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DLN: 93493131020365

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

		2013 cal applicable	endar year, or tax year beginning C Name of organization PROVIDENCE COLLEGE	g 07-01-2013 , 2013, and ending 06-	30-2014	D Employ	er iden	tification number		
Add	dress o	change				05-025	8932			
∏ Na	me cha	ange	Doing Business As							
Init	ial reti	urn		nail is not delivered to street address) Room/s	uite	E Telephon	e numb	er		
	mınate		ONE CUNNINGHAM SQUARE Suite			(401)8	865-10	000		
_		l return	City or town, state or province, cour PROVIDENCE, RI 02918	ntry, and ZIP or foreign postal code		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
App	olicatio	n pending				<b>G</b> Gross red	ceipts \$	354,212,099		
			F Name and address of prir REV BRIAN J SHANLEY OP ONE CUNNINGHAM SQUA			s this a group r ubordinates?	eturn 1	for ┌ Yes ┌ No		
			PROVIDENCE, RI 02918		J ' ' ''	are all subordin ncluded?		┌ Yes ┌ No		
<b>I</b> Ta	x-exer	mpt status	▼ 501(c)(3)	insert no ) 4947(a)(1) or 527	I	f "No," attach a	alıst (	see instructions)		
J W	ebsit	:e:► WW	VW PROVIDENCE EDU		H(c)	Group exemption	n num	ber ►		
<b>K</b> For	n of o	rganization	Corporation Trust Associatio	n	<b>L</b> Year	of formation 191	7 <b>M</b> 9	State of legal domicile RI		
Pa	rt I	Sum	imary							
Dce.	1	PROVID	escribe the organization's mission  DENCE COLLEGE IS A CATHOL  INITY COMMITTED TO ACADE	IC, DOMINICAN, LIBERAL ARTS IN	STITUTIC	)N OF HIGHER	EDUC	CATION AND A		
Kelma	,	Chackth	his how W if the organization di	scontinued its operations or disposed	of more th	an 25% of its	ot acc	ents		
Activities & Governance			,				,			
ŝ			_	ing body (Part VI, line 1a) of the governing body (Part VI, line 1t			3	33		
Ē				calendar year 2013 (Part V, line 2a)			5	2,315		
Act			·	ecessary)			6	37		
	7a	Total un	related business revenue from P	art VIII, column (C), line 12		[	7a	110,751		
	b	Net unre	lated business taxable income f	rom Form 990-T, line 34	<u> </u>		7b	-144,044		
					<u> </u>	Prior Year	_	Current Year		
a)	8		ibutions and grants (Part VIII, li		19,660,3	_	18,865,670			
Ravenue	9			ne 2g)		207,376,6		223,684,804 7,805,656		
ž	10 11			(A), lines 3, 4, and 7d) lines 5, 6d, 8c, 9c, 10c, and 11e)	•		6,878,179 7,805, 3,648,200 3,701,			
	12			(must equal Part VIII, column (A), li	ne 🗀		3,648,200 3,70			
				<u> </u>		237,563,3	-	254,057,233		
	13		s and similar amounts paid (Part		58,490,7	-	66,442,758			
	14		its paid to or for members (Part I			0	0			
\$	15	5-10)		ee benefits (Part IX, column (A), lines		87,149,9	92,503,235			
Expenses	16a	Profes	ssional fundraising fees (Part IX,		422,4	435,825				
ੜੇ	Ь	Total fu	ındraısıng expenses (Part IX, column (D	), line 25) 🕨 5,523,792						
	17	Other	expenses (Part IX, column (A),	lınes 11a–11d, 11f–24e)		69,072,6	8 9	77,357,176		
	18		·	st equal Part IX, column (A), line 25)		215,135,7		236,738,994		
, on	19	Reven	ue less expenses Subtract line	18 from line 12	_	22,427,5		17,318,239		
8 6 20 6					Begii	nning of Current Year	١	End of Year		
Net Assets or Fund Balances	20	Total	assets (Part X, line 16)			622,188,6	57	601,856,573		
A PE	21					191,046,0	8 0	130,629,269		
žZ	22			line 21 from line 20		431,142,6	59	471,227,304		
Pai	rt II	Sign	nature Block							
my k	nowle	edge and		amined this return, including accompa nplete Declaration of preparer (other						
		****	**			2015-05-08				
Sigr	1	I <b>B</b>	ature of officer			Date				
Her			N SWEENEY SR VP FINANCE/CFO							
			e or print name and title	Dronorodo signativas	Data		DTTN			
D~:-	7		Print/Type preparer's name FARA D'AGOSTINO	Preparer's signature	Date	I CHECK I II I	PTIN P012454	182		
Paid Dro			Firm's name 🕨 KPMG LLP			Firm's EIN 🕨				
	pare On		Firm's address 🟲 60 South Street			Phone no (401)	865-22	81		
USE		ווע   ביו				I				

Boston, MA 02111

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

✓ Yes ☐ No

	11 9 9 0 (2	.013)				Page Z
Par	rt III	Statement of Program S Check if Schedule O contains a				্য
1	Briefl	y describe the organization's mis	ssion			
CON		CE COLLEGE IS A CATHOLIC, D TO ACADEMIC EXCELLENC				
2	Dıd th	e organization undertake any sig	inificant program services (		ere not listed on	
_		ior Form 990 or 990-EZ?		· · · · · · ·		┌ Yes ┌ No
	If "Ye	s," describe these new services	on Schedule O			
3	servic	e organization cease conducting		es in how it conducts, a	ny program · · · · · ·	┌ Yes ┌ No
	If "Ye	s," describe these changes on S	chedule O			
4	expen	tibe the organization's program s ses Section 501(c)(3) and 501 tal expenses, and revenue, if any	(c)(4) organizations are red	quired to report the amo		
4a	(Code	e ) (Expenses \$	196,124,042 includin	g grants of \$ 66,4	42,758 ) (Revenue \$	225,843,510 )
	COLLE OF MC PROVI	IDENCE COLLEGE OFFERS UNDERGRADI GE'S CORE CURRICULUM ADDRESSES I DRAL AND ETHICAL REASONING, AESTHI IDENCE COLLEGE HONORS ACADEMIC F TIONS APPROXIMATELY 4,734 STUDENT	KEY QUESTIONS OF HUMAN EXIS ETIC APPRECIATION, AND UNDER REEDOM, PROMOTES CRITICAL T	FENCE, INCLUDING LIFE'S ME STANDING THE NATURAL WO HINKING AND ENGAGED LEAF	EANING AND PURPOSE, AND S ORLD, OTHER CULTURES, AND RNING, AND ENCOURAGES A	STRESSES THE IMPORTANCE DIVERSE TRADITIONS
41.		\ /Evnanças d	including	grants of \$	) (Dougnus d	`
4b	(Code	e ) (Expenses \$	incida in <u>c</u>	, grants or \$	) (Revenue \$	)
4c	(Code	e ) (Expenses \$	ıncludıng	grants of \$	) (Revenue \$	)
4d		r program services (Describe in				
		enses \$	including grants of \$	) (Rev	renue \$	)
4e	Tota	l program service expenses 🗠	196,124,042			

# 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 $I^{\bullet}$	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	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	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.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
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	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
L2a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
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		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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? If "Yes," complete Schedule F, Parts III and IV	16		No
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	Yes	
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	Yes	
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? If "Yes," complete Schedule L, Part III	27	Yes	
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		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$ $Mathematical Mathematical Mathemati$	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

-	Check of School of Contracts a vacantage of note to any line in the Bart V			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	.) No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   484		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
1	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			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	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	
ı	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		N
)	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		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	2. 105, to fine 50 of 55, and the organization meriorin 0000-1.	5c		
1	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		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	H		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	79 7h		
	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?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	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			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	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		
)	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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		- ' '

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

Se	ection 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	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
C-	estion B. Deligies (This Costion B. requests information about policies not required by the Internal B		· · · Cod	۵ ۱
56	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie cou	c.)
36	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a		
10a				No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a 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?	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?  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 12a 12b	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 13 14 15	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 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	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	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
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?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No No

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JOHN SWEENEY SR VP FINANCE ONE CUNNINGHAM SQUARE PROVIDENCE, RI 02918 (401)865-2281

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

	<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	more t perso	tion ( han d n is l	ne b both	oox, an d	heck unless officer stee)	į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	compensation V- from the			
		organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganizati relate organiza	ed	
											$\perp$			
											_			
											+			
											+			
											+			
1b	Sub-Total				. ,	<u> </u>		<b> </b>						
c	Total from continuation sheet	s to Part VII, S	ection A	٠.			-	Þ						
d	Total (add lines 1b and 1c) .				•	•	•	<b>F</b>	4,506,722		0		635,008	
2	Total number of individuals (in \$100,000 of reportable compe	_					d abov	e) w	ho received more th	aan				
												Yes	No	
3	Did the organization list any <b>fc</b> on line 1a? <i>If "Yes," complete S</i>					key •		yee,	, or highest compen	sated employee	3	Yes		
4	For any individual listed on line organization and related organ individual										4	Yes		
5	Did any person listed on line 1 services rendered to the organ									or individual for	5		No	
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization											ax year		

(A) Name and business address	<b>(B)</b> Description of services	<b>(C)</b> Compensation
RUFFALOCODY, 65 KIRKWOOD NORTH ROAD SW CEDAR RAPIDS IA 52404	FUNDRAISING SERVICES	426,192
KPMG LLP, 60 SOUTH STREET BOSTON MA 02111	AUDITING & TAX SVCS	203,400
CAMBRIDGE ASSOCIATES, 100 SUMMER ST 13 BOSTON MA 02110	INVESTMENT SERVICES	182,578
MFS, 500 BOYLSTON STREET BOSTON MA 02116	INVESTMENT SERVICES	135,489
RONEY LABINGER LLP, 344 WICKENDEN STREET PROVIDENCE RI 02903	LEGAL SERVICES	103,377

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 ▶61

Part V	/##	Statement of		an ar note to any lin	a in this Dowt VIII			
		Check ii Sched	ule O contains a respon	se of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated cam	paigns 1a					312-314
ats nts								
<u>is</u> a	b	Membership du						
S, G Am	C	Fundraising ev	ents <b>1c</b>	631,993				
iji P	d	Related organiz	zations 1d					
E.S.	е	Government grant	rs (contributions) <b>1e</b>	2,377,153				
ë is	f	All other contribution	ons, gifts, grants, and <b>1f</b>	15,856,524				
ř.		sımılar amounts no	ot included above					
真さ	g	Noncash contributi 1a-1f \$	ons included in lines	1,690,510				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add line:	s 1 a - 1 f	👢	18,865,670			
	Business Code							
HE 6	2a	TUITION & FEES		611600	173,325,888	173,325,888		
Program Serwoe Revenue	ь	ROOM REVENUE		721000	25,725,051	25,725,051		
or Œ	c	BOARD REVENUE		721000	14,434,397	14,434,397		
ž Ž	d	ATHLETICS REVEN		900099	10,048,732	10,048,732		
33	e	AUXILIARY REVENU			<u> </u>	· · ·		
Ē	f		am service revenue	721000	150,736	150,736		
Ş	'	All other progra	alli service reveilue					
<u>~</u>	g	Total. Add line	s 2a-2f		223,684,804			
	3		come (including dividence ar amounts)		1,273,666		-93,974	1,367,640
	4		stment of tax-exempt bond p	<b>├</b>	0			
	5	Royalties .			349,743			349,743
		,	(ı) Real	(II) Personal				
	6a	Gross rents	0	0				
	ь	Less rental expenses						
	c	Rental income	0	0				
	d	or (loss)	me or (loss)		0			
	"	Wee remedi meo	(i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	106,437,107	0				
	ь	than inventory Less cost or other basis and	99,905,117					
	c	sales expenses Gaın or (loss)	6,531,990	0				
	d	Net gain or (los	ss)		6,531,990			6,531,990
Other Revenue	8a	events (not inc \$631	. <u>,993</u> s reported on line 1c)					
느		,	a	70,575				
‡	ь		penses b	249,749				
Ò	С	Net income or	(loss) from fundraising e	events 🛌	-179,174			-179,174
	9a		from gaming activities ne 19 a	0				
	ь	Less direct ex	penses b	Ť				
	c		loss) from gaming activ	/ities	o			
	10a	Gross sales of returns and allo						
	ь	Less costofa	oods sold <b>b</b>					
			(loss) from sales of inve	entory	o			
		Mıscellaneou		Business Code				
	11a	COMMISSION	ıs	900099	604,237			604,237
	ь	PACT PROGRA	4 M	900099	476,976	476,976		
	С	SCHNEIDER A	RENA	713990	204,725		204,725	
	d	All other reven			2,244,596	1,681,730		562,866
	e	Total. Add lines	s 11a-11d	🕨	2 520 524			
	12	Total revenue	See Instructions		3,530,534			
	1				254,057,233	225,843,510	110,751	9,237,302

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 21 354,968 354,968 Grants and other assistance to individuals in the United States See Part IV, line 22 66,087,790 66,087,790 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 0 Benefits paid to or for members 0 Compensation of current officers, directors, trustees, and 1,490,469 584,061 662,395 244,013 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) . . . Other salaries and wages 70,343,869 52,217,519 15,588,010 2,538,340 Pension plan accruals and contributions (include section 401(k) 4,876,235 3,587,251 1,070,869 and 403(b) employer contributions) . . . . 218.115 11,064,141 8,147,909 2,432,319 Other employee benefits . . . . 483,913 10 4,728,521 3,476,825 1,037,904 213,792 11 Fees for services (non-employees) O Management . . . . 171,552 171,552 Legal . . . . . . . . Accounting . . . . . . . . . . . . 207,100 207,100 18,000 13,862 4,138 Professional fundraising services See Part IV, line 17 435,825 435,825 Investment management fees . . . . . 1,123,944 1,123,944 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . . . . . 0 Advertising and promotion . . 748,878 576,716 12 172,162 13 Office expenses . . . 3,236,318 2,236,446 667,626 332,246 2,102,062 1,618,813 483,249 14 Information technology . . 15 0 Royalties . 5,511,289 1,267,006 16 Occupancy . . . . . . 4,244,283 **17** 1,703,382 1,188,101 354,673 160,608 Travel . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 0 19 Conferences, conventions, and meetings . 0 20 Interest . . . . . . . . . . . . 3,265,381 2,514,693 750,688 Payments to affiliates . . . . 21 O 15,525,041 22 Depreciation, depletion, and amortization . 11,887,885 3,548,779 88,377 23 841,243 191,474 641,409 8,360 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 FOOD SERVICE 9,854,100 9,606,152 247,948 **BUILDING & GROUND MAINT** 9,064,495 6,980,632 2,083,863 ATHLETICS GAMES & SUPPLIES 4,923,923 4,923,923 d TUITION PAID TO OTHER SCHOOLS 4,269,371 4,269,371 14,791,097 10,965,433 e All other expenses 3,273,409 552,255 Total functional expenses. Add lines 1 through 24e 25 236,738,994 196,124,042 35,091,160 5,523,792 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► [ if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Pal	rt X	Check if Schedule O contains a response or note to any line ii	n this	Part X			
					(A) Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing			22,574,833	1	11,568,761
	2	Savings and temporary cash investments			0	2	0
	3	Pledges and grants receivable, net			10,683,356	3	10,857,933
	4	Accounts receivable, net			8,906,095	4	8,613,080
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete I Schedule L	art II	of	366,667	5	266,667
ŧ	6	Loans and other receivables from other disqualified persons ( $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedule	ributing employers	· · · · · · · · · · · · · · · · · · ·		200,007	
Assets	<b>,</b>	Notes and loans receivable, net			0		0
Ą	7 8	Inventories for sale or use			0		0
	_				915,657	_	824,143
	9 10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D					024,143
	ь	Less accumulated depreciation	10a	<u> </u>		100	333,399,598
	11	Investments—publicly traded securities	109,101,854		119,689,396		
	12	Investments—publicly traded securities			162,946,398		114,924,254
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			2,268,747		1,712,741
	16	Total assets. Add lines 1 through 15 (must equal line 34).			622,188,667	16	601,856,573
	17	Accounts payable and accrued expenses			15,589,064	17	11,888,443
	18	Grants payable			13,383,004	18	11,000,443
	19				12,498,445		8,904,730
	20	Deferred revenue			153,363,914		100,734,818
		·			155,565,914		100,734,818
es S	21	Escrow or custodial account liability Complete Part IV of Sc				21	
Liabiliti	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua	lıfıed	,			
<u> </u>		persons Complete Part II of Schedule L			0 500 700	22	0 500 700
_	23	Secured mortgages and notes payable to unrelated third part			2,526,762	23	2,526,762
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to reland other liabilities not included on lines 17-24) Complete PD	art X		7,067,823	25	6,574,516
	26	Total liabilities. Add lines 17 through 25			191,046,008	26	130,629,269
es-		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.			,,		,
Ĭ	27	Unrestricted net assets	_		288,012,503	27	310,569,962
<u>명</u>	28	Temporarily restricted net assets			68,660,852	28	82,241,992
<u> </u>	29	Permanently restricted net assets		• •	74,469,304	29	78,415,350
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check			,,		
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	
2	32	Retained earnings, endowment, accumulated income, or other				32	
7 X	33	Total net assets or fund balances		•	431,142,659	33	471,227,304
Net	34	Total liabilities and net assets/fund balances			622,188,667	34	601,856,573
	<sup>34</sup>	i otal navnities and net assets/fully valdfices	• •	• •	022,188,007	54	501,806,573

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 full viii, estamil (A), mie 12)	1		254,0	57,233
2	Total expenses (must equal Part IX, column (A), line 25)	2		236,7	38,994
3	Revenue less expenses Subtract line 2 from line 1	3		17.3	318,239
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			.42,659
5	Net unrealized gains (losses) on investments	5			352,916
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		- 5	86,510
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		471,2	227,304
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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved on	ı		
	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 separabasis, consolidated basis, or both	ate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	!	3a	Yes	
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:** 05-0258932

Name: PROVIDENCE COLLEGE

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

Form 990, Part VII - Compensation Compensated Employees, and Inde						, .	,	p.o, cco,g.		
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion ( nan o n is b	ne b oth ctor/	ox, ι an o ⁄trus	inless fficer tee)		( <b>D)</b> 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	Ke) emplojee	Highest compensated employee	Former	2/1099-14130)	2/1099-14130)	related organizations
KARL W ANDERSON	2 0									
TRUSTEE	0 0	X						0	0	0
DAVID J ALDRICH TRUSTEE	2 0	×						0	0	О
J PETER BENZIE	0 0									
TRUSTEE	0 0	×						0	0	0
CATHERINE LITTLE BERT TRUSTEE	2 0	×						0	0	О
DUANE M BOULIGNY	0 0									
TRUSTEE	0 0	X						0	0	0
THOMAS C BOYAN JR TRUSTEE	2 0	×						0	0	О
M JOSEPH CANAVAN	0 0								0	0
TRUSTEE	0 0	X						0	0	0
SR KATHLEEN CANNON OP TRUSTEE	2 0	×						0	0	О
SANDRA L COLETTA	0 0									
TRUSTEE	0 0	X						0	0	0
MAUREEN DAVENPORT CORCORAN BOARD SECRETARY & AUDIT CHAIR	3 0	×						0	0	О
THOMAS P CORCORAN	0 0									
TRUSTEE	0 0	×						0	0	0
SHARON T DRISCOLL TRUSTEE	2 0	×						0	0	o
SUSAN M ESPER	2 0	×						0	0	0
TRUSTEE	0 0							Ů	0	•
MARK A FLAHERTY TRUSTEE	2 0	×						0	0	0
PAUL R GALIETTO	2 0	×						0	0	0
TRUSTEE JOHN J GLIER	0 0							Ů	0	·
TRUSTEE	2 0	х						0	0	0
REV EDWARD M GORMAN OP	2 0	×						0	0	0
TRUSTEE ROBERT T GORMAN	0 0							Ů	-	
TRUSTEE	2 0	x						0	0	0
FR ANDREW HOFER OP	2 0	×						0	0	0
TRUSTEE THOMAS JOSEPH KEEGAN JR	0.0							Ů		
TRUSTEE	2 0	×						0	0	0
HEIDI M KENNY	2 0	x						0	0	0
TRUSTEE	0.0							Ů	0	
JOHN F KILLIAN BOARD CHAIR	4 0	x						0	0	0
REV JOHN A LANGLOIS OP	2 0	×						0	0	0
TRUSTEE HONORABLE WILLIAM C LEARY	0.0	<u> </u>						ı .	0	
TRUSTEE	2 0	x						0	0	0
VERY REV BRIAN M MULCAHY OP	2 0	x						0	0	0
TRUSTEE	0 0							<u> </u>		<u> </u>

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

Compensated Employees, and Inde	pendent Co	ntracto	rs			•	-			
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more ti perso and a	ion ( han o n is b	ne b oth ctor,	ox, ι an o /trus	inless fficer tee)		(D)  Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
JOHN G O'HURLEY	2 0	X						0	0	0
TRUSTEE ROBERT J PALMISANO	0 0					-				
TRUSTEE	2 0	×						0	0	0
CHRISTOPHER K REILLY	3 0									
BOARD VICE CHAIR	0 0	X						0	0	0
MARY-ELLEN SPOSATO ROGERS	2 0									
TRUSTEE	0 0	Х						0	0	0
PETER Q THOMPSON	2 0	х						0	0	0
TRUSTEE	0 0									
MOST REV THOMAS J TOBIN DD	2 0	×						0	0	0
TRUSTEE REVEREND BRIAN J SHANLEY OP	0 0 40 0	.,		.,						
PRESIDENT & TRUSTEE	0 0	Х		Х				0	0	57,343
REVEREND KENNETH R SICARD OP	40 0	x		x				0	0	47,910
TREASURER & TRUSTEE	0.0			Ĺ						17,513
HUGH LENA SR VP ACADEMIC AFFAIRS/PROVOST	40 0			х				297,507	0	45,208
JOHN SWEENEY	40 0			x				296,304	0	47,270
SR VP FINANCE & BUSINESS/CFO MARIFRANCES MCGINN	0 0 40 0									,
VP & GENERAL COUNSEL				х				242,815	0	47,147
KRISTINE GOODWIN	40 0	<del> </del>								
VP STUDENT AFFAIRS	0 0			X				231,761	0	38,069
GREGORY WALDRON	40 0			<u>,</u>						5.540
SR VP INSTIT ADVANCEMENT	0.0			×				84,331	0	5,548
REV R GABRIEL PIVARNIK OP	40 0			×				0	0	19,323
VP MISSION & MINISTRY	0 0			_^				Ů	Ŭ	17,525
EDWARD COOLEY	40 0					×		1,560,749	0	95,350
MEN'S BASKETBALL COACH SUSAN ROBINSON FRUCHTL	0 0 40 0	-				<u> </u>			_	
WOMEN'S BASKETBALL COACH	0 0					×		356,400	0	37,635
NATHAN LEAMAN	40 0					x		321,307	0	66,754
ROBERT DRISCOLL	0 0 40 0									
ATHLETICS DIRECTOR	0 0					×		287,698	0	65,289
SYLVIA MAXFIELD	40 0					х		232,368	0	21,418
SCHOOL OF BUSINESS DEAN  DAVID WEGRZYN	40 0	-		$\vdash$	$\vdash$	1				
FORMER SR VP INSTIT ADVANCE	0 0						х	289,232	0	40,744
KENO DAVIS	40 0						х	306,250	0	0
FORMER BASKETBALL COACH	0 0					1		<u> </u>		

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DLN: 93493131020365

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	orga	niza	tio
PROVID	FN	CF C	OLLEG	F	

**Employer identification number** 

									05-02589			
	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	$\sqcap$	A churc	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	ol described	in <b>section 170(b)(1</b>	. <b>)(A)(ii).</b> (At	tach Schedı	ule E)					
3	$\vdash$	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)(	<b>1)(A)(iii).</b> E	nter the	
_	_	hospita	ıl's name, cı	ty, and state							<del></del>	
5	ļ			erated for the benefi		or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in	
	_			A)(iv). (Complete P	•							
6	<u> </u>	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b> An organization that normally receives a substantial part of its support from a governmental unit or from the general public										
7	Г			,			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	Γ	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	Γ	Anorga	anızatıon org	ganized and operated	d exclusively	to test for p	oublic safety	See <b>sect io</b>	n 509(a)(4).			
11	$\vdash$	An orga	anızatıon org	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fun	ictions of, or t	o carry out	the purposes of	
				ly supported organiz						ee <b>section 5</b>	<b>609(a)(3).</b> Check	
				bes the type of supp <b>b</b> Type II <b>c</b>							.ll., into avato d	
_	Г			ox, I certify that the								
е	,	•		ox, I certify that the on managers and otl	_		,		, ,	•	•	
			509(a)(2)				,					
f				received a written de	etermination	from the IR	S that it is a	Type I, Typ	oe II, or Type	III support	ing organizatio <u>n,</u>	
_			this box	2006, has the organi		tad any aift	or contributi	on from on	, of the		J.	
g			ng persons?		ization accep	ited any gnt	or contributi	on nom any	or the			
			<b>.</b>	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons de	scribed in (ii)	)	Yes No	
		and (III	) below, the	governing body of th	e supported	organizatioi	٦?			11g	(i)	
		(ii) A fa	amıly memb	er of a person descr	bed in (i) abo	ove?				11g	(ii)	
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g	(iii)	
h		Provide	the follown	ng information about	the supporte	ed organızat	ıon(s)				_	
		_					T		1		T	
	(i) Nam suppor		(ii) EIN	(iii) Type of organization	( <b>iv)</b> Is t organızatı		(v) Did you the organiz	•	(vi) Is organizat		(vii) A mount of monetary	
	rganiza			(described on	col (i) list		in col (i) o		col (i) org		support	
_	organization			lines 1- 9 above	your gove		suppor		in the U			
				or IRC section	docume	nt?						
				(see								
				instructions))	Yes	No	Yes	No	Yes	No		
T-4-												

supported organization

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do 12,513,371 16,961,818 23,749,581 19,660,347 18,865,670 91,750,787 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit 0 to the organization without charge 12,513,371 16,961,818 23,749,581 19,660,347 18,865,670 91,750,787 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 5,824,412 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 85,926,375 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total (a) 2009 beginning in) 🟲 12,513,371 19,660,347 91,750,787 Amounts from line 4 16,961,818 23,749,581 18,865,670 Gross income from interest, dividends, payments received on securities loans, rents, royalties 2,079,938 1,506,712 1,638,749 1,818,037 1,717,383 8,760,819 and income from similar sources 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 2,622,488 2,601,097 2,978,299 3,366,778 3,396,384 14,965,046 capital assets (Explain in Part IV) 11 Total support (Add lines 7 115,476,652 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 984,488,944 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 74 410 % Public support percentage for 2012 Schedule A, Part II, line 14 15 73 440 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▼ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this ►□ box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

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						<u> </u>
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) 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 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	(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	(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))  ge 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 state of the sta	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

<b>Part IV Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions									
	Facts And Circumstances Test								
Retu	ırn Reference	Explanation							
		Schodulo A / Form 000 o	000 E7) 201						

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493131020365

## OMB No 1545-0047

# **Political Campaign and Lobbying Activities**

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

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

Open to Public Inspection

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

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

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

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

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

• 5	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III				
	me of the organization  OVIDENCE COLLEGE			Em	ployer ide	ntification number
rkc	OVIDENCE COLLEGE			05	-0258932	!
Par	t I-A Complete if the or	ganization is exempt under	section 501(d			
1	Provide a description of the ord	ganızatıon's dırect and ındırect politic	cal campaign acti	vities in Part I\	/	
2	Political expenditures	_	. 5		<b>.</b>	\$
3	Volunteer hours					т
Par	<u> </u>	ganization is exempt under				
1	Enter the amount of any excise	e tax incurred by the organization und	der section 4955		<b>-</b>	\$
2	Enter the amount of any excise	e tax incurred by organization manag	ers under sectior	4955	<b>•</b>	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	O for this year?			☐ Yes ☐ No
4a	Was a correction made?					☐ Yes ☐ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt under	section 501(c	c), except se	ection 50	01(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	t function activ	ities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to ot	her organızatıons	for section 52	7 <b>►</b>	\$
3	Total exempt function expendi	b <b>►</b>	\$			
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?				┌ Yes ┌ No
5	organization made payments f amount of political contribution	nd employer identification number (E) For each organization listed, enter the ns received that were promptly and d political action committee (PAC) If	e amount paid fro irectly delivered	m the filing org to a separate p	anızatıon's olıtıcal org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	( <b>d)</b> A mount filing organ funds If none	ızatıon's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Sch	nedule C (Form 990 or 990-EZ) 2013					Page <b>2</b>
Pä	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l <b>.</b> )		(a) Filing organization's totals	( <b>b)</b> Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
C	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

	•	on under section 501(h)).	(	a)		(b)	
ror ead activit	<del>-</del>	ow, provide in Part IV a detailed description of the lobbying	Yes	No	'	Amour	nt
_		n attempt to influence foreign, national, state or local ence public opinion on a legislative matter or referendum,		1			
	Volunteers?			No			
b	Paid staff or management (include compe	ensation in expenses reported on lines 1c through 1i)?		No			
С	Media advertisements?			No			
d	Mailings to members, legislators, or the p	oublic?		No			
e	Publications, or published or broadcast s	tatements?		No			
f	Grants to other organizations for lobbying	g purposes?		No			
_		fs, government officials, or a legislative body?		No			
		entions, speeches, lectures, or any similar means?		No			
	Other activities?		Yes			1	18,000
-	Total Add lines 1c through 1i						18,000
	<del>-</del>	anization to be not described in section 501(c)(3)?		No			
	If "Yes," enter the amount of any tax inc						
		urred by organization managers under section 4912		1			
		on 4912 tax, did it file Form 4720 for this year?	-01/-	\ <u> </u>		4:-	
Part	501(c)(6).	ation is exempt under section 501(c)(4), section 5	)110c	)(5),	or s	ectio	n
	301(0)(0).					Yes	No
1	Were substantially all (90% or more) due	es received nondeductible by members?			1		
		lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over l	obbying and political expenditures from the prior year?			3		
Part		ation is exempt under section 501(c)(4), section 5					
		(a) BOTH Part III-A, lines 1 and 2, are answered "	No" (	R (b	) Par	t III	-А,
	line 3, is answered "Yes						
	Dues, assessments and similar amounts	nd political expenditures (do not include amounts of political	1				
	expenses for which the section 527(f) ta	· · · · · · · · · · · · · · · · · · ·					
	Current year	• •	2a				
	Carryover from last year		2b				
c	Total		2c				
3	Aggregate amount reported in section 60	33(e)(1)(A) notices of nondeductible section 162(e) dues	3				
		ne 2c exceeds the amount on line 3, what portion of the excess					
	does the organization agree to carryover political expenditure next year?	to the reasonable estimate of nondeductible lobbying and	4				
	Taxable amount of lobbying and political	expenditures (see instructions)	5				
	rt IV Supplemental Informati						
		, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated grou	ın lıst)	Part 1	Τ-Δ Ι	ine 2	and
	II-B, line 1 Also, complete this part for a		ip 115c),	. r arc ı		c 2,	unu
	Return Reference	Explanation					
PART	,	DENCE COLLEGE PAYS ADVOCACY SOLUTIONS TO SUPPOR GE WHICH INCLUDE LOBBYING ACTIVITIES	RT INI	TIATI	VES	FTH	E
		SE MILST INCLUDE EGDDITHO ACTIVITIES					

201104410 3 (1 01111 3 3 0 01 3 3 0 12 ) 2 0 1 3		r age <del>-r</del>				
Part IV Supplemental Information	on <i>(continued)</i>					
Return Reference	Explanation					

Schedule D (Form 990) 2013

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DLN: 93493131020365

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)

Open to Public

emal	Revenue Service and its instruct	tions is at <u>www.irs.gov/10mi1990</u> .		Inspection
	ne of the organization VIDENCE COLLEGE		Emp	loyer identification number
			05-0	0258932
Pa	t I Organizations Maintaining Donor Ad		unds	or Accounts. Complete if the
	organization answered "Yes" to Form 990		ı	(1) 5
	Tabel wombon at and afternoon	(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 advis funds are the organization's property, subject to the or	rganization's exclusive legal control?		☐ Yes ☐ No
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene conferring impermissible private benefit?			
T	TII Conservation Easements. Complete if	the organization answered "Yes"	to Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)	certifie	d historic structure
	easement on the last day of the tax year			
	Total number of concervation eacoments			Held at the End of the Year
	Total number of conservation easements		2a	
	Total acreage restricted by conservation easements  Number of conservation easements on a certified history	oric structure included in (a)	2b	
	Number of conservation easements on a certified instrument of conservation easements included in (c) acc	, ,	2c	
	historic structure listed in the National Register	quired after 6/17/00, and not on a	2d	
	Number of conservation easements modified, transfer the tax year ▶	red, released, extinguished, or terminat	ed by th	ne organization during
	Number of states where property subject to conservat	ion easement is located 🛌		
	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	ıdlıng of	violations, and <b>Yes No</b>
	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation ease	ments c	luring the year
	A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s during	g the year
	Does each conservation easement reported on line 2( and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organization's financia		
7	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Otl	her Similar Assets.
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education,	orrese	arch in furtherance of public
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to these	l 16 (ASC 958), to report in its revenue ets held for public exhibition, education,	statem	ent and balance sheet
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>►</b> \$
	If the organization received or held works of art, histor following amounts required to be reported under SFAS			
	Revenues included in Form 990, Part VIII, line 1	, , , , , , , , , , , , , , , , , , , ,		<b>b- ⊄</b>
				r Ψ
	Assets included in Form 990, Part X			<b>▶</b> \$

3 Using the organization's acquisition	accession and other recor							
collection items (check all that app		rds, ch	heck any	of the fo	ollowing that ai	re a significant	use of its	
a Public exhibition		d		oan or ex	change progra	ims		
<b>b</b> Scholarly research		e	Г о	ther				
c  Preservation for future generat	ions							
4 Provide a description of the organiz	ration's collections and expla	ain hov	w they fu	irther the	e organization'	s exempt purpo	se in	
5 During the year, did the organizatio	n solicit or receive donations	s of ar	rt, hıstor	ıcal trea	sures or other	sımılar	_	_
assets to be sold to raise funds rat							☐ Yes	□ No
Part IV Escrow and Custodial Part IV, line 9, or reporte					on answered	"Yes" to Fori	n 990,	
Is the organization an agent, truste included on Form 990, Part X?	e, custodian or other interme	edıary	for con	ributions	s or other asse	ets not	┌ Yes	;
<b>b</b> If "Yes," explain the arrangement ii	n Part XIII and complete the	follov	wing tab	е	_			
							Amount	
<b>c</b> Beginning balance					<u>  :</u>	lc		
<b>d</b> Additions during the year					<u>  :</u>	Ld		
<b>e</b> Distributions during the year					<u>  :</u>	le		
<b>f</b> Ending balance					_ :	1f		
<b>2a</b> Did the organization include an amo	ount on Form 990, Part X, lin	e 21?	>				☐ Yes	F No
<b>b</b> If "Yes," explain the arrangement ii	n Part XIII Check here if the	e expl	anation	has beer	provided in P	art XIII		. 「
Part V Endowment Funds. Co	mplete if the organizatio	n ans	swered	"Yes" to	Form 990,	Part IV, line 1	LO.	
	(a)Current year	(b)	Prior year			(d)Three years ba		r years back
<b>1a</b> Beginning of year balance	192,125,408		165,950		164,708,996	136,039,6		114,951,915
<b>b</b> Contributions	4,306,918		12,963	411	10,673,580	4,808,2	289	2,223,164
c Net investment earnings, gains, and	d losses 30,482,108		20,369	649	-3,871,359	29,244,3	385	24,521,537
<b>d</b> Grants or scholarships	3,378,078		3,063	521	3,307,509	3,334,9	991	2,843,285
e Other expenditures for facilities and programs	9,779,154		4,095	109	2,252,730	2,048,3	365	2,813,653
<b>f</b> Administrative expenses								
<b>g</b> End of year balance	213,757,202		192,125		165,950,978	164,708,9	996	136,039,678
2 Provide the estimated percentage of		ce (lır	ne 1g, co	lumn (a)	) held as			
a Board designated or quasi-endowm	ent <b>►</b> 35 000 %							
<b>b</b> Permanent endowment ► 35 00	0 %							
c Temporarily restricted endowment The percentages in lines 2a, 2b, an								
<b>3a</b> Are there endowment funds not in t	he possession of the organiz	ation	that are	held and	l admınıstered	for the		
organization by						г	Y (	<del></del>
(i) unrelated organizations							3a(i) Ye 3a(ii)	No No
(ii) related organizations b If "Yes" to 3a(ii), are the related or						` .	3b	1 110
4 Describe in Part XIII the intended	= :							
Part VI Land, Buildings, and E	quipment. Complete if				swered 'Yes'	to Form 990,	Part IV,	line
11a. See Form 990, Part Description of property	X, line 10.			st or other	(b)Cost or oth			Book value
			nasis (II	vestment)	<u> </u>		711	
<b>1a</b> Land		•			5,575,0			5,575,655
<b>b</b> Buildings		•			489,638,0	076 18,448	3,836	309,189,240
c Leasehold improvements		•						
d Equipment		•			53,454,3		<u> </u>	13,139,560
						33E L C COC	100 I	E 40E 140
e Other	(d) must equal Form 000. Part	V 0-1:	ump (D)	line 10/-	12,103,			5,495,143 333,399,598

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization a	inswered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other (A)LIMITED PARTNERSHIPS	22,015,075	F
(B) HEDGE FUNDS	76,998,783	F
(C) OTHER INVESTMENTS	4,031,150	F
(D) DEPOSITS WITH TRUSTEES	11,879,246	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	114,924,254	
Part VIII Investments—Program Related. Co See Form 990, Part X, line 13.	mplete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX Other Assets. Complete if the organization	answered 'Yes' to Form 990	Part IV, line 11d See Form 990, Part X, line 15
(a) Descrip		(b) Book value
Part X Other Liabilities. Complete if the organ Form 990, Part X, line 25.		Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
ACCRUED INTEREST PAYABLE	536,191	
REFUNDABLE ADVANCES-GOVT GRANT	6,038,325	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	6,574,516	
2 Liphility for uncertain tay positions In Dort VIII provide	the tout of the feetnets to the	

			ı ayc
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue the organization answered 'Yes' to Form 990, Part IV, line 12a.	per R	<b>eturn</b> Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	277,049,485
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
C	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII )	1	
e	Add lines <b>2a</b> through <b>2d</b>	2e	23,129,401
3	Subtract line <b>2e</b> from line <b>1</b>	3	253,920,084
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 1,123,944		
b	Other (Describe in Part XIII )	1	
C	Add lines <b>4a</b> and <b>4b</b>	4c	137,149
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	254,057,233
Part	Reconciliation of Expenses per Audited Financial Statements With Expense if the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per	Return. Complete
1	Total expenses and losses per audited financial statements	1	236,964,840
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses		
d	Other (Describe in Part XIII )	5	
e	Add lines <b>2a</b> through <b>2d</b>	2e	1,349,790
3	Subtract line <b>2e</b> from line <b>1</b>	3	235,615,050
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,123,944		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	1,123,944
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18 )	5	236,738,994

## Part XIII Supplemental Information

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

Return Reference	Explanation
ENDOWMENT FUNDS	PART V, LINE 4 THE INTENDED USE OF THE COLLEGE'S ENDOWMENT IS TO FUND STUDENT SCHOLARSHIPS AND PROJECTS
FIN 48 (ASC 740) FOOTNOTE	PART X, LINE 2 THE COLLEGE IS A TAX-EXEMPT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND IS GENERALLY EXEMPT FROM INCOME TAXES PURSUANT TO SECTION 501(A) OF THE CODE, AS AMENDED ACCORDINGLY, IT IS GENERALLY NOT SUBJECT TO INCOME TAXES EXCEPT TO THE EXTENT IT HAS TAXABLE INCOME FROM ACTIVITIES THAT ARE NOT RELATED TO ITS EXEMPT PURPOSE THE COLLEGE HAS GENERATED UNRELATED BUSINESS INCOME FOR THE YEAR ENDED JUNE 30, 2014, BUT IT IS NOT MATERIAL TO THE AUDITED FINANCIAL STATEMENTS THE COLLEGE BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS
OTHER REVENUES INCLUDED IN FINANCIAL STATEMENTS NOT INCLUDED ON FORM 990	PART XI, LINE 2D PROVISION FOR DOUBTFUL PLEDGES \$ (523,325)
OTHER REVENUES INCLUDED ON FORM 990 NOT INCLUDED IN FINANCIAL STATEMENTS	PART XI, LINE 4B BLACK & WHITE EVENT \$ (249,749) LOSS ON EXTINGUISHMENT OF DEBT \$ (737,046) TOTAL \$ (986,795)
OTHER EXPENSES INCLUDED IN FINANCIAL STATEMENTS NOT INCLUDED ON FORM 990	PART XII, LINE 2D BLACK & WHITE EVENT \$ 249,749 POST RETIREMENT BENEFIT OBLIGATION \$ 63,185 LOSS ON EXTINGUISHMENT OF DEBT \$ 737,046 TOTAL \$ 1,049,980

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

Schedule D (Form 990) 2013

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As Filed Data -

DLN: 93493131020365

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

**SCHEDULE E** 

(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 **Employer identification number** PROVIDENCE COLLEGE 05-0258932 Part I YES NO 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? Yes 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? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? **4**c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? <u>5g</u> Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Yes

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
NONDISCRIMINATORY POLICY	LINE 3 A COPY OF THE COLLEGE'S RACIAL NONDISCRIMINATION POLICY IS INCLUDED IN ALL COLLEGE PUBLICATIONS
GOVERNMENT AID OR ASSISTANCE	LINE 6A THE COLLEGE PARTICIPATES IN VARIOUS GOVERNMENTAL ASSISTANCE PROGRAMS INCLUDING THE FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS AND FEDERAL WORK STUDY PROGRAMS

Schedule E (Form 990 or 990-EZ) 2013

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SCHEDULE F

Department of the Treasury

(Form 990)

As Filed Data -

DLN: 93493131020365

**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

Internal Revenue Se	rvice	about bonouu.	a. (.a			Inspection	
Name of the o	_				Employer ident	ification number	
I NO VIDENC	L COLLEGE				05-0258932		
Part I	<b>General Informatior</b> "Yes" to Form 990, Par	n <b>on Activitie</b> t IV, line 14b.	es Outside th	ne United States. Co	emplete if the organiz	zation answered	
othera	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?						
	antmakers. Describe in ance outside the United		ganızatıon's pı	rocedures for monitorii	ng the use of its gran	ts and other	
3 Activité	es per Region (The follow	ing Part I, line 3	table can be du	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		
(1) See A	dd'l Data						
( 2)							
( 3)							
(4)							
(5)							
to Part	rom continuation sheets I					61,678,576	
c Totals	(add lines 3a and 3b)					61,678,576	

Pa						<b>ited States.</b> Compl duplicated if additior			to Form 990,
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	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(:	1)								
( :	2)								
(:	3)								
( 4	4)								
2						ies by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganizations or ent	rities					

Schedule F (Form 990) 2013

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 addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
( 2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
( 12)							
(13)							
(14)							
( 15)							
( 16)							
( 17)							
( 18)							
	1			l .			

### Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>▽</b>	Yes	Γ	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	্য	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)	F	Yes	Г	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)	<b>~</b>	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)	F	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).	<b>▽</b>	Yes	Г	Νo

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
MONITOR THE USE OF GRANT FUNDS OUTSIDE THE US	PART I, LINE 2 THE OFFICE OF FINANCIAL AID MONITORS FEDERAL GRANT FUNDS USING BANNER REPOR TING TOOLS TO TRACK THE LEVELS OF AMOUNTS PAID FOR ALL TITLE IV GRANTS AND INSTITUTIONAL G RANTS AMOUNTS ARE RECONCILED TO THE STUDENT ACCOUNT SYSTEM TO ENSURE FUNDS ARE PROPERLY D ISBURSED

## 990 Schedule F, Supplemental Information

Return Reference	Explanation
EXPENDITURES	PART I, LINE 3, COLUMN (F) EXPENDITURES IN COLUMN (F) ARE BASED ON THE ACCRUAL METHOD OF ACCOUNTING

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 05-0258932

Name: PROVIDENCE 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	_
Central America and the Caribbean			Investments		52,356,412
Europe (Including Iceland and Greenland)			Investments		4,883,990
Central America and the Caribbean			Program Services	EDUCATIONAL ACTIVITIES	108,418

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
East Asia and the Pacific			1	EDUCATIONAL ACTIVITIES	348,106
Europe (Including Iceland and Greenland)				EDUCATIONAL ACTIVITIES	3,724,263
Middle East and North Africa			1	EDUCATIONAL ACTIVITIES	68,298

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			-	EDUCATIONAL ACTIVITIES	14,494	
Russia and the Newly Independent States			1 -	EDUCATIONAL ACTIVITIES	3,053	
South America			-	EDUCATIONAL ACTIVITIES	97,412	

Form 990 Schedule F	Part I - Activi	<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
South Asia				EDUCATIONAL ACTIVITIES	33,341
Sub-Saharan Africa				EDUCATIONAL ACTIVITIES	40,789

DLN: 93493131020365

OMB No 1545-0047

Open to Public **Inspection** 

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

Department of the Treasury Internal Revenue Service

**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.

**Supplemental Information Regarding** 

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.

Name of the organization PROVIDENCE COLLEGE **Employer identification number** 

					05-0258932	
<b>Part I</b> Fundraising Acti Form 990-EZ filers				on answered "Yes" to part.	o Form 990, Part IV,	line 17.
Indicate whether the organiza  Mail solicitations  Internet and email solic  Phone solicitations  In-person solicitations  Did the organization have a or key employees listed in F  If "Yes," list the ten highest to be compensated at least  (i) Name and address of individual or entity (fundraiser)	uritten or oral agree Form 990, Part VII) t paid individuals or	ement with or entity entities (i nization (iii) fundrais	e f g n any indi	Solicitation of non-Solicitation of gove Special fundraising vidual (including officers with professional fundraisional fundrais	ernment grants ernment grants g events s, directors, trustees undraising services?	✓ Yes Nondraiser is  (vi) A mount paid to (or retained by) organization
of effecty (failure)		cont	rol of outions?		col (i)	organización
1 RUFFALOCODY 65 KIRKWOOD N RD CEDAR 65 KIRKWOOD N RD CEDAR REAPIDS, IA	PHONE SOLICIT	Yes	<b>No</b> No	505,894	4 3 5 ,8 2 5	70,069
52404						
3						
4						
5						
6						
7						
8						
9						
0						
otal	l	<u> </u>	<u> </u>	505,894	435,825	70,069

CO, CT, DC, ME, MD, MI, MN, MO, NH, NC, ND, RI, UT

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contribut					
			(a) Event #1  BLACK & WHITE  (event type)	(b) Event #2	(c) Other events  0 (total number)	(d) Total events (add col (a) through col (c))		
₽	1	Gross receipts	702,568	3		702,568		
Revenue	2	Less Contributions	631,993	3		631,993		
<u>~</u>	3	Gross income (line 1 minus line 2)	70,575	5		70,575		
	4	Cash prizes						
ဟ	5	Noncash prizes						
Expenses	6	Rent/facility costs	114,067	7		114,067		
ă	7	Food and beverages .	83,638	3		83,638		
Direct	8	Entertainment						
à	9	Other direct expenses .	52,044	1		52,044		
	10	Direct expense summary Add lir	nes 4 through 9 in columr	n (d)		(249,749)		
	11	Net income summary Subtract li	ne 10 from line 3, columr	n (d)		-179,174		
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	irt IV, line 19, or rep	orted more than		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))		
		Gross revenue						
Expenses	2	Cash prizes						
xper	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	<ul><li>☐ Yes</li></ul>	Г Yes% Г Nо	Г Yes%	_		
	7	Direct expense summary Add line	s 2 through 5 ın column (	(d)				
	8	Net gaming income summary Subt	tract line 7 from line 1, co	olumn (d)	<u> ▶</u>			
9		er the state(s) in which the organiza						
a b								
10a b	b If "No," explain							

|--|

Page	3
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	·								
Does	the organization operate gaming	activities with nonmembers?		· Fyes FNo					
12	Is the organization a grantor, bei	neficiary or trustee of a trust	or a member of a partnership or other entity						
	formed to administer charitable o	jamıng <sup>,</sup>		· · · Fyes F No					
13	Indicate the percentage of gamir	ng activity operated in							
а	The organization's facility			13a %					
b	An outside facility			13b %					
14	Enter the name and address of th	ne person who prepares the or	rganization's gaming/special events books ar	nd records					
	Name 🟲								
	Address ►								
15a b	revenue?	ning revenue received by the	whom the organization receives gaming						
c	amount of gaming revenue retained by the third party ► \$  If "Yes," enter name and address of the third party								
	Name •								
	Address 🟲								
16	Gaming manager information								
	Name 🕨								
	Gamıng manager compensation ► \$								
	Description of services provided	<b>&gt;</b>							
	Director/officer	<b>F</b> Employee	Independent contractor						
17	Mandatory distributions								
а	Is the organization required unde	er state law to make charitabl	e distributions from the gaming proceeds to						
	retain the state gaming license?			· · Fyes Fno					
b	Enter the amount of distributions	required under state law dist	tributed to other exempt organizations or spe	nt					
	ın the organization's own exempt								
Pai		Ob, 15b, 15c, 16, and 17b,	anations required by Part I, line 2b, col , as applicable. Also complete this part						
	Return Reference		Explanation						
	DRAISING IVITIES	PROFESSIONAL FUNI SERVICES, INCLUDIN PAYMENT OF AN AGR POSTAGE, SUPPLIES	IDENCE COLLEGE HAS A WRITTEN AGREE DRAISER, WHEREBY RUFFALOCODY PROV NG PHONATHON MAILINGS THE AGREEM REED UPON FEE, PLUS REIMBURSEMENT C , ETC RUFFALOCODY BILLS PROVIDENCE IDENCE COLLEGE PAID RUFFALOCODY	IDED TELEMARKETING ENT CALLS FOR A MONTHLY OF COSTS SUCH AS PRINTIN E COLLEGE SEPARATELY FO					

Schedule I

(Form 990)

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

DLN: 93493131020365 OMB No 1545-0047

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

Open to Public ► Attach to Form 990 Department of the Treasury **Inspection** Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number PROVIDENCE COLLEGE 05-0258932 **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC Code section (a) Name and address of (b) EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable arant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) (1) SMITH HILL 05-0466422 501(C)(3) 317,668 COMMUNITY DEVELOPMENT CORP 231 DOUGLAS AVENUE PROVIDENCE, RI 02903 (2) CATHOLIC RELIEF 13-5563422 501(C)(3) 11,692 SERVICES USCCB 228 W LEXINGTON STREET BALTIMORE, MD 21201 (3) INST FOR STUDY & 05-0517863 501(C)(3) 10,000 PRACTICE OF NONVIOLENCE 265 OXFORD STREET PROVIDENCE, RI 02905

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

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

(a) Type of grant or assistance

(b) Number of

recipients

(f)Description of non-cash assistance

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.

(d)A mount of

non-cash assistance

FUNDS USING BANNER REPORTING TOOLS TO TRACK THE LEVEL OF AMOUNTS PAID FOR ALL TITLE IV GRANTS AND INSTITUTIONAL

GRANTS AMOUNTS ARE RECONCILED TO THE STUDENT ACCOUNT SYSTEM TO ENSURE FUNDS ARE PROPERLY DISBURSED.

(e) Method of valuation (book,

FMV, appraisal, other)

(c)A mount of

cash grant

	reen	, ichts	cush grunc	non easi assistance	TTTV, appraisal, other)				
(1) STUDENT SCHLORSHIPS & FINANCIAL AID		2900	57,531,995						
(2) ATHLETIC SCHOLARSHIPS		212	7,607,453						
(3) FEDERAL SUPPLEMENTAL EDUCATION OPPORTUNITY GRA	ANT	241	948,342						
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.									
Return Reference	Return Reference Explanation								
MONITOR THE USE OF GRANT FUNDS IN VARIOUS WAYS INCLUDING OBTAINING REPORTS FROM THE FUNDS IN THE USE OF GRANT FUNDS IN VARIOUS WAYS INCLUDING OBTAINING REPORTS FROM THE ORGANIZATIONS OUTLINING THE ACTIVITIES SUPPORTED BY GRANTS, MEETING REGULARLY WITH THE ORGANIZATIONS, AND VISITING THE ORGANIZATIONS TO OBSERVE ACTIVITIES ON A FIRST HAND BASIS THE OFFICE OF FINANCIAL AID MONITORS FEDERAL GRANT									

Schedule I (Form 990) 2013

DLN: 93493131020365

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

Schedule J (Form 990)

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

**Compensation Information** 

► 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 PROVIDENCE COLLEGE

**Employer identification number** 

05-0258932

Pa	rt I Questions Regarding Compensation	on				
	_				Yes	No
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I					
	First-class or charter travel	I	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	١	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 reimbursement or provision of all of the expenses			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Ex			2	Yes	
3	Indicate which, if any, of the following the filing org organization's CEO/Executive Director Check all used by a related organization to establish compet	that apply				
	✓ Compensation committee	Г	Written employment contract			
	☐ Independent compensation consultant	<u>                                      </u>	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	), Part VII	, Section A , line 1a with respect to the filing organization $% \left( 1\right) =\left( 1\right) \left( 1\right$			
а	Receive a severance payment or change-of-contro	ol paymen	t?	4a	Yes	
b	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-	-based co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and p	provide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only n	nust comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section a compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section of compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section a payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII	, paid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described		tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	he rebutta	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)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

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

The state of the s	
Return Reference	Explanation
HOUSING ALLOWANCE AND HEALTH OR SOCIAL CLUB DUES	PART I, LINE 1A THE FOLLOWING LISTED BENEFITS WERE PROVIDED BY THE COLLEGE DURING CALENDAR YEAR 2013 LISTED BENEFITS TO EMPLOYEES CEASE UPON THEIR TERMINATION DATE THE COLLEGE'S PRESIDENT, REV BRIAN J SHANLEY, OP AND THE COLLEGE'S EVP/TREASURER, REV KENNETH J SICARD, OP WERE PROVIDED WITH ON CAMPUS HOUSING THE SR VP OF FINANCE/CFO AND THE SR VP OF INSTITUTIONAL ADVANCEMENT WERE PROVIDED WITH OCCASIONAL HOUSING IN COLLEGE OWNED PROPERTY THE HOUSING WAS TAXABLE AND INCLUDED IN THEIR FORM W-2 THE COLLEGE'S PRESIDENT, REV BRIAN J SHANLEY, OP, NATHAN LEAMAN, HOCKEY COACH, DAVID WEGRZYN, FORMER VICE PRESIDENT INSTITUTIONAL ADVANCEMENT, AND EDWARD COOLEY, BASKETBALL COACH, WERE PROVIDED WITH SOCIAL CLUB MEMBERSHIPS PAID BY THE COLLEGE THE MEMBERSHIP DUES PAID BY THE COLLEGE FOR NATHAN LEAMAN, DAVID WEGRZYN, AND EDWARD COOLEY ARE TAXABLE TO THE INDIVIDUALS AND INCLUDED IN THEIR FORM W-2 THESE AMOUNTS HAVE BEEN REPORTED IN FORM 990, PART VII AND ON SCHEDULE J
SEVERANCE PAYMENT	PART I, LINE 4A THE FOLLOWING INDIVIDUALS RECEIVED MONTHLY SEVERANCE PAYMENTS THE TOTAL AMOUNTS RECEIVED ARE PROVIDED BELOW DAVID WEGRZYN \$ 131,950 KENO DAVIS \$ 306,250
SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	PART I, LINE 4B CERTAIN HIGHLY COMPENSATED EMPLOYEES PARTICIPATE IN A NONQUALIFIED 457(F) PLAN CONTRIBUTIONS MADE EDWARD COOLEY \$ 50.000 NATHAN LEAMAN \$ 25.000 ROBERT DRISCOLL \$ 20.000

**Schedule J (Form 990) 2013** 

#### **Additional Data**

Software ID: Software Version:

**EIN:** 05-0258932

Name: PROVIDENCE COLLEGE

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

(A) Name	(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation	
	(i) Base Compensation  (ii) Bonus & Incentive compensation		(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
HUGH LENA SR VP ACADEMIC AFFAIRS/PROVOST		13,651 0	11,148 0	25,500 0	19,708 0	342,715 0	0	
JOHN SWEENEY SR (I) VP FINANCE & (II) BUSINESS/CFO		12,104 0	31,922 0	25,500 0	21,770 0	343,574 0	0	
MARIFRANCES (I MCGINN VP & (III GENERAL COUNSEL		11,310 0	11,871 0	23,114 0	24,033 0	289,962 0	0	
KRISTINE GOODWIN VP STUDENT AFFAIRS (II		8,969 0	36,453 0	12,905 0	25,164 0	269,830 0	0	
EDWARD COOLEY MEN'S BASKETBALL COACH		132,500 0	162,046 0	75,500 0	19,850 0	1,656,099 0	0	
SUSAN ROBINSON FRUCHTL WOMEN'S BASKETBALL COACH		10,875 0	11,850 0	17,850 0	19,785 0	394,035 0	0 0	
NATHAN LEAMAN (I		13,838 0	19,016 0	47,041 0	19,713 0	388,061 0	0 0	
ROBERT DRISCOLL (I ATHLETICS (II DIRECTOR		12,295 0	35,361 0	45,500 0	19,789 0	352,987 0	0	
SYLVIA MAXFIELD (I SCHOOL OF BUSINESS DEAN		5,625 0	2,387 0	12,208 0	9,210 0	253,786 0	0	
DAVID WEGRZYN (I FORMER SR VP INSTIT ADVANCE		0	161,991 0	25,500 0	15,244 0	329,976 0	0	
KENO DAVIS FORMER BASKETBALL COACH	0	0	/	o o	0	306,250 0	0	

DLN: 93493131020365

2013

OMB No 1545-0047

Schedule K

(Form 990)

Department of the Treasury

Internal Revenue Service

**Supplemental Information on Tax Exempt Bonds** ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

► Attach to Form 990. ► See separate instructions.

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

Open to Public **Inspection** 

Name of the organization  Employer identification number											ber				
PRC	OVIDENCE COLLEGE									05	-02589	32			
P	art I Bond Issues			<u> </u>											
	(a) Issuer name	(b) Issuer EIN	<b>(c)</b> CUSIP #	(d) Date issued	(e) Issue	price	(f	<b>f)</b> Descriptio	n of purpose	( <b>g)</b> De	(g) Defeased				Pool ncing
_										Yes	No	Yes	No	Yes	No
A	RI Health & Educational Bldg Corp	52-1300173	762197LS8	11-20-2012	40,6	16,916	A dva Bond	ance refundır ds	ng of 2003A		x		х		X
В	RI Health & Educational Bldg Corp	54-1300173	762197JH5	01-25-2012	40,33	37,074	Cons	struction			х		х		Х
С	RI Health & Educational Bldg Corp	54-1300173	762197CH2	04-30-2008	18,20	000,000	Refur Bond	unding 2003E ds	3 & 2006		х		х		Х
Pa	Part II Proceeds														
	A manufacture of based and making d	A mount of hands raturad			<u> </u>	<u> </u>		В			С		D		
1_						1,855,	000	00 1,380,000			2,225,000				
2		A mount of bonds legally defeased					0		0		10.300.333				
3	Total proceeds of issue	_ J _				40,617,	455	4	10,343,462		18,200,000				
4	Gross proceeds in reserve fun						<u> </u>		0						
5	Capitalized interest from proc						0		0						
6	Proceeds in refunding escrows						0		0						
7	Issuance costs from proceeds					234,	178	178 335,840				3,010			
8	Credit enhancement from proc						0	0 0		40,513		0,513			
9	Working capital expenditures						이	0 0							
10	Capital expenditures from pro	ceeds					이	<del> </del>	28,215,133						
11	O ther spent proceeds				,	40,317,	-		0		17,91	6,477			
12	O ther unspent proceeds					-	,568	1	1,792,489						
13	Year of substantial completion	<u> </u>			20				s. 1		008				
14	Were the bonds issued as part	t of a current refund	ina issiie?		Yes	No v	<u> </u>	Yes	No X	Yes	+-N	10	Yes	+	No
14	·				, , , , , , , , , , , , , , , , , , ,	X				^	+-			+	
<u>15</u>	Were the bonds issued as part		————		Х				X		<del>            </del>	×		+	
16	Has the final allocation of proc				Х			X		X	<del> </del>	$\longrightarrow$		+	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?			X			x		X						
Pa	rt IIII Private Business U	Jse													
ı						Α		E E			С			D	
			Yes	No		Yes	No	Yes	N	ło	Yes		No		

property financed by tax-exempt bonds?

financed property?

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

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

Χ

Χ

Χ

Χ

Χ

Part III Private Business Use (Continued)

Раг	Private Business Use (Continued)									
			A		В	(	С	Г	)	
		Yes	No	Yes	No	Yes	No	Yes	No	
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		х		х		х			
ь	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		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 %		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									
6	Total of lines 4 and 5									
7	Does the bond issue meet the private security or payment test?		Х		Х		Х			
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х		х		х			
ь	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		x			
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?	Х	х			x				

Part IV Arbitrage

Pall TV Albitrage										
		Α		В		С		D		
		Yes	No	Yes	No	Yes	No	Yes	No	
1	Has the issuer filed Form 8038-T?		X		X		Х			
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?	Х		Х			Х			
b	Exception to rebate?		Х		X		Х			
С	No rebate due?		Х		Х	Х				
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?		Х		Х	Х				
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		×		X		×			
b	Name of provider	0		0		0				
С	Term of hedge									
d	Was the hedge superintegrated?									
е	Was the hedge terminated?									
							Sc	hedule K (Forn	າ 990) 2013	

Part IV Arbitrage (	Continued)
---------------------	------------

Return Reference

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×		X		x		
b	Name of provider	0		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		X		x		
7	Has the organization established written procedures to monitor the requirements of section 148?	x		×		x			

#### Procedures To Undertake Corrective Action

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

Α		A B		С		D		
Yes	No	Yes	No	Yes	No	Yes	No	
X		x		×				

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

**Explanation** THE DIFFERENCE BETWEEN TOTAL PROCEEDS IN PART II, LINE 3 AND THE ISSUE PRICE OF THE BOND ISSUE IS INVESTMENT EARNINGS OF PART II, LINE 3, BOND ISSUE A \$539 PART II, LINE 3, BOND ISSUE B THE DIFFERENCE BETWEEN TOTAL PROCEEDS IN PART II, LINE 3 AND THE ISSUE PRICE OF THE BOND ISSUE IS INVESTMENT EARNINGS OF \$6,388

Return Reference		planation
PART IV, LINE 2C	BOND ISSUE C APRIL 30, 2013	

DLN: 93493131020365

OMB No 1545-0047

Open to Public Inspection

#### 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.

Name of the organization

**Employer identification number** PROVIDENCE COLLEGE 05-0258932 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (d) Corrected? (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction person and organization Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (d) Loan to (i)Written (a) Name of (b) (c) Purpose (e)Original (f)Balance (g) In (h) ınterested Relationship of loan or from the principal due default? Approved agreement? organization? amount person with by organization board or committee? Τо From Yes No Yes Yes No 400,000 266,667 (1) EDWARD A HIGH COMP PERSONAL Χ Yes Yes Nο COOLEY EMPLOYEE LOAN Total 266,667 Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested (b) Relationship between (c) A mount of assistance (d) Type of assistance (e) Purpose of assistance person interested person and the organization 38,385 TUITION (1) NA N/A TUITION REMISSION

Business Transactions In			20 201 20			
Complete if the organization	<u>n answered "Yes" on F</u>	<u>-orm 990, Part IV, lin</u>	e 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) Sharing of organization' revenues?		
				Yes	No	

## Part V Supplemental Information

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

Schedule L (Form 990 or 990-EZ) 2013

DLN: 93493131020365

OMB No 1545-0047

(Form 990)

Department of the Treasury

**SCHEDULE M** 

# **Noncash Contributions**

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Internal Revenue Service Name of the organization PROVIDENCE COLLEGE

**Employer identification number** 

				103	-0256932			
Pa	rt I Types of Property				T			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(e Method of a noncash contri		_	nts
1	Art—Works of art							
2	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
5	Clothing and household							
6	goods							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	39	1 290 172	SELLING PRICE			
	Securities—Closely held stock .		3,	1,230,172	SEEEING I KIGE			
	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							
	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other►( TWARE)	X	1	17,000	FMV			
	Other►( CELLANEOUS)	. X	51	383,338	FMV			
27	O ther ▶()							
28	O ther ► ()							
29	Number of Forms 8283 received by th for which the organization completed F				9			1
					•		Yes	No
30a	During the year, did the organization	receive by (	contribution any property r	reported in Part I, lines 1	through 28, that			
	ıt must hold for at least three years fr	om the date	e of the initial contribution,	, and which is not required	l to be used			
	for exempt purposes for the entire ho	ldıng period	<sup>?</sup>			30a		No
b	If "Yes," describe the arrangement in	Part II						
31								
32a	Does the organization hire or use thir contributions?	d parties or	related organizations to s	olicit, process, or sell no	ncash			
_					• • •	32a		No
	If "Yes," describe in Part II  If the organization did not report an a  describe in Part II	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			
	describe iii i dit II							

Actional of the time project of time project of the time project of the time project o										
	ormation. 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										
number of items received, or a combination of both. Also complete this part for any additional information.										
Return Reference	Explanation									
	PART I, COLUMN (B) THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED									

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493131020365

Employer identification number

05-0258932

•

SCHEDULE O (Form 990 or 990-EZ)

Name of the organization PROVIDENCE COLLEGE

Department of the Treasury

Internal Revenue Service

Complete to provide information for resp

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Return Reference	Explanation
ORGANIZATION'S MISSION	PART III, LINE 1 PROVIDENCE COLLEGE IS A CATHOLIC, DOMINICAN, LIBERAL ARTS INSTITUTION OF HIGHER EDUCATION AND A COMMUNITY COMMITTED TO ACADEMIC EXCELLENCE IN PURSUIT OF THE TRUTH, GROWTH IN VIRTUE, AND SERVICE OF GOD AND NEIGHBOR HISTORY PROVIDENCE COLLEGE WAS FOUNDED IN 1917 BY THE DOMINICAN FRIARS AT THE INVITATION OF BISHOP HARKINS TO PROVIDENCE COLLEGE WAS FOUNDED IN 1917 BY THE DOMINICAN FRIARS AT THE INVITATION OF BISHOP HARKINS TO PROVIDENCE COLLEGE EVASON, BELIEVES THAT HUMAN BEINGS ARE DISPOSED TO KNOW THE TRUTH, AND TRUSTS IN THE POWER OF GRACE TO ENLIGHTEN MINDS, OPEN HEARTS, AND TRANSFORM LIVES PROVIDENCE COLLEGE MAINTAINS THAT THE PURSUIT OF TRUTH HAS INTRINSIC VALUE, THAT FAITH AND REASON ARE COMPATIBLE AND COMPLEMENTARY MEANS TO ITS DISCOVERY, AND THAT THE SEARCH FOR TRUTH IS THE BASIS FOR DIALOGUE WITH OTHERS AND CRITICAL ENGAGEMENT WITH THE WORLD ACADEMIC EXCELLENCE PROVIDENCE COLLEGE IS COMMITTED TO ACADEMIC EXCELLENCE, AND HOLDS ITSELF TO THE HIGHEST STANDARDS IN TEACHING, LEARNING, AND SCHOLARSHIP ITS CORE CURRICULUM ADDRESSES KEY QUESTIONS OF HUMAN EXISTENCE, INCLUDING LIFES MEANING AND PURPOSE, AND STRESSES THE IMPORTANCE OF MORAL AND ETHICAL REASONING, AESTHETIC APPRECIATION, AND UNDERSTANDING THE NATURAL WORLD, OTHER CULTURES, AND DIVERSE TRADITIONS PROVIDENCE COLLEGE HONORS ACADEMIC FREEDOM, PROMOTES CRITICAL THINKING AND ENGAGED LEARNING, AND ENCOURAGES A PEDAGOGY OF DISPUTED QUESTIONS COMMUNITY AND DIVERSITY PROVIDENCE COLLEGE SEEKS TO REFLECT THE RICH DIVERSITY OF THE HUMAN FAMILY FOLLOWING THE EXAMPLE OF ST DOMINIC, WHO EXTENDED A LOVING EMBRACE TO ALL, IT WELCOMES QUALIFIED MEN AND WOMEN OF EVERY BACKGROUND AND AFFIRMS THE GOD-GIVEN DIGNITY, FREEDOM, AND EQUALITY OF EACH PERSON PROVIDENCE COLLEGE PROMOTES THE COMMON GOOD, THE HUMAN FLOURISHING OF EACH MEMBER OF THE CAMPUS COMMUNITY, AND SERVICE OF NEIGHBORS NEAR AND FAR VERITAS AND PROVIDENCE ROVIDENCE COLLEGE BRINGS THE EIGHTHUNDRED-YEAR-OLD DOMINICAN IDEAL OF VERITAS TO THE ISSUES AND CHALLENGES OF TODAY IT SEEKS TO SHARE THE FR

Return Reference	Explanation
12-MEMBER CORPORATION	PART VI, SECTION A, LINES 6-8B THE 12-MEMBER CORPORATION IS THE BODY THAT HAS THE ULTIMATE AUTHORITY TO EXERCISE CONTROL OVER OWNERSHIP OF PROPERTY, TO PROMULGATE AND AMEND THE BY-LAWS, TO ACCEPT OR REJECT THE RECOMMENDATION FOR ELECTION TO THE PRESIDENCY OF THE COLLEGE BY THE BOARD OF TRUSTEES, AND TO ELECT MEMBERS OF THE CORPORATION AND OF THE BOARD OF TRUSTEES THE CORPORATION IS COMPRISED OF FOUR EX OFFICIO MEMBERS AND EIGHT OTHER INDIVIDUALS ELECTED BY THE CORPORATION, FOUR DOMINICAN FRIARS AND FOUR LAY PERSONS THE EX OFFICIO MEMBERS ARE THE PROVINCIAL OF THE PROVINCE OF ST JOSEPH, THE ELECTED LEADER OF THE DOMINICAN ORDER FOR THE EASTERN REGION OF THE UNITED STATES, THE ROMAN CATHOLIC BISHOP OF THE DIOCESE OF PROVIDENCE, THE PRESIDENT OF THE COLLEGE, AND THE CHAIRMAN OF THE BOARD OF TRUSTEES THE TERMS OF OFFICE OF THE BISHOP, THE PRESIDENT, THE PROVINCIAL AND THE CHAIRMAN OF THE BOARD OF TRUSTEES ARE CO-TERMINUS WITH THE RESPECTIVE INCUMBENCY OF EACH THE TERM OF ALL OTHER MEMBERS IS THREE YEARS

Return Reference	Explanation
FORM 990 REVIEW PROCESS	PART VI, SECTION B, LINE 11A THE FORM 990 WILL BE COMPLETED ANNUALLY AND COPIES WILL BE PROVIDED TO THE ENTIRE GOVERNING BOARD VIA POSTING ON THE TRUSTEES ONLY AREA OF THE COLLEGE WEBSITE MEMBERS OF THE AUDIT COMMITTEE WILL REVIEW THE FORM 990 WITH THE COLLEGE'S PRESIDENT, EXECUTIVE VICE PRESIDENT/TREASURER, SR VICE PRESIDENT FOR FINANCE & BUSINESS/CFO, AND CONTROLLER AT THE DISCRETION OF THE AUDIT COMMITTEE CHAIR, THE THIRD PARTY PREPARER OF THE FORM 990 MAY BE ASKED TO ATTEND ANY NECESSARY CHANGE, IDENTIFIED THROUGH THE REVIEW PROCESS, WILL BE MADE TO THE ORIGINALLY SUBMITTED FORM 990 THIS UPDATED VERSION OF THE FORM 990 WILL BE CONSIDERED APPROVED FOR FILING IT WILL BE SIGNED BY THE SR VICE PRESIDENT FOR FINANCE & BUSINESS/CFO, DATED, AND SUBMITTED BY THE FILING DEADLINE A COPY OF THE APPROVED FORM 990 WILL BE PROVIDED, VIA POSTING ON THE TRUSTEES ONLY AREA OF THE COLLEGE WEBSITE, TO ALL OF THE OFFICERS AND TRUSTEES BEFORE THE RETURN IS FILED

Return Reference	Explanation
CONFLICT OF INTEREST POLICY	PART VI, SECTION B, LINE 12C ALL OFFICERS, TRUSTEES, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ANNUAL INTERESTS THAT COULD GIVE RISE TO CONFLICTS ALL CONFLICT OF INTEREST DISCLOSURE FORMS ARE REVIEWED BY THE COLLEGE'S GENERAL COUNSEL, THE CHAIRMEN OF THE AUDIT COMMITTEE, AND A DESIGNEE OF THE CORPORATION ISSUES ARISING UNDER THE APPLICATION OF THIS POLICY SHALL BE RESOLVED BY THE BOARD OF TRUSTEES OR THE EXECUTIVE COMMITTEE.

Return Reference	Explanation
COMPENSATION POLICY	PART VI, SECTION B, LINE 15A THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES ANNUALLY REVIEWS THE POLICIES, PROGRAMS, AND TOTAL COMPENSATION FOR EXECUTIVES TO ENSURE COMPLIANCE WITH FEDERAL REGULATIONS CONCERNING EXECUTIVE COMPENSATION IN NON-PROFIT ORGANIZATIONS COMPETITIVE SURVEY DATA IS COLLECTED, ANALYZED, AND SUMMARIZED BY THE ASSOCIATE VICE PRESIDENT FOR HUMAN RESOURCES AND IS REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES SALARIES ARE BASED UPON THE EXECUTIVES SCOPE, SIZE, AND COMPLEXITY OF RESPONSIBILITIES AS WELL AS PERFORMANCE AGAINST GOALS AND OBJECTIVES BENEFITS FOR EXECUTIVES ARE THE SAME AS THOSE OFFERED TO ALL COLLEGE EMPLOYEES THIS PROCESS IS USED TO ESTABLISH COMPENSATION FOR THE FOLLOWING PRESIDENT, EVPTREASURER, VP FOR STUDENT AFFAIRS, SR VP OF ACADEMIC AFFAIRS/PROVOST, VP AND GENERAL COUNSEL, SR VP FOR FINANCE/CFO, SR VP FOR INSTITUTIONAL ADVANCEMENT AND VP FOR MISSION AND MINISTRY. THIS PROCESS IS DONE ANNUALLY PART VI, SECTION B, LINE 15B PROVIDENCE COLLEGES PRESIDENT AND EVPTREASURER ARE MEMBERS OF THE DOMINICAN FRIARS, A CATHOLIC RELIGIOUS ORDER THEY ARE PROVIDED ON CAMPUS HOUSING AND HEALTHCARE BENEFITS BY THE COLLEGE. INDEPENDENT COMPENSATION FOR OTHER OFFICERS AND KEY EMPLOYEES IS SET BY THE PRESIDENT OF THE COLLEGE. INDEPENDENT COMPENSATION COMPARABILITY SURVEYS ARE USED PERIODICALLY IN SETTING COMPENSATION. THE COLLEGE COMPLIES WITH THE THREE REQUIREMENTS OF THE REBUTTABLE PRESUMPTION STANDARD, AS OUTLINED IN TREASURY REGULATIONS SECTION 53 4958-6 (1) EXECUTIVE COMPENSATION IS AUTHORIZING EXECUTIVE COMPENSATION OBTAINS AND RELIES ON APPROPRIATE DATA AS TO COMPARABILITY PRIOR TO MAKING DETERMINATIONS, AND (3) THE COMMITTEE ADEQUATELY DOCUMENTS THE BASIS FOR DETERMINATIONS CONCURRENTLY WITH MAKING THE DETERMINATIONS.

Return Reference	Explanation
PUBLIC DISCLOSURE POLICY	PART VI, SECTION C, LINE 19 THE ORGANIZATION'S GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC ON THE WEBSITE. THE COLLEGE COMMUNITY (FACULTY, STAFF, AND STUDENTS) HAVE ACCESS TO THE CONFLICT OF INTEREST POLICY THROUGH THE COLLEGE'S WEBSITE. FINANCIAL STATEMENTS ARE AVAILABLE TO ANY ONE UPON REQUEST. THE FORM 990 IS POSTED ON THE INTERNET AT WWW. GUIDESTAR ORG

Return Reference	Explanation
OTHER CHANGES IN NET ASSETS	PART XI, LINE 9 PART VI, SECTION C, LINE 19 POST RETIREMENT BENEFIT OBLIGATION \$ (63,185)
OR FUND BALANCES	PROVISION FOR DOUBTFUL PLEDGES \$ (523,325) TOTAL \$ (586,510)

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization PROVIDENCE COLLEGE

# **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.

DLN: 93493131020365 OMB No 1545-0047

**Employer identification number** 

05-0258932

2013

Open to Public Inspection

Part I Identification of Disregarded Entities Complete	ıf the organızatıon	answered "Yes" or	n Form 990, Pa	irt IV, line 33.				
(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	(e) End-of-year assets	D	<b>(f)</b> Irect controlling entity		
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	I t <b>ions</b> Complete ıf t tax year.	l he organization ar	I nswered "Yes"	on Form 990, P	art IV,	line 34 because it	had on	ie
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity (if section 501)		<b>(f)</b> Direct controlling entity	Section (13) co	
							Yes	No
							+	
							+	┼
							<del> </del>	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	35Y			Schedule R (Form	1990) 2	013

Part III Identification of Related Control because it had one or more re							ation an	swered "Ye	es" on	Form	990, Part	IV, I	ine 3	4	
<b>(a)</b> Name, address, and EIN related organization	of	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	entity	ect Predomin olling income(rela		(f) Share of total incom	(g) Share of e end-of-year assets	(h Disprop allocai	prtionate	(i) Code V-UB: amount in bo 20 of Schedule K- (Form 1065	I Geno ox mar par 1	(j) eral or naging tner?	<b>(k</b> Percer owne	ntage
					514	+)			Yes	No		Yes	No		
Part IV Identification of Related C line 34 because it had one or									wered	d "Yes	s" on Form	990,	Part	IV,	
(a) Name, address, and EIN of related organization	(a) (b)  Name, address, and EIN of Primary activity		(c) Legal domicile (state or foreign country)		(d) Direct controlling entity		(e) of entity rp, S corp, trust)	orp, income		<b>(g)</b> e of end year assets	-of- Perce	h) entage ership	:	(i) Section (b)(13 controll entity	512 3) lled
(1) CHARITABLE REMAINDER TRUSTS (1)	INVESTING	RI		PC		TRUST	-							Yes Yes	No
(2) CHARITABLE PERPETUAL TRUST (1)	INVESTING	RI		PC		TRUST	-							Yes	

	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 the tax year, did the orgranization engage in any of the following transactions with one or more related or	organızatıons lıs	ted in Parts II-IV?										
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No						
b	Gift, grant, or capital contribution to related organization(s)				1b		No						
C	c Gift, grant, or capital contribution from related organization(s)												
d	Loans or loan guarantees to or for related organization(s)				1d		No						
е	Loans or loan guarantees by related organization(s)				1e		No						
f	Dividends from related organization(s)				1f								
g	Sale of assets to related organization(s)				1g		No						
h	h Purchase of assets from related organization(s)												
i	Exchange of assets with related organization(s)				1i		No						
j Lease of facilities, equipment, or other assets to related organization(s)							No						
k	k Lease of facilities, equipment, or other assets from related organization(s)												
ı	l Performance of services or membership or fundraising solicitations for related organization(s)												
m	<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)												
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No						
0	Sharing of paid employees with related organization(s)				10		No						
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No						
q	Reimbursement paid by related organization(s) for expenses				1q		No						
r	Other transfer of cash or property to related organization(s)				1r		No						
s	Loans or loan guarantees by related organization(s)  It						No						
2			· •										
	Name of related organization Tr	Transaction			unt in	volved							

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

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 regarding exclusion for certain investment partnerships													
<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under 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?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
		·					<u> </u>						

Schedule R (Form 990) 2013

# Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013