

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



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

DLN: 93493133059835

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 ca	lendar year, or tax year beginning	9 07-01-2013 , 2013, and ending 06-3	30-2014			
		applicable	C Name of organization BOARD OF TRUSTEES OF WHITMAN	COLLEGE		D Emplo	yer ide	entification number
_	dress cl	_	Doing Business As			91-0	56774	10
	me cha	_						
	tial retu		Number and street (or P O box if m 345 Boyer Ave	all is not delivered to street address) Room/si	uite	E Teleph	one nur	mber
	rminate	ea return	City or town, state or province, cour	stry, and ZID or foreign postal sada		(509)	527-	5592
_			Walla Walla, WA 993622067	ntry, and ZIP or foreign postal code				
j Api	plicatio	n pending			1			\$ 204,667,731
			F Name and address of prin GEORGE BRIDGES	icipal officer		Is this a group subordinates?		n for □ Yes 🔽 No
			345 Boyer Ave Walla Walla, WA 99362					
			Walla Walla, WA 39302			Are all subord included?	ınates	Γ Y es Γ No
I Ta	x-exen	npt status	▼ 501(c)(3)	nsert no) 4947(a)(1) or 527	7		na list	(see instructions)
	ebsite	e:► W\	WW WHITMAN EDU		H(c)	Group exempt	tion ni	ımber 🕨
<u> </u>	6		n ✓ Corporation ☐ Trust ☐ Association	- C out •	1 , , ,			
K Fori	m or or	rganizatior	Corporation Trust Association	n Other -	L Yea	ar of formation 18		M State of legal domicile WA
Pa	rt I	Sun	nmary					
90		THE MI	describe the organization's mission's SSION OF WHITMAN COLLEGE GRADUATE EDUCATION	n or most significant activities IS TO PROVIDE AN EXCELLENT, W	ELL-RO	JNDED LIBERA	AL AR	TS AND SCIENCES
Governance								
0¥e	2	Check t	his box দ if the organization dis	scontinued its operations or disposed	of more t	han 25% of its	net a	ssets
								1
Activities &	1		-	ing body (Part VI, line 1a) . . . of the governing body (Part VI, line 1b			4	18
				calendar year 2013 (Part V, line 2a)			5	1,882
ACI				ecessary)			6	881
	7a	Total ur	related business revenue from P	art VIII, column (C), line 12			7a	-444,470
	ь	Net unre	elated business taxable income fr	om Form 990-T , line 34			7b	-474,023
						Prior Year		Current Year
g _i	8		ributions and grants (Part VIII, lir		15,233,		16,682,083	
Ravenue	9	_		ne 2g)		72,407,1		78,137,607
Ή÷	10			(A), lines 3, 4, and 7d) lines 5, 6d, 8c, 9c, 10c, and 11e)		58,109,		71,850,710
	11 12			(must equal Part VIII, column (A), lin	e	4,634,	928	2,731,006
						150,385,	518	169,401,406
	13			IX, column (A), lines 1-3)		22,367,	-	23,502,386
	14			X, column (A), line 4)	·		0	0
88	15	5-10		e benefits (Part IX, column (A), lines		43,924,46		44,144,148
Expenses	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)			0	0
ੜੇ	Ь	Total fo	undraising expenses (Part IX, column (D)					
	17	Other	expenses (Part IX, column (A), l	ınes 11a-11d, 11f-24e)		28,112,	119	28,639,331
	18			st equal Part IX, column (A), line 25)	<u> </u>	94,403,		96,285,865
. 02	19	Rever	nue less expenses Subtract line	18 from line 12		55,981,		73,115,541
908 308					Beg	inning of Curre Year	nt	End of Year
SS et	20	Total	assets (Part X, line 16)			646,767,	477	719,036,562
Not Assets or Fund Balances	21					99,229,		100,457,417
žΞ	22	Neta	ssets or fund balances Subtract	line 21 from line 20		547,537,	794	618,579,145
	rt II		nature Block					
my k	nowle	dge and		imined this return, including accompainplete Declaration of preparer (other t				
		L				2015-05-13		
Sigr		Sign	ature of officer			Date		
Her	е		ER HARVEY TREASURER & CFO e or print name and title					
		<u> </u>	e or print name and title Print/Type preparer's name	Preparer's signature	Date	Charle C	PTIN	
Paid	d					Check If self-employed		
	u pare		Firm's name 🕨			Firm's EIN 🕨		
	On		Firm's address 🕨			Phone no		
J 36	. 011	עיי				1		

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

┌Yes ┌No

Form	1990 (20	13)	Page 2
Par		Statement of Program Service Accomplishments Theck if Schedule O contains a response or note to any line in this Part III	
1	Briefly	describe the organization's mission	
		N OF WHITMAN COLLEGE IS TO PROVIDE AN EXCELLENT, WELL-ROUNDED LIBERAL ARTS AND S UATE EDUCATION	SCIENCES
2	the pric	organization undertake any significant program services during the year which were not listed on r Form 990 or 990-EZ?	┌ Yes ┌ No
3	Did the service	describe these new services on Schedule O organization cease conducting, or make significant changes in how it conducts, any program	┌ Yes ┌ No
4	Describ expens	" describe these changes on Schedule O e the organization's program service accomplishments for each of its three largest program services, as es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloca I expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 48,194,569 including grants of \$) (Revenue \$ IC INSTRUCTION, SUPPORT AND OTHER PROGRAMS 1,482 FULL TIME EQUIVALENT STUDENTS, 413 GRADUATES	68,496,067)
4b	(Code) (Expenses \$ 23,502,386 including grants of \$ 23,502,386) (Revenue \$ TIONAL FINANCIAL AID 1,231 STUDENTS RECEIVING INSTRUCTIONAL SCHOLARSHIPS, 814 STUDENTS RECEIVING FEDERAL LOAD) NS OR GRANTS
4c	(Code) (Expenses \$ 13,116,313 including grants of \$) (Revenue \$ RY ENTERPRISES 784 STUDENTS IN COLLEGE-PROVIDED HOUSING, 723 STUDENTS IN COLLEGE-PROVIDED BOARD PLANS	9,641,540)
4d		program services (Describe in Schedule O)	
	(Expe	ses \$ including grants of \$) (Revenue \$)
4e	Total	rogram service expenses ► 84,813,268	
			Form 990 (2013)

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

Form	990 (2013)			Page 4
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? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
_		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	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? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		厂_
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 2,891			
	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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
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 ►			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c 6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c	Yes	
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	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			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	ļ		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes," has it filed a Form 7.20 to report these payments? If "No," provide an explanation in Schedule O	14h		

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

<u> </u>	ection A. Governing Body and Management					
					Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	18			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	17			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2	Yes	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management con			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	rıor Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the or	aanız	ation's assets?	5		No
6	Did the organization have members or stockholders?			6		No
	Did the organization have members, stockholders, or other persons who had the pow					
	more members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ui	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not a	requi	red by the Internal R	even	ıe Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			4.0		
104	bid the organization have local enapters, branches, or anniates.			10a		No
	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	ivitie	s of such chapters,	10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the act	ivitie on's e	s of such chapters, xempt purposes?	10b	Yes	No
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it	ivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	ivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing 	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	ivitie on's e s gov orm 9	s of such chapters, xempt purposes? erning body before filing 	10b		No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	s gov	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Form the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with	s gov	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	s gov	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	s gov s gov orm S y inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revi	s gov s gov orm S y inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the	s gov s gov orm S y inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	s gov s gov orm S y inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	y inte the p	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of	y interest of the present of the pre	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organication in joint venture arrangements under applicable federal tax law, and take	y interest of the present of the pre	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take organization in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	y interest of the present of the pre	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form?	y interest of the present of the pre	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	

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

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

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

►Walter Froese Controller 345 Boyer Ave Walla Walla, WA 99362 (509) 527-4936

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

_				_
D	-	α	Δ	4
г	a	ч	_	•

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

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

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

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

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

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

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

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

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

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

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

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

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

	(A) Name and Title	(B) Average hours per week (list any hours	more t	han o	one both	box, ı an c	heck unless officer stee)		Repor comper from organiza	table nsation the tion (W-	(E) Reportable compensation from related organizations (W	<u>, </u>	(F) Estima mount o compens from t	ited f other ation :he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-M15C)	2/1099-MISC)		rganizati relate organiza	ed │
												_		
												+		
												+		
												_		
												+		
1b c	Sub-Total Total from continuation shee ts to Part VII. S	ection	٠.	•			•				+		
d	Total (add lines 1b and 1c) .			٠.	٠.	٠.		Þ		2,015,222		0		579,878
2	Total number of individuals (ir \$100,000 of reportable comp						d abov	'e) w	ho receive	d more th	nan	<u>'</u>		
3	Did the organization list any f					, key	emplo	yee	, or highes	t compen	sated employee		Yes	No
4	on line 1a? <i>If "Yes," complete</i> s For any individual listed on lin					• mnei	nsatio	n an	d other cou	 mnensatu	on from the	3		No
-	organization and related organ											4	V 0.5	
5	Did any person listed on line 1			-					_	anızatıon	or individual for	4	Yes	
	services rendered to the orga	nızatıon? <i>If "Yes</i>	," compi	ete S	chea	lule J	forsu	ch p	erson .			5		No
	ction B. Independent Co					_								
1	Complete this table for your fi compensation from the organi												tax year	
	-	(A) Name and business	address							Des	(B) scription of services		(C Comper	
	APPETIT P O BOX 417632 BOSTON MA	02241								FOOD SERV	/ICES	\Box		,101,902
	& KEEBLE INC P O BOX 2747 SPOKA		\A/AII	VIIV	MA 00	1262				CONSTRUC		-	1	,924,515
	SIEBOLD GENERAL CONSTRUCTION 1 MOUNTAIN CONSTRUCTION INC 822									CONSTRUC		+		742,150 545,788
	ICELLO ASSOCIATES 1200 17TH ST ST				,						NT CONSULTING			250,000
	Total number of independent co \$100,000 of compensation from	•	-	not	lımıt	ed to	thos	e lıst	ted above)		ived more than			

ts its	1a
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f
ts, G : Am	С
. Gifi nilar	d
ons, Sin	f
buti ther	
ontri nd O	g h
	n
rogram Service Revenue	2a
Rev	2a b c d e f
же.	C C
) Ser	u e
gran	f
Ρ̈́	g
	т <u>д</u> 3
	4
	4 5
	6a
	b
	С
	d
	7a
	b
	c
	d
<u> </u>	8a
event	
her F	b
ŏ	С
	9a
	b
	с 10а
	b c
	11a
	p TT9
	С
	d
	e

Form 99		•						Page 9
Part V	/111	Statement o Check if Schedu	of Revenue ule O contains a respon:	se or note to anv lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
z z	1a	Federated cam	paigns 1a					
rani	b	Membership du	es 1b					
Ē.	С	Fundraising eve	ents 1c					
Gifts, Grants ilar Amounts	d	Related organiz	zations 1d	3,522,731				
B,G	е	Government grants	s (contributions) 1e	728,847				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	12,430,505				
ontrib id Ott	g	1a-1f \$	ons included in lines	6,222,063	16,682,083			
<u>3 F</u>	h	Total. Add lines	sla-ir	· · · · •	10,002,003			
an	_			Business Code				
.ven	2a	STUDENT TUITION		611310	68,500,539	68,500,539		
<u>8</u> 2	b	HOUSING & MEAL S	SERVICES	611310	8,481,695	8,481,695		
Š	d	BOOKSTORE		451211	1,155,373	1,155,373		
Ž.	e e				0			
ran L	f	All other progra	am service revenue		0	0	0	0
Program Service Revenue		-				U	U	U
	g 3		s 2a-2f		78,137,607			
			ome (including dividend ar amounts)		-3,796,589		-448,942	-3,347,647
	4	Income from inves	stment of tax-exempt bond p	· · · · · · · · · · · · · · · · · · ·	0			
	5	Royalties			0			
		Cross rents	(ı) Real 2,873,362	(II) Personal				
	6a b	Gross rents Less rental	1,547,935					
	_ c	expenses Rental income	1,325,427	0				
		or (loss)			1 225 427			1 225 427
	d	Net rental inco	me or (loss)		1,325,427			1,325,427
	7a	Gross amount from sales of assets other	(i) Securities 109,349,915	(II) O ther				
		than inventory						
	b	Less cost or other basis and	33,702,616					
	c	sales expenses Gaın or (loss)	75,647,299	0				
	d	Net gain or (los	<u> </u>		75,647,299			75,647,299
e	8a	Gross income f events (not inc						
Other Revenue		\$of contributions See Part IV , lin	s reported on line 1c)					
<u>ū</u>		1	a 					
듇	b c		penses b (loss) from fundraising e	vents	0			
	9a		rom gaming activities					
			a					
	b		penses b					
	10a		(loss) from gaming activ	rities	0			
	10a	Gross sales of returns and allo						
			a	20,246				
	Ь		oods sold b	15,774			=	
	С		(loss) from sales of inve		4,472		4,472	
	11a	Miscellaneous OTHER	s kevenue	Business Code 900099	1,401,107			1,401,107
	ь	OINEK		300033	0			2,.01,101
	C				0			
	d	All other reven			0	0	0	0
	e	Total. Add lines	L	🕨				
	12	Total revenue.	See Instructions		1,401,107			
	J				169,401,406	78,137,607	-444,470	75,026,186

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Check # Schools O contents a reported or nate to any line in this Part IX C C C C C C C C C	Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns $$ All	other organizat	ions must comp	lete column (A)	
To not not an amount of the components of the components and organizations in the United States See Part IV, line 21 2,75		Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>	<u> </u>	<u> </u>
## Operation of the fund of States See Part IV, line 22 Ginst and other assistance to individuals in the United States See Part IV, line 22 Canal States See Part IV, line 22 22,361,869 22,361,869 22,361,869 23,361,860 24,376,480 24,37				Program service	Management and	Fundraising
United States See Part IV, line 22 2 23,361,849 22,361,849 22,361,849 3 Grants and other assistance to governments, organization of the part IV, line 16 1, 140,337 1,140,337 1	1		0			
a prantations, and individuals outside the United States See Part IV, lines 17 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 6 Compensation of current officers, directors, trustees, and key employees 7 Other salaries and contributions (include section 401(k) and 403(b) employer contributions (include section 401(k) and 403(b) and 403(b) employer contributions (include section 401(k) and 403(b) and 403	2		22,361,849	22,361,849		
5 Compensation of current officers, directors, trustees, and key employees 1,284,500 520,850 522,186 211,464	3	organizations, and individuals outside the United	1,140,537	1,140,537		
Review Section Sect	4	Benefits paid to or for members	0			
des defined under section 4958(f)(1) and persons described in section 4958(f)(3) % 0	5		1,284,500	520,850	552,186	211,464
Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). 2,785,521 2,322,907 33,7750 138,864 Payroll taxes . 2,29,405 1,859,150 262,316 107,939 Payroll taxes . 2,29,405 1,859,150 262,316 107,939 Payroll taxes . 2,29,405 1,859,150 262,316 107,939 Payroll taxes . 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	6	(as defined under section 4958(f)(1)) and persons	0			
and 403(b) employer contributions)	7	Other salaries and wages	31,454,994	26,781,329	3,370,430	1,303,235
10 Payroll taxes	8		2,785,521	2,322,907	327,750	134,864
## A Management	9	Other employee benefits	6,389,728	5,328,534	751,828	309,366
Management	10	Payroll taxes	2,229,405	1,859,150	262,316	107,939
Legal	11	Fees for services (non-employees)				
c Accounting 102,940 72,540 15,000 15,000 d Lobbying 8,860 8,860 8,860 Professional fundraising services. See Part IV, line 17 0 8 8,860 8,860 Professional fundraising services. See Part IV, line 17 0 4 4 5 6 6 8,860 8,861 8,860 8,860 8,860 8,820 8,622,82 8,622,82 8,622,82 8,622,82 8,622,82 8,622,82	а	Management	0			
Bobying Boby	b	Legal	78,205	66,205	6,000	6,000
Professional fundraising services See Part IV, line 17 f Investment management fees	С	Accounting	102,540	72,540	15,000	15,000
Travel General management fees Genera	d	Lobbying	8,860		8,860	
Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	e	Professional fundraising services See Part IV, line 17	0			
Column (A) amount, list line 11g expenses on Schedule O)	f	Investment management fees	0			
12 Advertising and promotion	g	column (A) amount, list line 11g expenses on	9 112 671	8.491.498	455.749	165 424
13 Office expenses	12				155,1.15	
1,552,549 764,280 788,269 16			299.276	249.573	35,857	13.846
15 Royalties		·			· · · · · · · · · · · · · · · · · · ·	
16 Occupancy 2,138,651 2,031,719 96,239 10,693 17 Travel 3,480,836 2,864,020 403,014 213,802 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 0 ————————————————————————————————————		-		701,200	700,203	
17 Travel		,	2.138.651	2.031.719	96.239	10.693
18 Payments of travel or entertainment expenses for any federal, state, or local public officials					· · ·	
20		Payments of travel or entertainment expenses for any federal,		2,001,020	100,011	
21 Payments to affiliates	19	Conferences, conventions, and meetings	0			
21 Payments to affiliates	20	Interest	2,096,173	1,991,364	94,328	10,481
Total functional expenses. Add lines 1 through 24e 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) Other expenses Itemize expenses not covered above (List miscellaneous expenses not covered so to covered above (List miscellaneous expenses not covered not on the covered not not	21		0			
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a COMMUNICATIONS BS1,875 SI0,219 112,670 228,986 b SUPPLIES 5,633,716 4,848,189 767,782 17,745 c PAUL GARRETT EXPENSES -203,662 21ST CENTURY TRUST EXPENSES -3,357,221 -3,357,221 e All other expenses 0 0 0 0 0 0 0 Total functional expenses. Add lines 1 through 24e 96,285,865 84,813,268 8,692,557 2,780,040 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)	22	Depreciation, depletion, and amortization	6,239,080	5,927,126	280,759	31,195
miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a COMMUNICATIONS BS1,875 S10,219 112,670 228,986 b SUPPLIES 5,633,716 4,848,189 767,782 17,745 c PAUL GARRETT EXPENSES 21ST CENTURY TRUST EXPENSES 4Il other expenses 0 0 0 0 0 0 0 25 Total functional expenses. Add lines 1 through 24e 96,285,865 84,813,268 8,692,557 2,780,040 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)	23	Insurance	605,782	242,262	363,520	
b SUPPLIES 5,633,716 4,848,189 767,782 17,745 c PAUL GARRETT EXPENSES -203,662 -203,662 d 21ST CENTURY TRUST EXPENSES -3,357,221 -3,357,221 e All other expenses 0 0 0 0 0 0 25 Total functional expenses. Add lines 1 through 24e 96,285,865 84,813,268 8,692,557 2,780,040 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) 0	24	miscellaneous expenses in line 24e If line 24e amount exceeds 10%				
c PAUL GARRETT EXPENSES d 21ST CENTURY TRUST EXPENSES e All other expenses O 0 0 0 Total functional expenses. Add lines 1 through 24e 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)	а	COMMUNICATIONS	851,875	510,219	112,670	228,986
d 21ST CENTURY TRUST EXPENSES -3,357,221 -3,357,221 e All other expenses 0 0 0 0 0 0 25 Total functional expenses. Add lines 1 through 24e 96,285,865 84,813,268 8,692,557 2,780,040 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 F if following SOP 98-2 (ASC 958-720)	b	SUPPLIES	5,633,716	4,848,189	767,782	17,745
e All other expenses Total functional expenses. Add lines 1 through 24e 25 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)	С	PAUL GARRETT EXPENSES	-203,662	-203,662		
Total functional expenses. Add lines 1 through 24e 96,285,865 84,813,268 8,692,557 2,780,040 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) 0	d	21ST CENTURY TRUST EXPENSES	-3,357,221	-3,357,221		
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)	e	All other expenses	0	0	0	0
reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)	25	Total functional expenses. Add lines 1 through 24e	96,285,865	84,813,268	8,692,557	2,780,040
	26	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check	0			

Part X Balance Sheet

Pai	rt X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X .			
		,	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	846,394	1	860,499
	2	Savings and temporary cash investments	19,842,681	2	28,352,183
	3	Pledges and grants receivable, net	19,552,225	3	23,718,646
	4	Accounts receivable, net	262,909	4	432,678
	5	Loans and other receivables from current and former officers, directors, trusted employees, and highest compensated employees. Complete Part II of Schedule L	es, key	-	0
<u>se</u>	6	Loans and other receivables from other disqualified persons (as defined under $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing empand sponsoring organizations of section $501(c)(9)$ voluntary employees' beneforganizations (see instructions) Complete Part II of Schedule L	section ployers iciary		0
Se.			0		0
Assets	7	Notes and loans receivable, net		7	
_	8	Inventories for sale or use	545,610		337,011
	9	Prepaid expenses and deferred charges	300,365	9	293,602
	10a	Complete Fait VI of Schedule D	,887,428		
	Ь	Less accumulated depreciation	,140,828 142,680,686		142,746,600
	11	Investments—publicly traded securities	188,464,342	11	208,899,499
	12	Investments—other securities See Part IV, line 11	270,100,694	12	309,025,870
	13	Investments—program-related See Part IV, line 11	3,045,693	13	3,040,614
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	1,125,878	15	1,329,360
	16	Total assets. Add lines 1 through 15 (must equal line 34)	646,767,477	16	719,036,562
	17	Accounts payable and accrued expenses	6,677,297	17	8,757,380
	18	Grants payable	3,433,517	18	3,448,661
	19	Deferred revenue	1,550,479	19	1,524,128
	20	Tax-exempt bond liabilities	57,030,977	20	56,342,353
ø	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
дe		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	1,062,193	23	667,116
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	29,475,220	25	29,717,779
	26	Total liabilities. Add lines 17 through 25	99,229,683	26	100,457,417
یں d)		Organizations that follow SFAS 117 (ASC 958), check here ▶ and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	226,401,053	27	247,694,157
<u>ප</u>	28	Temporarily restricted net assets	172,771,380		211,214,769
<u> </u>	29	Permanently restricted net assets	148,365,361	29	159,670,219
Ĭ	29	Organizations that do not follow SFAS 117 (ASC 958), check here ► □ and	140,000,001	23	155,575,215
or Fund Balance		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
45.	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net ,	33	Total net assets or fund balances	547,537,794	33	618,579,145
Ż	34	Total liabilities and net assets/fund balances	646,767,477	34	719,036,562
	1		1,,		,

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				. ৷ᠵ
1	Total revenue (must equal Part VIII, column (A), line 12)	1		169,4	01,406
2	Total expenses (must equal Part IX, column (A), line 25)	2		96,2	285,865
3	Revenue less expenses Subtract line 2 from line 1	3			.15,541
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			37,794
5	Net unrealized gains (losses) on investments	5		3 17 75	,,,,,,,
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		-2,0	74,190
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		618,5	579,145
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: 13000248 **Software Version:** 2013v3.1

EIN: 91-0567740

Name: BOARD OF TRUSTEES OF WHITMAN COLLEGE

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

Form 990, Part VII - Compensation Compensated Employees, and Inde				ıru	ste	es, r	чеу	employees, nigi	nest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	person is both an officer and a director/trustee) o		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and				
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-1413C)	2/1099-M13C)	related organizations
BRADLEY M MCMURCHIE	1 00	V		V		<u> </u>				
CHAIR	2 00	Х		Х				0	0	0
NANCY B SERRURIER VICE CHAIR	1 00	x		х				0	0	О
ANDREW U FERRARI	2 00									
TRUSTEE	1 00	Х						0	0	0
BARBARA S FEIGIN TRUSTEE	1 00	x						0	0	О
DAVID NIERENBERG	1 00									
TRUSTEE	1 00	Х						0	0	0
DEAN ALLEN NICHOLS TRUSTEE	1 00	x						0	0	О
JAMES R MOORE	1 00	x						0	0	0
TRUSTEE JANICE M ABRAHAM	1 00							Ů	0	Ů.
TRUSTEE	1 00	×						0	0	О
JOHN C COLEMAN	1 00	x						0	0	0
TRUSTEE JOHN W STANTON	1 00							Ů	0	Ů.
TRUSTEE	1 00	x						0	0	О
JOSEPH C DAVIS	1 00	x						0	0	0
TRUSTEE	1 00							Ů	0	Ů.
KAREN E GLOVER TRUSTEE	1 00	×						0	0	О
MEGAN FERGUSON CLUBB	1 00	x						0	0	0
TRUSTEE MEDICA	1 00							Ů	0	Ů.
MEGAN MEDICA TRUSTEE	1 00	x						0	0	0
PETER H VAN OPPEN	1 00	X						0	0	0
TRUSTEE DVAN G CROCKER	1 00							Ů	0	<u> </u>
RYAN C CROCKER TRUSTEE	1 00	×						0	0	О
SARAH O WANG	1 00	х						0	0	0
TRUSTEE STEPHEN E HAMMOND	1 00							Ů	0	<u> </u>
TRUSTEE	1 00	x						0	0	О
THOMAS H MCCRACKEN	1 00	x						0	0	0
TRUSTEE	1 00							Ů	0	Ů.
WALTER C MINNICK TRUSTEE	1 00	x						0	0	О
WILLIAM G WAY	1 00	V							0	
TRUSTEE	1 00	Х						0	0	0
GEORGE S BRIDGES PRESIDENT	40 00			х				350,921	0	194,761
PETER HARVEY	40 00	 		U				242.005	_	47.205
CFO/TREASURER	2 00			Х				212,805	0	47,385
CHARLES E CLEVELAND DEAN OF STUDENTS	40 00				х			164,793	0	34,521
DAN M TERRIO	40 00	 			V			454.450		24.427
CHIEF INFORMATION OFFICER					Х			154,456	0	24,437

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

(A) Name and Title	(B) A verage hours per week (list any hours	person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the				
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
JOHN W BOGLEY VP FOR DEVELOPMENT	40 00				х			196,919	0	85,502
TIMOTHY V KAUFMAN-OSBORN PROVOST & DEAN OF THE FACULTY	40 00				х			190,241	0	52,675
DAVID F SCHMITZ FACULTY	40 00					х		151,071	0	50,653
PATRICK KEEF FACULTY	40 00					х		153,323	0	23,259
PAUL H YANCEY FACULTY	40 00					х		150,319	0	19,491
ROBERT J CARSON FACULTY	40 00					х		152,331	0	24,896
SUSAN PICKETT FACULTY	40 00					х		138,043	0	22,298
TACCET	J		l		<u> </u>	<u> </u>				

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493133059835

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.

OMB No 1545-0047

Open to Public **Inspection**

Name	of	the organization		
BOARD	OF	TRUSTEES OF WHITI	MAN	COLLEGE

Employer identification number

									91-0567		
	rt I			blic Charity Sta						nstructions	
⊺he	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	ıgh 11, check	only one b	ox)		
1	Γ	A churc	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in s e	ection 170(b)(1)(A)(i).		
2	굣	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Schedı	ule E)				
3	\sqcap	A hosp	ital or a coo	perative hospital se	rvice organiz	atıon descr	ıbed ın sectio	n 170(b)(1)(A)(iii).		
4	Γ	A medi	cal research	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in se	ction 170(b)(1)(A)(iii). E	nter the
_	_			ty, and state							
5	ı	_	•	erated for the benefi	_	or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in
	_	section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
6	<u> </u>			•	3			. , ,	,, ,, ,		
7	Г			at normally receives			support from	a governm	ental unit or f	rom the gen	eral public
8	\vdash			on 170(b)(1)(A)(vi). described in sectior			nplete Part II)			
9	Γ	An orga	anization tha	at normally receives	(1) more th	an 331/3% c	f its support	from contri	butions, mem	bership fees	, and gross
		receipt	s from activ	ities related to its ex	xempt function	ons—subjec	t to certain e	xceptions,	and (2) no mo	re than 331,	/3% of
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from bu	ısınesses
		acquire	d by the org	janızatıon after June	30,1975 S	ee section !	509(a)(2). (C	omplete Pa	rt III)		
10	Γ	Anorga	anızatıon org	ganized and operated	d exclusively	to test for p	oublic safety	See sect io	n 509(a)(4).		
11	Γ	An orga	anızatıon orç	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fun	ictions of, or t	o carry out	the purposes of
				ly supported organiz						ee section 5	609(a)(3). Check
				bes the type of supp							
_	_			b Type II c			· -				
е	ı	•	_	ox, I certify that the on managers and otl	_		,		, ,	•	•
			509(a)(2)	on managers and oc	ner than one	or more par	mery support	ca organiza	icions desemb	ed III Section	11 30 3 (4)(1) 01
f				received a written de	etermination	from the IR	S that it is a	Type I, Typ	e II, or Type	III support	ıng organızatıo <u>n,</u>
_			his box	2006				.			J
g			vugust 17, 2 ig persons?	2006, has the organi	zation accep	ted any girt	or contribution	on from any	or the		
			.	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons de	scribed in (ii))	Yes No
		and (III) below, the	governing body of th	e supported	organizatioi	1?			11g	(i)
		(ii) A fa	amily memb	er of a person descr	bed in (i) abo	ove?				11g	(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g	(iii)
h		Provide	the following	ng information about	the supporte	ed organizat	ıon(s)				
	i) Nam		(ii) EIN	(iii) Type of	(iv) Is t		(v) Did you	•	(vi) Is		(vii) A mount of
	suppor			organization	organizati		the organiz		organizat		monetary
0	rganiza	ation		(described on lines 1- 9 above	col (i) list your gove		ın col (i) o suppor		col (i) org		support
				or IRC section	docume	_	Заррог		"" נווי נווי	3 .	
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	1
									1		
T-4-									1	1	

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

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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	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	Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).									
		Facts And Circumstances Test								
Retu	ırn Reference	Explanation								
		Schodulo A / Form 000 o	000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493133059835

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

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

Open to Public Inspection

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

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

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

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

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

• 5	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III				
Na	me of the organization ARD OF TRUSTEES OF WHITMAN COLLEC	CE		Employer id	dent	ification number
БОР	ARD OF TRUSTEES OF WHITMAN COLLEC	GE		91-05677	40	
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c			organization.
1	Provide a description of the ord	ganızatıon's dırect and ındırect politic	al campaign activ	vities in Part IV		
2	Political expenditures	g				¢
3	Volunteer hours			·		Ψ
Par	t I-B Complete if the or	ganization is exempt under s	section 501(c)(3).		
1	Enter the amount of any excise	e tax incurred by the organization und	er section 4955	•	-	\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	4955	-	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?			┌ Yes ┌ No
4a	Was a correction made?					┌ Yes ┌ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt under s	section 501(c), except section	50:	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	tion 527 exempt	function activities 🕨	-	\$
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to oth	ner organizations	for section 527 ►		\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	nd on Form 1120)-POL, line 17b ►	•	\$
4	Did the filing organization file F	Form 1120-POL for this year?				┌ Yes ┌ No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	amount paid fror rectly delivered t	n the filing organizatior o a separate political o	n's fi rgai	unds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter	;	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

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

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2013						Page 2
Pä	art III-A Complete if the organization	is exemp	t under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	on offiliated	aroup (and	List in Dort IV or	ah affiliated are	un mambaria nam	o addraca EIN
^	expenses, and share of excess lobb			iistiii Paitiv ea	ich ammateu gro	up member s nam	e, address, ETN
<u>B</u>	Check ► ☐ if the filing organization checked bo	x A and "lim	ited contro	ol" provisions ap	oly		
	Limits on Lobbying E (The term "expenditures" means ar			l.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	opinion (gras	s roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and 1d)					
f	f Lobbying nontaxable amount Enter the amount from the following table in both columns						
	If the amount on line 1e, column (a) or (b) is:	The lobbyi	ing nontax	able amount is:			
	Not over \$500,000	20% of the	amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	us 15% of the	e excess over \$500,	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	us 10% of the	e excess over \$1,00	0,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plu	us 5% of the	excess over \$1,500	000		
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (enter 25% of lir	ne 1f)					
h	Subtract line 1g from line 1a If zero or less, ent	er-0-					
i	Subtract line 1f from line 1c If zero or less, ente	er-0-					
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line	1ı, dıd the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t Lobbying Exp	section 5 he instruc	01(h) el ctions fo	r lines 2a thr	have to cor ough 2f on p		ne five
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
<u>2a</u>	Lobbying nontaxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
c	Total lobbying expenditures						
d	Grassroots nontaxable amount						

_		(a)		(b)
or ea	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	
C	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?	Yes		3,91
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		4,94
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	O ther activities?		Νo	
j	Total Add lines 1c through 1i	,		8,86
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		Ī	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

501(c)(6).

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

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

	inic 5, is diswered Tes.		
1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		
	expenses for which the section 527(f) tax was paid).		

- Current year
- Carryover from last year
- Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?
- Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

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

Return Reference	Explanation
	THE AMOUNT OF \$3,919 IS THE PORTION OF INDEPENDENT COLLEGES OF WASHINGTON FEES/DUES ALLOCATED TO LOBBYING COSTS ALLOCATED TO THE COLLEGE PRESIDENT'S TIME AND TRAVEL COSTS TO MEET WITH STATE AND FEDERAL LEGISLATORS WERE \$4,941

2a

2b 2c

3

4

5

Belledale e (Form 330 of	-		rage -r
Part IV Suppler	nental Information <i>(continu</i>	ed)	
Return Referer	ce	Explanation	
-			
-			

Schedule D (Form 990) 2013

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

DLN: 93493133059835

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Open to Public

	ne of the organization RD OF TRUSTEES OF WHITMAN COLLEGE			oloyer identifi	cation numb	er
Рa	rt I Organizations Maintaining Donor Adv	vised Funds or Other Similar F		0567740 or Acco unt	ts. Comple	te if the
	organization answered "Yes" to Form 990		uu 5			
		(a) Donor advised funds		(b) Funds and	d other acco	unts
	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 advisor funds are the organization's property, subject to the or	-	nor adv	ısed	☐ Yes	┌ No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the beneft conferring impermissible private benefit?	_			┌ Yes	┌ No
a	t III Conservation Easements. Complete if	the organization answered "Yes" t	o Forn	n 990, Part	IV, line 7.	
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of ar Preservation of a	certifie	d historic stru	ıcture	
	easement on the last day of the tax year					
_	Total number of conservation easements			Held at th	ne End of the	Year
3	Total acreage restricted by conservation easements		2a 2b			
b	Number of conservation easements on a certified histo	oric structure included in (a)				
c d	Number of conservation easements included in (c) acq historic structure listed in the National Register	• •	2c 2d			
	Number of conservation easements modified, transferr	red released extinguished or terminate	ed by th	ne organizatio	n durina	
	the tax year ►		,		9	
	Number of states where property subject to conservati					
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?	the periodic monitoring, inspection, han	dling of	violations, ai	nd ┌ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	ments o	during the yea	r	
	A mount of expenses incurred in monitoring, inspecting	and enforcing concervation eacoment	c durin	a the year		
	► \$	g, and emorening conservation easement	5 duilli	g the year		
	Does each conservation easement reported on line 2(a and section $170(h)(4)(B)(H)$?	d) above satisfy the requirements of sec	ction 1	70(h)(4)(B)(ı)	☐ Yes	⊏ No
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financia			t, and	,
T	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Ot	her Simila	r Assets.	
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reve	or rese	arch in furthe		
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	.16 (ASC 958), to report in its revenue its held for public exhibition, education,	statem	ent and balar		lıc
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$	1,4	10,125
	If the organization received or held works of art, histor following amounts required to be reported under SFAS			· ·		
3	Revenues included in Form 990, Part VIII, line 1			► \$		
b	Assets included in Form 990, Part X					
				- Y		

Part	t IIII Organizations Maintaining Co	llections of Art,	His	torical T	reas	ures, or O	the	r Similar As	sets (continued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ls, ch	eck any of	the fol	llowing that a	re a	significant use	e of its	
а	▼ Public exhibition		d	┌ Loar	orex	change progr	ams			
b	Scholarly research		e	┌ Oth	er					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	llections and explai	n how	v they furth	er the	organızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit o							ıılar		
Door	assets to be sold to raise funds rather than t	<u>'</u>						as" to Forms (Yes	✓ No
Pal	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					n answered	u Y	es to form	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	for contrib	utions	or other ass	etsı	not	┌ Yes	Г No
b	If "Yes," explain the arrangement in Part XII	I and complete the f	follow	ving table		_				
							_	Aı	nount	
с	Beginning balance					-	1c			
d	Additions during the year					<u> </u>	1d			
e •	Distributions during the year					-	1e			
f	Ending balance		_				1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						☐ Yes	□ No
_ь	If "Yes," explain the arrangement in Part XII									<u>. </u>
Pa	rt V Endowment Funds. Complete								(=\Faur	waara baak
1a	Beginning of year balance	(a)Current year 414,542,107	(D)P	Prior year 373,745,231		374,507,651	_	Three years back 313,738,735		years back 278,739,032
ь	Contributions	7,296,996		9,015,129		7,129,763	-	9,042,964		5,407,786
c	Net investment earnings, gains, and losses									
_	- ' - '	73,823,357		49,256,080	+	8,565,779	-	66,900,952		44,766,917
d	Grants or scholarships	7,636,808		7,310,481	<u> </u>	7,008,868		6,541,015		6,661,827
e	Other expenditures for facilities and programs	10,893,190		10,163,852	2	9,449,094		8,633,985		8,513,173
f	Administrative expenses	477,132,462		414,542,107	7	373,745,231		374,507,651		313,738,735
g	End of year balance				<u> </u>			374,307,031		
2	Provide the estimated percentage of the curr	ent year end balanc 31 000 %	e (IIn	e 1g, colur	mn (a))	neid as				
а	Board designated of quasi-endownient	31 000 %								
b	Permanent endowment - 30 000 %									
С	Temporarily restricted endowment • 39 (The percentages in lines 2a, 2b, and 2c shot)00 % ıld equal 100%								
За	Are there endowment funds not in the posses	ssion of the organiza	tion t	hat are he	ld and	administered	for	the		
	organization by								Ye	
	(i) unrelated organizations						•	3a		No
b	(ii) related organizations		Lon S	chodulo P			•	3a		No No
4	Describe in Part XIII the intended uses of th	•					•	3	<u> </u>	
Par	rt VI Land, Buildings, and Equipme				n ans	wered 'Yes	' to	Form 990, Pa	art IV,	line
	11a. See Form 990, Part X, line 1							•		
	Description of property			(a) Cost o basis (inves		(b) Cost or ot basıs (other		(c) Accumulated depreciation	(d) I	Book value
1a	Land			11,4	12,776	6,704	,580			18,117,356
b	Buildings		•	8,8	60,465	176,197	,132	63,960,84	5	121,096,752
c	Leasehold improvements									0
d	Equipment					6,302	,350	4,179,98	3	2,122,367
	Other		•			1,410	,125			1,410,125
Tota	l. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part X	, colu	mn (B), line	e 10(c).	.)		•		142,746,600
								Schedule I	D (Form	990) 2013

See Form 990, Part X, line 12.	iplete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives	0	
(2)Closely-held equity interests (3)Other	0	
(A) COMMINGLED TRUSTS	38,961,626	F
(D) INVESTMENT CHARES BELONGING TO BELATED		
(B) INVESTMENT SHARES BELONGING TO RELATED ENTITIES	-5,043,638	F
(C) ALTERNATIVE INVESTMENTS	275,107,882	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	309,025,870	
Part VIII Investments—Program Related. Co		answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.	· ·	
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		cost of cha of year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. Complete if the organization	answered 'Yes' to Form 990	, Part IV, line 11d See Form 990, Part X, line 15
(a) Descri	ption	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)	
Part X Other Liabilities. Complete if the organ		
Form 990, Part X, line 25.		
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
POST RETIREMENT BENEFIT OBLIGATION	5,263,758	
SPLIT INTEREST A GREEMENTS	9,559,786	
INTEREST RATE EXCHANGE AGREEMENTS	10,880,000	
MED/DENTAL INSURANCE TERMINAL LIABILITY DEFERRED COMPENSATION	918,182	
ASSET RETIREMENT OBLIGATION	775,693	
SALARY CONTINUATION PLAN	991,000	
	332,000	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	29,717,779	

Par		evenue per Audited Financial Statements With Revenue p wered 'Yes' to Form 990, Part IV, line 12a.	er Re	turn Complete if
1		er support per audited financial statements	1	
2	Amounts included on line 1 be	ut not on Form 990, Part VIII, line 12		
а	Net unrealized gains on inves	tments		
b	Donated services and use of	acılıtıes 2b		
c	Recoveries of prior year grant	s		
d		2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1 .		3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1		
а	Investment expenses not inc	uded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 an	d 4c. (This must equal Form 990, Part I, line 12)	5	
Part		xpenses per Audited Financial Statements With Expenses swered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Total expenses and losses pe	r audited financial statements	1	
2	Amounts included on line 1 bu	ıt not on Form 990, Part IX, line 25		
а	Donated services and use of f	acılıtıes		
b	Prior year adjustments	2b		
C	Otherlosses	2c		
d	Other (Describe in Part XIII)			
e	Add lines 2a through 2d		2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:		
а	Investment expenses not inc	uded on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)	4b		
C	Add lines 4a and 4b	 	4c	
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, line 18)	5	
Par	XIII Supplemental In	formation		
Part		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		e any additional
	Return Reference	Explanation		
	lule D, Part III, Line 4, tions of art - description of tions	THE COLLEGE HAS COLLECTIONS OF WORKS OF ART AND RARE BO BY THE STUDENTS IN THEIR STUDIES	OKS T	HAT ARE UTILIZED
	lule D, Part V, Line 4, Intended of endowment funds	ENDOWMENT FUNDS ARE USED SOLELY TO SUPPORT THE MISSION FOR COSTS SUCH AS FINANCIAL AID TO STUDENTS, FACULTY SALTHE LIBRARY		
	lule D, Part X, Line 2, FIN 48 740) footnote	MANAGEMENT BELIEVES THEY HAVE NO UNCERTAIN TAX POSITIOUNRELATED BUSINESS INCOME TAX FOR WHITMAN COLLEGE AND FOUNDATION, IF ANY, IS IMMATERIAL THE FEDERAL TAX RETURNS FILED BY THE COLLEGE ARE SUBJECT TO EXAMINATION BY THE IN SERVICE UP TO THREE YEARS FROM THE EXTENDED DUE DATE OF GENERALLY, THE COLLEGE'S FEDERAL TAX FILINGS FOR THE FISCA 2011, ARE THE LAST YEAR STILL SUBJECT TO EXAMINATION	PAUL S (FOR TERNA EACH	GARRETT WHITMAN MS 990 AND 990-T) AL REVENUE RETURN
		1		

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

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493133059835

OMB No 1545-0047

SCHEDULE E

Department of the Treasury

(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

Internal Revenue Service Name of the organization BOARD OF TRUSTEES OF WHITMAN COLLEGE

Employer identification number

	91-0567740			
Pai	tI	$\overline{}$	YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
1	Does the organization maintain the following?	- - -		
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		Νo
c	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
-	Use of facilities?	5f		Νo
g	Athletic programs?	5g		No
h	O ther extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		No
		7		
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a 6b	Yes	No
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

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

Return Reference	Explanation
Schedule E, Part I, Line 3, Racially nondiscriminatory policy	THE COLLEGE MAKES ITS POLICY OF NON-DISCRIMINATION KNOWN THROUGH THE COLLEGE WEBSITE, THE ANNUAL CATALOG, AND OTHER MATERIALS ADDITIONALLY, THE COLLEGE PLACES AN ADVERTISEMENT WHICH DESCRIBES ITS POLICY IN A REGIONAL NEWSPAPER EACH YEAR
Schedule E, Part I, Line 6a, Financial aid or assistance from a governmental agency	THE COLLEGE RECEIVES FUNDS FROM THE DEPARTMENT OF EDUCATION IN THE FORM OF GRANTS AND LOANS TO BE GIVEN OUT TO WHITMAN STUDENTS THE COLLEGE ALSO RECEIVES FUNDS FROM OTHER FEDERAL AGENCIES IN THE FORM OF GRANTS FOR RESEARCH EQUIPMENT, STUDY, OR OTHER EFFORTS AS STIPULATED IN EACH INDIVIDUAL GRANT

Schedule E (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493133059835

OMB No 1545-0047

2013

SCHEDULE F (Form 990)

Department of the Treasury

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.

Open to Public **Inspection**

Nan	no of the organization				Employer ident	tification number				
Name of the organization BOARD OF TRUSTEES OF WHITMAN COLLEGE						in ication number				
507	TROUT TROUBLES OF WHITEHAN	COLLEGE			91-0567740					
Pa	art I General Information	n on Activitie	es Outside th	ne United States, Co	mplete if the organiz	zation answered				
	"Yes" to Form 990, Par	t IV, line 14b.	, outside ti	io omitou otutosi ot	implete il tile organi.	adon answered				
1	•	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and								
-	other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used									
	to award the grants or assista		-	·		✓ Yes				
	to award the grants of assiste	ance)* 165 140				
2	For grantmakers. Describe in		ganızatıon's p	rocedures for monitorii	ng the use of its gran	ts and other				
	assistance outside the United	d States.								
3	Activites per Region (The follow	ng Part I. line 3	table can be di	uplicated if additional spa	ice is needed)					
	, , , , , , , , , , , , , , , , , , , ,			 	,					
	(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in	(e) If activity listed in (d) is	(f) Total expenditures				
		offices in the	employees,	region (by type) (e g ,	à program service, describe	for and investments				
		region	agents, and independent	fundraising, program services, investments, grants	specific type of service(s) in region	ın region				
			contractors in	to recipients located in the	(, , ,					
	See Add'l Data		region	region)						
` -	J See Add I Data									
(2	2)									
(3	3)									
	N									
(4	;)									
(5	3									
, -	,									
	a Sub-total									
	b Total from continuation sheets									
	to Part I		_							
	c Totals (add lines 3a and 3b)	0	C)[173,962,005				

Part II						i ted States. Compl duplicated if additior			to Form 990,
	ame of lization	(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)									
						es by the foreign co (c)(3) equivalency l			
3 Ente	er total num	ber of other or	ganızatıons or ent	ities					

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 additional space is needed. (d) A mount of (e) Manner of cash (a) Type of grant or (b) Region (c) Number of (f) A mount of (g) Description (h) Method of cash grant assistance recipients disbursement non-cash of non-cash valuation assistance assistance (book, FMV, appraisal, other) (1) STUDENT FINANCIAL EAST ASIA AND THE 178,246 WIRE 21 AID PACIFIC TRANSFER/CHECK (2) STUDENT FINANCIAL 659,467 WIRE EUROPE 68 AID KINCLUDING TRANSFER/CHECK ICELAND AND GREENLAND) (3) STUDENT FINANCIAL 79.303 WIRE MIDDLE EAST AND 5 AID NORTH AFRICA TRANSFER/CHECK (4) STUDENT FINANCIAL NORTH AMERICA 1 18.778 WIRE AID CANADA & MEXICO TRANSFER/CHECK ONLY) (5) STUDENT FINANCIAL SOUTH AMERICA 109,341 WIRE 12 AID TRANSFER/CHECK (6) STUDENT FINANCIAL SOUTH ASIA 1 11,525 WIRE AID TRANSFER/CHECK (7) STUDENT FINANCIAL SUB-SAHARAN 7 69.877 WIRE TRANSFER/CHECK AID AFRICA (8) STUDENT FINANCIAL CENTRALAMERICA 3 14.000 WIRE AID AND THE TRANSFER/CHECK CARIBBEAN (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Part IV Foreign Forms

1	organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	▼	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	্য	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	দ	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)	Γ	Yes	ঘ	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)	∀	Yes	Г	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	굣	No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 2, Procedures for monitoring use of grant funds	THE GRANTMAKING ACTIVITIES SHOWN IN PARTS I AND III INVOLVE COLLEGE FINANCIAL AID FUNDS DE LIVERED TO ENROLLED STUDENTS' INDIVIDUAL ACCOUNTS THE AID IS TO HELP DEFRAY THE COST OF C ERTAIN STUDY PROGRAMS TAKING PLACE IN FOREIGN COUNTRIES ALL SUCH PROGRAMS ARE CLOSELY VET TED BY THE COLLEGE TO ENSURE THE RECIPIENTS ARE OF HIGH ACADEMIC QUALITY AND FINANCIALLY S TABLE ANY AID DELIVERED TO SUCH STUDENTS IS GOVERNED BY THE PROCESSES OUTLINED IN SCHEDUL E E

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 3, Method to account for expenditures on org 's financial statements	CENTRAL AMERICA AND THE CARIBBEAN ACCRUAL EAST ASIA AND THE PACIFIC ACCRUAL EUROPE (INCL UDING ICELAND AND GREENLAND) ACCRUAL MIDDLE EAST AND NORTH AFRICA ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) ACCRUAL RUSSIA AND NEIGHBORING STATES ACCRUAL SOUTH AMERICA ACCR UAL SOUTH ASIA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part III, Method used to account for grants on organization's financial statements	EAST ASIA AND THE PACIFIC ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) ACCRUAL MIDDL E EAST AND NORTH AFRICA ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) ACCRUAL SOUTH AMERI CA ACCRUAL SOUTH ASIA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, Line 3, Method to account for expenditures on org 's financial statements	CENTRAL AMERICA AND THE CARIBBEAN ACCRUAL EAST ASIA AND THE PACIFIC ACCRUAL EUROPE (INCL UDING ICELAND AND GREENLAND) ACCRUAL MIDDLE EAST AND NORTH AFRICA ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) ACCRUAL RUSSIA AND NEIGHBORING STATES ACCRUAL SOUTH AMERICA ACCR UAL SOUTH ASIA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part III, Method used to account for grants on organization's financial statements	EAST ASIA AND THE PACIFIC ACCRUAL EUROPE (INCLUDING ICELAND AND GREENLAND) ACCRUAL MIDDL E EAST AND NORTH AFRICA ACCRUAL NORTH AMERICA (CANADA & MEXICO ONLY) ACCRUAL SOUTH AMERI CA ACCRUAL SOUTH ASIA ACCRUAL SUB-SAHARAN AFRICA ACCRUAL

Additional Data

Software ID: 13000248

Software Version: 2013v3.1

EIN: 91-0567740

Name: BOARD OF TRUSTEES OF WHITMAN COLLEGE

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0		FACULTY STAFF CONFERENCES AND RESEARCH	26,268
EAST ASIA AND THE PACIFIC	0	0		STUDENT FINANCIAL AID	178,246
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	GRANTMAKING	STUDENT FINANCIAL AID	659,467

Form 990 Schedule F	<u>Part I - Activi</u>	<u>ties Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(d) is a program service, describe specific type of service	(f) Total expenditures for region
MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING	STUDENT FINANCIAL AID	79,303
NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	GRANTMAKING	STUDENT FINANCIAL AID	18,778
SOUTH AMERICA	0	0	GRANTMAKING	STUDENT FINANCIAL AID	109,341

Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
SOUTH ASIA	0	0	GRANTMAKING	STUDENT FINANCIAL AID	11,525	
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANTMAKING	STUDENT FINANCIAL AID	14,000	
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	FACULTY AND STAFF CONFERENCES AND RESEARCH	192,050	

Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES	511,041	
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	FACULTY AND STAFF CONFERENCESL AND RESEARCH	171,045	
MIDDLE EAST AND NORTH AFRICA	0	0		FACULTY AND STAFF CONFERENCES AND RESEARCH	32,893	

Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region	
SOUTH AMERICA	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES	272,310	
SOUTH ASIA	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES	35,830	
NORTH AMERICA (CANADA & MEXICO ONLY)	0	0		STUDENT FINANCIAL AID	24,475	

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES	56,180
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0		STUDENT FINANCIAL AID	1,537,849
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	STUDENT FINANCIAL AID	76,530

Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	FACULTY AND STAFF CONFERENCES AND RESEARCH	75,982	
SOUTH AMERICA	0	0	PROGRAM SERVICES	FACULTY AND STAFF CONFERENCES AND RESEARCH	6,256	
SOUTH ASIA	0	0	PROGRAM SERVICES	FACULTY AND STAFF CONFERENCES AND RESEARCH	33,912	

Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
SUB-SAHARAN AFRICA	0	0		FACULTY AND STAFF CONFERENCES AND RESEARCH	32,354	
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		149,097,656	
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	INVESTMENTS		20,463,690	

Form 990 Schedule F Part I - Activities Outside The United States						
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
RUSSIA AND NEIGHBORING STATES	0	0		FACULTY AND STAFF CONFERENCES AND RESEARCH	5,147	
SUB-SAHARAN AFRICA	0	0	GRANTMAKING	STUDENT FINANCIAL AID	69,877	
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	OFF CAMPUS STUDIES	170,000	

DLN: 93493133059835

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

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

Open to Public

Internal Revenue Service	🕨 Informatio	n about Schedule I (Fo	orm 990) and its instruct	ions is at <u>www.i<i>rs.go</i>v/</u>	form990.		Inspection
Name of the organization	NN COLLECT					Employer identificati	on number
BOARD OF TRUSTEES OF WHITM <i>A</i>	AN COLLEGE					91-0567740	
Part I General Informati	ion on Grants and	d Assistance				•	
 Does the organization maintain the selection criteria used to a Describe in Part IV the organical 	award the grants or as zation's procedures fo	sistance? or monitoring the use o	f grant funds in the Unite	ed States			√ Yes
				United States. Con ort II can be duplicate			es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
2 Enter total number of section	501(c)(3) and govern	ment organizations lis	ted in the line 1 table .			. _	
3 Enter total number of other org	ganızatıons lısted ın th	ne line 1 table				▶	

Schedule I, Part I, Line 2,

grant funds

Procedures for monitoring use of

(a)Type of grant or assistance

(b)Number of

(f)Description of non-cash assistance

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

(d)A mount of

THE COLLEGE AWARDS SCHOLARSHIPS USING ESTABLISHED POLICIES ON THE BASIS OF BOTH NEED AND SCHOLARSHIP MERIT AWARDS

ITO STUDENTS WITH NEED ARE BASED ON THE STUDENTS' FINANCIAL INFORMATION CONTAINED IN THE FINANCIAL AID PROFILE FILED

WITH THE COLLEGE SCHOLARSHIP SERVICES AND THE FREE APPLICATION FOR FINANCIAL AID FILED WITH THE FEDERAL PROCESSOR

ALL AID IS OBJECTIVELY DETERMINED AND AWARDED ON AN EQUAL BASIS TO RECIPIENTS WITH SIMILAR ATTRIBUTES

(e) Method of valuation (book,

(c)A mount of

(a) Type of grains of assistance		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	(175 esemption of non-easin assistance				
(1) INSTITUTIO NAL FINANCIAL A	ID	1231	22,361,849							
Part IV Supplemental Info	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.									
Return Reference E	Return Reference Explanation									

DLN: 93493133059835

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

Name of the organization BOARD OF TRUSTEES OF WHITMAN COLLEGE **Employer identification number**

91-0567740

_			91-0307740			
Pa	rt I Questions Regarding Compensation	n			T	
					Yes	No
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	<u> </u>	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u> </u>				
	Discretionary spending account	⊽	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses d			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe			2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all tused by a related organization to establish compen	that apply				
	Compensation committee	굣	Written employment contract			
	☐ Independent compensation consultant	▽	Compensation survey or study			
	Form 990 of other organizations	⊽	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	, Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	l paymen	t?	4a		No
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-b	based co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,	paid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described i					
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow the section $534958-6(c)$?	ne 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)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

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

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Also complete this part for any additional information

Return Reference	Explanation
Schedule J, Part I, Line 1a, Travel for companions	WHEN THE SPOUSES OF KEY EMPLOYEES ACCOMPANY THEM ON COLLEGE-RELATED BUSINESS TRIPS AT THE REQUEST OF THE COLLEGE, THE INCREMENTAL TRAVEL COSTS ARE INCLUDED IN THE EMPLOYEE'S TAXABLE INCOME
Schedule J, Part I, Line 1a, Tax indemnification and gross-up payments	WHEN THE SPOUSES OF KEY EMPLOYEES ACCOMPANY THEM ON COLLEGE-RELATED BUSINESS TRIPS AT THE REQUEST OF THE COLLEGE, THE INCREMENTAL TRAVEL COSTS ARE INCLUDED IN THE EMPLOYEE'S TAXABLE INCOME THESE PAYMENTS ARE GROSSED UP SO THERE IS NO NEGATIVE TAX EFFECT ON THE EMPLOYEE
Schedule J, Part I, Line 1a, Housing allowance or residence for personal use	THE COLLEGE PRESIDENT IS REQUIRED, AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF THE COLLEGE, TO MAINTAIN HIS (HER) PERSONAL RESIDENCE IN A HOUSE PROVIDED BY THE COLLEGE THIS HOUSE IS LOCATED ON THE EDGE OF THE CAMPUS AND THE PROVISION OF SUCH IS NOT CONSIDERED TAXABLE COMPENSATION
Schedule J, Part I, Line 1a, Health or social club dues or initiation fees	THE COLLEGE PRESIDENT AND THE VICE PRESIDENT OF DEVELOPMENT ARE PROVIDED MEMBERSHIPS IN SOCIAL CLUBS BY THE COLLEGE THE AMOUNTS PAID FOR DUES ARE INCLUDED IN THEIR W-2'S AS TAXABLE COMPENSATION
Schedule J, Part I, Line 1a, Personal services	THE PRESIDENT'S PERSONAL RESIDENCE (OWNED BY THE COLLEGE) IS PROVIDED CLEANING SERVICES AND YARD CARE BY THE COLLEGE THIS IS NOT CONSIDERED TAXABLE COMPENSATION
Schedule J, Part I, Line 4b, Supplemental nonqualified retirement plan	THE COLLEGE PRESIDENT PARTICIPATED IN A 457(F) PLAN DURING THE YEAR THE COLLEGE MADE PAYMENTS OF \$43,140 TO THE PLAN FOR THE 2013 CALENDAR YEAR PROVIDED THAT HE REMAINS ACTIVELY EMPLOYED WITH THE COLLEGE, THE ACCOUNT BECOMES FULLY VESTED ON THE EARLIER OF (A) HIS SPECIFIED DISTRIBUTION DATE (B) THE DATE ON WHICH HE SEPARATES FROM SERVICE INVOLUNTARILY WITHOUT CAUSE (C) HIS DISABILITY OR (D) HIS DEATH BENEFITS ARE DISTRIBUTED OVER A PERIOD OF YEARS NOT EXCEEDING THE LIFE EXPECTANCY OF DR. BRIDGES AND HIS BENEFICIARIES AS HE SHALL DESIGNATE AT LEAST TWELVE MONTHS PRIOR TO THE SPECIFIED DISTRIBUTION DATE

Schedule J (Form 990) 2013

Additional Data

(A) Name

PROVOST & DEAN OF

JOHN W BOGLEY VP

FOR DEVELOPMENT

ROBERT J CARSON

PAUL H YANCEY

SUSAN PICKETT

(1)

(11)

(1)

(11) (1)

(11) (1)

(11)

196,919

152,331

150,319

138,043

THE FACULTY

FACULTY

FACULTY

FACULTY

Software ID: 13000248

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (B) Breakdown of W-2 and/or 1099-MISC compensation

Software Version: 2013v3.1

EIN: 91-0567740

0

Name: BOARD OF TRUSTEES OF WHITMAN COLLEGE

(C) Deferred

20,460

15,176

9,439

13,826

(D) Nontaxable

65,042

9,720

10,052

8,472

(E) Total of columns

282,421

177,227

169,810

160,341

(F) Compensation

0

0

(A) Nume		(B) Dieakdowii o	n W-2 and/or 1099-Mis	oc compensation] (C) Deletted	1	(L) Total of columns	reported in prior Form	
		(i) Base Compensation	(ii) Bonus & (iii) Other compensation		compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
PATRICK KEEF FACULTY	(1) (11)	1 ' _ 1	0	0	15,339 0	7,920 0	176,582 0	0	
DAN M TERRIO CHIEF INFORMATION OFFICER	(I) (II)		0	0	15,605 0	8,832 0	178,893 0	0	
DAVID F SCHMITZ FACULTY	(1) (11)	·	0	0	15,438 0	35,215 0	201,724 0	0	
PETER HARVEY CFO/TREASURER	(1) (11)	_	0 0	0	37,065 0	10,320	260,190 0	0	
CHARLES E CLEVELAND DEAN OF STUDENTS	(I) (II)		0	0	16,960 0	17,561 0	199,314 0	0	
GEORGE S BRIDGES PRESIDENT	(1) (11)		0	0	109,136 0	85,625 0	545,682 0	0	
TIMOTHY V KAUFMAN-OSBORN	(ı) (ıı)		0	0	36,020 0	16,655 0	242,916 0	0	

0

0

0

0

0

DLN: 93493133059835

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

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

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

Open to Public **Inspection**

Internal Revenue Service Name of the organization

Department of the Treasury

BOARD OF TRUSTEES OF WHITMAN COLLEGE

Employer identification number

ВОА	BOARD OF TRUSTEES OF WHITMAN COLLEGE 91									91-0567740					
Pa	art I Bond Issues	,													
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(1	f) Descriptio	n of purpose	(g)	Defeased	beha	On alf of uer		Pool ncing
							<u> </u>			Ye	s No	Yes	No	Yes	No
A	WASHINGTON HIGHER EDUCATION FACILITIES AUTHORITY	91-1306482	939781VM9	11-23-2004	28,77	0,000		REFUND A BOND ISSUE FROM 1999			x		x		x
В	WASHINGTON HIGHER EDUCATION FACILITIES AUTHORITY	91-1306482	939781A34	06-10-2008	30,39	5,000	0 FACILITIES CONSTRUCTION		N	х		×		х	
Pa	rt III Proceeds									•	•		<u>'</u>		
						A		В			С		D		
1					<u> </u>		0		750,000						
_2					<u> </u>		0		0						
3	Total proceeds of issue				28,770,000 30,395,000										
4	Gross proceeds in reserve fund						0		0						
_5							0		0						
6	Proceeds in refunding escrows						0		0						
7	Issuance costs from proceeds					232	,781		282,842						
8	Credit enhancement from proc					0 0									
9	Working capital expenditures f	irom proceeds			0 0										
10	Capital expenditures from proc	ceeds				0 30,000,000									
11	O ther spent proceeds					28,442	,263		0						
12	O ther unspent proceeds						0		0						
13	Year of substantial completion	1			20	04		20:	10						
					Yes	No	,	Yes	No	Yes		No l	Yes	\bot	No
14	Were the bonds issued as part	of a current refundi	ng issue?			Х			Х						
15	Were the bonds issued as part	of an advance refur	nding issue?		Х				Х						
16	Has the final allocation of proc	eeds been made?			Х			Х							
17	Does the organization maintain allocation of proceeds?	n adequate books ar	nd records to supp	ort the final	Х			Х							
Par	rt IIII Private Business U	ise													
						Α		В			C			D	
	Was the organization a partner	r in a nartnarahin a	ra mambaratan II	I.C. which owned	Yes	No	•	Yes	No	Yes	1	ło	Yes	$-\!\!\!\!+\!\!\!\!\!-$	No
1	Was the organization a partner		a member of an LL	_C, which owned		Х			x						

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

property financed by tax-exempt bonds?

financed property?

Χ

Part III F	Private	Business	Use i	(Continued))
------------	---------	----------	-------	-------------	---

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

Part IV Arbitrage

	Albidage	А		В		С	С			
		Yes			Yes	No	Yes	No		
1	Has the issuer filed Form 8038-T?	Х		Х						
2	If "No" to line 1, did the following apply?			•						
a	Rebate not due yet?									
ь	Exception to rebate?									
С	No rebate due?									
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed			•						
3	Is the bond issue a variable rate issue?	Х		Х						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	×		x						
b	Name of provider	JP MORGAN		BNY MELLON						
С	Term of hedge		25 0		30 0					
d	Was the hedge superintegrated?		Х		Х					
e	Was the hedge terminated?		Х		Х					
		Schedule K (Form 990) 2013								

Par	Part IV Arbitrage (Continued)										
		Α		В		С	C D				
i		Yes	No	Yes	No	Yes	No	Yes	No		
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х	Х							
ь	Name of provider			AIG MATCHI	NG FUND						
С	Term of GIC				3 1		·				
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?			Х							
6	Were any gross proceeds invested beyond an available temporary period?		×		X						
7	Has the organization established written procedures to monitor the requirements of section 148?		Х	Х							

Part V Procedures To Undertake Corrective Action

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

	Α		В		С		D		
	Yes	No	Yes	No	Yes	No	Yes	No	
١	X		×						
١									

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

DLN: 93493133059835

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► 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.

Transactions with Interested Persons

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

Name of the organization

Comp	ess Beneti	t Transaci	t ions (secti	on 501(c)(3	3) and section	501(c)(4)	organi	zatıor	ns only).			
					0, Part IV, line						40b		
1 (a) Nam	e of disqualif			shıp between		(c) Des					(d) Cor	recte	
			perso	n and organiz	zation					Γ	Yes	No	
												_	
												-	
												-	
	amount of tay	incurred by	organization	managers or	disqualified per	eons during t	he vest	unde	rsection	<u> </u>		-	
4958 .					dısqualıfıed per • • •				> \$				
Enter the	amount of tax	, ıf any, on lıı	ne 2, above, r	eımbursed by	the organizati	on			> \$				
art II Lo	ans to and	l/or From	Intereste	d Persons	_								
					• 990-EZ, Part V	line 38a. or	Form 9	90. Pa	art IV . li	ine 26	or if the		
		_			line 5, 6, or 22	, 11110 300, 01	. 01111 3	,,,,	aic I V , ii	20,	or in the		
) Name of	(b)	(c)	(d) Loan		to (e) Original (f			(g) In ((i)Written		
nterested	Relationsh				1 ' ' 1		1 .		Approved by		agreemen		
person	with	loan	organizati	on?	amount								
	organizatio	'''							board or				
									commi	ttee?			
			То	1_					1	T	Yes	No	
			1 10	From			Yes	No	Yes	No	res		
			10	From			Yes	No	Yes	No	res	1	
			10	From			Yes	No	Yes	No			
			10	From			Yes	No	Yes	No			
			10	From			Yes	No	Yes	NO			
				From			Yes	No	Yes	No			
				From			Yes	No	Yes	No			
31		*		From			Yes	No	Yes	No		<u> </u>	
rt IIII Gra	ants or As	▶ \$	enefitting	Intereste	d Persons.			No	Yes	No			
al rt III Gr a Co	ants or As	sistance B	enefitting	Intereste	d Persons. Form 990, Pa	art IV, line 2		No			_ _ _ _ _ _ _		
rt IIII Gra	mplete if the	sistance B e organızat (b) Relatıon	senefitting ion answere ship between	Intereste ed "Yes" on (c) A moun	d Persons. Form 990, Pa		27.				res		
rt IIII Gra	mplete if the	sistance Be organizat (b) Relation interested pe	enefitting ion answere ship between erson and the	Intereste ed "Yes" on (c) A moun	Form 990, Pa		27.				_ _ _ _ _ _ _		
Col Col a) Name of II perso	mplete if the nterested n	sistance Be organizat (b) Relation interested pe	senefitting ion answere ship between	Intereste ed "Yes" on (c) A moun	Form 990, Part of assistance	(d) Type	27.		e (e) Purpo	se of as	sıstan	
Col Name of II	mplete if the nterested n	sistance Be organizat (b) Relation interested pe	enefitting ion answere ship between erson and the	Intereste ed "Yes" on (c) A moun	Form 990, Part of assistance		27.		e (e) Purpo	_ _ _ _ _ _ _	sıstar	
Co Name of I	mplete if the nterested n	sistance Be organizat (b) Relation interested pe	enefitting ion answere ship between erson and the	Intereste ed "Yes" on (c) A moun	Form 990, Part of assistance	(d) Type	27.		e (e) Purpo	se of as	sıstar	
Col Name of II	mplete if the nterested n	sistance Be organizat (b) Relation interested pe	enefitting ion answere ship between erson and the	Intereste ed "Yes" on (c) A moun	Form 990, Part of assistance	(d) Type	27.		e (e) Purpo	se of as	sıstar	
Col Name of II	mplete if the nterested n	sistance Be organizat (b) Relation interested pe	enefitting ion answere ship between erson and the	Intereste ed "Yes" on (c) A moun	Form 990, Part of assistance	(d) Type	27.		e (e) Purpo	se of as	sıstar	
Col Name of II perso	mplete if the nterested n	sistance Be organizat (b) Relation interested pe	enefitting ion answere ship between erson and the	Intereste ed "Yes" on (c) A moun	Form 990, Part of assistance	(d) Type	27.		e (e) Purpo	se of as	sıstar	
Col Name of II perso	mplete if the nterested n	sistance Be organizat (b) Relation interested pe	enefitting ion answere ship between erson and the	Intereste ed "Yes" on (c) A moun	Form 990, Part of assistance	(d) Type	27.		e (e) Purpo	se of as	sısta	

Business Transactions						
Complete if the organizat	<u>ion answered "Yes" on l</u>	<u>Form 990, Part IV, lın</u>	e 28a, 28b, or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh organiz reven	f zatıon's	
				Yes	No	
(1) SHARON KAUFMAN-OSBORN	FAMILY MEMBER OF TIMOTHY KAUFMAN- OSBORN, KEY EMPLOYEE	41,187	COMPENSATION		No	
(2) PATRICIA SORENSON	FAMILY MEMBER OF CHARLES CLEVELAND, KEY EMPLOYEE	36,227	COMPENSATION		No	
(3) KARI TUPPER	FAMILY MEMBER OF GEORGE BRIDGES, OFFICER	62,634	COMPENSATION		No	

Part V Supplemental Information

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

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2013

DLN: 93493133059835

Employer identification number

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

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

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

JAK	D OF TRUSTEES OF WHITMAN COLLEGE				91-0567740			
Pa	rt I Types of Property							
		(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermı		ts
1	Art—Works of art	Х	3		MARKET VALUE			
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х			MARKET VALUE			
5	Clothing and household	x			MARKET VALUE			
_	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property Securities—Publicly traded .	×	182	6.047.062	MARKET VALUE			
	Securities—Closely held stock .		102	0,047,003	MARKET VALUE			
	Securities—Partnership, LLC, or trust interests							
. 2	Securities—Miscellaneous							
	Qualified conservation							
	contribution—Historic structures							
	Qualified conservation contribution—Other							
	Real estate—Residential .	X	1	175,000	APPRAISAL			
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts Scientific specimens							
	Archeological artifacts							
	Other • ()							
	Other ► ()							
	Other ►()							
	Other ► ()						-	-
	Number of Forms 8283 received	by the orga	inization during the tax vea	r for contributions				
	for which the organization comple		=		29			2
							Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1 through 28, that			
	it must hold for at least three ye	ars from the	e date of the initial contribu	ıtıon, and which is not requi	red to be used			
	for exempt purposes for the entire	re holding p	period?			30a	igsquare	No
b	If "Yes," describe the arrangeme	ent in Part 1	II					
31	3					31	Yes	
32a	Does the organization hire or use contributions?	e third parti	les or related organizations	to solicit, process, or sell	noncash • • •	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	an amount	in column (c) for a type of	property for which column (a) is checked,			

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

number of items received, of a combination of both. Also complete this part for any additional information.									
Return Reference	Explanation								
Schedule M, Part I, Explanations of reporting method for number of contributions	ART - WORKS OF ART REPORTING NUMBER OF CONTRIBUTIONS SECURITIES - PUBLICLY TRADED NUMBER OF CONTRIBUTIONSRECEIVED REAL ESTATE - RESIDENTIAL NUMBER OF CONTRIBUTIONS								
Schedule M, part I, column (b), Line 1, Number of contributions or items contributed	REPORTING NUMBER OF CONTRIBUTIONS								
Schedule M, part I, column (b), Line 4, Number of contributions or items contributed									
Schedule M, part I, column (b), Line 5, Number of contributions or items contributed									
Schedule M, part I, column (b), Line 9, Number of contributions or items contributed	NUMBER OF CONTRIBUTIONSRECEIVED								

Schedule M (Form 990) (2013)

DLN: 93493133059835

OMB No 1545-0047

Inspection

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

 $\label{lem:complete} \textbf{Complete to provide information for responses to specific questions on } \\$ 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.

Name of the organization BOARD OF TRUSTEES OF WHITMAN COLLEGE

Employer identification number

91-0567740

990 Schedule O. Supplemental Information

990 Schedule O, Supplemental Information										
Return Reference	Explanation									
Form 990, Part VI, Sec A, Line 2, Family/business relationships amongst interested persons	JOHN COLEMAN AND WILLIAM WAY - FAMILY RELATIONSHIP, JOHN STANTON AND PETER VAN OPPEN - BUSINESS RELATIONSHIP									
Form 990, Part VI, Sec B, Line 11b, Review of form 990 by governing body	AN ELECTRONIC DRAFT COPY IS PROVIDED TO THE AUDIT COMMITTEE VIA THE WHITMAN COLLEGE WEBSIT E. THE COMMITTEE DISCUSSES AND PROVIDES INPUT TO MANAGEMENT. THE COMMITTEE NEXT ACCEPTS TH E. FORM 990 AND IT IS MADE AVAILABLE TO THE BOARD OF TRUSTEES FOR REVIEW AFTER THE TRUSTEE S. HAVE PROVIDED THEIR INPUT AND ALL QUESTIONS ARE RESOLVED, THE FORM 990 IS FILED WITH THE IRS									
Form 990, Part VI, Sec B, Line 12c, Conflict of interest policy	TRUSTEES, OFFICERS, AND KEY EMPLOYEES ARE GIVEN A QUESTIONNAIRE ANNUALLY THE QUESTIONNAIR E INCLUDES THE COLLEGE'S CONFLICT OF INTEREST POLICY AND ASKS EACH INDIVIDUAL ABOUT THE EX ISTENCE OF CONFLICTS OF INTEREST, AS WELL AS OTHER PAYMENTS OR SITUATIONS WHICH COULD BE C ONSTRUED TO PRESENT A CONFLICT IF AN INDIVIDUAL ANSWERS ANY QUESTION IN THE AFFIRMATIVE, THEY ARE ASKED TO DESCRIBE THE SITUATION IN THEIR RESPONSE IF THERE ARE ANY CONCERNS RELA TIVE TO ANY ONE INDIVIDUAL'S RESPONSE, MANAGEMENT FOLLOWS UP TO DISCUSS HOW BEST TO DEAL W ITH ANY IDENTIFIED SITUATIONS MANAGEMENT VERIFIES ALL IDENTIFIED INDIVIDUALS HAVE RESPOND ED ALL THE RESPONSES ARE RETAINED IN ACCORDANCE WITH THE COLLEGE'S FILE RETENTION POLICY TRUSTEES ARE REMINDED OF POTENTIAL CONFLICTS AT EACH MEETING									
Form 990, Part VI, Sec B, Line 15a, Process to establish compensation of top management official	TRUSTEES APPROVED THE COMPENSATION PACKAGE OF THE COLLEGE'S PRESIDENT AND THE DELIBERATION S ON THAT PROCESS ARE DOCUMENTED IN THE MINUTES COMPARABLE DATA FROM PEER INSTITUTIONS WA S USED TO SET THE COMPENSATION RATE									
Form 990, Part VI, Sec B, Line 15b, Process to establish compensation of other employees	COMPENSATION PROCESS FOR OFFICERS AND KEY EMPLOYEES TRUSTEES APPROVED THE COMPENSATION PA CKAGES OF THE COLLEGES OFFICERS AND KEY EMPLOYEES COMPARABLE DATA FROM PEER INSTITUTIONS FOR EACH POSITION WAS USED TO SET THE COMPENSATION FOR OFFICERS AND KEY EMPLOYEES									
Form 990, Part VI, Sec C, Line 19, Required documents available to the public	THE COLLEGE PROVIDES ACCESS TO ITS FORM 990 AND FINANCIAL STATEMENTS VIA ITS WEBSITE THE COLLEGES TAX EXEMPTION LETTER FROM THE IRS AND OTHER POLICY DOCUMENTS ARE AVAILABLE UPON REQUEST									
FORM 990, PART VIII, LINE 3, INVESTMENT INCOME	WHITMAN COLLEGE NETS INVESTMENT EXPENSES AGAINST INVESTMENT INCOME, WHICH RESULTED IN A NEGATIVE AMOUNT IN THE CURRENT YEAR									
Form 990 , Part XI, Line 9, Other changes in net assets or fund balances	CHANGE IN SPLIT INTEREST AGREEMENTS2074190,									
Schedule M, part I, column (b), Line 15, Number of contributions or items contributed	NUMBER OF CONTRIBUTIONS									
Schedule M, part I, column (b), Line 1, Number of contributions or items contributed	REPORTING NUMBER OF CONTRIBUTIONS									
Schedule M, part I, column (b), Line 9, Number of contributions or items contributed	NUMBER OF CONTRIBUTIONSRECEIVED									
Schedule M, part I, column (b), Line 15, Number of contributions or items contributed	NUMBER OF CONTRIBUTIONS									

DLN: 93493133059835

2013

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

► 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.

Related Organizations and Unrelated Partnerships

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

Internal Revenue Service Name of the organization BOARD OF TRUSTEES OF WHITMAN COLLEGE

Department of the Treasury

Employer identification number

				91-05677	740			
Part I Identification of Disregarded Entities Complete	ıf the organization	answered "Yes" or	n Form 990, Pai	rt IV, line 33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity		
Part II Identification of Related Tax-Exempt Organiza		the organization ai	nswered "Yes" o	on Form 990, P	art IV,	line 34 because it l	had or	ne
or more related tax-exempt organizations during the (a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	on Public charity (if section 501)	status (c)(3))	(f) Direct controlling entity	Section (13) co	g) n 512(ontrolle tity?
(1) WHITMAN COLLEGE PAUL GARRETT FOUNDATION	TRUST	WA	501(C)(3)	11 - Type I		BOARD OF TRUSTEES OF WHITMAN COLLEGE	Yes Yes	No
345 BOYER AVENUE WALLA WALLA, WA 99362 91-1648072								
(2) WHITMAN COLLEGE 21ST CENTURY TRUST 345 BOYER AVENUE	TRUST	WA	501(C)(3)	11 - Type I		BOARD OF TRUSTEES OF WHITMAN COLLEGE	Yes	
WALLA WALLA, WA 99362 91-6526001							 	<u> </u>
								
								<u> </u>
F D		C N E O 1	254			Calcadada D / Farma	0001 3	

(a)		(b)	(c)	(d)	(e)	(f)	(g)	(h		(i)	(j		(k)
Name, address, and I related organizatio		Primary activity	degal domicile (state or foreign country)	Direct controlling entity	Predomina income(rela unrelated excluded f tax unde sections 5 514)	ant Share ated, total income from er			prtionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	part		Percentage ownership
					314)			Yes	No		Yes	No	
Part IV Identification of Related line 34 because it had one of	Organizations Taxable	e as a Corpo	ration s a corr	or Trust	Complete r trust dur	ıf the orga	nızatıon anı vear.	swered	d "Yes	" on Form	990,	Part I	V,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Lega domici (state or fo countr	l le oreign	Direc	(d) t controlling	(e) Type of entity (C corp, S corp, or trust)	(f) Share of tota Income		(g) e of end- year assets	of- Percer	ıtage	c	(i) ection 512 (b)(13) ontrolled entity?
												Y	es No
(1) CHARITABLE LEAD ANNUITY TRUST (1)	HOLDINGS	WA		NA	T	RUST						Y	es
345 BOYER AVENUE WALLA WALLA, WA 99362													
(2) CHARITABLE REMAINDER TRUSTS (37)	HOLDINGS	WA		NA	T	RUST						Ye	es
345 BOYER AVENUE WALLA WALLA, WA 99362													
(3) POOLED INCOME FUNDS (3)	HOLDINGS	WA		NA	Т	RUST						Ye	es
345 BOYER AVENUE WALLA WALLA, WA 99362													
											_		

1	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 Dur	ring the tax year, did the orgranization engage in any of the following transactions with one or more re	elated organizations li	sted in Parts II-IV?				
a I	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 from related organization(s)				1c \	Yes	
d I	Loans or loan guarantees to or for related organization(s)				1d		No
e l	Loans or loan guarantees by related organization(s)				1e		No
f [Dividends from related organization(s)				1f		No
	Sale of assets to related organization(s)				1g		No
_	Purchase of assets from related organization(s)				1h		No
	exchange of assets with related organization(s)				1i		No
	ease of facilities, equipment, or other assets to related organization(s)				1j		No
k I	Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I P	erformance of services or membership or fundraising solicitations for related organization(s)				11		No
m P	erformance of services or membership or fundraising solicitations by related organization(s)				1m		No
n S	haring of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
o :	Sharing of paid employees with related organization(s)				10		No
n	Reimbursement paid to related organization(s) for expenses				1p	\dashv	No
-	Reimbursement paid by related organization(s) for expenses				1g		No
q I	Remindusement paid by related organization(s) for expenses				-4		
r	Other transfer of cash or property to related organization(s)				1r		No
s (Other transfer of cash or property from related organization(s)				1s		No
2 I	f the answer to any of the above is "Yes," see the instructions for information on who must complete	e this line, including co	vered relationships	and transaction thresholds			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount inv	olved	
1) WH	ITMAN COLLEGE 21ST CENTURY TRUST	С	3,319,069	CASH			
2) WH	ITMAN COLLEGE PAUL GARRETT FOUNDATION	С	203,662	CASH			
		+					

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

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

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

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013