

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

generally cannot redact the information on the form

Finformation about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

2013

Open to Public Inspection

			lendar year, or tax year beginning C Name of organization	07-01-2013 , 2013, and ending	06-30-2014	D 5		
B Che		pplicable	NEWMAN UNIVERSITY INC					ntification number
, Add		_	Doing Business As			48-05	556716	5
_		-						
Init			Number and street (or P O box if m 3100 MCCORMICK AVENUE	all is not delivered to street address) Roc	om/suite	E Telepho	one num	ber
┌ Ter			Suite			(316)	942-4	291
┌ Am			City or town, state or province, coun WICHITA, KS 672132097	itry, and ZIP or foreign postal code				
J App	lication	n pending				G Gross r	eceipts \$	44,854,306
			F Name and address of prin NOREEN CARROCCI	cipal officer		is this a group subordinates?		for
			3100 MCCORMICK AVENU	E		suporumates) TES • 110
			WICHITA, KS 672132097			Are all subordi	nates	┌ Y es ┌ No
T Ta:	-exem	npt status	<u> </u>	nsert no)		ncluded? [f "No." attach	ı a lıst	(see instructions)
		<u> </u>						
	ebsite	::= ∨∨∨	WW NEWMANU EDU		H(c)	Group exempt	ion nur	nber ►
			Corporation Trust Association	Other 🕨	L Year	of formation 19	33 M	State of legal domicile KS
Pa	rt I	Sum	nmary					
			lescribe the organization's missio HEDULE O	n or most significant activities				
a a	3	<u> </u>	HEDOLE O					
ဋ	_							
Ĕ	-							
Governance	2 (Check t	his box দ if the organization dis	scontinued its operations or dispo	sed of more th	nan 25% of its	net as	sets
	3 1	Number	of voting members of the governi	ng body (Part VI, line 1a)			з	30
Activities &				of the governing body (Part VI, line			4	27
Ě	5	Total nu	ımber of ındıvıduals employed ın o	calendar year 2013 (Part V, line 2	a)		5	838
ទ្ធ	6	Total nu	ımber of volunteers (estımate ıf no	ecessary)			6	29
-	7a 🗆	Total un	related business revenue from Pa	art VIII, column (C), line 12 .			7a	97,700
	Ьſ	Net unre	elated business taxable income fr	om Form 990-T, line 34			7b	-7,237
						Prior Year		Current Year
	8	Contr	ibutions and grants (Part VIII, lir	ne 1 h)		3,112,	549	8,039,347
Revenue	9	Progra	am service revenue (Part VIII, lir	ne 2g)		32,751,	180	34,866,004
9.6	10		·	(A), lines 3, 4, and 7d)		1,666,6		1,119,702
щ	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		465,	692	654,122
	12			(must equal Part VIII, column (A		37,996,	072	44,679,175
	13			IX, column (A), lines 1-3)		12,885,		13,620,998
	14			X, column (A), line 4)		<u> </u>	0	0
	15			e benefits (Part IX, column (A), lii				
Expenses		5-10	,			14,385,		15,214,809
₹	16a			column (A), line 11e)			0	0
五	b		undraising expenses (Part IX, column (D)		_			
	17			ines 11a-11d, 11f-24e)	——	9,955,0		10,165,014
	18			st equal Part IX, column (A), line 2		37,226,		39,000,821
	19	Rever	nue less expenses. Subtract line .	18 from line 12		769, nning of Curre		5,678,354
Not Assets or Fund Balances					pegi	Year		End of Year
38. 88.	20	Total	assets (Part X, line 16)			63,255,	048	70,126,750
절	21	Total	liabilities (Part X, line 26)			24,908,	171	24,044,500
žZ_	22	Net a	ssets or fund balances Subtract	line 21 from line 20		38,346,	877	46,082,250
Par	t II	Sigr	nature Block					
my kr	owled	dge and		imined this return, including accor iplete Declaration of preparer (oth				
		****	***			2015 05 45		
Sign		I B	ature of officer			2015-05-15 Date		
Here			NIFER GANTZ VP OF ADMIN AND FINANC e or print name and title	Е				
		<u>'</u>	Print/Type preparer's name	Preparer's signature	Date	Check I If	PTIN	2749
Paid	l	<u> </u>	ELIZABETH S HOGAN Firm's name			self-employed Firm's EIN	P00273	0240
Pre	oare		Shame P DID LL			7 mm 3 CHV F		
معاا	Onl	lī	Fırm's address ► 1551 N WATERFRONT F	PKWY STE 300		Phone no (316	1 942-42	

WICHITA, KS 672066601

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

✓ Yes ☐ No

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

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

GI I	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	Yes	.) No
3	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 84		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	1		
	gaming (gambling) winnings to prize winners?	1 c	Yes	
ı	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?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	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?			
		5c		
	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?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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.	Ė		
	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	<u> </u>		
	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 10b	-		
	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		

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.

<u> </u>	ection A. Governing Body and Management					1
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	30			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	27			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2	Yes	"
3				3		No
4	Did the organization make any significant changes to its governing documents since filed?		· · · · · · · · · · · · · · · · · · ·	4		No
5	Did the organization become aware during the year of a significant diversion of the or	raaniz	ation's assets?	5		No
6	Did the organization have members or stockholders?	94		6	Yes	
	Did the organization have members of stockholders, or other persons who had the pow	orto	last or appoint one or	H	163	
	more members of the governing body?			7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b	Yes	
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not			eveni	je Cod	e.)
			•		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Νο
	Did the organization have local chapters, branches, or affiliates?			10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it	on's e	xempt purposes?	10b		
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e s gov	xempt purposes? erning body before filing			No
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e s gov • • form 9	xempt purposes? erning body before filing	10b	Vas	
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's e s gov orm 9	xempt purposes? erning body before filing 90 rests that could give	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Form the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts?	on's e s gov orm 9	xempt purposes? erning body before filing	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	on's e s gov Form 9 ly inte the p	xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	on's e s gov orm 9 y inte	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	on's e s gov form 9	xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	on's es gov form 9 y inte the p	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revi	on's estable on several severa	xempt purposes? erning body before filing 90 rests that could give olicy? If "Yes," describe d approval by beration and decision?	10b 11a 12a 12b 12c 13	Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the	on's ess gover. Form 9 Ty inte the p the p ewan edeli	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	on's ess gover. Form 9 Ty inte the p the p ewan edeli	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's estable signs of	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the 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 of	on's es gov. Form 9 y inte the p ewan edeli crsim	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organical participation in joint venture arrangements under applicable federal tax law, and take	on's es gov. Form 9 y inte the p ewan edeli crsim	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	on's es gov. Form 9 y inte the p ewan edeli crsim	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	on's es gov. form 9 y inte the p ewan e deli zation zation sylvation pr sim	erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No

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

Form 990	(2013	
----------	-------	--

_				_
D	-	α	Δ	4
г	a	ч	_	•

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)

(A) Name and Title	(B) Average hours per week (list any hours	more t perso	tion (han c in is l	ne l both	oox, an d	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	c	(F) Estima nount of ompens from t	ted fother ation he
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		ganızatı relate organıza	ed
										_		
										-		
1b Sub-Total c Total from continuation shee	 ts to Part VII. S	 ection A	٠.	•			* *					
d Total (add lines 1b and 1c) .			· ·	<u>.</u>	<u>.</u>		Þ	950,345)		114,857
2 Total number of individuals (in \$100,000 of reportable comp	_					d abov	e) wl	ho received more th	nan			
											Yes	No
3 Did the organization list any f on line 1a? <i>If "Yes," complete</i> s					key •		yee, •	, or highest compen	sated employee	3		No
4 For any individual listed on lin organization and related organization and related organization.										4	Yes	<u> </u>
5 Did any person listed on line 3 services rendered to the orga									or individual for	5	. 55	No
Section B. Independent Co	ontractors					_						
1 Complete this table for your fi compensation from the organi											ax year	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
GREAT WESTERN CAMPUS DINING,	FOOD SERVICE	606,242
ROYALL COMPANY,	RECRUITING	380,455
RDG PLANNING DESIGN,	ARCHITECT SERVICES	174,925
MEDIA PARTNERS INC,	ADVERTISING	155,159
VILLAGE CHARTERS,	TRANSPORTATION	135,653
2. Total number of independent centractors (including but not limited to these listed above)	who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►7

Part V		Statement of	r Revenue :le O contains a respor	se or note to any lin	e in this Part VIII			
	1a	Federated camp		ise of flote 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
ats u								
irat nou	b	Membership due						
s, G	С		nts 1c	54,450				
Gifte	d	Related organiza	ations 1d	10,500				
E E	е	Government grants	(contributions) 1e	202,762				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributio similar amounts not	ns, gifts, grants, and 1f t included above	7,771,635	j	j		
를 물	g	Noncash contributio 1a-1f \$	ons included in lines	1,602,934				
Containe	h	Total. Add lines	1a-1f	🕍	8,039,347			
				Business Code				
auri (2a	TUITION & FEES		611600	32,257,250	32,257,250		
Program Service Revenue	ь	AUXILIARY ENTERP	RISES	611710	2,608,754	2,522,712	86,042	
- Se	С							
ė.	d							
S	e							
Ž Ta	f	All other progra	m service revenue					
ř	g	Total. Add lines	2a-2f	🕨	34,866,004			
	3	Investment inco	ome (including dividen	ds, interest,	300,203			300,203
	4		r amounts) tment of tax-exempt bond		0			300,203
	5		· · · · · ·	· · · · · ·	0			
		[(ı) Real	(II) Personal				
	6a	Gross rents	48,610					
	b	Less rental expenses	36,952					
	С	Rental income or (loss)	11,658	0				
	d		me or (loss)		11,658		11,658	
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	819,499					
	ь	than inventory Less cost or						
		other basis and sales expenses						
	С	Gain or (loss)	819,499					
	d	Net gain or (los	s)		819,499			819,499
Other Revenue	8a	Ψ	uding 450					
⊕ >		of contributions See Part IV, line	reported on line 1c)					
ř.		,	а	290,191				
i i	b		oenses b	138,179				
5	С		loss) from fundraising (I	events 🛌	152,012			152,012
	9a	Gross income fr See Part IV, line	om gaming activities e 19 a					
	b	Less direct exp	penses b					
	С	Net income or (ا loss) from gamıng actı	vities≱-	0			
	10a	Gross sales of i returns and allo						
	ь	Less cost of go	a oods sold b					
	С		loss) from sales of inve		0			
		Miscellaneous		Business Code	425.55	400.000		
	11a	INTEREST ON RECEIVABLES	STUDENT	900099	129,288	129,288		
	b	PARKING		900099	89,625	89,625		
	С	BAD DEBT REC	OVERIES	900099	68,832	68,832		
	d	All other revenu			202,707	197,707		5,000
	e	Total. Add lines	11a-11d	🕨	490,452			
	12	Total revenue.	See Instructions	🗚		25 265 441	07.75	4 376 74
		_		•	44,679,175	35,265,414	97,700	1,276,714 Form 990 (2013)

Form	990 (2013)				Page 10
Par	IX Statement of Functional Expenses				
Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns $$ All	other organizat	ons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	13,620,998	13,620,998		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,488,372	858,411	498,983	130,978
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	10,381,788	8,116,470	1,957,019	308,299
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	519,958	412,268	99,405	8,285
9	Other employee benefits	2,040,653	1,599,893	385,761	54,999
10	Payroll taxes	784,038	615,507	148,409	20,122
11	Fees for services (non-employees)	,	,	,	<u> </u>
а	Management	0			
b	Legal	740	596	144	<u> </u>
c	Accounting	70,967	57,180	13,787	_
d	Lobbying	70,307	37,100	15,707	
	Professional fundraising services See Part IV, line 17	0			
e	- · · · · · · · · · · · · · · · · · · ·			162 224	
f	Investment management fees	163,224		163,224	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,766,783	1,319,070	318,050	129,663
12	Advertising and promotion	409,462	318,105	52,301	39,056
13	Office expenses	1,295,505	973,949	234,836	86,720
14	Information technology	486,513	391,996	94,517	
15	Royalties	0	331,330	31,317	_
16	Occupancy	1,086,978	875,806	211,172	
17	Travel	877,923	631,023	152,150	94,750
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	031,023	132,130	74,730
19	Conferences, conventions, and meetings	0			
20	Interest	846,792	682,282	164,510	
21	Payments to affiliates	040,732	002,202	104,510	
22		1 647 606	1 227 501	320 105	
	Depreciation, depletion, and amortization	1,647,696	1,327,591	320,105	1 470
23 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)	153,532	122,520	29,542	1,470
а	BOOKS/RESOURCE MATERIALS	617,517	593,615	23,902	
b	BAD DEBTS	418,985	337,587	81,398	
c	MEMBERSHIPS	84,354	65,156	18,070	1,128
d			· · · · ·		<u> </u>
e	All other expenses	238,043	79,578	113,128	45,337
25	Total functional expenses. Add lines 1 through 24e	39,000,821	32,999,601	5,080,413	920,807
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

Ра	rt X	Check if Schedule O contains a response or note to any line in	thıs P	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			139,117	 	167,176
	2	Savings and temporary cash investments			1,020,090	2	5,141,738
	3	Pledges and grants receivable, net			3,512,188	\vdash	5,101,763
	4	Accounts receivable, net			996,363	4	1,115,638
	5	Loans and other receivables from current and former officers, cemployees, and highest compensated employees. Complete Paschedule L	lirecto art II	ors, trustees, key of		-	0
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contrı mploy	buting employers			0
8	7	Notes and loans receivable, net			0	 	
Ą	8	Inventories for sale or use			282.186	- -	328,007
	9	Prepaid expenses and deferred charges			105,559	⊢ •	250,503
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		56,018,968	,	9	250,500
	Ь	Less accumulated depreciation	10b	24,057,601	33,254,794	10c	31,961,367
	11	Investments—publicly traded securities		<u> </u>	16,195,772		19,296,114
	12	Investments—other securities See Part IV, line 11			4,850,917		3,600,796
	13	Investments—program-related See Part IV, line 11			212,829		232,289
	14	Intangible assets			0		0
	15	Other assets See Part IV, line 11			2,685,233		2,931,359
	16	Total assets. Add lines 1 through 15 (must equal line 34)		63,255,048		70,126,750	
	17	Accounts payable and accrued expenses	1,925,414		1,609,602		
	18	Grants payable			0	H	0
	19	Deferred revenue			1,288,646		1,540,733
	20	Tax-exempt bond liabilities			17.665.000		16,890,000
	21	Escrow or custodial account liability Complete Part IV of Scho			0		0
Liabilities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	ors, tr			21	
i Ģe		persons Complete Part II of Schedule L			0	22	0
	23	Secured mortgages and notes payable to unrelated third partie	s .		3,522,481	23	3,500,000
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X o	f Schedule	500.000		504.405
		D			506,630	\vdash	504,165
—	26	Total liabilities. Add lines 17 through 25			24,908,171	26	24,044,500
ည်		lines 27 through 29, and lines 33 and 34.					
<u>8</u>	27	Unrestricted net assets			11,844,580	\vdash	11,998,547
ă	28	Temporarily restricted net assets	•	• •	6,682,799	\vdash	14,135,784
Ē	29	Permanently restricted net assets			19,819,498	29	19,947,919
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check h complete lines 30 through 34.	ere ►	□ and			
ź	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Ą	32	Retained earnings, endowment, accumulated income, or other	funds			32	
Ř	33	Total net assets or fund balances	•		38,346,877	33	46,082,250
	34	Total liabilities and net assets/fund balances			63,255,048	34	70,126,750

				'	age ==
Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				্. ৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		44,6	579,175
2	Total expenses (must equal Part IX, column (A), line 25)	2			00,821
3	Revenue less expenses Subtract line 2 from line 1	3			578,354
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		38,3	346,877
5	Net unrealized gains (losses) on investments	5		2,0	57,059
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			-40
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		46,0	082,250
Par	t XII Financial Statements and Reporting	<u> </u>			
	Check if Schedule O contains a response or note to any line in this Part XII				. ┌
	<u> </u>			Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	arate			
	✓ Separate basis Consolidated basis ■ Both consolidated and 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?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: Software Version:

EIN: 48-0556716

Name: NEWMAN UNIVERSITY INC

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				ıru	ste	es, r	.ey	. Employees, nigi	lest	
(A) 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)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2,2033 11300)	2,2033 112007	related organizations
LINDA SNOOK	1 0	x		x				0	0	0
TRUSTEE/CHAIR ARCHIE MACIAS	25							0	0	0
TRUSTEE/VICE-CHAIR	1 0 25	х		Х				0	0	0
GERALD AARON	1 0	х						0	0	0
TRUSTEE SR ROSE THERESE BAHR	0 0									
TRUSTEE	0.0	х						0	0	0
TERESA HALL BARTLS	1 0	×						0	0	0
TRUSTEE MICHAEL BUKATY	0 0									
TRUSTEE	0 0	Х						0	0	0
JOHN CLEVENGER	1 0	х						0	0	0
TRUSTEE SR DENISE ANN CLIFFORD	0 0									
TRUSTEE	0 0	Х						0	0	0
REVEREND FRANK COADY	1 0	х						0	0	0
TRUSTEE KENNETH DOONAN	0 0	<u> </u>						_		
TRUSTEE	0 0	Х						0	0	0
TAD DRUART TRUSTEE	1 0	х						0	0	О
GLENN DUGAN	1 0	X						0	0	0
TRUSTEE BART A GRELINGER	0.0							0	0	0
TRUSTEE	1 0	х						0	0	0
MONSIGNOR ROBERT HEMBERGER	1 0	×						0	0	0
TRUSTEE GERRY KILLEEN	25 1 0							, v		
TRUSTEE	0 0	x						0	0	О
JT KLAUS	1 0	x						0	0	0
TRUSTEE PATRICIA KOEHLER	0 0									
TRUSTEE	0.0	х						0	0	0
JEFF KORSMO	1 0	х						0	0	0
TRUSTEE TONY MADRIGAL	0 0									
TRUSTEE	0 0	Х						0	0	0
SR JANET MCCANN	1 0	х						0	0	0
TRUSTEE SR JAN RENZ	0 0									
TRUSTEE	40 25	Х						0	0	0
VERA ROBL	1 0	х						0	0	0
TRUSTEE SR GABRIELLE ROWE	0 0	 						_	_	
TRUSTEE	0 0	X						0	0	0
LARRY SCHUMACHER TRUSTEE	10	x						0	0	o
ROBERT SIMPSON	0 0								0	
TRUSTEE	25	Х						0		0

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

Compensated Employees, and Inde					J.C.		,	inproject, mg.		
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	Posit more the perso a Individual trustee or director	ion (e nan o n is b	ne bo oth a ctor/	ox, u an of trus	ınless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
			8			왕				
JACKIE VIETTI	1 0	х						0	0	0
TRUSTEE	0 0	_ ^						Ų į	Ů	
ELAINE VITELLO	1 0	×						0	0	0
TRUSTEE	0 0									
REVEREND THOMAS A WELK	1 0	x						0	0	0
TRUSTEE	0 0									
STEPHEN WILLIAMSON	10	х						0	0	0
TRUSTEE NOREEN CARROCCI	0 0									
PRESIDENT/TRUSTEE	40 0	х		х				262,100	0	15,532
JENNIFER GANTZ	5 40 0									
VP FOR FIN & ADMIN	5			Х				56,875		3,510
TRACY MCGAREY	40 0			х				36,465		10,351
EXECUTIVE SECRETARY	5							,		,
MICHAEL AUSTIN	40 0			х				92,492		17,996
VP FOR ACAD & STU AFF/PROVOST	5									
JOHN CLAYTON	40 0			х				92,080		13,266
DEAN OF ADMISSIONS TROY HORINE	0 0		-							
VP FOR INST ADVANCEMENT	40 0			х				109,656		12,431
RHONDA CANTRELL	40 0									
VP FOR HUMAN RESOURCES	0 0			х				91,260		12,724
VICTOR TRILLI	40 0			х				99,441		15,907
DIRECTOR OF ATHLETICS	0.0			^				99,441		15,507
MARK BARRETT	40 0			х				0	0	0
VP OF ENROLLMENT MANAGEMENT	0 0							,		
JEROME JOHNSTON	40 0			х				0	0	0
VP FOR INST ADVANCEMENT	0 0				ļ					
SHARON NIEMANN	40 0					×		109,976		13,140
DIRECTOR OF CRNA PROGRAM	0 0							105,570		13,140

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493133001335

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.

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

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

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

2013

Open to Public Inspection

Name	of	the	orga	nization	
NEWMA	N L	JNIVE	RSIT	/ INC	

Employer identification number

48-0556716

1	Γ	A churc	ch, conventi	on of churches, or a	ssociation of	fchurches d	escribed in s	ection 170((b)(1)(A)(i).				
2	굣	A scho	ol described	d in section 170(b)(1	.)(A)(ii). (At	tach Sched	ule E)						
3	\sqcap	A hosp	ıtal or a coo	perative hospital se	rvice organiz	zatıon descr	ıbed ın sectio	n 170(b)(1	.)(A)(iii).				
4	Γ			h organization operat ity, and state	ted in conjun	ction with a	hospital des	cribed in se	ection 170(b)(1)(A)(i	iii). Ente	r the	
5	Γ			erated for the benefi	t of a college	or universi	ty owned or o	perated by	a governmen	tal unıt	describe	ed in	_
		sect ion	170(b)(1)((A)(iv). (Complete P	art II)								
6	Γ	A feder	al, state, or	local government or	government	tal unit desc	rıbed ın secti	on 170(b)(1)(A)(v).				
7	Γ			at normally receives on 170(b)(1)(A)(vi).			support from	a governm	ental unit or f	rom the	general	public	;
8	Γ			described in section			nplete Part II	[)					
9	\sqcap	An orga	anization tha	at normally receives	(1) more th	an 331/3% d	of its support	from contri	butions, mem	bership	fees, ar	nd gros	s
		receipt	s from activ	ities related to its ex	xempt function	ons—subjec	t to certaın e	xceptions,	and (2) no mo	re than	3 3 1/3%	of	
		its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses											
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)											
10	Γ	An orga	An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
e f g	Γ	By checother the section of the other the section of the control o	that description Type I cking this became foundation to the second state of the second state of the second	ly supported organize the type of supported by Type II continuous, I certify that the son managers and other ceceived a written deceived a written	orting organ Type II organization her than one etermination zation accep controls, eith le supported bed in (i) abo	ization and of I - Function is not conting or more publication the IR oted any gift organization ove?	complete line ally integrate rolled directly blicly support S that it is a or contributitogether with n?	s 11e thro d d	ugh 11h Type III - No tly by one or r ations describ be II, or Type y of the	on-func nore dis ed in se III sup	tionally squalifie ection 50	ntegrad person () () () () () () () () () () () () ()	ated ons 1) or
L		• •		ng information about							119()		
h		Provide	the following	ng miormation about	the supporte	eu organizat	1011(5)						
	suppo	Name of pported anization (ii) EIN (iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions)) (iii) EIN (iii) Type of organization (iv) Is the organization (number of anization) (vi) Is the organization (number of anization) (vii) Is the organization (number of anization) (viii) Amount of anization (number of anization) (viii) Amount of anizat										etary	
				instructions))	Yes	No	Yes	No	Yes	No			
Гotа	<u> </u>												
_													

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ □
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 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	Total. 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) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(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) 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) 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) 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) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 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) 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) 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) 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) 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) 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) 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) 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) 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 second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

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

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

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

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493133001335

OMB No 1545-0047

SCHEDULE D Supplemental Financial Statements

(Form 990)

Department of the Treasury

► 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

ema	Revenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .			Inspect	tion
	me of the organi			Empl	loyer ident if ica	tion numbe	er
INEV	WMAN UNIVERSITY I	INC.		48-0	556716		
Pa		izations Maintaining Donor Adv		unds o	or Accounts	. Complet	te if the
	organiz	zation answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised funds	1 .	(h) Eunda and a	thorocou	ınto
	Total number a	t and of year	(a) Donor advised lunds	 '	(b) Funds and o	other accou	ints
		tributions to (during year)					
	33 3	nts from (during year)					
		e at end of year					
	Did the organiz	ration inform all donors and donor adviso rganization's property, subject to the or		or advi	sed	┌ Yes	┌ No
	used only for c conferring impe	ration inform all grantees, donors, and do haritable purposes and not for the benef ermissible private benefit?	it of the donor or donor advisor, or for ar	ny othe	r purpose	┌ Yes	┌ No
_		rvation Easements. Complete if		o Forti	1 990, Part IV	, ime 7.	
	Preservation Protection Preservation Complete lines	conservation easements held by the organ of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a he last day of the tax year	or education) Preservation of an Preservation of a c	certified	d historic struct	ture	
	easement on th	ne last day of the tax year	1		Held at the	End of the	Year
	Total number o	of conservation easements		2a			
	Total acreage	restricted by conservation easements		2b			
	Number of con:	servation easements on a certified histo	ric structure included in (a)	2c			
		servation easements included in (c) acq ure listed in the National Register	uired after 8/17/06, and not on a	2d			
	Number of cons	servation easements modified, transferr	ed, released, extinguished, or terminate	d by th	e organization (durıng	
	the tax year 🛌						
	Number of stat	es where property subject to conservati	on easement is located 🛌				
		nization have a written policy regarding t f the conservation easements it holds?	he periodic monitoring, inspection, hand	dling of	violations, and	┌ Yes	┌ No
	Staff and volun ►	teer hours devoted to monitoring, inspec	cting, and enforcing conservation easen	nents d	uring the year		
	A mount of expo	enses incurred in monitoring, inspecting	, and enforcing conservation easements	s during	the year		
	'	uservation easement reported on line 2(c 'O(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 17	0(h)(4)(B)(ı)	┌ Yes	┌ No
	balance sheet,	escribe how the organization reports cor and include, if applicable, the text of the in's accounting for conservation easeme	e footnote to the organization's financial		•		
Ğ		izations Maintaining Collection etc. If the organization answered "Y		or Oth	ner Similar <i>i</i>	Assets.	
	works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or rese	arch in furthera		
,	works of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse le the following amounts relating to these	ts held for public exhibition, education,				IC
	(i) Revenues I	ncluded in Form 990, Part VIII, line 1			- \$		
	(ii) Assets incl	luded in Form 990, Part X			► \$		
	If the organizat	tion received or held works of art, histori nts required to be reported under SFAS		or financ			
	Revenues inclu	uded in Form 990, Part VIII, line 1			- \$		

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	<u> Ilections of Art, </u>	His	tori	<u>cal Tı</u>	reasu	<u>res, or Ot</u>	her	Similar As	sets (c	ontınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	s, ch	neck a	any of	the foll	owing that a	re a s	ignificant use	of its	
a	Public exhibition		d	Γ	Loan	or excl	hange progra	ams			
b	Scholarly research		e	Γ	Othe	r					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n hov	w the	y furthe	er the o	organization'	s exe	mpt purpose	n	
5	During the year, did the organization solicit o									_	_
Do	assets to be sold to raise funds rather than t									Yes	✓ No
Pali	TEXT Escrow and Custodial Arrang Part IV, line 9, or reported an an						i answered	re	s" to Form s	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermed	diary	for c	ontribi	utions d	or other asse	ets no		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the f	ollov	ving t	able						
									An	nount	
C	Beginning balance						<u> </u>	1c			
d	Additions during the year						<u> </u>	1d			
е	Distributions during the year						<u> </u>	1e			
f	Ending balance						_ :	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?							│ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has	been p	rovided in P	art XI	III		Γ
Pa	rt V Endowment Funds. Complete		ans	were	ed "Ye						
		(a)Current year	(b)	Prior y				(d) Th	ree years back		rears back
1a	Beginning of year balance	18,110,326		16,6	644,220		18,044,004		15,913,854		14,393,930
Ь	Contributions	92,633			79,430		133,250		206,310		199,368
С	Net investment earnings, gains, and losses	2,792,891		2,:	398,888		-569,902		2,933,371		2,416,284
d	Grants or scholarships	254,569			306,312		275,358		299,365		415,670
е	Other expenditures for facilities and programs	561,643			559,413		533,510		559,541		530,806
f	Administrative expenses	163,244			146,487		154,264		150,625		149,252
g	End of year balance	20,016,394		18,	110,326		16,644,220		18,044,004		15,913,854
2	Provide the estimated percentage of the cur	rent year end balance	e (lın	e 1g	, colum	nn (a)) l	neld as				
а	Board designated or quasi-endowment ►	6 396 %									
b	Permanent endowment ► 93 603 %										
c	Temporarily restricted endowment F The percentages in lines 2a, 2b, and 2c sho) % uld equal 100%									
За	Are there endowment funds not in the posses	ssion of the organiza	tion '	that a	are hel	d and a	dministered	for th	ne		
	organization by									Yes	No
	(i) unrelated organizations			•				•	3a(
ь	If "Yes" to 3a(II), are the related organization							• •	<u> 34(</u> 31		+
4	Describe in Part XIII the intended uses of the	•						-		1	
Par	t VI Land, Buildings, and Equipme		ne o	rgan	ızatıo	n ansv	vered 'Yes'	to F	orm 990, Pa	rt IV, I	ine
	11a. See Form 990, Part X, line : Description of property	10.			Cost or s (invest		(b)Cost or other		(c) Accumulated depreciation	(d) Bo	ook value
	Land						522,	409		+	522,409
	Buildings						44,682,		16,680,11	5	28,002,775
	Leasehold improvements						11,002,0		10,000,11	- '	
	Equipment						5,715,	238	4,697,56	9	1,017,669
	0 th a :-						5,098,		2,679,91		2,418,514
	I. Add lines 1a through 1e <i>(Column (d) must e</i>		colu	ımn (ı	B), line	10(c).)				+	31,961,367
	- , , , ,	, ,		•		. , ,			Schedule [

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
(3)Other	2.600.706	_
(A) PRIVATE EQUITY INVESTMENTS	3,600,796	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	> 3,600,796	
Part VIII Investments—Program Related. C	<u> </u>	answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	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	on answered 'Ves' to Form 990	, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc		(b) Book value
		+
Tabel (Column (b)tt 5 200 2	1 <i>E</i>)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the org		► Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.		
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
FEDERAL STUDENT LOAN FUNDS ANNUITIES PAYABLE	263,864	
ASSET RETIREMENT OBLIGATIONS	3,086	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	▶ 504,165	
, , ,	- 1 304,105	

	= (, -, , ,		rage
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	er Re	eturn Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	33,151,543
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 2b 24,400		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	-11,539,539
3	Subtract line 2e from line 1	3	44,691,082
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 163,224		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	-11,907
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	44,679,175
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Total expenses and losses per audited financial statements	1	25,416,170
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	199,57
3	Subtract line 2e from line 1	3	25,216,599
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 163,224		
b	Other (Describe in Part XIII)	1	

Part XIII Supplemental Information

Add lines **4a** and **4b** . . .

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) .

Return Reference	Explanation
SCHEDULE D, PART III, LINE 1A	COLLECTIONS OF WORKS OF ART, HISTORICAL TREASURES AND SIMILAR ASSETS ARE NOT CAPITALIZED IN AS MUCH AS THE ITEMS ARE PRESERVED AND CARED FOR CONTINUOUSLY CONTRIBUTIONS OF COLLECTION ITEMS ARE NOT REPORTED IN THE FINANCIAL STATEMENTS PROCEEDS FROM DISPOSAL OF AND INSURANCE RECOVERIES RELATED TO COLLECTION ITEMS ARE REPORTED AS INCREASES IN THE APPROPRIATE NET ASSET CLASSES THE UNIVERSITY'S COLLECTIONS CONSIST OF APPROXIMATELY 50 SMALL SCULPTURES AND VARIOUS PAINTINGS THEY ARE SUBJECT TO A POLICY THAT REQUIRES PROCEEDS FROM THE DISPOSITION OF COLLECTION ITEMS TO BE USED TO ACQUIRE OTHER COLLECTION ITEMS NO COLLECTION ITEMS WERE SOLD OR REMOVED IN THE YEAR ENDED JUNE 30, 2014
SCHEDULE D, PART III, LINE 4	THE UNIVERSITY'S COLLECTIONS CONSIST OF APPROXIMATELY 50 SMALL SCULPTURES AND VARIOUS PAINTINGS THE ART COLLECTIONS ENHANCE THE ART AND RELIGIOUS PROGRAMS OF THE UNIVERSITY
SCHEDULE D, PART V, LINE 4	THE INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS IS TO UNDERWRITE SCHOLARSHIPS AND EDUCATIONAL ACTIVITIES
SCHEDULE D, PART X, LINE 2	MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740 BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS
SCHEDULE D, PART XI, LINE 2D	SCHOLARSHIPS (13,620,998)
SCHEDULE D, PART XI, LINE 4B	RENTAL EXPENSES (36,952) SPECIAL EVENT EXPENSES (138,179) (175,131)
SCHEDULE D, PART XII, LINE 2D	RENTAL EXPENSES 36,952 SPECIAL EVENT EXPENSES 138,179 RELATED ORG EXPENSE 40 175,171

4c

13,784,222

39,000,821

, ,							
Part XIII Supplemental Information (continued)							
Return Reference	Explanation						
SCHEDULE D, PART XII, LINE 4B	SCHOLARSHIPS 13,620,998						

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493133001335

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 NEWMAN UNIVERSITY INC

Employer identification number

	48-0556/16			
Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4	Does the organization maintain the following?	٦,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
•	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
e	Educational policies?	5e		No
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Part Prog. 75, 50, 1075, 2, 6, 8, 5, 7, sources, regard pendicary manufactures 2 If "No." explain on Part II.			
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No." explain on Part II	17	Ινος	1

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

Return Reference	Explanation		
SCHEDULE E, LINE 3	THE UNIVERSITY'S RACIALLY NONDISCRIMINATORY POLICY IS INCORPORATED INTO THE COURSE CATALOG, REGISTRATION SCHEDULES STUDENT HANDBOOKS, NEWSPAPER ADS AND WRAPS AND THE UNIVERSITY'S WEBSITE		
SCHEDULE E, LINE 6A	PELL GRANT MONIES RECEIVED FROM THE FEDERAL GOVERNMENT FOR PAY MENT TO ELIGIBLE STUDENTS ARE ACCOUNTED FOR AS AGENCY TRANSACTIONS RATHER THAN BEING REPORTED AS REVENUE AND EXPENSE DURING THE CURRENT YEAR, THE UNIVERSITY PROCESSED NEW FEDERAL DIRECT LOANS (WHICH INCLUDES STAFFORD LOANS, PARENTS' LOANS FOR UNDERGRADUATE STUDENTS, AND GRADUATE PLUS LOANS), FEDERAL PERKINS LOANS, FEDERAL PELL GRANTS, FEDERAL SUPPLEMENTAL EDUCATION OPPORTUNITY GRANTS, FEDERAL WORKSTUDY PROGRAM, AND TEACHER EDUCATION ASSISTANCE FOR COLLEGE AND HIGHER EDUCATION GRANT		

Schedule E (Form 990 or 990-EZ) 2013

DLN: 93493133001335

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

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

Open to Public Inspection

ame of the organization					Emplo	yer identification number
EWMAN UNIVERSITY INC					48-0	556716
Part I Fundraising Act Form 990-EZ filers				on answered "Yes" on part.	to Form 990,	Part IV, line 17.
Indicate whether the organ	ızatıon raısed funds	through a	ny of the 1	ollowing activities Che	eck all that app	ly
a Mail solicitations			e	Solicitation of nor	-government g	rants
b Internet and email soli	citations		f	☐ Solicitation of gov	ernment grants	5
c Phone solicitations			q	Special fundraisin		
d In-person solicitations			3	,,	3	
2a Did the organization have a or key employees listed in						
b If "Yes," list the ten highes to be compensated at least			fundraise	rs) pursuant to agreem	ents under whic	th the fundraiser is
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrai cust cont	Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(v) A mount p (or retained fundraiser lis col (i)	d by) (or retained by) sted in organization
1		Yes	No			
•						
2						
3						
3						
4						
5						
5						
6						
7						
8						
9						
10						
otal			>			
3 List all states in which the registration or licensing	organization is regis	tered or lı	censed to	solicit contributions o	r has been notr	fied it is exempt from

		G (Form 990 or 990-EZ) 2013				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		<u> </u>	(a) Event #1 PARTY/PLAZA	(b) Event #2 JET OPEN	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	(-),
E.E.	1	Gross receipts	147,578	116,896	80,167	344,641
Revenue	2	Less Contributions	29,250	25,200	0	54,450
~	3	Gross income (line 1 minus line 2)	118,328	91,696	80,167	290,191
	4	Cash prizes	(0
	5	Noncash prizes	2,900	1,000	0	3,900
Expenses	6	Rent/facility costs	2,441	. 16,359	6,779	25,579
ă	7	Food and beverages .	14,945	4,159	934	20,038
Drea	8	Entertainment	1,147	, 0	1,548	2,695
ā	9	Other direct expenses .	35,838	18,163	31,966	85,967
	10	Direct expense summary Add lir	nes 4 through 9 ın column	(d)		(138,179)
	11 Net income summary Subtract line 10 from line 3, column (d)					
Revenue		Gaming. Complete if the o \$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
မှ မွ	2	Cash prizes				
sesuedy	3	Non-cash prizes				
ш	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteerlabor	│ Yes %	┌ Yes%	│ Yes % \(\bar{\chi} \) No	
	7	Direct expense summary Add line	s 2 through 5 in column (d)	•	
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)	🛌	
9 a b	Is	ter the state(s) in which the organiz the organization licensed to operate 'No," explain	e gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming	licenses revoked, susper	nded or terminated during		

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name ▶					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	T Employee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	∕ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u>I</u>	<u> </u>		rm 990 or 990-	7) 2012

DLN: 93493133001335

OMB No 1545-0047

Schedule I (Form 990)

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

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

Open to Public **Inspection**

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

Employer identification number

NEWMAN UNIVERSITY INC	48-0556716	48-0556716					
Part I General Information	on on Grants and	l Assistance					
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization 	ward the grants or as: ation's procedures fo	sistance? r monitoring the use o	f grant funds in the Unite	ed States			✓ Yes
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran
2 Enter total number of section 5							
3 Enter total number of other orga						. <u>-</u>	

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHPS	1209	13,620,998		NONE	NONE
Part IV Supplemental Informa	tion. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any othe	r addıtıonal ınformatıon.

Return Reference Explanation

Explanation

Explanation

Explanation

Explanation

SCHEDULE I, PART I, LINE 2 ALL GRANTS ARE INSTITUTIONAL FINANCIAL AID AND APPLIED DIRECTLY TO THE STUDENT'S ACCOUNT BY THE UNIVERSITY

Schedule I (Form 990) 2013

DLN: 93493133001335

OMB No 1545-0047

(Form 990)

Department of the Treasury

Internal Revenue Service

Schedule J

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 NEWMAN UNIVERSITY INC

Employer identification number

48-0556716

Pa	rt I Questions Regarding Compensatio	n	·			
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II.					
	First-class or charter travel	<u> </u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u> </u>	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 or reimbursement or provision of all of the expenses de			1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?					
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compens	hat apply				
	▼ Compensation committee	ᅜ	Written employment contract			
		<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			
а	Receive a severance payment or change-of-control	paymen	t?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
С	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only me	ust comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	, line 1a	, did the organization pay or accrue any			
а	The organization?			 5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A 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 in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow th section 53 $4958-6(c)$?	e 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 of	W-2 and/or 1099-MIS	SC compensation (iii) Other	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation reported as deferred
		compensation	incentive compensation	reportable compensation	compensation		(B)(ı)-(D)	ın prıor Form 990
(1)NOREEN CARROCCI PRESIDENT/TRUSTEE	(i) (ii)	179,296 0	0	82,804 0	6,468 0	9,064 0	277,632 0	25,000 0

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 complete the part for any additional mornington									
Return Reference	Explanation								
	RESIDENCE FOR PERSONAL USE - NEWMAN UNIVERSITY PROVIDES HOUSING TO NOREEN CARROCCI AND DID INCLUDE THE FAIR MARKET VALUE OF THE HOUSING IN HER W-2 SOCIAL CLUB DUES - NEWMAN UNIVERSITY PROVIDED SOCIAL CLUB DUES TO NOREEN CARROCCI AND DID INCLUDE THE FAIR MARKET VALUE OF THE SOCIAL CLUB DUES IN HER W-2								
SCHEDULE J, PART I, LINE 4B	NOREEN CARROCCI PARTICIPATED IN A 457(F) PLAN - \$10,000								

Schedule J (Form 990) 2013

DLN: 93493133001335

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 NEWMAN UNIVERSITY INC **Employer identification number**

NEW	NEWMAN UNIVERSITY INC										48-0556716				
Pa	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	((f) Descriptio	on of purpose	(g)	Defeased	beh	On alf of suer		Pool ancing
						'	<u> </u>			Yes	s No	Yes	No	Yes	No
A	KANSAS INDEPENDENT COLLEGE FINANCE AUTHORITY	48-1233911	048526HN4	10-28-2006	8,00			EDUC FACILITIES REVENUE BOND			X		x		X
В	KANSAS INDEPENENT COLLEGE FINANCE AUTHORITY	48-1233911	048526HVR	03-15-2011	11,18			EDUC FAC REFUNDING & IMPROVEMENT			х		х		х
Pa	rt III Proceeds														
						A		E P	В		С		D		
1		mount of bonds retired					0	<u> </u>	0						
2	A mount of bonds legally defeas			0				\longrightarrow							
3	Total proceeds of issue		8,000,000 11,185,000												
4	Gross proceeds in reserve fund	450,000 500,000													
_5	Capitalized interest from proce		0 0												
6	Proceeds in refunding escrows			0 7,185,946											
7	Issuance costs from proceeds					174,	,100		210,054						
8	Credit enhancement from proce						0		0						
9	Working capital expenditures fr	rom proceeds					0		0						
10	Capital expenditures from proc	eeds				7,375,	,900 713,660								
11	Other spent proceeds						0	0 2,575,340							
12	O ther unspent proceeds					0 0									
13	Year of substantial completion				20	2007 2011									
					Yes	No)	Yes	No	Yes		No	Yes		No
14	Were the bonds issued as part	of a current refundir	ng issue?		'	×		X							
15	Were the bonds issued as part	of an advance refur	ıdıng ıssue?			Х			Х						
16	Has the final allocation of proce	eeds been made?		,	Х			х							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?							Х							
Par	TTTT Private Business Us	se													
l						A		 	В		С			D	
	N			Ct. = b assumed	Yes	No	\Box	Yes	No	Yes		No	Yes	+	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned					x			l x						

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

property financed by tax-exempt bonds?

financed property?

Х

Part III Private Business Use (Continued)

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

Part IV Arbitrage

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

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?

Par	t IV Arbitrage (Continued)								
		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		Х				
b	Name of provider	0		0					
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		x		х				
7	Has the organization established written procedures to monitor the requirements of section 148?		×		х				
Pa	rt V Procedures To Undertake Corrective Action								,
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure								

Χ

Χ

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

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

DLN: 93493133001335

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

NEWMAN UNIVERS	SITY INC								4	48-05	5671	6			
) and section			organi	ızatıoı	ns on	ly).			
						O, Part IV, line	2.								
1 (a) Nam	e of disqual	ified	person (ship between n and organiz	disqualified		(c) Desc	cription	of tra	nsact	ion	<u> </u>		ected?
				- PC1301	Tana organiz		├						Yes	<u> </u>	No
													+		
							_						_		
							\vdash						+		
	amount of ta	x inc	curred by or	ganızatıon n	nanagers or o	disqualified pe	rso	ons during t	he yea	r unde	rsect	ion			
4958		•									- 9	\$ 			
3 Enterthe	amount of ta	x, if	any, on line	2, above, re	eimbursed by	the organizat	ıor	1				\$			
Part II Lo	ans to ar	nd/o	or From I	ntereste	d Persons										
Со	mplete if the	e org	anızatıon ar	nswered "Ye	s" on Form 9	990-EZ, Part V		ıne 38a, or	Form 9	90, P	art IV	, line 26	6, or ıf	the	
		port				line 5, 6, or 22		(5) 5 1	l		1		Τ,		
(a) Name of interested	(b) Relations	hın	(c) Purpose of	(d) Loan to or from the		(e)Original principal	((f) Balance due	(g) In		(h)	oved		i)Wri ireem	
person	with		loan	organizatio		amount		uuc			by	ovcu	٦	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Terre
	organızat	ıon									boar	d			
											com	mittee?			
				То	From	1			Yes	No	Yes			es/	No
															•
T - t - 1			<u> </u>						<u> </u>		1				
Total Part IIII Gra	A	:-	▶ \$	fillin-	Todovosto	d Dovesta									
						d Persons. Form 990, P	ar	t IV. line 2	7.						
(a) Name of I		_) Relationsh		1	nt of assistanc		(d) Type		sistano	ce l	(e) Pur	pose o	fass	ıstance
perso			erested per	son and the								. ,	•		
			organiza		-										
(1) DISCLOSUF REQUIRED	RENOT	1	CLOSURE I QUIRED	TON		12,73	34	MERIT SC	HOLAF	RSHIP	F	INANC	CIALA	ID	
(2) DISCLOSUR	RENOT	_	CLOSURE	VOT		12 73	34	MERIT SC	HOLAF	RSHIP		INANC	TAL A	.ID	
REQUIRED		1	UIRED			± <i>L</i> , / ~									
(3) DISCLOSUF	RENOT	DIS	CLOSURE	TOV		8,52	26	TUITION	WAIVE	R		INANC		ID/E	ΜP
REQUIRED		REC	UIRED								E	BENEFI	Т		
					1			-							
					+			-							
		1			1										

Complete if the organizat			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) Sh of organiz reven	f zatıon's
				Yes	No
(1) COMMERCE BANK	SEE PART V	122,352	BANK FEES AND INTEREST		Νo

Part V Supplemental Information

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

Return Reference	Explanation
SCHEDULE L, PART IV, LINE 1,	JOHN CLEVENGER IS A NEWMAN UNIVERSITY BOARD MEMBER AND PRESIDENT OF
COLUMN B	COMMERCE BANK

Schedule L (Form 990 or 990-EZ) 2013

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

DLN: 93493133001335

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury

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	Þ
Name of the organiza NEWMAN UNIVERSITY INC	

Employer identification number

Pai	It I Types of Property							
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermı		ts
1	Art—Works of art			19				
	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Χ	3	1,602,934	MARKET QUOTAT	ION		
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	O ther ► ()							
	O ther ►()							
	O ther ▶()							
	O ther ► ()				<u> </u>			
	Number of Forms 8283 received for which the organization comple				29		Yes	0 No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	arty reported in Part I lines	1 through 28 that		165	140
J 0u	it must hold for at least three ye							
	for exempt purposes for the enti				red to be used	20-		No
L						30a		No_
31	If "Yes," describe the arrangement of the organization have a gif			review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us	·		•				
JEU	contributions?	· · ·	· · · · · · · · ·			32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	an amount	ın column (c) for a type of	property for which column (a) is checked,			

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

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

Return Reference	Explanation
SCHEDULE M, PART I, COLUMN B	THE NUMBER REPORTED IN PART I, COLUMN B IS THE NUMBER OF CONTRIBUTIONS

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493133001335

SCHEDULE 0 (Form 990 or 990-EZ)

Name of the organization NEWMAN UNIVERSITY INC

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 2013 Open to Public

Inspection

www.irs.gov/form990. Employer identification number

48-0556716

Return Reference	Explanation	
Reference	FORM 990, PART I, LINE 1	REWMAN LINIVERSITY IS A CATHOLIC UNIVERSITY NAMED FOR JOHN HENRY CARDINAL NEWMAN AND POUNDED BY THE ADDRESS OF THE BLOOD OF CHRIST FOR THE PURPOSE OF EMPOWERING GRADUATES TO TRANSFORM SOCIETY FORM 990, PART III, LINE 1 WEARE A CATHOLIC LINIVERSITY NAMED FOR JOHN HENRY CARDINAL NEWMAN AND FOUNDED BY THE ADDRESS OF THE BLOOD OF CHRIST FOR THE PURPOSE OF EMPOWERING GRADUATES TO TRANSFORM SOCIETY OUR CORE VALUES NEWMAN LINIVERSITY'S MISSION STATEMENT IS GROUNDED IN THE FOOLLOWING CORE VALUES CATHOLIC DIDBITITY ("WEAREA CATHOLIC LINIVERSITY") AS A CATHOLIC INSTITUTION OF HIGHER LEARNING, NEWMAN FINDS GUIDANCE IN EX CORCE EXCL. SINE AND OTHER TEACHNSO OF THE CATHOLIC CHURCH AND DRAWN SOURSE-MERA CATHOLIC UNIVERSITY Y) AS A CATHOLIC INSTITUTION OF HIGHER LEARNING, NEWMAN FINDS GUIDANCE IN EX CORCE EXCL. SINE AND OTHER TEACHNSO OF THE CATHOLIC CHURCH AND DRAWN SOURSE-MERA CATHOLIC CHURCH AND THAN SOURSE-MERA CATHOLIC CHURCH AND THE ADD OTHER TEACHNSO OF THE CATHOLIC CHURCH AND THE ADD OTHER TEACHNSO OF THE CATHOLIC CHURCH AND THE ADD CRESS OF THE BLOOD OF CHRIST, AND OF CUR NAMES AND DIOCESES AT THE SAME TIME OUR CATHOLIC CHURCH SAND SPONSORS, THE ADD OR FOR FOR THE BLOOD OF CHRIST, AND OF CUR NAMES AND EXCLOSION AND EDUCATOR JOHN ENDRY CARDINAL NEWMAN FROM THE ADDRESS. WE RECEIVE OUR SPECIAL MISSION OF DEVELOPING AND EMPOWERING OUR GRADUATES TO WORK FOR THE THERMOTH OF SOCIETY-A MISSION INSPRED BY THE ADDRESS OWN FOUNDER, SANT MARIA DEMATTING THAT AND TO LEAD A MEANINGFUL AND PURPOSEFUL LEE FINALLY, WITH A STRONG LIBERAL ARTS OUR SITE OF THE LINIVERSITY AS AN INSTITUTION THAT THE DUCATES THE WHOLE PRESON TO SEEK THE TRUTH AND TO LEAD A MEANINGFUL AND PURPOSEFUL LEE FINALLY, WITH A STRONG LIBERAL ARTS STRENST THE RICHERS AND VITALITY OF OUR CATHOLIC INTELLECTUAL HERITAGE WHILE AFFIRMING THE VALUE OF DIALOGUE MYOLVING FERSIONS OF OUR CATHOLIC INTELLECTUAL HORSE AND THE ADDRESS OF THE

Return Reference	Explanation	
	FORM 990, PART I, LINE 1	SONAL AND INSTITUTIONAL INTEGRITY, AND STRIVING TO EMBRACE ALL HUMANITY TO LIVE IN THE THE SPRIT OF CRITICAL CONSCIOUSNESS NEWMAN UNIVERSITY IS AN EDUCATIONAL COMMUNITY ROOTED IN JUDEO-CHRISTIAN PRINCIPLES THAT CHALLENGES ALL WHO JOIN IT TO ACCEPT THE RESPONSIBILITY O F FORMING A CRITICAL CONSCOUSNESS THIS MEANS MORE THAN JUST LEARNING TO PERCEIVE INJUSTIC E, IT ALSO MEANS DEVELOPING THE WILLINGNESS AND SKILLS TO TAKE ACTION AGAINST IT THROUGH THE POWER OF REASON AND AN EMBRACE OF THE GOSPEL CALL TO LOVE OUR NEIGHBOR AS OUR SELVES, WE STRIVE TO CREATE A MORE JUST AND PEACEFUL WORLD THE NEWMAN CODE EXPRESSES OUR COMMITMEN TO BYSAGSING THE WHOLE PERSON IN THE EFORT TO TRANSFORM SOCIETY TO RESPECT DIGNITY UNDER STANDING THAT DIVERSE PERSPECTIVES ARE INTEGRAL TO A LEARNING ENVIRONMENT, WE VALUE THE IN SIGHTS OF EVERY MEMBER OF THE NEWMAN COMMUNITY WHEN DIFFERENCES OF OPINION AND BELIEF ARISE, WE PUT ASIDE PERSONAL PREJUDICES AND LISTEN CAREFULLY WITH OPEN MINDS WE RESPOND CALM LY, THOUGHTFULLY, AND WITH CONSIDERATION FOR OPPOSING VIEWS AT ALL TIMES WE TREAT OTHERS WITH THE SAME RESPECT TO WHICH WE ARE ENTITLED WE UPHOLD, AND WHEN NECESSARY DEFEND, THE INHERENT DIGNITY AND THE FUNDAMENTAL RIGHTS OF ALL INVIDUALS MINDFUL OF EVERY ONES NEED FOR CONDITIONS THAT SUPPORT THEIR WORK AND DEVELOPMENT, WE RESPECT BOTH PUBLIC AND PRIVATE E PROPERTY AND WORK TO PROMOTE A SAFE AND COOPERATIVE LEARNING BIN/RONMENT TO HONOR INTEGRITY, WE COMMIT OUR SELVES TO BEING HONEST AND FONETS RUE TO OUR WORD, EVEN IN THE FACE OF TEMPTATION OR PERSECUTION, HAS A VALUE BEYOND MEASURE BY PLEDGING TO HONOR OUR PERSONAL INTEGRITY, WE COMMIT OUR SELVES TO BEING HONEST AND FONETS ROLD FOR WORD, EVEN IN THE FACE OF TEMPTATION OR PERSECUTION, HAS A VALUE BEYOND MEASURE BY PLEDGING TO HONOR OUR PERSONAL INTEGRITY, WE COMMIT OUR SELVES TO BEING HONEST AND FONETS ROLD FOR EXPONAL AND ACADEMIC MATTERS, WE ABIDE BY THE RELEVANT POLICIES AND CODES OF NEWMAN UNIVERSITY TO EMBRACE ALL HUMANITY EMBRACING HUMANITY DEARNING THE DROSS NEED FON THE PROVIDE REAL

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	ROBERT SIMPSON AND LINDA SNOOK HAVE A BUSINESS RELATIONSHIP

FORM 990, PART VI, SECTION A, LINE 6 THE MEMBERS OF THE CORPORATION SHALL CONSIST OF THE REGIONAL LEADER AND THE MEMBERS OF THE REGIONAL COUNCIL OF THE ADORERS OF THE BLOOD OF CHRIST, UNITED STATES REGION ("ADORERS CONGREGATION") A PUBLIC JURIDIC PERSON WHICH IS THE CANONICAL ANALOGUE OF THE ADORERS OF THE BLOOD OF CHRIST, UNITED STATES REGION, A MISSOURI PUBLIC BENEFIT NON-PROFIT CORPORATION ("ADORERS CORPORATION") "REGIONAL LEADER" MEANS THE PERSON WITH CANONICAL AUTHORITY FOR THE GOVERNANCE OF THE ADORERS CONGREGATION "REGIONAL COUNCIL" MEANS THE PERSONS SELECTED AND APPROVED ACCORDING TO THE CONSTITUTION WHO ASSIST AND ADVISE THE REGIONAL LEADER ACCORDING TO THE REQUIREMENTS OF CANON LAW AND THE CONSTITUTION OF THE ADORERS CONGREGATION AND HAVE THE POWERS ATTRIBUTED TO THEM IN THESE BY LAWS "CONSTITUTION" MEANS THE BASIC DOCUMENT WHICH SETS FORTH THE NORMS AND DIRECTIVES WHICH GOVERN THE ADORERS CONGREGATION AS PROMULGATED BY THE GENERAL SUPERIOR OF THE CONGREGATION ON JUNE 7, 1992, AND AS AMENDED FROM TIME TO TIME THE MEMBERS OF THE CORPORATION SHALL NOT BE ELECTED BUT RATHER SERVE EX OFFICIO BY VIRTUE OF THEIR APPOINTMENT AS REGIONAL LEADER AND AS MEMBERS OF THE REGIONAL COUNCIL OF THE ADORERS CONGREGATION, AND THEIR AUTHORITY AS MEMBERS SHALL DERIVE THEREFROM A MEMBER WHO CEASES TO BE REGIONAL LEADER OR CEASES TO BE A MEMBER OF THE REGIONAL COUNCIL SHALL SIMULTANEOUSLY CEASE TO BE A MEMBER OF THE CORPORATION	Return Reference	Explanation
J	PART VI, SECTION A,	COUNCIL OF THE ADORERS OF THE BLOOD OF CHRIST, UNITED STATES REGION ("ADORERS CONGREGATION") A PUBLIC JURIDIC PERSON WHICH IS THE CANONICAL ANALOGUE OF THE ADORERS OF THE BLOOD OF CHRIST, UNITED STATES REGION, A MISSOURI PUBLIC BENEFIT NON-PROFIT CORPORATION ("ADORERS CORPORATION") "REGIONAL LEADER" MEANS THE PERSON WITH CANONICAL AUTHORITY FOR THE GOVERNANCE OF THE ADORERS CONGREGATION "REGIONAL COUNCIL" MEANS THE PERSONS SELECTED AND APPROVED ACCORDING TO THE CONSTITUTION WHO ASSIST AND ADVISE THE REGIONAL LEADER ACCORDING TO THE REQUIREMENTS OF CANON LAW AND THE CONSTITUTION OF THE ADORERS CONGREGATION AND HAVE THE POWERS ATTRIBUTED TO THEM IN THESE BY LAWS "CONSTITUTION" MEANS THE BASIC DOCUMENT WHICH SETS FORTH THE NORMS AND DIRECTIVES WHICH GOVERN THE ADORERS CONGREGATION AS PROMULGATED BY THE GENERAL SUPERIOR OF THE CONGREGATION ON JUNE 7, 1992, AND AS AMENDED FROM TIME TO TIME THE MEMBERS OF THE CORPORATION SHALL NOT BE ELECTED BUT RATHER SERVE EX OFFICIO BY VIRTUE OF THEIR APPOINTMENT AS REGIONAL LEADER AND AS MEMBERS OF THE REGIONAL COUNCIL OF THE ADORERS CONGREGATION, AND THEIR AUTHORITY AS MEMBERS SHALL DERIVE THEREFROM A MEMBER WHO CEASES TO BE REGIONAL LEADER OR CEASES TO BE A MEMBER OF THE

Return Reference	Explanation
	THE REGIONAL LEADER AND THE REGIONAL COUNCIL OF THE ADORERS OF THE BLOOD OF CHRIST, UNITED STATES (ADORERS CONGREGATION), BEING THE MEMBERS, HAVE THE RIGHT TO APPROVE ALL OF NEWMAN UNIVERSITY'S BOARD OF TRUSTEES

	Return eference
FORM 990, PART VI, PART VI, SECTION A, LINE 7B THE FOLLOWING ARE SUBJECT TO APPROVAL BY MEMBERS OF THE ADORERS GOVERNING BODY (A) TO APPROVE, MODIFY OR DISAPPROVE THE PHILOSOPHY OR CHARITABLE PURPOSE OF THE CORPORATION, (B) TO APPROVE, MODIFY OR DISAPPROVE THE MISSION STATEMENT OF THE CORPORATION, (C) TO APPROVE RESOLUTIONS SUBMITTED BY THE BOARD OF TRUSTEES PROPOSING AMENDMENTS TO THE CORPORATION'S ARTICLES OF INCORPORATION AND BY LAWS AND TO AMEND THE ARTICLES AND BY LAWS AS THE MEMBERS DEEM APPROPRIATE FROM TIME TO TIME, (D) TO APPROVE ANY MERGERS, CONSOLIDATIONS OR DISSOLUTION AND THE ACQUISITION OR CREATION OF SUBSIDIARY CORPORATION (E) TO APPROVE THE SALE, PURCHASE OR ENCUMBRANCE OF REAL PROPERTY, (F) TO APPROVE NEW INDEBTEDNESS INCURRED BY THE CORPORATION IN EXCESS OF ONE MILLION DOLLARS (\$1,000,000), (G) TO APPROVE THE APPOINTMENT AND DISMISSAL OF THE PRESIDENT OF THE CORPORATION WHICH DECISION WILL NOT BE UNREASONABLY WITHHELD, (I) TO APPROVE SUCCESSOR TRUSTEES PROPOSED BY THE TRUSTEES PURSUANT TO ARTICLE III, SECTION 2(F), (I) TO REMOVE IMMEDIATELY, WITH OR WITHOUT CAUSE, ANY OR ALL TRUSTEES UPON WRITTEN NOTICE DELIVERED TO THE REGISTERED OFFICE OF THE CORPORATION, AND (J) TO APPROVE AN ACTING PRESIDENT OF THE CORPORATION IF OTHIT THAN THE PROVOSTIVICE PRESIDENT FOR ACADEMIC AFFAIRS	RT VI, MC CTION A, OF E 7B BC AN AN (E INC RE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	AN INDEPENDENT ACCOUNTING FIRM PREPARES THE FORM 990 THE AUDIT COMMITTEE THEN REVIEWS THE COMPLETE FORM 990 AND ALL REQUIRED SCHEDULES, WITH THE EXCEPTION OF SCHEDULE B - CONTRIBUTORS ANY QUESTIONS OR CONCERNS ARE ADDRESSED AND ANY NECESSARY CHANGES ARE MADE. THE FORM 990 AND ALL REQUIRED SCHEDULES, WITH THE EXCEPTION OF SCHEDULE B - CONTRIBUTORS, IS THEN ELECTRONICALLY PROVIDED TO THE ENTIRE GOVERNING BODY PRIOR TO FILING. A PUBLIC DISCLOSURE COPY OF SCHEDULE B IS PROVIDED TO THE GOVERNING BODY IN ORDER TO RESPECT THE WISHES OF CONTRIBUTORS WHO WOULD LIKE TO REMAIN ANONY MOUS.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	INDIVIDUALS (BOARD MEMBERS AND OFFICERS) ARE REQUIRED TO NOTIFY THE BOARD EACH YEAR OF ANY CONFLICT OF INTEREST ISSUES THIS IS PERFORMED BY COMPLETING A REPORTING FORM AND IS DISCLOSED AT THE FIRST BOARD MEETING OF THE YEAR ALSO, THE VICE PRESIDENT FOR FINANCE AND ADMINISTRATION IS CHARGED WITH REPORTING TO THE BOARD ANY BUSINESS TRANSACTIONS BETWEEN BOARD MEMBERS AND NEWMAN UNIVERSITY THAT EXCEED \$25,000. THE POLICY IS SPECIFIC ON THESE POINTS. THE BOARD IS RESPONSIBLE FOR DETERMINING WHETHER OR NOT A TRANSACTION CREATES A CONFLICT OF INTEREST. ONCE A POTENTIAL CONFLICT OF INTEREST HAS BEEN IDENTIFIED, THE BOARD OF TRUSTEES MAY TAKE ONE OR MORE OF THE FOLLOWING ACTIONS (1) THE TRUSTEE WHO IS A COVERED PERSON MAY INFORM THE BOARD OF THE CONFLICT AND RECUSE HIM OR HERSELF FROM PARTICIPATION IN THE DISCUSSION AND REFRAIN FROM VOTING ON THE AGENDA ACTION ITEM (2) THE BOARD OF TRUSTEES, AFTER APPROPRIATE DISCUSSION AND THROUGH A VOTE OF THE BOARD, SHALL DETERMINE, ON A SITUATION BY SITUATION BASIS, IF A CONFLICT OF INTEREST FOR A FINANCIAL TRANSACTION EXISTS. THE COVERED PERSON MAY PARTICIPATE IN THE DISCUSSION BUT MAY NOT VOTE ON THE DETERMINATION OF WHETHER A CONFLICT OF INTEREST EXISTS. IF THE BOARD DETERMINES THAT A CONFLICT OF INTEREST EXISTS, THE COVERED TRUSTEES SHALL BE EXCLUDED FROM THE DISCUSSION AND FROM VOTING ON THE AGENDA ACTION ITEM (3) IN CERTAIN CIRCUMSTANCES AND WHERE A CONFLICT OF INTEREST WAS NOT REPORTED BY THE COVERED PERSON, THE BOARD OF TRUSTEES MAY DISALLOW A FINANCIAL TRANSACTION, AND/OR SANCTION, REMOVE OR OTHERWISE DISCIPLINE THE COVERED PERSON/TRUSTEE. SUCH ACTION, IF DEEMED NECESSARY, SHALL BE ACCOMPLISHED IN EXECUTIVE SESSION BY A VOTE OF THE BOARD OF TRUSTEES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	WHEN DETERMINING THE COMPENSATION OF THE PRESIDENT, NEWMAN UNIVERSITY OFFICIALS COMPARE SALARY LEVELS TO PUBLISHED DATA IN THE CHRONICLE OF HIGHER EDUCATION AND OTHER PROFESSIONAL JOURNALS FOR SIMILAR ORGANIZATIONS AN INDEPENDENT COMPENSATION CONSULTANT WAS USED ALONG WITH A COMPENSATION SURVEY OR STUDY AND THE REVIEW OF THE FORM 990 OF OTHER ORGANIZATIONS THIS PROCESS WAS LAST UNDERTAKEN IN 2009

Return Reference	Explanation
· · · · · · · · · · · · · · · · · · ·	FOR OTHERS HIRED, CURRENT MARKET CONDITIONS ARE USED IN ADDITION TO COMPARISON OF PUBLISHED DATA IN THE CHRONICLE OF HIGHER EDUCATION AND OTHER PROFESSIONAL JOURNALS FOR SIMILAR ORGANIZATIONS

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

Return Reference	Explanation						
FORM 990, PART XI, LINE 9	RELATED ORGANIZATION CHANGE IN NET ASSETS (40)						

DLN: 93493133001335

2013

OMB No 1545-0047

Open to Public ection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

Department of the Treasury Internal Revenue Service Name of the organization

NEWMAN UNIVERSITY INC

Ins
Employer identification number
48-0556716

Part I Identification of Disregarded Entities Co								
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	sets (f) Direct controlling entity			
Part II Identification of Related Tax-Exempt Orgon or more related tax-exempt organizations dur	ganizations Complete if ing the tax year.	the organization ans	swered "Yes" o	n Form 990,	Part IV,	line 34 because it	had or	ne
(a) Name, address, and EIN of related organization	(a) ress, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) Exempt		(d) Exempt Code sect	ion Public char (If section 5	ity status	(f) Direct controlling entity	Section (13) co	(g) n 512(b ontrolle itity?
(A) ADODEDO OF THE BLOOD OF CHRIST HO DECION	GUDDODT	Mo	504(6)(2)				Yes	No
(1) ADORERS OF THE BLOOD OF CHRIST US REGION	SUPPORT	МО	501(C)(3)			NA		No
4233 SULPHUR AVENUE ST LOUIS, MO 63109 37-1402562								
(2) LEAVEN INT'L CORPORATION	SUPPORT	KS	501(C)(3)	1		ADORERS		No
1165 SOUTHWEST BLVD								
WICHITA, KS 67213 48-0996031								
(3) NEWMAN UNIVERSITY WETLAND CONSERVATION	CONSERVATION	KS	501(C)(3)	11A		NEWMAN UNIV	Yes	
3100 MCCORMICK AVENUE								
WICHITA, KS 67213 45-4338785								

Part III	Identification of Related Org because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
	(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h Disprop r allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	j) eral or agıng :ner?	(k) Percentage ownership
						,			Yes	No		Yes	No	
												_		
													\square	
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllir entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share	(g) e of end- -year ssets		(h) ercentage wnership	Section (b) (continue)	i) on 512 (13) rolled tity?	No.
							1			-	ĺ	Yes	<u>*</u>	No
												ı		

Schedule R (Form 990) 2013

Note.	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No				
1 During th	e tax year, did the orgranization engage in any of the following transactions with one or more	e related organizations li	sted in Parts II-IV?								
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity											
b Gift, g	rant, or capital contribution to related organization(s)				1b		No				
c Gıft, g	rant, or capital contribution from related organization(s)				1 c	Yes					
d Loans	or loan guarantees to or for related organization(s)				1d		No				
e Loans	or loan guarantees by related organization(s)				1e		No				
f Divide	nds from related organization(s)				1f		No				
g Sale o	fassets to related organization(s)				1g		No				
h Purch	ase of assets from related organization(s)				1h		No				
i Excha	nge of assets with related organization(s)				1i		No				
j Lease	of facilities, equipment, or other assets to related organization(s)				1j		No				
k Lease	of facilities, equipment, or other assets from related organization(s)				\vdash	Yes					
I Perfor	nance of services or membership or fundraising solicitations for related organization(s)				11		No				
m Perfor	nance of services or membership or fundraising solicitations by related organization(s)				1m		No				
n Sharın	g of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No				
o Sharıı	g of paid employees with related organization(s)				10		No				
p Reimb	ursement paid to related organization(s) for expenses				1 p	Yes					
q Reimb	ursement paid by related organization(s) for expenses				1q	Yes					
r Other	transfer of cash or property to related organization(s)				1r		No				
s Other	transfer of cash or property from related organization(s)				1s		No				
- 76.1											
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete (a)	(b)	(c)	(d)							
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining am	ount II	nvolved					

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													
(a) Name, address, and EIN of entity	(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	(h) Disproprtiona allocations ⁷	_	(i) Code V ² 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