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DLN: 93493132040445

Form **990**

Department of the Treasury

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

Open to Public Inspection

OMB No 1545-0047

2013

A F-	L	2012!	Printermation about Form 990 and its instructions is at <u>www.irs.gov</u>	-			
		2013 cal applicable	endar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30 C Name of organization	J-2U14	D Employ	er identi	ification number
	eck if a dress cl		Queens University of Charlotte		- 56-053		
_	me cha	_	Doing Business As		- 56-053	30003	
	tial retu	_	Number and street (or P O box if mail is not delivered to street address) Room/sui	te			
_	rmınate		1900 SELWYN AVENUE	ie	E Telephon	e numbe	r
		return	Suite City or town, state or province, country, and ZIP or foreign postal code		(704)3	37-23	75
		n pending	CHARLOTTE NC 28274		G Gross red	cointe ¢ 9	n 298 125
	•		F Name and address of principal officer	H(a) Ist	his a group r		· · · ·
			DR PAMELA L DAVIES PHD		ordinates?	etuiii it	┌ Yes ┌ No
			1900 SELWYN AVENUE CHARLOTTE,NC 28274	H(h) Aro	all subordin	atoc	┌ Yes ┌ No
					uded?	ates	j řesj No
I Ta	x-exen	npt status	▼ 501(c)(3)	If"N	No," attach a	alıst (s	ee instructions)
J W	ebsit	e: ► ww	w queens edu	H(c) Gro	up exemptio	n numb	er ►
K For	m of or	rganization	Corporation Trust Association Other ►	L Year of f	ormation 189	6 M St	ate of legal domicile NC
Pa	rt I	Sum	mary				
Governance		QUEENS	escribe the organization's mission or most significant activities S UNIVERSITY OF CHARLOTTE PROVIDES EDUCATIONAL EXPERII STER PERSONAL AND PROFESSIONAL SUCCESS	ENCES THA	T TRANSFO	ORM ST	UDENTS' LIVES
20ve	2	Check th	his box দ if the organization discontinued its operations or disposed o	f more than	25% of its r	net asse	ets
	3	Number	of voting members of the governing body (Part VI, line 1a)		.	з	36
Activities &	4	Number	of independent voting members of the governing body (Part VI, line 1b)		[4	36
<u> </u>	5	Total nu	mber of individuals employed in calendar year 2013 (Part V, line 2a) $$.		[5	1,088
ă	1		mber of volunteers (estimate if necessary)			6	758
	1		related business revenue from Part VIII, column (C), line 12			7a	10,671
	Ь	Net unre	elated business taxable income from Form 990-T, line 34		or Year	7b	Current Year
	8	Contri	butions and grants (Part VIII, line 1h)		9,322,3	2 1	13,083,300
E E	9		am service revenue (Part VIII, line 2g)		54,454,9	_	57,304,825
Rayenue	10	Invest	tment income (Part VIII, column (A), lines 3, 4, and 7d)		4,848,4	18	4,687,420
ά	11		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		26,022		36,549
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		68,651,7	41	75,112,094
	13		s and similar amounts paid (Part IX, column (A), lines 1-3)		16,266,8	50	17,959,269
	14	Benefi	ts paid to or for members (Part IX, column (A), line 4)			0	0
ø	15		es, other compensation, employee benefits (Part IX, column (A), lines		28,826,7	8 0	29,731,068
Expenses	16a	5-10)) ssional fundraising fees (Part IX, column (A), line 11e) 		20,020,7	0	29,731,008
⊕	ь		indraising expenses (Part IX, column (D), line 25) ►1,534,013			+	
Ш	17		expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		23,229,3	34	24,132,081
	18		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		68,322,9	_	71,822,418
	19	Reven	ue less expenses Subtract line 18 from line 12		328,7	58	3,289,676
€ 8 € 8				_	ng of Current Year	t	End of Year
Set afan	20	Total	assets (Part X, line 16)		222,901,8	7 2	232,436,439
Net Assets or Fund Balances	21		liabilities (Part X, line 26)		85,891,6	_	77,959,151
žŽ	22		ssets or fund balances Subtract line 21 from line 20		137,010,19		154,477,288
Pa	rt II	Sign	ature Block				
my k prepa	nowle arer ha	dge and as any ki	perjury, I declare that I have examined this return, including accompandelief, it is true, correct, and complete Declaration of preparer (other the nowledge *** ature of officer	an officer) is			
Her	е		THEW PACKEY CFO/VP FOR ADMINISTRATION				
		<u> </u>	e or print name and title Print/Type preparer's name Preparer's signature Diagram Diagram	ate Cr	, – , 1,	PTIN	
Paid	H		Printy Type preparer's name Preparer's signature Day Sandra L Feinsmith	0		P11N P0106415	57
	u pare		Firm's name ► BDO USA LLP	Fir	m's EIN 🟲		
	pare On		Firm's address ► 1100 Peachtree Street Suite 700	Ph	one no (704)	337-237	5
Jac	. UII	''y	ATLANTA CA 202004516		. ,		

May the IRS discuss this return $\underline{\hspace{1cm}}$ with the preparer shown above? (see instructions) .

0111	1 2 2 0 (2013)				raye Z
Par	t III	Statement of Program S Check if Schedule O contains a			ш	
1	Brief	ly describe the organization's mi	ssion			
		NIVERSITY OF CHARLOTTE P ERSONAL AND PROFESSIONAL		NAL EXPERIENCES	S THAT TRANSFORM STUDENT	S' LIVES AND
2	the pi	ne organization undertake any si rior Form 990 or 990-EZ?				┌ Yes ┌ No
		es," describe these new services				
3	servi	ne organization cease conducting ces?		nanges in how it coi	nducts, any program	┌ Yes ┌ No
	If "Y∈	es," describe these changes on S	schedule O			
4	exper	ribe the organization's program s nses Section 501(c)(3) and 501 otal expenses, and revenue, if an	(c)(4) organizations are	e required to report		
4a	(Code	e) (Expenses \$	52,563,100 inc	cluding grants of \$	17,959,269) (Revenue \$	57,304,825)
	Locat Schoo	ens University of Charlotte is a private, (led in the heart of historic Charlotte, Qui of of Business, The Blair College of Heal Hayworth School of Graduate and Contil	eens serves approximately 2 th, The Presbyterian School c	,200 Undergraduate and	d Graduate students through its College	of Arts and Sciences, McColl
4b	(Cod	e) (Expenses \$	Inc	luding grants of \$) (Revenue \$)
4 c	(Code	e) (Expenses \$	Inc	luding grants of \$) (Revenue \$)
4d		er program services (Describe ir			\/Payanus #	1
_		penses \$	including grants of \$) (Revenue \$)
4e	Tota	al program service expenses 🕨	52,563,100			

Form 990 (2013) Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 5	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 I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II"</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 😼	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
.0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
.1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
.2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
.3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
.5	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
.6	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
.7	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
8.	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	
.9	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		No
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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		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?	38	Yes	

Par	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		· ·	.l No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 276		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
-	gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
	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	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		No
a	If "Yes," indicate the number of Forms 8282 filed during the year	-		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		No
g	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		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
		8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
	Did the organization make any taxable distributions under section 4966?	9a 9b		
		90		
.0	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
1	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)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	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 Part VI "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Cheat of Cahadula O contains a vacanance or note to any line in this Dart VI									
Check if Schedule O contains a response or note to any line in this Part VI			•		•		•	•	. *

No No No No No No No No	Se	ction A. Governing Body and Management			
1				Yes	No
If there are maternal 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 0 B. Enter the number of voting members included in line 1a, above, who are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? 3 Did the organization diselect control over management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4 No. 5 Did the organization have my significant changes to its governing documents since the prior Form 990 was head? 5 Did the organization have members or stockholders? 6 Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 6 Did the organization have members, stockholders, or other persons who had the power by the following at the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 9 The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 9 The governing body? 9 Each committee with authority to act on behalf of the governing body? 10 Each committee with authority to act on behalf of the governing body? 11 Each governing body? 12 Each governing body? 13 Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 1	1a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 			
body, or if the governing body delegated broad authority to an executive committee, with any other officer, circutor, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee and a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? 3			1		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customally performed by or under the direct supports of officers, directors or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was finded. 5 Did the organization have members or stockholders, or their persons who had the power to elect or appoint one or more members of the governing body? 5 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If Yes, "provide the names and addresses in Schedule 0. 10 Did the organization have local chapters, browned the names and addresses in Schedule 0. 10 Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 Did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11 Did the organization have a written policies and procedur		body, or if the governing body delegated broad authority to an executive committee			
a Did the organization fleetings or trustees, or key employees to a management duties customanly performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 4	b				
3 No supervision of officers, directors or trustees, or key employee sto at management company or other person? 4 Dot the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 No 6 Did the organization have members or stockholders? 7 Did the organization have members or stockholders? 8 Did the organization have members or stockholders? 9 Did the organization have members or the poverning body? 10 Did the organization or the poverning body? 11 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 12 The governing body? 13 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 13 The governing body? 14 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 14 The governing body? 15 Did the organization to entemporaneously document the meetings held or written actions undertaken during the year by the following 15 Did the organization that suthority to act on behalf of the governing body? 16 Each committee with authority to act on behalf of the governing body? 17 Did the organization have local chapters, branches, or affiliates? 18 Did the organization have local chapters, branches, or affiliates? 19 Did the organization have local chapters, branches, or affiliates? 10 Did the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization of the policy? 10 Did the organization have a written conflict of interest policy? If "Mo," got to line 13 12 Did the organi	2		2		No
4 No 10 the organization make any significant changes to its governing documents since the prior Form 990 was field? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 No 7 Did the organization have members of stockholders? 7 Did the organization have members of the option of the power to elect or appoint one or more members of the governing body? 8 Are any operance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "res," provide the names and addresses in Schedule O. 8 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10 Did the organization have local chapters, branches, or affiliates? 10 Did the organization have local chapters, branches, or affiliates? 11 Als the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12 Did the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12 Did the organization have a written conflict of interest policy? If "No," go to line I3 13 Did the organization have a written of the sky employees required to disclose annually interests that could give insependent persons, comparability and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 15 Did the organization have a written of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 16 Did the organization h	3	Did the organization delegate control over management duties customarily performed by or under the direct	3		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 5 Are any overnance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 By 4 Yes 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's maining address? If Yes, *provide the names and addresses in Schedule O. 9 No Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 10b If Yes,* did the organization have local chapters, branches, or affiliates? 10c If the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 10b Did the organization provided a complete copy of this form 990 to all members of its governing body before filing the form? 10c Did the organization provided a complete copy of this form 990 to all members of its governing body before filing the form? 10b Did store organization provided a complete copy of this form 990 to all members of its governing body before filing the form? 11c Did the organization have a written organization to review this Form 990 11d Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O have this was done 11c Yes 11d Did the organization regularly and consistently monitor and destruction policy? 11d The organization have a written document retention and destruction policy? 11d The organization have a written document retention	4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		No
6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or opersons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If Yes, "provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 10b If "Yes," did the organization have local chapters, branches, or affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b If "Yes," did the organization have awritten oplicies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b If "Yes," did the organization have a written conflict of interest policy? If "We," go to line 13	5		5		No
Table Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or momer members of the governing body? No or persons other than the governing body? Sold the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Sold the following The governing body? No Sold the committee with authority to act on behalf of the governing body? Sold the governing body? No Sold the committee with authority to act on behalf of the governing body? No Sold the committee with authority to act on behalf of the governing body? No No The governing body the following body: No No No The governing body the following body: No No No The governing body before filling the form? No No No No No No No N	6		6		No
more members of the governing body? A rea any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 7b No or persons other than the governing body? B Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following at The governing body? A The governing body? B Each committee with authority to act on behalf of the governing body? B Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the granization's mailing address of If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) If "Yes," did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have local chapters, branches, or affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? If the form? If the form? Does cribe in Schedule O the process, if any, used by the organization to review this Form 990 Does cribe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "Wo," go to line 13 Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," described in Schedule O fow this was done. To Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? To Did the organization have a written whistleblower policy? To Did the organization have a written whistleblower policy? To Did the organization have a written whistleblower policy? To Did the organization have a written whistleblower policy? To Did th	7a		H		
so persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. 9 No Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 10b If "yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization have awritten operations are consistent with the organization's exempt purposes? 11b Use officers, directors, or trustees, and key employees required to disclose annually interests that could give in seconflicts? 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b Use officers, directors, or trustees, and key employees required to disclose annually interests that could give in seconflicts? 12b Use officers, directors, or trustees, and key employees required to disclose annually interests that could give in seconflicts? 12c Yes 12d Yes	, ,		7a		No
year by the following a The governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? b Each committee with authority to act on behalf of the governing body? Section B. Policies (This Section Ryear) employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Possible In Schedule O. This Section B requests information about policies not required by the Internal Reverber Use Color of the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12b Unit the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a Did the organization have a written conflict of interest policy? If "Wo," go to line 13 12b Unit the organization have a written conflict of interest policy? If "Wo," go to line 13 12c Ves Unit the organization requirily and consistently monitor and enforce compliance with the policy? If "Yes," describe the section of the organization have a written whistleblower policy? 12c Visit the organization have a written document retention and destruction policy? 12c Visit the organization have a written document retention and destruction policy? 12d If we organization have a written document retention and destruction policy? 12d If the organization have a written document retention and destruction policy? 12d If the organization have a written document retention and destruction policy? 12d If the organization have a written	b		7b		No
b Each committee with authority to act on behalf of the governing body? 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "yes," provide the names and addresses in Schedule O. 10 In Did In the organization have local chapters, branches, or affiliates? 10 If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12 Did the organization have a written conflict of interest policy? If "No," got oline 13 13 Pes or the organization have a written conflict of interest policy? If "No," got oline 13 14 Did the organization have a written whistleblower policy? 15 Did the organization have a written whistleblower policy? 16 Did the organization have a written whistleblower policy? 17 Did the organization have a written whistleblower policy? 18 Did the organization have a written document retention and destruction policy? 19 Did the organization have a written document retention and destruction policy? 19 Did the organization have a written document retention and destruction policy? 19 Did the organization have a written document retention and destruction policy? 19 Did the organization have a written document retention and destruction policy? 20 Did the organization have a written document retention and destruction policy? 21 The organization have a written document retention and destruction policy? 22 Pes organization have a written document retention and destruction policy? 23 Pes organization for the deliberation and decision? 24 Pes organization for the organization of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the delibera	8				
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Codes No organization's mailing address? If "Yes," provide the names and addresses in Schedule O .	а	The governing body?	8a	Yes	
reganization's mailing address? If "Yes," provide the names and addresses in Schedule O. Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No 10a Did the organization have local chapters, branches, or affiliates? 10b Did the organization have local chapters, branches, or affiliates? 10c Did the organization have written policies and procedures governing the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Pescribe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Pescribe in Schedule O the process, and key employees required to disclose annually interests that could give rise to conflicts? 12b Vescribe in Schedule O how this was done 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12d Did the organization have a written whistleblower policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a Yes 15a Ves 1	b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
100 In the organization have local chapters, branches, or affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? affiliates, and branches to ensure their operations are consistent with the organization by the form? affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? and the form? affiliates, and branches to ensure their operations are consistent with the organization body before filling the form? affiliates, and branches to ensure their operations are consistent with the organization bave a written conflict of interest policy? If "No," go to line 13 and 12	9				No
10a Ind the organization have local chapters, branches, or affiliates?	Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?				Yes	No
affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 12a Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Pold the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Yes 12c Yes 13 Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. 13 Did the organization have a written whistleblower policy? 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 The organization's CEO, Executive Director, or top management official 15 Other officers or key employees of the organization 15 Ves 16 Other officers or key employees of the process in Schedule O (see instructions) 16 Uff we organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 17 List the States with which a copy of this Form 990 is required to be filed▶ 28	10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b Describe in Schedule O the process, if any, used by the organization to review this Form 990	b		10b		
Did the organization have a written conflict of interest policy? If "No," go to line 13	11a			Yes	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
In Schedule O how this was done	b		12b	Yes	
13 Yes 14 Did the organization have a written whistleblower policy?	c		12c	Yes	
Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	13		13	Yes	
independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	14	Did the organization have a written document retention and destruction policy?	14	Yes	
The organization's CEO, Executive Director, or top management official	15				
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	ь	Other officers or key employees of the organization	15b	Yes	
taxable entity during the year?		If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16a		16a		No
List the States with which a copy of this Form 990 is required to be filed► Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	16b		
List the States with which a copy of this Form 990 is required to be filed► Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	Se	ection C. Disclosure			
(3)s only) available for public inspection. Indicate how you made these available. Check all that apply					
	18	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

interest policy, and financial statements available to the public during the tax year

State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►MATTHEW PACKEY 1900 SELWYN AVENUE CHARLOTTE, NC 28274 (704) 337-2375

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t perso and a	tion (han c n is l	ne b both	oox, an c	heck unless officer stee)	1	Repor compen from organizat	table sation the tion (W-	(E) Reportable compensation from related organizations (W	- "	(F) Estima mount of compens from t	ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-	-MISC)	2/1099-MISC)		rganizati relate organiza	ed b
												-		
1b	Sub-Total							<u> </u>						
C	Total from continuation sheet	s to Part VII, S	ection A	٠.	•			•						
d	Total (add lines 1b and 1c) .						•	Þ		2,398,387	131,80	00		367,785
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	an			
													Yes	No No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee,	, or highest	t compen	sated employee	3	les	No No
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1 services rendered to the organ									anızatıon	or individual for	5	162	N o
_											L		ı	
_S∈ 1	ection B. Independent Co Complete this table for your five		ensate/	d inda	nen	dent	contr	acto	rs that rec	eived mo	re than \$100 000	of		
	compensation from the organiz	zation Report co									thin the organizati			
		(A)									(B)	- 1	(C)

(A)	(B)	(C)					
Name and business address	Description of services	Compensation					
ROBINSON BRADSHAW HINSON, 101 NORTH TRYON ST SUITE 1900 CHARLOTTE NC 28246	LEGAL SERVICES	259,632					
Deltak Edu LLC, 1415 West 22nd St Suite 400 OAK BROOK IL 60523	ONLINE HIGHER ED PRG	174,076					
BrandRPM LLC, 4910 Starcrest Dr MONROE NC 28110	PROMOTIONAL PRODUCTS	167,388					
BDO USA LLP, 5430 WADE PARK BLVD SUITE 208 RALEIGH NC 27607	AUDIT & TAX SERVICES	158,846					
Fussell's Turf Management LLC, 1538 Wickerby Ct MATTHEWS NC 28105	LANDSCAPING	158,596					
2. Total number of independent contractors (including but not limited to these listed above) who recoved more than							

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►8

(D)
Revenue
excluded from
tax under
sections
512-514

1,226,145

3,450,604

36,549

Form 99 Part V		Statement of Revenue				
		Check if Schedule O contains a response or note	e to any lir	ne in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue
	1a	Federated campaigns 1a				
ants	ь	Membership dues 1b				
, B	С	Fundraising events 1c	5,566			
ifts, a⊤ A	d	Related organizations 1d				
n, Gi	e		2,900,022			
Contributions, Gifts, Grants and Other Similar Amounts	f		0,177,712			
uti. Per	•	similar amounts not included above	,,,,,,,,,			
Ę ŏ	g	Noncash contributions included in lines 1a-1f \$	1,684,498			
Cont	h	Total. Add lines 1a-1f	▶	13,083,300		
		Busines	s Code			
euri	2a	TUITION & FEES	611310	45,685,590	45,685,590	
E S	ь	AUXILIARY ENTERPRISES	611310	9,539,839	9,539,839	
15.e	С	OTHER INCOME	611310	2,079,396	2,079,396	
Program Serwoe Revenue	d					
Ē	е					
iD _O	f	All other program service revenue				
	g	Total. Add lines 2a-2f		57,304,825		
	3	Investment income (including dividends, interestand other similar amounts)	st, ►	1,199,702		-26,443
	4	Income from investment of tax-exempt bond proceeds .	. ▶	0		
	5	Royalties	▶	0		
		(I) Real (II) Pel	rsonal			
	6a	Gross rents Less rental				
		expenses Rental income 0				
	С	or (loss)		0		
	d	Net rental income or (loss)		0		
	7a	Gross amount from sales of assets other	thei			
	Ь	than inventory Less cost or				
	"	other basis and sales expenses 15,172,103				
	С	Gain or (loss) 3,487,718				
	d	Net gain or (loss)	· ·►	3,487,718		37,114
Other Revenue	8a	Gross income from fundraising events (not including \$5,566				
ě		of contributions reported on line 1c) See Part IV, line 18				
ř.		a	50,477			
Ť.	b	Less direct expenses b	13,928			
0	C	Net income or (loss) from fundraising events .	· *	36,549		
	ya 	Gross income from gaming activities See Part IV, line 19				
	ь	Less direct expenses b				
	С	Net income or (loss) from gaming activities .	· •	0		
	10a	Gross sales of inventory, less returns and allowances .				
	b	Less cost of goods sold b				
	С	Net income or (loss) from sales of inventory .	.	0		
		Miscellaneous Revenue Busines	s Code			
	11a					
	b					
	C	All other reverse				
	d e	All other revenue	▶			
			-	0		
	12	Total revenue. See Instructions	· •	75,112,094	57,304,825	10,671

Part IX Statement of Functional Expenses

	section 501(c)(3) and 501(c)(4) o	rganizations must complete all columns	All other organizations must complete column (A	()
--	-----------------------------------	--	---	----

Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizat	ions must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>	<u> </u>	<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	17,959,269	17,959,269		
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	2,946,681	735,407	1,603,292	607,982
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	21,171,806	17,766,150	2,897,120	508,536
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	996,491	811,311	157,934	27,246
9	Other employee benefits	3,030,407	1,835,305	1,117,595	77,507
10	Payroll taxes	1,585,683	1,233,050	310,982	41,651
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	78,635		78,635	
c	Accounting	198,719		198,719	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	209,584		209,584	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	25,487		25,487	
12	Advertising and promotion	281,740	180	281,209	351
13	Office expenses	2,223,048	1,771,256	347,823	103,969
14	Information technology	773,790	120,086	623,294	30,410
15	Royalties	773,790	120,080	023,294	30,410
	•	4,906,829	22.214	4 004 515	
16 17	Occupancy		22,314	4,884,515	15 442
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,397,991	1,205,546	177,003	15,442
19	Conferences, conventions, and meetings	1,076,981	588,703	381,682	106,596
20	Interest	1,983,653	300,703	1,983,653	100,330
21	Payments to affiliates	1,983,633		1,703,033	
22	Depreciation, depletion, and amortization	4,824,924	4,824,924		
23	Insurance	407,415	1,021,321	407,415	
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)	107,123		107,113	
а	SERVICES PURCHASED & MAINT	2,681,983	1,003,499	1,678,484	
Ь	DINING SERVICES	2,279,066	2,279,066		
c	BAD DEBT EXPENSE	262,935		262,935	
d	MEMBERSHIPS & SUBSCRIPTIONS	396,460	347,963	48,497	
e	All other expenses	122,841	59,071	49,447	14,323
25	Total functional expenses. Add lines 1 through 24 e	71,822,418	52,563,100	17,725,305	1,534,013
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)				rm 990 (2013)

Part X Balance Sheet

1 Cash-non-interest-bearing Segmenting of year Segmenting of year Segmenting of year Segmenting of year 2,147,946 2 1,534,866 3,737,708,92 4 4,865,970 3 7,370,862 4 4,665,970 3 7,370,862 4 4,665,970 3 7,370,862 4 4,665,970 3 7,370,862 4 4,665,970 5 4 1,466,976 5 5 5 5 5 5 5 5 5	Par	't X	Check if Schedule O contains a response or note to any line i	n this l	Part X			
2 Savings and temporary cash investments		_				(A)		(B)
3 Pledges and grants receivable, net 10,470,708 3 7,370,800		1	Cash-non-interest-bearing			4,885,379	1	5,306,663
4 Accounts receivable, net		2	Savings and temporary cash investments			2,147,949	2	1,934,999
Solution and other rice evables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		3	Pledges and grants receivable, net			10,470,708	3	7,370,862
### Part Fig. Section Part P		4	Accounts receivable, net			0	4	1,466,976
1		5	employees, and highest compensated employees Complete	Part II	of	0	5	0
9 Prepand expenses and deferred charges 9 759,775 9 1.791,296 10a 167,626,233 179,1968 110,191,296 b Leand, buildings, and equipment cost or other basis 10a 167,626,233 118,418,855 10c 117,551,968 11 Investments—publicly traded securities 48,741,546 11 44,029,683 12 Investments—publicly traded securities 48,741,546 11 44,029,683 13 Investments—publicly traded securities 48,741,546 11 44,029,683 14 Intangible assets 160,679 13 170,626 15 Other assets See Part IV, line 11 9 15 0 14 0 16 Total assets Add lines 1 through 15 (must equal line 34) 222,201,872 6 232,436,439 17 Accounts payable and accrued expenses 14,162,241 17 6,890,561 18 Grants payable 188,900 18 188,900 19 Deferred revenue 9 19 0 0 20 Tax-exempt bond liabilities 189,900 20 55,915,000 21 Escrow or custodial account liability Complete Part IV of Schedule D 9 21 0 22 Loans and other payables to current and former officers, directors, trustees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 9 22 0 23 Secured mortgages and notes payable to unrelated third parties 9 24 0 25 Other liabilities (including federal income tax, payables to related third parties 9 24 0 26 Total liabilities (including federal income tax, payables to related third parties 9 27 117,488,420 26 Total liabilities. Add lines 17 through 25 85,881,673 26 77,559,151 27 Organizations that do not follow SFAS 117 (ASC 958), check here and complete and comp	ıts	6	4958(f)(1)), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary	d contr emplo	ibuting employers			
9 Prepand expenses and deferred charges 9 759,775 9 1.791,296 10a 167,626,233 179,1968 110,191,296 b Leand, buildings, and equipment cost or other basis 10a 167,626,233 118,418,855 10c 117,551,968 11 Investments—publicly traded securities 48,741,546 11 44,029,683 12 Investments—publicly traded securities 48,741,546 11 44,029,683 13 Investments—publicly traded securities 48,741,546 11 44,029,683 14 Intangible assets 160,679 13 170,626 15 Other assets See Part IV, line 11 9 15 0 14 0 16 Total assets Add lines 1 through 15 (must equal line 34) 222,201,872 6 232,436,439 17 Accounts payable and accrued expenses 14,162,241 17 6,890,561 18 Grants payable 188,900 18 188,900 19 Deferred revenue 9 19 0 0 20 Tax-exempt bond liabilities 189,900 20 55,915,000 21 Escrow or custodial account liability Complete Part IV of Schedule D 9 21 0 22 Loans and other payables to current and former officers, directors, trustees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 9 22 0 23 Secured mortgages and notes payable to unrelated third parties 9 24 0 25 Other liabilities (including federal income tax, payables to related third parties 9 24 0 26 Total liabilities (including federal income tax, payables to related third parties 9 27 117,488,420 26 Total liabilities. Add lines 17 through 25 85,881,673 26 77,559,151 27 Organizations that do not follow SFAS 117 (ASC 958), check here and complete and comp	Š	,	Notes and leans reservable, not				_	
9 Prepaid expenses and deferred charges 963,775 9 1,791,296 108 Land, buildings, and equipment cost or other basis 100 100 167,626,233 11 Investments—publicly traded securities 44,741,586 11 44,029,683 12 Investments—publicly traded securities 48,741,586 11 44,029,683 13 Investments—program-related See Part IV, line 11 160,679 13 170,626 14 Intangible assets 0 14 0 15 Other assets See Part IV, line 11 222,391,872 16 232,436,439 16 Total assets. Add lines 1 through 15 (must equal line 34) 222,391,872 16 232,436,439 17 Accounts payable and accrued expenses 141,162,241 17 6,890,561 18 Grants payable 189,900 18 188,900 19 Deferred revenue 9 9 0 55,915,000 20 Tax-exempt bond liabilities 55,520,000 20 55,915,000 21 Escrow or custodial account liability Complete Part IV of Schedule 0 22 0 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule 0 22 0 23 Secured mortgages and notes payable to unrelated third parties 0 24 0 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 16,020,532 25 14,984,890 26 Total liabilities. Add lines 17 through 25 50,000,000,000 27 117,498,420 27 Unrestricted net assets 0 0 0 0 0 0 0 0 0	4					_		
10a Land, buildings, and equipment cost or other basis 10a 167,626,233 118,418,866 10c 117,515,686 10c 117,515,686 11 118,418,866 10c 117,515,686 11 118,418,866 10c 117,515,686 11 118,418,866 10c 117,515,686 12 12 12 12 12 12 12 1								
11 Investments—publicity traded securities 14,711,561,688 10, 117,551,688 11 1,7551,688 12 1,7551,688 12 1,7551,688 13 1,7451,581 14 1,7551,688 13 1,7451,581 14 1,7551,688 13 1,7451,581 13 1,7451,581 14 1,7551,581 13 1,7451,581 14 1,7551,581 13 1,7451,581 13 1,7451,581 14 1,7551,581,581 1,7551,581		_	Land, buildings, and equipment cost or other basis			300,773	9	1,701,200
11 Investments—publicly traded securities 48,741,546 11 44,029,683 12 Investments—other securities See Part IV, line 11 37,122,941 12 52,813,366 13 Investments—program—related See Part IV, line 11 100,679 13 170,628 14 101,0679 13 170,628 15 15 100,679 13 170,628 15 15 100,679 15 15 100,679 15 15 100,679 15 15 100,679 15 15 100,679 15 15 100,679 15 15 100,679 15 15 100,679 15 15 100,679 15 15 100,679 15 15 100,679 15 15 100,679 100,679 100,67		Ь			50.074.265	118.418.895	10c	117.551.968
1					· · ·			
13			·			, ,		· · ·
14								
15						· · · · · · · · · · · · · · · · · · ·		<u> </u>
Total assets. Add lines 1 through 15 (must equal line 34) 222,901,872 16 232,436,439 232,436,439 232,436,439 234,437,238 234,								
17						222.901.872		232,436,439
18 Grants payable 18 188,900 18 188,900 19 0 0 19 0 0 0 19 0 0 0 19 0 0 0 0 19 0 0 0 0 0 0 0 0 0		 						
19 Deferred revenue								
20						· · · · · · · · · · · · · · · · · · ·		,
21 Escrow or custodial account liability Complete Part IV of Schedule D						_		55 915 000
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	_					, ,		<u> </u>
24 Unsecured notes and loans payable to unrelated third parties	<u>, a</u> o		Loans and other payables to current and former officers, dire	ctors, t				
24 Unsecured notes and loans payable to unrelated third parties	죭					0	22	0
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		23	Secured mortgages and notes payable to unrelated third part	ies .		0	23	0
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties			0	24	0
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete F	art X				
Organizations that follow SFAS 117 (ASC 958), check here F and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets								<u> </u>
lines 27 through 29, and lines 33 and 34. 90,097,900 27 117,498,420 27		26				85,891,673	26	77,959,151
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	S e o			- ▽ ar	nd complete			
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	lan	27	Unrestricted net assets			90,097,900	27	117,498,420
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	e E	28	Temporarily restricted net assets			27,705,693	28	16,768,375
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	Ξ	29	Permanently restricted net assets			19,206,606	29	20,210,493
30 Capital stock or trust principal, or current funds	r Fu			here Þ	+ ┌─and			
33 Total net assets or fund balances		30	Capital stock or trust principal, or current funds				30	
33 Total net assets or fund balances	Ř	31	Paid-in or capital surplus, or land, building or equipment fund				31	
33 Total net assets or fund balances 137,010,199 33 154,477,288 34 Total liabilities and net assets/fund balances 222,901,872 34 232,436,439		32	Retained earnings, endowment, accumulated income, or othe	r funds			32	
34 Total liabilities and net assets/fund balances	횾	33	Total net assets or fund balances			137,010,199	33	154,477,288
	_	34	Total liabilities and net assets/fund balances	<u>.</u> .	· ·	222,901,872	34	232,436,439

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		75,:	L12,094
2	Total expenses (must equal Part IX, column (A), line 25)	2		71,8	322,418
3	Revenue less expenses Subtract line 2 from line 1	3		3,2	289,676
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		137,0	10,199
5	Net unrealized gains (losses) on investments	5		5,0	069,449
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		9,:	107,964
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		154,4	177,288
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	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	rate			
	☐ Separate basis ☐ Both consolidated and separate basis			i	
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2 c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n		i	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: **Software Version:**

EIN: 56-0530003

Name: Queens University of Charlotte

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

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers, pendent Cor	Direct otracto	ors, ors	Tru	ste	es, ŀ	(ey	Employees, High	nest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (c 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			related organizations
mıchael marsıcano	1 0	х				<u> </u>				
chair DONNA JONES DEAN	0 0									
vice chair	0 0	Х								
KATHRYN WINSMAN BLACK	1 0	х								
Secretary HOWARD BISSELL III	0 0	-								
TRUSTEE	0 0	Х								
JAN HALL BROWN	1 0	Х								
TRUSTEE DEBORAH BUTLER BRYAN	0 0									
TRUSTEE	0 0	х								
ANGELINE MASSEY CLINTON	1 0	х								
TRUSTEE KEVIN COLLINS	0 0									
TRUSTEE	0 0	Х								
MARJORIE KNIGHT CRANE	1 0	х								
TRUSTEE CHRISTINE LOUTTIT CROWDER	0.0									
TRUSTEE	1 0	x								
JESSE J CURETON JR	0 0	×								
TRUSTEE	0 0									
DAVID C DARNELL TRUSTEE	10	х								
CARLOS E EVANS	0 0	<u> </u>								
TRUSTEE	0 0	Х								
ANTHONY FOX	1 0	х								
TRUSTEE OPHELIA GARMON-BROWN	0 0									
TRUSTEE	0 0	Х								
KATHRYN TAYLOR GRIGG	1 0	х								
TRUSTEE CARSON SLOAN HENLINE	0 0									
TRUSTEE	0.0	х								
LYTTLETON RICH HOLLOWELL	1 0	х								
TRUSTEE SANDRA P LEVINE	0 0									
TRUSTEE	0 0	х								
CATHERINE PARKS LOEVNER	1 0	х								
TRUSTEE	0.0									
J MICHAEL MCGUIRE	10	х								
TRUSTEE KATIE B MORRIS	0 0	<u> </u>								
TRUSTEE	0 0	X								
MICHAEL W MURPHY II	1 0	х								
TRUSTEE BAILEY W PATRICK	0 0									
TRUSTEE	0 0	Х					L			
LARRY POLSKY	1 0	х								
TRUSTEE	0 0			<u> </u>	1	1				

Name and Title	A verage hours per week (list any hours for related	Posit more th person and a	ion (d nan o n is b	ne booth a	ox, u an of trus	inless ficer tee)		Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,1033 (1100)	2,1033 (1100)	related organizations
DAVID L POPE	10	×								
TRUSTEE A ALEX PORTER	0 0									
TRUSTEE	0 0	Х								
THOMAS J REDDIN	1 0	x								
TRUSTEE MARY ANNE BOLDRICK ROGERS	0 0									
TRUSTEE	00	х								
DAVID V SINGER	10	.,								
TRUSTEE	0 0	Х								
CAROLINE WANNAMAKER SINK	1 0	x								
TRUSTEE MICHAEL C TARWATER	0 0									
TRUSTEE	0 0	х								
BRENT TREXLER	10									
TRUSTEE	0 0	Х								
CYNTHIA HALDENBY TYSON	1 0	x								
TRUSTEE RUTH ANNE M VAGT	0.0									
TRUSTEE	10	х								
F WILLIAM VANDIVER JR	10									
TRUSTEE	0 0	Х								
MANUEL L ZAPATA	10	х								
TRUSTEE	0.0	^								
PAMELA L DAVIES	60 0	х		х				357,801		67,983
PRESIDENT, EX-OFFICIO, B O T james bullock	1 0 50 0									
VP for University Advancement	0 0			Х				266,436		26,880
MATTHEW PACKEY	50 0			Х				217,468		38,573
CFO/VP FOR ADMINISTRATION	1 0			^				217,400		
Abiodun Goke-Pariola	50 0			х				209,894		41,496
VP for academic affairs brian ralph	1 0 50 0									
vp for enrollment management	0 0			Х				166,781		36,008
rebecca anderson	50 0			Х				132,978	0	33,539
vp marketing & community relat	0.0							132,970		
William A Nichols jr	50 0			х				118,163		17,932
VP campus planning & services tamara burrell	40 0									
exec dir pres rel & secretary	1 0			Х				57,506		14,387
JOHN BENNETT	30 0					х		150,257	76,600	17,220
ASSOC PROF, BEHAVIORAL SCIENCE	20 0					<u> </u>		130,237	76,600	17,220
NANCY MCNELIS	50 0					x		170,221		6,054
AVP ADV/MANAGING DIR EXT REL william sparks	30 0									
associate professor, mgmt sci	20 0					х		162,273	49,600	17,833
RON SHIFFLER	50 0							334 355		22.240
DEAN, MCCOLL SCHOOL OF BUS	1 0					Х		234,355		22,319
HARRY BOWEN	30 0					x		154,254	5,600	27,561
PROFESSOR, INT'L BUS & FIN	20 0						<u> </u>			

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As Filed Data -

DLN: 93493132040445

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

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

Open to Public Inspection

Name of the organization Queens University of Charlotte

Employer identification number

Total											
				instructions))	Yes	No	Yes	No	Yes	No	
(i) Name support organiza		ted	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of monetary support
h				ng information about					_		
				lled entity of a perso						11g((iii)
				er of a person descri						11g	
				governing body of th			_		. ,	11 g	
			ig persons? erson who d	rectly or indirectly o	ontrols, eith	ier alone or t	ogether with	persons des	scribed in (ii)		Yes No
g				2006, has the organi	ızatıon accep	oted any gift	or contributi	on from any	of the		
f			rganızatıon :hıs box	received a written de	etermination	from the IR	S that it is a	Type I, Typ	e II, or Type	III supporti	ing organization, —
e	Γ	other th	nan foundatı ı 509(a)(2)	ox, I certify that the on managers and otl	her than one	or more pub	olicly support	ed organızat	tions describ	ed in sectioi	n 509(a)(1) or
11		one or the box	more public that descri	ganized and operated y supported organiz bes the type of supp b Type II c	ations descr oorting organ	ibed in secti ization and d	ion 509(a)(1 complete line) or section s 11e throu	509(a)(2) S gh 11h	ee section 5	09(a)(3). Check
10				ganized and operated							
		•		janization after June				•		,	
				oss investment inco							
9	ı			at normally receives ities related to its ex							
8				described in section						h - w - h	
,	·*	describ	ed in sectio	n 170(b)(1)(A)(vi).	(Complete P	Part II)		_	incar unit of I	rom the gene	erai public
6 7	। 			local government or at normally receives	=					rom the gen	oral public
_	_			A)(iv) (Complete P							
5	Г	Anorga	anızatıon op	erated for the benefi		or universi	ty owned or o	perated by a	a governmen	tal unıt desc	ribed in
4	'			ty, and state	tea ili conjun	iction with a	nospital desi	cribed iii sec	.tion 170(b)(1)(A)(III). □	inter the
3 4	 -			perative hospital se n organization operat						1)/4)/;;;) =	inter the
2				I in section 170(b)(1							
1	Γ		•	on of churches, or as				ection 170(l	o)(1)(A)(i).		
The or	ganız			e foundation becaus							
Part	51	Reas	on for Pu	blic Charity Sta	tus (All ord	ganizations	must comi	plete this p			
									56-05300	003	

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 13,946,006 52,494,526 9,748,641 9,322,321 13,083,300 98,594,794 include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 13,946,006 52,494,526 9,748,641 9,322,321 13,083,300 98,594,794 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 21,268,184 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 77,326,610 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (a) 2009 (f) Total beginning in) 🟲 9,748,641 9,322,321 Amounts from line 4 13,946,006 52,494,526 13,083,300 98,594,794 Gross income from interest, dividends, payments received on securities loans, rents, royalties 579,830 586,177 797,019 1,415,613 1,199,702 4,578,341 and income from similar sources Net income from unrelated business activities, whether or 0 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 26,022 36,549 62,571 capital assets (Explain in Part IV) 11 Total support (Add lines 7 103,235,706 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 74 903 % Public support percentage for 2012 Schedule A, Part II, line 14 15 0 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 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						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
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	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a o 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).								
Facts And Circumstances Test									
Retu	ırn Reference	Explanation							
		Schodulo A / Form 000 o	000 E7) 201						

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493132040445

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

e of the organization Institution of Charlotte To organizations Maintaining Donor Advised Funds or Other Similar Formation organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donfunds are the organization's property, subject to the organization's exclusive legal control?	Employer identification number 56-0530003 unds or Accounts. Complete i (b) Funds and other accounts	ıf the
Organizations Maintaining Donor Advised Funds or Other Similar Foorganization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in don	unds or Accounts. Complete	ıf th
organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Fotal number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in don		ıf th
(a) Donor advised funds Fotal number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in don	(b) Funds and other accounts	
Fotal number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in don	(b) Funds and other accounts	
Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in don		<u></u>
Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in don		
Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in don		
Did the organization inform all donors and donor advisors in writing that the assets held in don		
	ar advised	
	Yes T	- No
Did the organization inform all grantees, donors, and donor advisors in writing that grant funds used only for charitable purposes and not for the benefit of the donor or donor advisor, or for ai conferring impermissible private benefit?	ny other purpose	- No
Conservation Easements. Complete if the organization answered "Yes" to	o Form 990. Part IV. line 7.	
Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or education) Preservation of an	historically important land area certified historic structure	
Complete lines 2a through 2d if the organization held a qualified conservation contribution in t easement on the last day of the tax year	he form of a conservation	
	Held at the End of the Ye	ar
Total number of conservation easements	2a	
Total acreage restricted by conservation easements	2b	
Number of conservation easements on a certified historic structure included in (a)	2c	
Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	
Number of conservation easements modified, transferred, released, extinguished, or terminate	d by the organization during	
the tax year ▶		
Number of states where property subject to conservation easement is located 🗠		
Does the organization have a written policy regarding the periodic monitoring, inspection, hand enforcement of the conservation easements it holds?		- No
Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easer ►	nents during the year	
· A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements . .	s during the year	
►\$		
Does each conservation easement reported on line 2(d) above satisfy the requirements of sec and section 170(h)(4)(B)(ii)?	tion 170(h)(4)(B)(i)	- No
In Part XIII, describe how the organization reports conservation easements in its revenue and balance sheet, and include, if applicable, the text of the footnote to the organization's financial the organization's accounting for conservation easements		
Organizations Maintaining Collections of Art, Historical Treasures, Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	or Other Similar Assets.	
If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its rever works of art, historical treasures, or other similar assets held for public exhibition, education, service, provide, in Part XIII, the text of the footnote to its financial statements that describe	or research in furtherance of public	
If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue works of art, historical treasures, or other similar assets held for public exhibition, education, service, provide the following amounts relating to these items	statement and balance sheet	
(i) Revenues included in Form 990, Part VIII, line 1	► \$	
(ii) Assets included in Form 990, Part X	► \$	
·		
If the organization received or held works of art, historical treasures, or other similar assets fo following amounts required to be reported under SFAS 116 (ASC 958) relating to these items		
	► \$	

b Contributions	
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part IV Secrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following table 1 It Amount 1 C 2 Beginning balance It 3 Amount 4 Additions during the year It 5 If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII 5 Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered Yes" to Form 990, Part IV, line 10. Part V En	
Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part IV Inne 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table C Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization has been provided in Part XIII. 1a Beginning of year balance 8 (a)Time years back (d)Time years back (d)Time years back (e)Flour year balance (a)Cument year (b)Finor year b (c)Tiwe years back (d)Time years back (e)Flour years back (e)Flo	
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Ine 9, or reported an amount on Form 990, Part X, line 21. Is It she organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is Seginning balance It It It It It It It I	
Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	
assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Fyes b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the Organization answered "Yes" to Form 990, Part IV, line 10. (a)Curnett year (b)Pror year b (c)Two years back (d)Three years back (e)Four years back (d)Three years back (d)Three years back (e)Four years back (d)Three years back (e)Four years b	
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year life Id	-
Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year l Distributions nuclude an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a)Current year (b)Prior year (c)Citro years back (d)Three years back (e)Four year l Distributions 1, 4,623,605 2,655,119 4,088,901 2,2617,404 C Net investment earnings, gains, and losses g End of year balance 1, 1,804,663 2,171,797 3,869,165 2,080,487 11,771,320 4 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment l 68 910 % b Permanent endowment l 16 520 % c Temporarily restricted endowment l 14 570 % The percentages in lines 2a, 2b, and 2c should equal 100%	l No
b If "Yes," explain the arrangement in Part XIII and complete the following table Ramount	
Reginning balance Reg	┌ No
1c	
d Additions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance Contributions	
Ending balance 1	
part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Check here if the explanation has been provided in Part XIII	
Did the organization include an amount on Form 990, Part X, line 21? Yes	
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a)Current year (b)Prior year b (c)Two years back (d)Three years back (e)Four years back years b	
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a)Current year (b)Prior year b (c)Two years back (d)Three years back (e)Four year b (c)Two years back (d)Three years back (e)Four year b (c)Two years back (d)Three years back (e)Four year b (c)Two years back (d)Three years back (e)Four year b (c)Two years back (d)Three years back (e)Four year b (c)Two years back (d)Three years back (e)Four year b (c)Two years back (d)Three years back (e)Four year b (c)Two years back (d)Three years back (e)Four year back (e)Four year years back (e)Four years years years years years years years years	□ No
(a)Current year (b)Prior year b (c)Two years back (d)Three years back (e)Four year (b)Prior year (b)Prior year (c)Prior year (d)Prior year	<u> </u>
1a Beginning of year balance 81,173,423 75,373,009 75,373,150 43,064,913 4 b Contributions	are back
b Contributions	1,069,806
c Net investment earnings, gains, and losses 9,585,889 5,317,092 -219,877 11,771,320 c Other expenditures for facilities and programs	1,038,026
e Other expenditures for facilities and programs	3,234,862
and programs	
g End of year balance	2,277,781
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ► 68 910 % Permanent endowment ► 16 520 % Temporarily restricted endowment ► 14 570 % The percentages in lines 2a, 2b, and 2c should equal 100%	2.064.012
a Board designated or quasi-endowment ► 68 910 % b Permanent endowment ► 16 520 % c Temporarily restricted endowment ► 14 570 % The percentages in lines 2a, 2b, and 2c should equal 100%	3,064,913
b Permanent endowment 16 520 % Temporarily restricted endowment 14 570 % The percentages in lines 2a, 2b, and 2c should equal 100%	
C Temporarily restricted endowment ► 14 570 % The percentages in lines 2a, 2b, and 2c should equal 100%	
The percentages in lines 2a, 2b, and 2c should equal 100%	
3a Are there endowment funds not in the possession of the organization that are held and administered for the	
organization by (i) unrelated organizations	No_
(ii) related organizations	No
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R?	
4 Describe in Part XIII the intended uses of the organization's endowment funds	
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, lin 11a. See Form 990, Part X, line 10.	ie
	ok value
1a Land	260,000
b Buildings	5,426,339
c Leasehold improvements	
d Equipment	3,058,937
	3,806,692
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	7,551,968

Part VII Investments—Other Securities. Comp See Form 990, Part X, line 12.	lete if the organization a	answered 'Yes' to Form	m 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year r	
(1)Financial derivatives		,	
(2)Closely-held equity interests (3)Other			
(A) PERPETUAL TRUSTS	4,323,312	F	
(B) HEDGE FUNDS	33,424,391	F	
(C) REAL ESTATE FUNDS AND LPS	6,015,072	F	
(D) INVESTMENT IN LAND	1,296,242	F	
(E) PRIVATE EQUITY LPS	7,490,167	F	
(F) OTHER INVESTMENTS	264,182	F	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	52,813,366	and Washing To	one OOO Deat IV line 44 a
Part VIII Investments—Program Related. Com See Form 990, Part X, line 13.	-		
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year r	
Total (Column (b) must equal Form 990, Part X col (B) line 13.)			
Part IX Other Assets. Complete if the organization a	l answered 'Yes' to Form 990,	, Part IV , line 11d See F	form 990, Part X, line 15
(a) Descript	ion		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.			
Part X Other Liabilities. Complete if the organ Form 990, Part X, line 25.	ızatıon answered 'Yes' to	Form 990, Part IV, li	ne 11e or 11f. See
1 (a) Description of liability	(b) Book value		
Federal income taxes DEPOSITS & DEFERRED REVENUE	3 454 687		
CAPITAL LEASE OBLIGATIONS	3,454,687		
LINES OF CREDIT	10,390,792		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	14,964,690		

~

Part	ΧI		evenue per Audited Financial Statements With Revenue prered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete ıf
1	Tota		r support per audited financial statements	1	
2	A mo	unts included on line 1 bu	t not on Form 990, Part VIII, line 12		
а	Net	unrealized gains on invest	ments		
b	Dona	ated services and use of fa	ocilities		
C	Reco	veries of prior year grants	2c	1	
d	Othe	er (Describe in Part XIII)			
e	Add	lines 2a through 2d .		2e	
3	Subt	ract line 2e from line 1 .		3	
4	A mo	unts included on Form 99	O, Part VIII, line 12, but not on line 1		
а	Inve	stment expenses not incl	uded on Form 990, Part VIII, line 7b . 4a		
b	Othe	r (Describe in Part XIII)	4b	1	
С	Add	lines 4a and 4b		4c	
5	Tota	l revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line 12)	5	
Part			penses per Audited Financial Statements With Expenses	per	Return. Complete
			swered 'Yes' to Form 990, Part IV, line 12a.	1	· -
1			audited financial statements	1	
2	A mo	unts included on line 1 bu	t not on Form 990, Part IX, line 25		
а	Dona	ited services and use of fa	cilities 2a	1	
b	Prior	year adjustments			
С	Othe	rlosses	<u>2</u> c	1	
d	Othe	r (Describe in Part XIII)		1	
e	Add	lines 2a through 2d		2e	
3	Subt	ract line 2e from line 1 .		3	
4	A mo	unts included on Form 99), Part IX, line 25, but not on line 1:		
а	Inve	stment expenses not incl	ided on Form 990, Part VIII, line 7b 4a		
b	Othe	r (Describe in Part XIII)	4b		
C	Add	lines 4a and 4b		4c	
5	Tota	l expenses Add lines 3 ar	d 4c. (This must equal Form 990, Part I, line 18)	5	
Part	XIII	Supplemental Inf	ormation		
Part '	de the V, line nation	descriptions required for 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to	provid	le any additional
	R	eturn Reference	Explanation		
ENDO	WM E N	T FUNDS	SCHEDULE D, PART V THE INTENDED USES OF THE UNIVERSITY'S I FOR SCHOLARSHIPS, PROFESSORSHIPS, FACULTY DEVELOPMENT, LIBRARY, ACADEMIC AND OTHER		
FIN 48	3 (ASC	:)FOOTNOTE	SCHEDULE D, PART X, LINE 2 The University analyzed its tax positions 2014 and determined that there were no uncertain tax positions that wou the University's financial statements. The University recognizes interest to unrecognized tax benefits as income tax expense in the statement of a the University did not accrue any interest or penalties.	ld hav and p	e a material impact on enalties,if any, related

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

Schedule D (Form 990) 2013

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As Filed Data -

DLN: 93493132040445

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

	e of the organization ns University of Charlotte	Employer identification	on nun	nber	
Queei	,	56-0530003			
Pa	rt I			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in in other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes	I
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student addresses, and scholarships?			v	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broads the period of solicitation for students, or during the registration period if it has no solicitation pro that makes the policy known to all parts of the general community it serves? If "Yes," please des	gram, ın a way	2	Yes	
	please explain If you need more space use Part II		3	Yes	
4 a	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?		4a_	Yes	
t	Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the pu with student admissions, programs, and scholarships?	ublic dealing	4c	Yes	
	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes	
5	If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to		-		
	Students' rights or privileges?		5a		Νo
t	Admissions policies?		5b		Νo
c	Employment of faculty or administrative staff?		5c		Νo
c	Scholarships or other financial assistance?		5d		Νo
•	Educational policies?		5e		No
f	Use of facilities?		5f		Νo
ç	Athletic programs?		5g		Νo
ŀ	other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		5h		No
	n Does the organization receive any financial aid or assistance from a governmental agency? The has the organization's right to such aid ever been revoked or suspended?		6a 6b	Yes	No
	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 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Pa		7	Yes	

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

Return Reference	Explanation
NONDISCRIMINATORY POLICY	SCHEDULE E, LINE 3 Queens University of Charlotte published the following statement in its admission materials, application, and its wiebsite. "Admissions is granted to qualified applicants without regard to race, age, creed, handicap, sexual orientation or national or ethnic origin."
FINANCIAL AID/ASSISTANCE FROM A GOVERNMENTAL AGENCY	SCHEDULE E, LINE 6A The university participates in a variety of federal financial aid programs including the Pell Grant Program, Federal Supplemental Educational Opportunity Grant (SEOG) Program, Federal Work Study Program and Federal Direct and Perkins Loan Programs. The university also receives various federal grants and contracts for academic programming and scientific research. The university receives assistance from the state of North Carolina including the North Carolina Need Based Scholarship, the North Carolina Forgivable Education Loan Program and the North Carolina Teaching Fellows Program.

Schedule E (Form 990 or 990-EZ) 2013

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DLN: 93493132040445

SCHEDULE F (Form 990)

Department of the Treasury

Name of the organization

Queens University of Charlotte

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

					56-0530003	
General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?						
other assistance,	al Information on Activities Outside the United States. Complete If the organization answered of Form 990, Part IV, line 14b. Iters. Does the organization maintain records to substantiate the amount of its grants and ince, the grantees' eligibility for the grants or assistance, and the selection criteria used grants or assistance?					
			ganızatıon's pı	rocedures for monitorir	ng the use of its grant	s and other
3 Activites per Regio	n (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ce is needed)	
(a) Region		offices in the	employees, agents, and independent contractors in	region (by type) (e g , fundraising, program services, investments, grants to recipients located in the	a program service, describe specific type of	for and investments
	celand and			Investments		607,000
` ,						
(3)						
(4)						
(5)						
b Total from continuato Part I						,
c lotais (add lines 3	a and 3b)		I			607.000

Pa						ited States. Compl duplicated if additior			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(:	1)								
(:	2)								
(:	3)								
(4	4)								
2						ies by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganizations or ent	rities					

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

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

Part IV Foreign Forms

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

Schedule F (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 56-0530003

Name: Queens University of Charlotte

Schedule F (Form 990) 2013

Page **5**

Part V Supplemental Information

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

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DLN: 93493132040445

OMB No 1545-0047

(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.

Open to Public Inspection

Department of the Treasury Attach to Form 990 or Form 990-EZ. See separate instructions. Internal Revenue Service Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Phone solicitations Folicitation of non-government grants Folicitation of government grants Folicitation of	nber
Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Internet and email solicitations Phone solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser have custody or control of contributions? Yes No Yes No Yes No	
Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (ii) Name and address of individual or entity (fundraiser) (iii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No Yes No	
Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser have custody or control of contributions? Yes No Yes No (v) Amount paid to (or retained by) fundraiser listed in col (i) Yes No	
Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser have custody or control of contributions? Yes No Yes No (vi) Amount paid to (or retained by) fundraiser listed in coll (i) Yes No	
Phone solicitations In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (iii) Did fundraiser have custody or control of contributions? Yes No Yes No Yes No Individual or entity (fundraiser) Yes No	
Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (ii) Name and address of individual or entity (fundraiser have custody or control of contributions? Yes No Yes No 1. Yes No	
or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of individual or entity (fundraiser) Or entity (fundraiser) (ii) Activity (iii) Did fundraiser have custody or control of	
(i) Name and address of Individual or entity (fundraiser) (ii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No (iii) Activity (iii) Did fundraiser have custody or control of contributions? Yes No (v) Amount paid to (or retained by) fundraiser listed in col (i) (vi) Amount paid to (or retained by) fundraiser listed in col (i)	Гм
Individual or entity (fundraiser) fundraiser have custody or control of contributions? Yes No 1 1 1 1 1 1 1 1 1 1 1 1 1	
1	ed by)
2	
3 4	
4	
4	
5	
5	
7	
3	
tal	
List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing	

Sche	dule	G (Form 990 or 990-EZ) 2013				Page 2
Pai	rt II	Fundraising Events. Con more than \$15,000 of funda events with gross receipts of the second seconds.	raising event contribut			
		evenue man grees receipte s	(a) Event #1 B.W. Golf Tourn (event type)	(b) Event #2 Golf Tournament (event type)	(c) O ther events 0 (total number)	(d) Total events (add col (a) through col (c))
Ð	1	Gross receipts	29,36			56,043
Revenue	2	Less Contributions		5,566		5,566
<u>~</u>	3	Gross income (line 1 minus line 2)	29,36	8 21,109		50,477
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs	5,91	3,500		9,413
ă	7	Food and beverages .	1,73	8 1,200		2,938
Direct	8	Entertainment		300		300
à	9	Other direct expenses .	73	6 541		1,277
	10	Direct expense summary Add III	nes 4 through 9 ın columr	n (d)		(13,928)
	11	Net income summary Subtract I	ine 10 from line 3, columi	n (d)		36,549
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or rep	•
Revenue		\$15,000 on Form 990-EZ, li	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue				
မှာ	2	Cash prizes				
kpenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
붑	5	Other direct expenses				
	6	Volunteerlabor	│	│ Yes %		_
		Direct expense summary Add line				
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		
9 a b	Ist	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 'Yes," explain	licenses revoked, suspe	nded or terminated during	the tax year?	· · 「Yes 「No

						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> </u>	<u> </u>		rm 990 or 990-	7) 2012

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DLN: 93493132040445

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.

Department of the Treasury Internal Revenue Service							Open to Public Inspection	
Name of the organization						Employer identification number		
Queens University of Charlotte						56-0530003		
Part I General Information	on on Grants and	l Assistance				•		
 Does the organization maintain the selection criteria used to a Describe in Part IV the organization 	ward the grants or as	sıstance?					⊽ Yes	
Part II Grants and Other A Form 990, Part IV, lii			rganizations in the more than \$5,000. Pa				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 gra or assistance	
2 Enter total number of section 5	. 0.1 (c.)(3.) and govern	ment organizations list	ted in the line 1 table			•		

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

MONITORING THE USE OF

GRANTS

(a)Type of grant or assistance

(f)Description of non-cash assistance

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

(d)A mount of

SCHEDULE I, PART I, LINE 2 Scholarships and fellowships are awarded by Queens University of Charlotte to students based on their academic achievement, talent in the fine arts, and participation in intercollegiate athletics. The awards are based on their performance levels. Students are also

awarded need-based scholarships and grants based on their need as established by completing the Free Application for Federal Student Aid (FAFSA)

(e) Method of valuation (book,

(c)A mount of

and, if applicable, by specific criteria and guidelines for other federal and state programs

(b) Number of

(a) Type of grant of assistant		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	(1) Description of non-cash assistance		
(1) SCHOLARSHIPS		1680	17,912,341					
(2) WORK STUDY PROGRAMS		155	46,928					
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.								
Return Reference	ce Explanation							

DLN: 93493132040445

OMB No 1545-0047

Inspection

Open to Public

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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.

Name of the organization Queens University of Charlotte **Employer identification number**

56-0530003

Pa	rt I Questions Regarding Compensation)	<u> </u>			
					Yes	No
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	<u>~</u>	Housing allowance or residence for personal use			
	Travel for companions	\vdash	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	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org			1b	Yes	
2	Did the organization require substantiation prior to redirectors, trustees, officers, including the CEO/Exec			2	Yes	
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all th used by a related organization to establish compensi	at apply	y Do not check any boxes for methods			
	Compensation committee	굣	Written employment contract			
	✓ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	In	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, For a related organization	art VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	oaymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplemen	ital non	qualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	vide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	st com	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of					
а	The organization?			5a	Yes	
	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III			35		110
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 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," d			7		No
8	Were any amounts reported in Form 990, Part VII, p					
-	subject to the initial contract exception described in					
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	rebutta	able presumption procedure described in Regulations	9		

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

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

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

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

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any addition	complete this part for any additional information									
Return Reference	Explanation									
RESIDENCE FOR PERSONAL USE AND SOCIAL CLUB DUES	SCHEDULE J, PART I, LINE 1A Queens owns and provides a residence for the President which is located on the campus. This residence is used frequently for business purposes such as meetings, receptions, and entertaining donors. The business value was not treated as taxable compensation. Queens also provides the President with a membership to a country club (Myers Park Country Club). This membership is used primarily for business purposes such as meetings, receptions and entertaining donors. The value was not treated as taxable compensation.									
DETERMINING COMPENSATION	SCHEDULE J, PART I, LINE 3 The Presidents compensation is determined and approved by the Compensation Committee of the Board of Trustees This committee utilizes information from the 990 returns of other benchmark institutions, compensation surveys of other private colleges and universities, and other benchmarks obtained by the members of the committee as information in the compensation determination process. These discussions are documented in the minutes and files of the compensation committee.									
COMPENSATION CONTINGENT UPON THE REVENUES OF THE ORGANIZATION	SCHEDULE J, PART I, LINE 5A The Compensation Committee implemented a Compensation Philosophy for the officers of the organization through the application of the following considerations * Base salary will be set so that the targeted positioning of an Officer is the 50th percentile of the target market for each position. The actual base salary for an individual Officer relative to the target market pay will be set by the Committee based on the individual's unique background, experiences, personal skills and abilities (including creativity, growth-orientation and discipline) as well as based on the business challenges facing the Organization which require the use of such attributes or skills. * Annual incentive compensation, if any, will be delivered according to a guideline that approximates the market 75th percentile total cash compensation for commensurate performance. The Committee has the discretion to deliver annual incentives above or below the 75th percentile based on individual circumstances and performance conditions. The aim of annual incentives is to drive and reward consistent improvement in performance. Goals to achieve an incentive payout include, but are not limited to, targets at different levels for total revenues of the organization.									
DEFERRED COMPENSATION	SCHEDULE J, PART II, COLUMN (C) AMOUNTS REPORTED AS DEFERRED COMPENSATION ARE EMPLOYER CONTRIBUTIONS TO THE DEFINED CONTRIBUTION RETIREMENT 403(B) PLAN, WHICH IS APPLICABLE TO ALL PARTICIPATING EMPLOYEES									

Schedule J (Form 990) 2013

Software ID: Software Version:

EIN: 56-0530003

Name: Queens University of Charlotte

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

	- Officers, Direct	ors, rrustees, ke	/ Linployees, und	riightest compens,	ateu Empioyees		
J	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	Compensation compensation c		(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(I) (II)			55,317	7,304 0	9,916 0	167,477 76,600	
(I) (II)		62,923	7,652	15,040 0	11,840 0	293,316 0 0	0 0
(I) (II))	21,701	310	15,356 0	23,217 0	7 256,041 0 0	0 0
(I) (II)		21,200	1,290	15,000 0	26,496 0	251,390	0 0
(I) (II)		17,000	233	12,162 0	23,846 0	202,789	0 0
(I) (II)		13,000	174	9,750 0	23,789 0	166,517	0 0
(I) (II)	124,056	37,917	8,248	3,495 0	2,559 0	9 176,275 0 0	0 0
(I) (II)			50,102	8,544 0	9,289 0	180,106 49,600	
(I) (II)		60,225	15,293	19,125 0	48,858 0	425,784	0 0
(I) (II)			2,400	17,625 0	4,694 0	256,674 0 0	0 0
(I) (II)			34,342	9,530 0	18,031	181,815 5,600	
		(i) Base Compensation (i) 94,940 (ii) 195,861 (ii) 195,454 (ii) 187,404 (ii) 149,548 (ii) 119,804 (ii) 124,056 (ii) 124,056 (iii) 282,283 (iii) 231,955 (iii) 119,912	(i) Base Compensation	(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation (ii) Bonus & Incentive compensation (iii) 94,940 76,600 (iii) 195,861 62,923 7,652 (iiii) 195,454 21,704 310 (iiii) 187,404 21,200 1,290 (iiii) 149,548 17,000 233 (iiii) 119,804 13,000 174 (iii) 124,056 37,917 8,248 (iii) 124,056 37,917 50,102 (iii) 282,283 60,225 15,293 (iii) 231,955 2,400 (iii) 119,912 34,342	(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation (ii) Bonus & Incentive compensation (iii) 94,940 (iii) 76,600 (iii) 195,861 62,923 7,652 15,040 (iii) 195,454 21,704 310 15,356 (iii) 187,404 21,200 1,290 15,000 (iii) 149,548 17,000 233 12,162 (iii) 119,804 (iii) 119,804 (iii) 119,804 (iii) 124,056 37,917 8,248 3,495 (iii) 124,056 (iii) 282,283 60,225 15,293 19,125 (iii) 231,955 (iii) 231,955 (iii) 231,955 (iiii) 231,955 (iiii) 231,955 (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	(i) Base Compensation (ii) Bonus & incentive compensation (iii) Other compensation compensation benefits (i) 94,940 (ii) 76,600 55,317 7,304 (iii) 9,916 (iii) 0 9,916 (iii) 0 9,916 (iii) 0 0 9,916 (iii) 0 0 11,840 (iii) 0 0 11,840 (iii) 0 0 11,840 (iii) 0 0 11,840 (iii) 0 0 <td> Co Deferred Compensation Co Deferred Compens</td>	Co Deferred Compensation Co Deferred Compens

(Form 990)

2

financed property?

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.

OMB No 1545-0047

DLN: 93493132040445

2013

Open to Public **Inspection**

Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** Queens University of Charlotte 56-0530003 Part I **Bond Issues** (h) On (i) Pool (g) Defeased behalf of financing (c) CUSIP # (a) Issuer name (b) Issuer EIN (d) Date issued (e) Issue price (f) Description of purpose ıssuer Yes No Yes No Yes No PUBLIC FINANCE 7/27/2011, 5/10/2001 & AUTHORITY 27-3866124 12-19-2013 55,915,000 Χ Χ Χ 10/14/1999 Part II **Proceeds** В С D Α Amount of bonds retired 0 Amount of bonds legally defeased 2 0 3 Total proceeds of issue 55,915,000 4 Gross proceeds in reserve funds 5 Capitalized interest from proceeds 0 Proceeds in refunding escrows 6 Issuance costs from proceeds 7 395,000 Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 0 Capital expenditures from proceeds 10 Other spent proceeds 55,520,000 11 Other unspent proceeds 12 0 Year of substantial completion 13 No Yes Yes Yes No Yes No No Were the bonds issued as part of a current refunding issue? Х 14 Were the bonds issued as part of an advance refunding issue? 15 Х Has the final allocation of proceeds been made? Х 16 Does the organization maintain adequate books and records to support the final 17 Χ allocation of proceeds? **Private Business Use** Part III C Α В D Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned Χ property financed by tax-exempt bonds?

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

Χ

Sche	edule K (Form 990) 2013								Page 2
Par	Private Business Use (Continued)								
			A	E		C			D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business us of bond-financed property?	е	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 finance property?	d							
С	Are there any research agreements that may result in private business use of bond-financed property?		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	•							
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		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						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		х						
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							
Pai	t IV Arbitrage								
		A		В		С		D	
	Yes	No	Yes	No	Y	es	No	Yes	No
1	Has the Issuer filed Form 8038-T?	X							
2	If "No" to line 1, did the following apply?								

		A		В		٠		U	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х						
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?								
b	Exception to rebate?	Х							
С	No rebate due?								
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		Х						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х						
b	Name of provider	0							
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								
							Sc	hedule K (Forr	n 990) 2013

			١	В	}	c		D	
		Yes	No	Yes	No	Yes	No	Yes	No
а	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
b	Name of provider	0							
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
,	Were any gross proceeds invested beyond an available temporary period?		X						
7	Has the organization established written procedures to monitor the requirements of section 148?	Х							
Pa	rt V Procedures To Undertake Corrective Action								
			\	В	1	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		Х							
Pa	Supplemental Information. Provide additional in	formation for res	ponses to q	uestions on S	Schedule K (:	see instructio	ns).		
	Return Reference			Explanation	1				

Part VI Supplemental Info	ormation. Provide additional information for responses to questions on Schedule K (see instructions).
Return Reference	Explanation
SCHEDULE K SUPPLEMENTAL INFORMATION	PART II, COLUMN A, LINE 11 THE OTHER SPENT PROCEEDS ARE THE REFUNDING PROCEEDS THAT ARE NO LONGER IN ESCROW

DLN: 93493132040445

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

Open to Public Inspection

	ns University	ganızatıon of Charlotte							E	mploy	er ident	tificati	on numbe	er
											30003			
Part							3) and sectio						- 40h	
		e of disqualit				nship between	0, Part IV, line	(c) Des						rected?
1	(a) Nam	c or alsqualli	icu	person		on and organiz		(6) 563	сприоп	or tru	ii sactioi		Yes	No
													105	1110
														_
														_
														_
														-
														_
														-
		amount of tax	ind	curred by o	rganızatıon	managers or	dısqualıfıed pe	rsons during	he year	runde	rsectio	n		
	4958 .		•								- \$			
3	Enter the a	amount of tax	(, IT	any, on line	2, above,	reimbursed by	y the organizat	ion			F \$			
Par	t III Lo	ans to an	d/e	or From	Interest	ed Persons	5.							
							990-EZ, Part \ line 5, 6, or 22		Form 9	90, Pa	art IV , lı	ine 26,	or If the	
(a) [Name of	(b)		(c)	(d) Loar		(e)Original	(f)Balance	(g) In		(h)		(i)Wr	ıtten
	erested	rested Relationship erson with organization		Purpose o			principal	due	defaul	t?	Approv	/ed	agreei	ment?
рe	erson				organizat	ion	amount				by .			
þе			,,,								lboard			
		organizati	111								board or			
		organizaci	711			T_				T	or commi	1		
		organizaci.) II		То	From			Yes	No	or	ttee?	Yes	No
		organizaci.			То	From	_		Yes	No	or commi	1	Yes	No
		organizati.			То	From			Yes	No	or commi	1	Yes	No
		Organizati.			То	From			Yes	No	or commi	1	Yes	No
		Organizati.			То	From			Yes	No	or commi	1	Yes	No
		Organizaci.			То	From			Yes	No	or commi	1	Yes	No
Total		Organizati.		▶ \$	То	From			Yes	No	or commi	1	Yes	No
Total		ants or As	sis	tance Be	enefitting	J Intereste	d Persons.			No	or commi	1	Yes	No
Part	Cor	ants or As	sis e o	tance Be organization	enefitting on answer	J Intereste ed "Yes" on	Form 990, P		27.		or commit Yes	No		
Part	Cor Name of ir	ants or As	sis e o	stance Be organizations) Relations	enefitting on answer hip between	JIntereste red "Yes" on n (c) Amoun			27.		or commit Yes	No		No
Part	Cor	ants or As	sis e o	stance Be organizations) Relations erested pe	enefitting on answer hip betwee	JIntereste red "Yes" on n (c) Amoun	Form 990, P		27.		or commit Yes	No		
Part	Cor Name of ir	ants or As	sis e o	stance Be organizations) Relations	enefitting on answer hip betwee	JIntereste red "Yes" on n (c) Amoun	Form 990, P		27.		or commit Yes	No		
Part	Cor Name of ir	ants or As	sis e o	stance Be organizations) Relations erested pe	enefitting on answer hip betwee	JIntereste red "Yes" on n (c) Amoun	Form 990, P		27.		or commit Yes	No		
Part	Cor Name of ir	ants or As	sis e o	stance Be organizations) Relations erested pe	enefitting on answer hip betwee	JIntereste red "Yes" on n (c) Amoun	Form 990, P		27.		or commit Yes	No		
Part	Cor Name of ir	ants or As	sis e o	stance Be organizations) Relations erested pe	enefitting on answer hip betwee	JIntereste red "Yes" on n (c) Amoun	Form 990, P		27.		or commit Yes	No		
Part	Cor Name of ir	ants or As	sis e o	stance Be organizations) Relations erested pe	enefitting on answer hip betwee	JIntereste red "Yes" on n (c) Amoun	Form 990, P		27.		or commit Yes	No		
Part	Cor Name of ir	ants or As	sis e o	stance Be organizations) Relations erested pe	enefitting on answer hip betwee	JIntereste red "Yes" on n (c) Amoun	Form 990, P		27.		or commit Yes	No		

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.											
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization revenues?							
				Yes	No						
(1) CAROLINE WANNAMAKER SINK	TRUSTEE	259,632	CONSULTING		Νo						
				1							

Part V Supplemental Information

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

Return Reference	Explanation
•	Caroline is a partner at Robinson Bradshaw & Hinson, PA (RBH) RBH regularly PROVIDES CONSULTING SERVICES TO Queens on various issues

Schedule L (Form 990 or 990-EZ) 2013

DLN: 93493132040445

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

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

Noncash Contributions

Open to Public Inspection

Name of the organization Queens University of Charlotte **Employer identification number**

			56	-0530003			
Part I Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr			nts
1 Art—Works of art	×	1	•	appraisal			
2 Art—Historical treasures .		_	202/000	причина.			
3 Art—Fractional Interests							
4 Books and publications							
5 Clothing and household goods							
6 Cars and other vehicles							
7 Boats and planes							
8 Intellectual property							
9 Securities—Publicly traded .	X	38	1,558,806	FMV			
.0 Securities—Closely held stock .							
Securities—Partnership, LLC, or trust interests							
.2 Securities—Miscellaneous							
L3 Qualified conservation contribution—Historic structures							
.4 Qualified conservation contribution—Other							
5 Real estate—Residential .							
. Real estate—Commercial							
7 Real estate—O ther							
8 Collectibles							
9 Food inventory							
0 Drugs and medical supplies .							
21 Taxıdermy							
2 Historical artifacts							
3 Scientific specimens							
4 Archeological artifacts							
.5 Other▶(IFT CERTIFICATES)	X	19	210	FMV			
26 Other►(ELESCOPE)	×	1	2,600				
27 Other►(URNITURE/HOUSEHOLD ITEMS)	X	1	17,633				
0 OK CABINET)	_ X	1	2,585				
Other►(VENT TICKETS)	_ X	2		FMV			
Number of Forms 8283 received by t for which the organization completed	_		I 2	9		Yes	1 No
Ouring the year, did the organization it must hold for at least three years							
for exempt purposes for the entire h	olding period	?			30a		Νo
b If "Yes," describe the arrangement	ın Part II						
Does the organization have a gift ac	ceptance po	licy that requires the revie	w of any non-standard co	ntributions?	31	Yes	
Does the organization hire or use th contributions?	ird parties or	related organizations to s	olicit, process, or sell no	ncash • • •	32a		No
b If "Yes," describe in Part II							
If the organization did not report an	amount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			
describe in Part II		•	, ,	•			

	whether the organization is reporting in Part I, column (b), the number of contributions, the eccived, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
SCHEDULE M, PART I, LINE 33	THE UNIVERSITY DOES NOT SEEK AN APPRAISAL, NOR DOES THE UNIVERSITY RECORD AS REVENUE, ANY NONCASH ITEM DONATED UNLESS THE DONOR PROVIDES AN INDEPENDENT THIRD PARTY APPRAISAL AS PART OF FORM 8283 THE STOCK GIFTED TO QUEENS IS SOLD IMMEDIATELY UPON THE TRANSFER, WHICH IS HOW A CASH VALUE IS DETERMINED FOR THE STOCK

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493132040445

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization	Employer identification number
Queens University of Charlotte	
	56-0530003

990 Schedule O, Supplemental Information

Return Reference Explanation									
REVIEW OF FORM 990									
MONITORING CONFLICTS OF INTEREST	FORM 990, PART VI, SECTION B, LINE 12C At least annually, all employees are reminded of the University's conflict of interest policy and all new employees are educated about the policy during the hiring process. Supervisors look for potential conflicts of interest for employees under their supervision and disclose such potential conflicts as necessary.								
DETERMINING COMPENSATION	FORM 990, PART VI, SECTION B, LINE 15A AND B The Presidents compensation is determined and approved by the Compensation Committee of the Board of Trustees. The committee utilizes a nindependent compensation consulting firm as well as information from the 990 returns of other benchmark institutions, compensation surveys of other private colleges and universities, and other benchmarks obtained by the members of the committee as information in the compensation determination process. These discussions are documented in the minutes and filles of the compensation committee. The President determines the compensation for the other officers of the university. She utilizes information from the 990 returns of other benchmark institutions, compensation surveys of other private colleges and universities, and other benchmark data in the compensation determination process.								
DOCUMENTS AVAILABLE TO THE PUBLIC	FORM 990, PART VI, SECTION C, QUESTION 19 NONE OF THESE DOCUMENTS ARE AVAILABLE TO THE GEN ERAL PUBLIC, HOWEVER, ANY OF THESE DOCUMENTS ARE AVAILABLE UPON REQUEST								
Part XI Line 9	Other Changes in Net Assets or Fund Balances Asset transfer from dissolved subsidiary \$8,6 60,797 Changes in fair value of financial instruments 447,167								

DLN: 93493132040445

OMB No 1545-0047 2013

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SCHEDULE R (Form 990)

Department of the Treasury

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

► Attach to Form 990. ► See separate instructions.

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

Internal Revenue Service Name of the organization **Employer identification number** Queens University of Charlotte 56-0530003 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

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

Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the		ne organization an	swered "Yes" on	Form 990, Part IV	, line 34 because it	had on	ie
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	512(b) ontrolled city?
(1) EXECUTIVE LEADERSHIP INSTITUTE INC	EDUCATION	NC	501(C)(3)	TYPE I	NA	Yes Yes	No
1900 SELWYN AVENUE							
CHARLOTTE, NC 28274 56-2232163							
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 5013	35Y	•	Schedule R (Forn	1 990) 2	013

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)	mana parti	ral or	(k) Percentage ownership
						,			Yes	No		Yes	No	
												igspace		
												\vdash		
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 controllin 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 city?	No.
							1			-	ĺ	Yes	•	No
												l		

Note. Complete line 1 if any entity is	s listed in Parts II, III, or IV of this schedule						Yes	No	
1 During the tax year, did the orgranizati	on engage in any of the following transactions with one o	or more rela	ated organizations lis	sted in Parts II-IV?					
a Receipt of (i) interest (ii) annuities	(iii) royalties or (iv) rent from a controlled entity					1a		No	
b Gift, grant, or capital contribution to	related organization(s)					1b		No	
c Gift, grant, or capital contribution fr	om related organization(s)					1c		No	
d Loans or loan guarantees to or for re	elated organization(s)					1d		No	
e Loans or loan guarantees by related	organization(s)					1e		No	
f Dividends from related organization	(s)					1f			
g Sale of assets to related organization	on(s)					1g		No	
h Purchase of assets from related organization(s)									
i Exchange of assets with related organization(s)									
j Lease of facilities, equipment, or other assets to related organization(s)									
k Lease of facilities, equipment, or ot	ner assets from related organization(s)					1k		No	
I Performance of services or members	thip or fundraising solicitations for related organization(s	s)				11		No	
m Performance of services or members	thip or fundraising solicitations by related organization(s	s)				1m		No	
n Sharing of facilities, equipment, mail	ing lists, or other assets with related organization(s)					1n	Yes		
• Sharing of paid employees with rela	red organization(s)					10		No	
p Reimbursement paid to related orga	nızatıon(s) for expenses					1 p		No	
q Reimbursement paid by related orga	inization(s) for expenses					1q		No	
r Other transfer of cash or property to	related organization(s)					1r		No	
s Other transfer of cash or property fr	om related organization(s)					1s	Yes		
2 If the answer to any of the above is	'Yes," see the instructions for information on who must o	complete t	hıs lıne, ıncludıng co	vered relationships	and transaction thresholds				
	(a) lated organization		(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved		
1) EXECUTIVE LEADERSHIP INSTITUTE		5	ò	8,660,797	BOOK VALUE				

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 i													
(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>				l					<u> </u>	

Part VII Supplemental Information

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

Return Reference	Explanation
	EXECUTIVE LEADERSHIP INSTITUTE, A SUBSIDIARY TAX EXEMPT ORGANIZATION, WAS DISSOLVED ON JUNE 25, 2014 UPON TERMINATION, THE NET ASSETS AS OF THAT DATE WERE TRANSFERRED TO QUEENS UNIVERSITY

Schedule R (Form 990) 2013