 5 and 6? If "Yes," described in lines 6 and 6			7		No
8	Were any amounts reported in Form 990, Part VII, paid	lora	occured pursuant to a contract that was			
	subject to the initial contract exception described in Re					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the resection 53 $4958-6(c)$ ?	butt	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	<b>(B)</b> Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	<b>(F)</b> Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2013

#### Part III Supplemental Information

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

Return Reference	Explanation
	THE PRESIDENT IS PROVIDED HOUSING AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF THE COLLEGE THE COST OF HOUSING IS EXCLUDED FROM COMPENSATION UNDER IRC SECTION 119(D) HOUSING IS MADE AVAILABLE TO THE VICE PRESIDENT FOR ENROLLMENT AND EDUCATION SERVICES THE VALUE OF HOUSING IS INCLUDED AS REPORTABLE COMPENSATION FOR SCHEDULE J

Schedule J (Form 990) 2013

Software ID: Software Version:

**EIN:** 23-1352641

Name: GETTYSBURG COLLEGE

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

Form 990, Schedule J, Part	<u>t IJ</u>	<u> Officers, Direc</u> t	<u>:cors, Trustees, Ke</u>	<u>y Employees, and</u>	<u> Highest Compens</u>	<u>sated Employees</u>		
(A) Name		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other compensation	compensation.	benefits		990 or Form 990-EZ
JANET RIGGS PRESIDENT	(ı) (ıı)		0	2,329 0	39,169 0	49,476 0	444,978 0	0
CHRISTOPHER ZAPPE PROVOST	(ı) (ıı)		0	753 0	26,836 0	25,510 0	264,742 0	0 0
DANIEL KONSTALID VP FOR FINANCE & ADMIN/TREAS	(I) (II)	0	o	694 0	30,147 0	25,530 0	289,810 0	0 0
ROBERT KALLIN VP FOR DEVELOPMENT	(ı) (ıı)		0 0	8,787 0	27,197 0	26,821 0	274,091 0	0
FOR ENROLLMENT & EDUC SRVS	(I) (II)		0	10,172 0	27,764 0	19,443 0	285,894 0	0
TECHNOLOGY	(I) (II)	0	o	929 0	33,420 0	16,802 0	265,994 0	0
	(I) (II)		0	1,829 0	26,859 0	19,493 0	231,639 0	0
JANE NORTH EXECUTIVE VICE PRESIDENT	(I) (II)	0	o o	1,017 0	19,738 0	70,484 0	260,695 0	0
SUSAN EISENHOWER CHAIRMAN LDRSHP/PUBLIC POLICY	(ı) (ıı)		0	2,144	26,306 0	1,330 0	243,052 0	0
	(ı) (ıı)		0	1,294 0	15,630	10,070	194,254 0	0 0
	(1) (11)	0	o o	6,558 0	18,074 0	1,153 0	184,175 0	0
PHILIP BOBKO FACULTY	(ı) (ıı)		0	2,774 0	18,092	18,037 0	191,668 0	0
	(I) (II)		0	2,538 0	18,584 0	23,821	193,279 0	0

DLN: 93493081000565

2013

OMB No 1545-0047

Schedule K (Form 990)

# **Supplemental Information on Tax Exempt Bonds**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection** 

Name of the organization

Department of the Treasury

Internal Revenue Service

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

	e or the organization TYSBURG COLLEGE										•		tion nun	iber	
										23-	-13526	41			
Pa	art I Bond Issues						1					(1.)			
	(a) Issuer name	(b) Issuer EIN	<b>(c)</b> CUSIP #	(d) Date issued	(e) Issue	price	(1	<b>(f)</b> Descriptio	n of purpose	<b>(g)</b> De	feased	beha	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	ADAMS COUNTY INDUSTRIAL DEVELOPMENT AUTHORITY	23-2988777	006116BJ5	06-23-2010	71,5	23,663	REF:	FINACING			x		х		х
В	ADAMS COUNTY INDUSTRIAL DEVELOPMENT AUTHORITY	23-2988777	006116BQ9	07-24-2013	18,5	84,772	REF:	FINACING			х		х		х
Pa	rt III Proceeds														
						4		В			С			D	
1	Amount of bonds retired						0		0						
2	A mount of bonds legally defeas  Total proceeds of issue	ea 					0		0						
3	Gross proceeds in reserve fund					71,523,6	663	1	18,584,722						
4	<u> </u>						0		0						
5	Capitalized interest from procee	eas 					0		0						
6	Proceeds in refunding escrows						0		0						
7	Issuance costs from proceeds					722,0	014		266,775						
8	Credit enhancement from proce						0		0						
9	Working capital expenditures from	· ·					0		0						
10	Capital expenditures from proce	eeas 					0		0						
11	Other spent proceeds					70,801,6	649	1	18,295,000						
12	O ther unspent proceeds  Year of substantial completion						0		0						
13	fear of substantial completion				20			20:			1		.,		
	Were the bonds issued as part of	of a current refunder	20.10.2		Yes	No		Yes	No	Yes	N	•	Yes		No
14					Х			Х			_				
15	Were the bonds issued as part of		ding issue?		Х				Х						
16	Has the final allocation of proce	eds been made?			Х			Х							
17	Does the organization maintain allocation of proceeds?		id records to suppo	rt the final	X			х							
Pai	TIII Private Business Us	se			<u> </u>		1	-	, T			ı			
					Yes	A No		Yes	No	Yes	C	<del>.  </del>	Yes	D 	No
				•	1.63	140		163	110	1 63		<u> </u>	162		110

property financed by tax-exempt bonds?

financed property?

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

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

Χ

Χ

Χ

Part III Private Business Use (Continued)

Par	Private Business Use (Continued)								
			A		В		С		
		Yes	No	Yes	No	Yes	No	Yes	No
3 <b>a</b>	Are there any management or service contracts that may result in private business use of bond-financed property?		×		×				
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?								
С	Are there any research agreements that may result in private business use of bond-financed property?		Х		Х				
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 %		0 %				
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 990 %		0 650 %				
6	Total of lines 4 and 5		0 990 %		0 650 %				
7	Does the bond issue meet the private security or payment test?	Х		Х					
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х		х				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		х		Х				
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

	, ii bitt ago	Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?	×		×					
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?								
b	Exception to rebate?								
С	No rebate due?								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X		Х				
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	0		0					
С	Term of hedge								
d	Was the hedge superintegrated?								
е	Was the hedge terminated?								
ľ							Sc	hedule K (Forn	n 990) 2013

and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?

Pai	rt IV Arbitrage (Continued)								
	<u> </u>	А		В	}	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×		X				
b	Name of provider	0		0					
С	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				
7	Has the organization established written procedures to monitor the requirements of section 148?	Х		х					
Pa	rt V Procedures To Undertake Corrective Action								
		А		В	1	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified			V					

Χ

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

Χ

DLN: 93493081000565

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions with Interested Persons**

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the o GETTYSBURG CO							Em	ploy	er identi	ificatioi	n numbei	r	
Part I Exc	ess Benefit	t Transacti	ons (secti	on 501(c)(3	23-1352641 n 501(c)(4) organizations only).								
		janization ans	wered "Yes	on Form 99	0, Part IV, line 2	25a or 25b, or	Form 9	90-E	Z, Part	V, line			
<b>1 (a)</b> Nar	ne of dısqualıfı	ed person (			n disqualified	<b>(c)</b> Descr	iption of	ftran	saction	L	(d) Corre	ected	
			perso	n and organiz	zation						Yes	No	
										-+			
										_			
										$\longrightarrow$			
2 Ft													
2 Enterthe	amount of tax	incurred by oi			disqualified pers	ons during th	e year u	nder	section section				
	amount of tax	. ıf anv. on lıne			y the organizatio	n			 ► s				
									,				
	oans to and						000			2.5	6.1		
					990-EZ, Part V , line 5, 6 , or 22	line 38a, or F	orm 990	), Pa	rt IV, III	1e 26, c	rifthe		
(a) Name of	(b)	(c) Purpos			(e)Original	(f)Balance	<b>(g)</b> In		(h)		(i)Wri	tten	
ınterested	Relationship	ofloan	or from		principal	due	default	?	Approv	/ed	agreem	nent?	
person	with organization	,	organiza	ition?	amount				by board				
									or				
			То	From	$\dashv$		Yes	No	Yes	No ttee?	Yes	No	
1) Stephen K	Board of	GB Great	Х	FIOIII	190,000	172,040		No	Yes	140	Yes	NO	
Cloetingh (2) Robert N	Trustee Board of	Productions GB Great	, X		50,000	47,037	,	No	Yes	+-	Yes		
Duelks	Trustee	Productions				,		NO	1 65		1 65		
(3) Robert	Board of	GB Great	Х		50,000	47,038	3	Νo	Yes		Yes		
Garthwait Jr	Trustee	Productions	5				-		-	┿			
	-				+		<del>                                     </del>		1	+-	_		
										+-	_		
otal	<u> </u>	<u></u> ► \$	<b>I</b>		<b>I</b>	266,115			1		7		
Part IIII Gr	ants or Ass	sistance Be					_		1				
(a) Name of		(b) Relations		_	Form 990, Par nt of assistance			tang	. (2)	Durnes	se of assi	ıstanı	
pers		interested per	•	, , ,	iit oi assistance	(u) Type	01 05515	tanci		Fulpos	e or assi	istalic	
		organız	atıon										
						_							
						_							
						_							
						_							
						_							

Part IV Business Transactions  Complete if the organiza			ne 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh organiz reven	f zatıon's
				Yes	No
(1) PETER NORTH	SPOUSE/OFFICER	183,486	EMPLOYEE COMPENSATION		No
(2) ABIGAIL KALLIN	DAUGHTER/OFFICER	38,950	EMPLOYEE COMPENSATION		Νo
		-			
					1

#### Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
LOANS TO AND/OR FROM	GGP PROMISSORY NOTE GETTYSBURG GREAT PRODUCTIONS (GGP), A DISREGARDED
INTERESTED PERSONS,	ENTITY OF GETTYSBURG COLLEGE, RECEIVED LOAN PROCEEDS FROM CERTAIN INTERESTED
SCHEDULE L, PART II	PARTIES TO PARTIALLY FUND A FEATURE LENGTH FILM THAT FURTHER RAISES THE
	NATIONAL VISIBILITY OF GETTYSBURG COLLEGE LOANS ACCRUE INTEREST AT THE RATE
	OF 6% PER ANNUM PRINCIPAL AND INTEREST ON THESE NOTES ARE PAYABLE FROM
	AVAILABLE REVENUES GENERATED FROM FILM DISTRUBITION AS DEFINED BY THE
	PROMISSORY AND SUBORDINATED PROMISSORY NOTE AGREEMENTS

Schedule L (Form 990 or 990-EZ) 2013

DLN: 93493081000565

OMB No 1545-0047

**SCHEDULE M** (Form 990)

# **Noncash Contributions**

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

**Employer identification number** 

GETTYSBURG	COLLEGE

23-1352641

Pa	rt I Types of Property			-				
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	( ( Method of ( noncash contri		_	nts
1	Art—Works of art	Х	6	35,253	FMV			
	Art—Historical treasures .							
3	Art—Fractional Interests							
4	Books and publications	Х		143	FMV			
5	Clothing and household							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	99	3,728,171	FMV			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22								
23								
	Archeological artifacts							
EVE	Other►( INT EXPENSES)	X	2	6,765				
SUP	Other►( PLIES)	Х	9	8,283	FMV			
27	O ther ►()							
28	`							
29	Number of Forms 8283 received by the				•			1
	for which the organization completed F	01111 0203,	Part IV, Donee Acknowled	ugement			Yes	No
302	During the year, did the organization r	eceive by	contribution any property r	renorted in Part I lines 1	through 28 that		162	NO
504	it must hold for at least three years fr							
	for exempt purposes for the entire hol			, and winch is not required	to be used	20-		NI.
L						30a		No
	If "Yes," describe the arrangement in							
31	S S					31	Yes	
32a	Does the organization hire or use thire	•	related organizations to s	olicit, process, or sell noi	ncash			
	contributions?				• • •	32a		Νo
	If "Yes," describe in Part II							
33	If the organization did not report an aidescribe in Part II	mount in co	olumn (c) for a type of prop	erty for which column (a)	is checked,			

Part II

Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2013)

DLN: 93493081000565

Inspection

OMB No 1545-0047

# **SCHEDULE 0**

(Form 990 or 990-EZ)

Name of the organization GETTYSBURG COLLEGE

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Supplemental Information to Form 990 or 990-EZ

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Employer identification number

23-1352641

990 Schedule O, Supplemental Inf Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 11A	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE COLLEGE MONITORS AND ENFORCES ITS CONFLICT OF INTERST POLICY THROUGH THE
TORRIVISSO, TART VI, OLOHON B, LINE 120	USE OF AN ANN
	UAL SIGNED STATEMENT FROM TRUSTEES, ADMINISTRATIVE OFFICERS, DEPARTMENT DIRECTORS AND CHAI
	RPERSONS BY SIGNING THE CONFLICT OF INTEREST DISCLOSURE STATEMENT, AN INDIVIDUAL CERTIFIE
	S THAT THEY HAVE REVIEWED THE COLLEGES CONFLICT OF INTEREST POLICY,
	ACKNOWLEDGED RESPONSI BILITY TO PLACE THE INTEREST OF THE COLLEGE ABOVE PERSONAL INTEREST IN EXECUTING
	DUTIES, A ND DISCLOSED ANY POSSIBLE PERSONAL, FAMILIAL, AND/OR BUSINESS RELATIONSHIPS THAT REASONABL
	Y COULD GIVE RISE TO A CONFLICT OF INTEREST INVOLVING GETTY SBURG COLLEGE
	COMPLETION OF TH  E FORM IS ALSO ACKNOWLEDGEMENT THAT INDIVIDUALS HAVE A RESPONSIBILITY UNDER
	THE POLICY TO ADVISE THE BOARD OF ANY SIGNIFICANT CHANGES TRUSTEES, ADMINISTRATIVE OFFICERS,
	OR DIRECTO RS WHO HAVE A CONFLICT OF INTEREST IN A PROPOSED TRANSACTION ARE REQUIRED TO
	REFRAIN FROM PARTICIPATING IN CONSIDERATION OF THE TRANSACTION ADDITIONAL RESTRICTIONS ON
	TRANSACTIONS BETWEEN THE COLLEGE AND (I) A TRUSTEE, (II) A FAMILY MEMBER OF A TRUSTEE, (III) MEMBER
	OF THE PRESIDENT'S COUNCIL, (IV) A FAMILY MEMBER OF A MEMBER OF THE PRESIDENT'S
	COUNCIL, OR  (V) ANY ORGANIZATION WITH WHOM ANY OF THE FOREGOING PERSONS HAVE A BUSINESS
	RELATIONSHIP (
	COLLECTIVELY A "DISQUALIFIED PARTY") EXIST AS A GENERAL POLICY, THE COLLEGE SHALL NOT TRA
	NSACT BUSINESS WITH A DISQUALIFIED PARTY, AND NO DISQUALIFIED PARTY SHALL SOLICIT BUSINESS
	FROM THE COLLEGE IF IT WOULD CREATE A POTENTIAL CONFLICT OF INTEREST CERTAIN EXCEPTIONS
	APPLY AS SPECIFIED IN THE POLICY
·	THE EXECUTIVE COMPENSATION SUB-COMMITTEE OF THE BOARD OF TRUSTEES (THE ECSC) IS
AND B	CHARGED WIT  H THE RESPONSIBILITY TO REGULARLY REVIEW THE COMPENSATION OF THE PRESIDENT AND
	TO DECIDE W HETHER ACTION IS REQUIRED TO ADJUST ONE OR MORE COMPONENTS OF THE
	COMPENSATION PACKAGE. TH  E ECSC IS FURTHER CHARGED WITH THE RESPONSIBILITY TO BE FULLY INFORMED ABOUT THE
	COMPENSAT
	I ION STATUS FOR EACH OF THE OTHER OFFICERS TO ASSIST IN THE ASSESSMENT OF REASONABLENESS F
	OR COMPENSATION ADJUSTMENTS FOR THE PRESIDENT AND OTHER OFFICERS, THE ECSC PERIODICALLY RE
	TAINS AN INDEPENDENT COMPENSATION CONSULTANT TO COMPILE A COMPENSATION STUDY
	WHICH RELIES ON MARKET DATA RELEVANT IN SCOPE AND SCALE TO OPERATING RESPONSIBILITIES WITHIN
	THE COLLEG  E. THE COMPENSATION STUDY, PERFORMANCE REVIEWS AND COMPENSATION PLANS ARE
	REVIEWED AND END ORSED DURING AN ECSC MEETING A SUMMARY OF RECOMMENDATIONS FOR THE
	PRESIDENT'S COMPENSATIO
	N AND AGGREGATE COMPENSATION FOR THE OTHER OFFICERS IS SHARED WITH THE FULL BOARD OF TRUST
	EES FOR RATIFICAITON COMPENSATION DECISIONS ARE REFLECTED IN SALARY LETTERS AND AMENDMENT
	S TO THE PRESIDENT'S EMPLOYMENT AGREEMENT AS NECESSARY
FORM 990, PART VI, SECTION C, LINE 19	GETTY SBURG COLLEGE MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCI
	AL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART XI, LINE 9	PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT
	S \$(724,517) POST RETIREMENT RELATED CHANGES (309,105) LOSS ON DEBT REFINACING
	(180, 158) CHANGE IN SURRENDER VALUE OF LIFE INSURANCE 34,952 CHANGE IN NET ASSETS OF
	RELATED ENTIT IES 297,424 DISREGARDED ENTITY (84,955)TOTAL PART XI, LINE 9 \$
	(966,359)

DLN: 93493081000565

OMB No 1545-0047

Open to Public Inspection

23-1352641

# **Related Organizations and Unrelated Partnerships**

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

GETTYSBURG COLLEGE

Name of the organization

(Form 990)

**SCHEDULE R** 

**Employer identification number** 

(a) Name, address, and EIN (If applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity		
(1) GETTYSBURG HOTEL MANAGEMENT LLC 300 NORTH WASHINGTON STREET GETTYSBURG, PA 17325 41-2224678	REAL ESTATE	PA	479,322	2,516,791	GETTYSBURG C		
(2) GETTYSBURG GREAT PRODUCTIONS LLC 300 NORTH WASHINGTON STREET GETTYSBURG, PA 17325 90-0845620	FILM PRDN	PA	375,000	1,093,365	GETTYSBURG C		
Part II Identification of Related Tax-Exempt Org		of the organization a	answered "Yes"	on Form 990, P	art IV, line 34 because i	t had or	ne
or more related tax-exempt organizations duri (a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	n Public charity sta (if section 501(c)		Section (13) co	
(1) EMPLOYER-CONTRIBUTION VEBA TRUST	VEBA TRUST	PA	501(C)9	N/A	GETTYSBURG C	Yes	No
300 NORTH WASHINGTON STREET	VEDA TROST	100	301(0)9	IN/A	GETTI SBOKG C		140
GETTYSBURG, PA 17325 04-3838440							
(2) EMPLOYEE-CONTRIBUTION VEBA TRUST	VEBA TRUST	PA	501(C)9	N/A	GETTYSBURG C		No
300 NORTH WASHINGTON STREET							
GETTYSBURG, PA 17325 04-3838463							$\downarrow$
							<u> </u>
							+

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

	р			,	•							
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	Share of end- Dispr		ions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part		<b>(k)</b> Percentage ownership
							Yes	No		Yes	No	· · · · · · · · · · · · · · · · · · ·
(1) GETTYSBURG HOTEL INVESTORS LP  ONE LINCOLN SQUARE GETTYSBURG, PA 17325 23-2571553	REAL ESTATE	PA	SEE PART VII	EXCL UNDER 512(B)13	479,322	4,916,130		No			No	
Part TV Identification of Polated Organizations Taxable	Co-		T	• Complete	if the orga	nization an		d "Vo	o" on Form	000	Da	-+ T\/

Part IV

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	(g) Share of end-of- year assets	<b>(h)</b> Percentage ownership	(i) Section (b)(i) contro enti	n 512 13) olled ty?
(4) PHILET LAND INC	REAL ESTATE	PA	GETTYSBURG COL	C CODD	202 172	205 607	100 000 %	Yes Yes	No
(1) BULLET LAND INC 300 NORTH WASHINGTON STREET GETTYSBURG, PA 17325 23-2530522	REAL ESTATE	PA	GETTTSBURG COL	CCORP	392,173	285,607	100 000 %	res	
(2) MAJESTIC CONCESSIONS CORP  25 N CARLISLE STREET GETTYSBURG, PA 17325 75-3195760	CONCESSIONS	PA	GETTYSBURG COL	C CORP	40,951	50,191	100 000 %	Yes	
(3) GETTYSBURG HOTEL INC ONE LINCOLN SQUARE GETTYSBURG, PA 17325 23-2678413	HOTEL SERVICE	PA	BULLET LAND INC	C CORP				Yes	
(4) CHARITABLE ANNUITY TRUSTS (3)	ANNUITY	PA	NA	TRUST					
(5) CHARITABLE UNITRUSTS (8)	ANNUITY	PA	NA	TRUST					
(6) POOLED INCOME FUND (2)	ANNUITY	PA	NA	TRUST					

Pa	rt V	Transactions With Related Organizations Complete if the organization	answered "Yes	s" on 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						Yes	No
<b>1</b> D	uring th	ne tax year, did the orgranization engage in any of the following transactions with one or m	nore related orga	ınızatıons lıs	sted in Parts II-IV?				
а	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity								No
<b>b</b> Gift, grant, or capital contribution to related organization(s)									No
c Gift, grant, or capital contribution from related organization(s)									No
d	Loans	or loan guarantees to or for related organization(s)					1d		No
e	Loans	or loan guarantees by related organization(s)					1e		No
f	f Dividends from related organization(s)								No
g	Sale o	of assets to related organization(s)					1g		No
h	Purch	ase of assets from related organization(s)					1h		No
i	Exchai	nge of assets with related organization(s)					<b>1</b> i		No
j	Lease	of facilities, equipment, or other assets to related organization(s)					1j		No
k	k Lease of facilities, equipment, or other assets from related organization(s)								No
, , , , , , , , , , , , , , , , , , , ,							11	Yes	
m	Perform	mance of services or membership or fundraising solicitations by related organization(s)					1m		No
n	Sharing	g of facilities, equipment, mailing lists, or other assets with related organization(s)					1n		No
0	Sharır	ng of paid employees with related organization(s)					10		No
р	Reımb	oursement paid to related organization(s) for expenses					<b>1</b> p		No
q	Reımb	oursement paid by related organization(s) for expenses					1q	Yes	
r	Other	transfer of cash or property to related organization(s)					1r		No
s	Other	transfer of cash or property from related organization(s)					1s	Yes	
_2	Ifthe	answer to any of the above is "Yes," see the instructions for information on who must con							
		(a) Name of related organization	Trans	<b>b)</b> saction (a-s)	(c) Amount involved	<b>(d)</b> Method of determining amo	ount II	nvolved	
<b>(1)</b> E	(1) EMPLOYER-CONTRIBUTION VEBA TRUST  Q 285,287 FMV								

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

revenue) that was not a related organization. See instructions													
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations <sup>7</sup>	_	(i) Code V <sup>2</sup> UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	<b>(k)</b> Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
		·					<u> </u>						

#### Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
SCHEDULE R, PART III, COLUMN A, LINE 1	EIN 23-2571553
	DIRECT CONTROLLING ENTITIES OF GETTYSBURG HOTEL INVESTORS. LP ARE BULLET LAND. INC. GETTYSBURG HOTEL MANAGEMENT LLC

Schedule R (Form 990) 2013