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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

► Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning 07-01-2014 and ending 06-30-2015 C Name of organization D Employer identification number **B** Check if applicable ST JOSEPH'Ś COLLEGE Address change 11-1733439 % JOHN C ROTH Name change Doing business as Initial return E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite Final return/terminated (718)940-5300 Amended return City or town, state or province, country, and ZIP or foreign postal code BROOKLYN, NY 112053688 **G** Gross receipts \$ 138,929,103 Application pending F Name and address of principal officer **H(a)** Is this a group return for Jack P Calareso PHD subordinates? ┌ Yes ┌ No 245 CLINTON AVENUE BROOKLYN, NY 112053688 **H(b)** Are all subordinates included? Tax-exempt status **▽** 501(c)(3) **┌** If "No," attach a list (see instructions) Website: ► WWW SJCNY EDU H(c) Group exemption number ► K Form of organization ✓ Corporation ✓ Trust ✓ Association ✓ Other ► L Year of formation 1916 M State of legal domicile NY Part I Summary Briefly describe the organization's mission or most significant activities PROVIDE STRONG ACADEMIC & VALUE-ORIENTED EDUCATION AT UNDERGRADUATE & GRADUATE LEVELS, ROOTED IN LIBERAL ARTS TRADITION THAT SUPPORTS PROVISION FOR CAREER PREPARATION & ENHANCEMENT Activities & Governance 2 Check this box 📂 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 3 25 4 Number of independent voting members of the governing body (Part VI, line 1b) . 25 5 Total number of individuals employed in calendar year 2014 (Part V, line 2a) . 1,821 **6** Total number of volunteers (estimate if necessary) . 6 0 **7a** Total unrelated business revenue from Part VIII, column (C), line 12 . . 7a 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Contributions and grants (Part VIII, line 1h) 6,512,140 5,947,524 97,274,862 Program service revenue (Part VIII, line 2g) . 94,107,803 2,794,404 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 1,768,993 10 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 619,749 617,394 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 106,175,744 103,467,125 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 25,480,018 25,358,580 Benefits paid to or for members (Part IX, column (A), line 4) 0 0 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 53,094,714 53,438,631 Expenses 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . 0 0 Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \frac{1,035,610}{}$ b 30,045,228 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . 17 29,414,872 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 108,333,521 108,498,522 19 Revenue less expenses Subtract line 18 from line 12 -2,157,777 -5,031,397 (Assets or defined by **Beginning of Current End of Year** 106,696,738 20 Total assets (Part X, line 16) 112,684,355 21 Total liabilities (Part X, line 26) 37,469,063 38,025,730 22 68,671,008 Net assets or fund balances Subtract line 21 from line 20 $\,$. 75,215,292 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

JOHN C ROTH CHIEF FINANCIAL OFFICER

Sign Here Signature of officer

2016-01-20

Date

Forn	990 (2014) Pa	ge
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	<u>. ~</u>
1	Briefly describe the organization's mission	
BRO INS ^T COL LEV THE SOC	DSEPH'S COLLEGE WAS FOUNDED IN 1916 IN BROOKLYN, NEW YORK AND EXISTS TODAY WITH ITS ORIGINAL CAMPUS IN EXLYN AND A BRANCH CAMPUS IN PATCHOGUE, NEW YORK THE COLLEGE IS AN INDEPENDENT NOT-FOR-PROFIT IT ITUTION PROVIDING ACADEMIC UNDERGRADUATE AND GRADUATE LEVEL PROGRAMS THE MISSION OF ST JOSEPH'S EGE IS TO PROVIDE STRONG ACADEMIC AND VALUE-ORIENTED EDUCATION AT THE UNDERGRADUATE AND GRADUATE LS, ROOTED IN LIBERAL ARTS TRADITION THAT SUPPORTS PROVISION FOR CAREER PREPARATION AND ENHANCEMENT COLLEGE PREPARES EACH STUDENT FOR A LIFE CHARACTERIZED BY INTEGRITY, INTELLECTUAL AND SPIRITUAL VALUE AL RESPONSIBILITY, AND SERVICE - A LIFE THAT IS WORTHY OF THE COLLEGE'S MOTTO, ESSE NON VIDERI "TO BE, NOTED IN THE COLLEGE OF THE	E T
		_
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ 93,289,026 including grants of \$ 25,358,580) (Revenue \$ 92,655,854)	
	EDUCATIONAL INSTITUTION OF HIGHER LEARNING THAT PROVIDES ACADEMIC UNDERGRADUATE AND GRADUATE LEVEL PROGRAMS THE COLLEGE PROVIDES STRONG ACADEMIC AND VALUE-ORIENTED PROGRAMS ROOTED IN A LIBERAL ARTS TRADITION THAT SUPPORTS PROVISION FOR CAREER PREPARATION AND ENHANCEMENT OUR STRONG ACADEMIC PROGRAMS INCLUDE - twenty-three undergraduate majors between the Schools of Arts and Sciences and Professions and Graduate Studies - an expanded graduate program that includes nine master's degrees - several certificate programs that can advance a career or be comwith a major - a student-faculty ratio of 15 1 -more than 500 dedicated faculty, who are available in a small-class environment	
4b	(Code) (Expenses \$ 1,259,322 including grants of \$) (Revenue \$ 1,440,095)	
	The Dillon Child Study Center offers toddler, preschool and kindergarten programs based on the child development approach to the education of young children Located on St. Joseph's College campus in the Clinton Hill section of Brooklyn, Dillon, founded in 1934, is historically one of the first college preschools on the Ecoast. Licensed by the New York City Department of Health and registered with the New York State Department of Education, Dillon serves over one hundred children, with five classes for pre-kindergarten and kindergarten children and an inclusive class of both typically and atypically developing children. In a child-centered atmosphere, children learn through play and develop confidence, competence and dispositions for future learning. All teachers have obtained or are working toward Early Childhood certification and their Master's degrees.	
4 c	(Code) (Expenses \$ 17,742 including grants of \$) (Revenue \$ 11,854)	
	The Clare Rose Playhouse serves as a major teaching facility for the College's Theater courses and a training ground for young actors. The Playhouse is the site community theater productions of musicals, dramas, comedies, cabaret acts, musical performances, dance troupes and comedians.	e of
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 94,566,090	

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	140
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
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	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 💆	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic 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 or for domestic individuals 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
c	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), 501(c)(4), and 501(c)(29) 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 "Yes," 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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	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_
1_	Enter the number reported in Box 2 of Form 1006 Enter Out that applicable 1 1 220		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 239 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?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N o
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N o
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
	Dod the construction of the description of the desc			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	70		
h	required?	7g		
	Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	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			
3	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		
b	Enter the amount of reserves the organization is required to maintain by the states			
_	The which the organization is incensed to issue qualified fleath plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	 14a	 	No
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14a 14b		INO

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni		
10-	Did the eventuation have local chanters branches ov affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a		110
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	, [ŀ	
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16a		No
b	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			N o
b	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			No_

Own website Another's website Upon request Other (explain in Schedule O)

- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records ►JOHN C ROTH 245 CLINTON AVENUE

BROOKLYN, NY 112053688 (718) 940-5616

Form 990 (2014)	
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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	(C) Position (do not check more than one box, unless 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)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more t perso and a	han d n ıs l	ne l both	box, an d	fficer	i	(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	. ~	Ke) employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	•			
C	Total from continuation sheets to Part VII, Section A	▶			
d	Total (add lines 1b and 1c)	-	2,264,201	0	229,214
		_			

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►73

			Yes	NO			
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	,					
	on the factor respectively for such marviaga.	3		No			
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such						
	ındıvıdual	4	Yes				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No			

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
KEATING AND ASSOCIATES, 49 ELIOT STREET NATICK, MA 01760	ADVERTISING	2,542,722
RACANELLI CONSTRUCTION CO INC, 1895 WALT WHITMAN ROAD MELVILLE, NY 11747	CONSTRUCTION	1,038,416
SIGNATURE CLEANING SERVICES INC, 231 W 29TH STREET SUITE 402 FARMINGDALE, NY 11735	CLEANING	771,389
ALLIED BARTON SECURITY SERVICES, 161 WASHINGTON STREET CONSHOHOCKEN, PA 19428	SECURITY SERVICES	587,675
Professional Sports Publications, 570 Elmont Road ELMONT, NY 11003	ADVERTISING	425,000
2 Total number of independent contractors (including but not limited to those li	isted above) who received more than	

Part V	11111	Statement of	f Revenue ıle O contaıns a respor	nse or note to any lu	ne in this Part VIII			Г
	4-			ise of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts its	1a	Federated camp						
ran our	b	Membership due	es 1b					
, G Am	С	Fundraising eve	ents 1c	254,196				
Other Revenue Contributions, Giffs, Grants Service Revenue and Other Similar Amounts	d	Related organiz	ations 1d					
s, G mil	е	Government grants	(contributions) 1e	4,167,117				
on: Si	f	All other contributio	ons, gifts, grants, and 1f	1,526,211		i		
buti the		sımılar amounts no				ļ		
ıtı 1 O	g	Noncash contribution 1a-1f \$	ons included in lines					
Cor	h	Total. Add lines	s 1a-1f	· · · .	5,947,524			
				Business Code				
inue	2a	TUITION AND FEES	i	900099	92,655,854	92,655,854		
Beev	b	CHILD STUDY CENT	TER	900099	1,440,095	1,440,095		
93	С	PERFORMANCE FEE	ES	711130	11,854	11,854		
λerv	d							
Ē	е							
ogra	f	All other progra	m service revenue					
Ğ	g	Total. Add lines	3 2a-2f	►	94,107,803			
	3		ome (ıncludıng dıvıden		583,899			583,899
	4		ar amounts) tment of tax-exempt bond	l l	0			
	5			▶	0			
			(ı) Real	(11) Personal				
	6a	Gross rents	285,770					
	Ь	Less rental expenses						
	С	Rental income or (loss)	285,770	0				
	d	Net rental incor	ne or (loss)		285,770			285,770
		Gross amount	(ı) Securities	(II) O ther				
	7a	from sales of assets other	37,561,541					
		than inventory Less cost or						
	b	other basis and	35,351,036					
	С	sales expenses Gaın or (loss)	2,210,505					
	d	Net gain or (los	s)	.	2,210,505			2,210,505
	8a	Gross income fr						
ıne		events (not incl \$254,	_					
e		of contributions See Part IV, line	reported on line 1c)					
ъ		See Fare IV, III	a	88,693				
her	b	Less direct exp	penses b	110,942				
ŏ	С		loss) from fundraising	events 🛌	-22,249			-22,249
	9a	Gross income fr See Part IV, line	rom gaming activities e 19					
		,	а					
			penses b					
			loss) from gaming actives	vities	0			
	IUa	Gross sales of i returns and allo						
			а					
		Less cost of go						
	С	Net income or (Miscellaneous	loss) from sales of inve s Revenue	entory p - Business Code	0			+
	11a	BOOKSTORE/V		611710	116,095			116,095
		OTHER COMM	ISSIONS	-··-·	,			<u> </u>
	b	PARKING & LIE		611710	15,225	100.000		15,225
	C	ATHLETICS RE		611420	196,001 26,552	196,001		26,552
	d e		ue 311a-11d	▶	20,332			20,332
	12			-	353,873			
	12	rocar revenue.	See Instructions	🟲	103,467,125	94,303,804		3,215,797

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to any line in this of include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations and		expenses	general expenses	expenses
	domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	25,358,580	25,358,580		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,686,149	675,297	909,375	101,477
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	40,237,317	34,280,280	5,512,840	444,197
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,890,264	1,497,156	367,926	25,182
9	Other employee benefits	6,023,040	4,892,739	999,030	131,271
10	Payroll taxes	3,257,944	2,711,188	502,074	44,682
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	38,499		38,499	
C	Accounting	170,410		170,410	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	107,190		107,190	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,694,215	1,461,832	215,930	16,453
12	Advertising and promotion	3,244,335	3,108,002	133,629	2,704
13	Office expenses	2,208,624	1,838,635	307,665	62,324
14	Information technology	2,560,474	1,191,334	1,361,589	7,551
15	Royalties	0			
16	Occupancy	4,491,912	3,937,892	511,369	42,651
17	Travel	778,314	664,198	113,183	933
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	1,301,922	1,136,801	152,409	12,712
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,803,791	3,321,361	445,291	37,139
23	Insurance	1,253,149	1,094,351	146,573	12,225
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	DEPT GRANT EXPENSE	3,692,503	3,310,744	352,370	29,389
b	BUILDING CONTRACTED SERVICES	1,587,993	1,393,702	179,334	14,957
С	SCHEDULED EVENTS	1,394,003	1,235,113	118,866	40,024
d	PROFESSIONAL DEVELOPMENT	417,775	327,643	88,894	1,238
e	All other expenses	1,300,119	1,129,242	162,376	8,501
25	Total functional expenses. Add lines 1 through 24e	108,498,522	94,566,090	12,896,822	1,035,610
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

	rt X	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	10,042	1	11,180
	2	Savings and temporary cash investments	8,789,270	2	11,376,869
	3	Pledges and grants receivable, net	2,465,212	3	1,928,364
	4	Accounts receivable, net	1,817,579	4	1,787,715
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	, o	5	0
ŧs	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	n s		0
A ssets	7	Notes and loans receivable, net	813,170		884,886
4	8	Inventories for sale or use	013,170		004,000
	9	Prepaid expenses and deferred charges	1,651,511		1,631,904
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 129,096,01		9	1,001,004
	Ь	Less accumulated depreciation 10b 65,454,35	8 64,122,398	10c	63.641.661
	11	Investments—publicly traded securities	32,473,950		24,929,565
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	541,223		504,594
	16	Total assets. Add lines 1 through 15 (must equal line 34)	112,684,355		106,696,738
	17	Accounts payable and accrued expenses	6,279,167	17	7,117,335
	18	Grants payable	0	18	0
	19	Deferred revenue	3,881,110		4,002,589
	20	Tax-exempt bond liabilities	25,775,000		25,070,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
졅		persons Complete Part II of Schedule L	0	22	0
Ï	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	200,000
	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	1,533,786		1,635,806
	26	Total liabilities. Add lines 17 through 25	37,469,063	26	38,025,730
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
튭	27	Unrestricted net assets	60,086,876	27	54,280,825
ä	28	Temporarily restricted net assets	4,515,129	28	3,466,313
Ε	29	Permanently restricted net assets	10,613,287	29	10,923,870
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ┌ and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	75,215,292	33	68,671,008
_	34	Total liabilities and net assets/fund balances	112,684,355	34	106,696,738

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
	Total various (much agual Doub VIII. poliuma (A.) lina 13.)				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		103,4	67,125
2	Total expenses (must equal Part IX, column (A), line 25)	2		108.4	198,522
3	Revenue less expenses Subtract line 2 from line 1				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		-5,0	31,397
7	The cassets of fulld balances at beginning of year (must equal r are A, fine 33, column (A))	4		75,2	215,292
5	Net unrealized gains (losses) on investments	5		-1,4	180,773
6	Donated services and use of facilities	_			
_	T	6			
7	Investment expenses	7			
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain in Schedule O)	8			
•	cher changes in nec assets of fana balances (explain in schedule o)	9			-32,114
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		68,6	571,008
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both	rate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	:	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: **Software Version:**

EIN: 11-1733439

Name: ST JOSEPH'S COLLEGE

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per week (list any hours	(B) A verage hours per week (list any hours (C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	inghest compensus endoyee (e) employee Officer Institutional Trustes or director or director or director		Highest compensated employee	Former	2/1099-MISC)	2,2033 112007	related organizations			
(1) W Christian Drewes Esq	1 0	x		x				0	0	0	
chair (1) Frank Lourenso	0 0										
vice chair	0 0	Х		Х				0	0	0	
(2) Mary M Laı	1 0	, , , , , , , , , , , , , , , , , , ,		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
Board Member (Chair, fin Comm)	0 0	Х		Х				0	0	0	
(3) Sheila Baird	1 0	X						0	0	0	
Board member (4) Peter M Boger	0 0										
Board member	0 0	Х						0	0	0	
(5) Mary Butz	10							_	_	_	
Board member	0 0	Х						0	0	0	
(6) Christopher R Carroll Esq	1 0	X		×				0	0	0	
secretary	0 0										
(7) John A Danzı		х						0	0	0	
Board member (8) Dr Mary Ellen Freeley	1 0										
Board member	0 0	Х						0	0	0	
(9) Sister Elizabeth A Johnson	1 0	×						0	0	0	
Board member	0 0	^						Ů		· · · · · · · · · · · · · · · · · · ·	
(10) Daniel J Keane Esq	1 0	х						0	0	0	
Board member (11) Dennis McCarthy	0 0										
Board member	0 0	Х						0	0	0	
(12) Sister Kathleen McKinney CSJ	1 0	х						0	0	0	
Board member	0 0	^						0			
(13) Margaret Meegan	1 0	Х						0	0	0	
Board member (14) Peter M Meyer	1 0										
Board member	0 0	Х						0	0	0	
(15) Frances A Resheske	1 0										
Board member	0 0	Х						0	0	0	
(16) Peter M Rogers	1 0	X						0	0	0	
Board member (17) Dr Paul Peter Romanello	0 0										
Board member	0 0	Х						0	0	0	
(18) Lisa Rose	1 0	<u> </u>									
Board member	0 0	Х						0	0	0	
(19) Michael E Ryan	1 0	X						0	0	0	
Board member (20) Stephen Sommers	0 0										
BOARD MEMBER	0 0	х						0	0	0	
(21) Alberta Aldınger	1 0	.						_	_	_	
board member	0 0	Х						0	0	0	
(22) Sister Angela Gannon CSJ	1 0	Х						0	0	0	
Board Member (23) Sister Helen Kearney CSJ	0 0										
Board Member	0 0	х						0	0	0	
(24) Bernard Kennedy	10										
Board Member	0 0	Х						0	0	0	

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

Compensated Employees, and Inde			1	1						
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th persoi and a	ion (d ian o n is b	ne b	ox, u an of	nless ficer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(26) John C Roth	40 0			х				269,684	0	24,542
Chief Financial Officer (1) Nancy Connors	40 0			х				208,943	0	21,083
(2) Sister Loretta McGrann CSJ	40 0			х				57,089	0	18,209
Provost (3) Jack P Calareso	40 0			х				283,461	0	17,776
President (6 Months salary) (4) Kenneth McCollum	0 0 40 0				x			206,557	0	19,799
Chief Information Officer (5) Theresa La Rocca-Meyer	0 0				_			206,337		19,799
VP for Enrollment management	0 0				Х			219,744	0	19,312
(6) Susan Hudec Dean of Students	40 0				x			178,553	0	19,147
(7) Christopher Frost Dean-Patchogue	40 0					х		200,780	0	11,476
(8) Georgia-Lynne Lamens Associate Vice President	40 0					х		177,172	0	18,911
(9) Jackson Taylor FACULTY	40 0					х		171,000	0	17,734
(10) Gail Lamberta Faculty	40 0					х		146,213	0	14,720
(11) Heather Barry	40 0					х		145,005	0	26,505
Faculty	0 0				<u> </u>					

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DLN: 93493022002216

OMB No 1545-0047

Public Charity Status and Public Support

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

SCHEDULE A

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.

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

2014

Open to Public Inspection

Name of the organization
ST JOSEPH'S COLLEGE

Employer identification number

11-1733439

Pai	rt I	Reason for Publi	c Charity S	tatus (All organıza	tions must co	mplete this i	part.) See instruction	ons.						
Γhe o	rganız	zation is not a private fo	undation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)							
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(b)(1)(A)(i).							
2	<u> </u>	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)									
3	Γ	A hospital or a cooper	atıve hospıtal	service organization o	lescribed in sec	tion 170(b)(1)(A)(iii).							
4	Γ	A medical research or	ganızatıon ope	rated in conjunction v	vith a hospital d	lescribed in se	ction 170(b)(1)(A)(iii	i). Enter the						
	_	hospital's name, city,	and state											
5	Г	An organization opera			versity owned o	or operated by	a governmental unit d	escribed in						
		section 170(b)(1)(A)(iv). (Complete Part II)												
6	Γ	A federal, state, or local government or governmental unit described in section $170(b)(1)(A)(v)$.												
7	Г -	An organization that n described in section 1	70(b)(1)(A)(v	i). (Complete Part II)		ental unit or from the g	general public						
8	<u> </u>	A community trust des												
9	ı	An organization that n												
		receipts from activitie												
		ıts support from gross						n businesses						
		acquired by the organi	zatıon after Ju	ne 30, 1975 See sec	tion 509(a)(2).	(Complete Pa	rt III)							
10		An organization organi	•	•	•	•								
11	Г	An organization organi	•	•										
		one or more publicly s												
а	Г	the box in lines 11a th Type I. A supporting o	_			_								
•	'	supported organization												
		organization You mus				•		5						
b	Г	Type II. A supporting												
		management of the su			same persons t	hat control or i	manage the supported	organization(s) You						
С	\vdash	must complete Part IN Type III functionally i			n onerated in c	onnection with	and functionally inter	grated with its						
•	'	supported organization						gracea with, its						
d	Γ	Type III non-function						janization(s) that is						
		not functionally integra					ement and an attentiv	eness requirement						
_	_	(see instructions) You					o o Tuno I Tuno II T	una III funationallu						
е	'	Check this box if the o integrated, or Type III	_				is a Type I, Type II, T	ype III functionally						
f		Enter the number of su												
g		Provide the following in												
	(i)Na	me of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of						
	(organızatıon		organization	listed in your	-	monetary support	other support (see						
				(described on lines	docume	nt?	(see instructions)	instructions)						
				1-9 above or IRC section (see										
				instructions))										
				,,	Yes	No								
Total							1							

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	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	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(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						
,	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	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
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 VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organization instructions	on ala not check	cabox on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not 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 Gross receipts from activities that are not an unrelated trade or 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 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a 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 C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom			
2 A mounts paid to perform activity that directly furth- excess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493022002216

OMB No 1545-0047

Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

Political Campaign and Lobbying Activities

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

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

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

- 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) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** ST JOSEPH'S COLLEGE 11-1733439 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ┌ Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2014

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legislative body (direct lobbying)					
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	h Subtract line 1g from line 1a If zero or less, enter -0-					
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

	filed Form 5768 (election under section 501(h)).	(a	1)		(b)	
	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No		Amoun	ıt
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)?	Yes		1		
c	Media advertisements?		Νo	1		
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				1,48
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	O ther activities?	Yes				2,01
j	Total Add lines 1c through 1i					3,50
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912			1		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 501(c))(5),	or se	ectio	n
			-		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		Ļ	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		Ļ	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	i	l

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

Current year

Carryover from last year

c

3 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)

	2a	
	2b	
	2c	
	3	
s		
	4	
	5	

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, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
Schedule C	Lobbying Activities, Line 1b Throughout the year members of the Institutional Advancement and Marketing and Communications Staff contacted Empire State Development to discuss NYS Consolidate Funding Application, also discussed topics related to Health Care Programs, Tap, Tourism Programs, NYS Dream Act, LI Regional Economic Funding, Smart Scholarship and Veteran Support Program with assemblymen, senators, the comptroller, and members of their staff Total expenses related to these lobbying activities totaled \$1,484
SCHEDULE C	LOBBYING ACTIVITIES, LINE 11 The College pays membership dues to CICU, a portion of those dues are expended in furtherance of lobbying activities by CICIU. The College's pro-rata share of lobbying totaled \$1,990. The College also pays membership dues to Nacubo, a portion of those dues are expended in furtherance of lobbying activities by Nacubo. The College's pro-rata share of lobbying totaled \$28.

Part IV Supplemental Information (continued)						
Return Reference	Explanation					

Schedule C (Form 990 or 990EZ) 2014

DLN: 93493022002216

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.

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

Open to Public Inspection

	me of the organization		Employer identification number
51]	IOSEPH'S COLLEGE		11-1733439
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990,		
		(a) Donor advised funds	(b) Funds and other accounts
	Total number at end of year		
	Aggregate value of contributions to (during year)		
	Aggregate value of grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor adviso funds are the organization's property, subject to the organization		nor advised Yes No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benefit conferring impermissible private benefit?		
aı	rt III Conservation Easements. Complete if	the organization answered "Yes" t	to Form 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the orga Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space	or education)	n historically important land area certified historic structure
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in	the form of a conservation
	,,,,,,,,		Held at the End of the Year
а	Total number of conservation easements		2a
Ь	Total acreage restricted by conservation easements		2b
:	Number of conservation easements on a certified histo	rıc structure ıncluded ın (a)	2c
I	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d
	Number of conservation easements modified, transferre	ed, released, extinguished, or terminate	ed by the organization during
	the tax year 🛌		
	Number of states where property subject to conservati	on easement is located 🕨	
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?		dling of violations, and
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation easei	ments during the year
	A mount of expenses incurred in monitoring, inspecting	, and enforcing conservation easement	s during the year
	* \$		470(1)(4)(5)(1)
	Does each conservation easement reported on line $2(d)$ and section $170(h)(4)(B)(H)$?	i) above satisfy the requirements of sec	Yes No
	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia nts	l statements that describes
a r	t III Organizations Maintaining Collections Complete if the organization answered "Yo		or Other Similar Assets.
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote to	16 (ASC 958), not to report in its reve ts held for public exhibition, education,	or research in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asset service, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statement and balance sheet
	(i) Revenue included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$
	If the organization received or held works of art, historic following amounts required to be reported under SFAS		or financial gain, provide the
,	Revenue included in Form 990, Part VIII, line 1		▶ \$
ь	Assets included in Form 990. Part X		b- \$

Part	Organizations Maintaining Co	llections of Art, I	Histo	rical Tr	reasu	res, or Ot	ner Similar As	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	s, chec	k any of t	the foll	owing that ar	e a significant use	of its
а	Public exhibition		d [Loan	orexc	hange progra	ms	
b	Scholarly research		е Г	O the	r			
c	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	how th	ney furthe	er the o	organization's	exempt purpose	ın
5	During the year, did the organization solicit							F F
Dor	assets to be sold to raise funds rather than to the training to the training to the training assets to be sold to raise funds rather than to the training to the training training to the training traini							Yes No
FGII	Part IV, line 9, or reported an ar					i aliswereu	res to roini s	790,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other asse		┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XI	I and complete the fo	llowing	g table				
							An	nount
C	Beginning balance					<u> </u>	С	
d	Additions during the year					<u> </u>	d	
e	Distributions during the year						e e	
f	Ending balance					1		
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21, for	escrow	orcust	odial account	liability?	┌ Yes ┌ No ┌
ь	If "Yes," explain the arrangement in Part XI.							<u>'</u>
Pa	rt V Endowment Funds. Complete	If the organization a	answe (b)Prio				Part IV, line 10. (d)Three years back	(e)Four years back
1a	Beginning of year balance	51,776,082		0,599,232	D (C)IV	50,034,618	50,412,517	45,043,224
ь	Contributions	284,705		720,317		310,850	451,026	641,911
С	Net investment earnings, gains, and losses	1,162,867		4,257,093		2,582,764	-1,655,876	7,006,870
d	Grants or scholarships							
e	Other expenditures for facilities and programs	28,308,120		3,325,509		1,890,000	-1,106,045	1,369,128
f	Administrative expenses	519,050		475,051		439,000	279,094	910,360
g	End of year balance	24,396,484		1,776,082		50,599,232	50,034,618	50,412,517
2	Provide the estimated percentage of the cur		(line 1	.g, colum	nn (a))	held as		
а	Board designated of quasi-endownient	49 434 %						
b	Permanent endowment ► 44 776 %							
С	Temporarily restricted endowment ► 5 7 The percentages in lines 2a, 2b, and 2c sho	89 % uld equal 100%						
За	Are there endowment funds not in the posse	ssion of the organizati	ıon tha	t are held	d and a	dministered	for the	
	organization by (i) unrelated organizations						3a(Yes No
	(ii) related organizations						3a(
b	If "Yes" to 3a(II), are the related organization		on Sch	edule R?	٠		31	
4	Describe in Part XIII the intended uses of the	ne organization's endo	wment	funds				
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		e orga	anızatıoı	n ansv	wered 'Yes'	to Form 990, Pa	art IV, line
	Description of property			a) Cost or asıs (ınvest		(b)Cost or other)		(d) Book value
1a	_and					7,057,7	40	7,057,740
b I	Buildings					95,126,6	05 42,184,98	4 52,941,621
c l	_easehold improvements							
	Equipment		· [26,911,6	74 23,269,37	4 3,642,300
	I. Add lines 1a through 1e <i>(Column (d) must e</i>		column	(B), line	10(c).))		63,641,661
	. , , , ,	. ,			. , ,		Schedule [) (Form 990) 2014

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of value	
(Including name of security) (1)Financial derivatives		Cost or end-of-year ma	rket value
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	*		- 000 Paul IV luna 11 a
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	omplete if the organizatio	n answered 'Yes' to Forn	1 990, Part IV, line 11c
(a) Description of investment	(b) Book value	(c) Method of value	
		Cost or end-of-year ma	rket value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. Complete if the organization (a) Desc		J, Part IV, line IId See For	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line .	15.)		
Part X Other Liabilities. Complete if the org			e 11e or 11f. See
Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Book value		
Federal income taxes	742.041		
REFUNDABLE GOV'T GRANTS BENEFICIAL INTEREST IN TRUSTS	742,041 724,433		
CAPITAL LEASE OBLIGATION	169,332		
	200,002		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,635,806		

OTHER REVENUE ON BOOKS BUT

OTHER REVENUE ON RETURN BUT

OTHER EXPENSES ON RETURN

NOT ON RETURN

NOT ON BOOKS

BUT NOT ON BOOKS

	the organization answ	vered 'Yes' to Form 990, Part IV, line	12a.			
1	Total revenue, gains, and other	r support per audited financial statements			1	77,224,680
2 /	Amounts included on line 1 but	t not on Form 990, Part VIII, line 12				
a i	Net unrealized gains (losses) o	on investments	2a	-1,480,773		
b [Donated services and use of fa	icilities	2b	736,212		
c i	Recoveries of prior year grants		20	2		
d (Other (Describe in Part XIII)		2d	-32,114		
e /	Add lines 2a through 2d .		. –		2e	-776,675
3 9	Subtract line 2e from line 1 .				3	78,001,355
4	Amounts included on Form 990	O, Part VIII, line 12, but not on line 1				· · ·
a 1	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b	4a	107,190		
b (Other (Describe in Part XIII)		4b	25,358,580		
c /	Add lines 4a and 4b		_		4c	25,465,770
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, lin	e 12))	5	103,467,125
Part X	Reconciliation of Ex	xpenses per Audited Financial St swered 'Yes' to Form 990, Part IV, Irr	ater	ments With Expense	s per	Return. Complete
1 7	Total expenses and losses per	audited financial statements			1	83,768,964
2 /	Amounts included on line 1 but	t not on Form 990, Part IX, line 25				
a [Donated services and use of fa	cilities	. 2	?a 736,212	<u>:</u>]	
b F	Prior year adjustments		2	2b		
c (Otherlosses		2	2c		
d (Other (Describe in Part XIII)		2	2d		
e A	Add lines 2a through 2d				2e	736,212
3 9	Subtract line 2e from line 1 .				3	83,032,752
4	Amounts included on Form 990), Part IX, line 25, but not on line 1:				
a I	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b .	. 4	la 107,190)	
b (Other (Describe in Part XIII)		4	lb 25,358,580	5 7	
c A	Add lines 4a and 4b				4c	25,465,770
5	Total expenses Add lines 3 an	ıd 4c. (Thıs must equal Form 990, Part I, lı	ne 18	3)	5	108,498,522
Part >	Supplemental Inf	ormation				
	, line 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1 lines 2d and 4b, and Part XII, lines 2d an				e any additional
	Return Reference	Explanation				
FUND	DED USE OF ENDOWMENT	SCHEDULE D, PART V, QUESTION 4 St generating funds to support the College's be used to fund scholarships, facility upg leave the principal untouched SCHEDULE D, PART X THE COLLEGE A	educ rades	cational mission Endowme c, and educational program	entearn is The (ings are intended to College would prefer to
		STANDARD CodiFICATION ("ASC") 740 TAXES ASC 740-10 CLARIFIES THE A TAKEN OR EXPECTED TO BE TAKEN IN FINANCIAL STATEMENT RECOGNITION THAT THE TAX EFFECTS FROM AN UN FINANCIAL STATEMENTS ONLY IF TH SUSTAINED IF THE POSITION WERE TO ASSESSMENT OF THE TAX POSITION POSITION, WITHOUT REGARD TO THE CHALLENGED THE COLLEGE IS EXEM BY VIRTUE OF BEING AN ORGANIZAT AND SIMILAR PROVISIONS OF THE N COLLEGE MAY BE SUBJECT TO TAX O UNLESS THAT INCOME IS OTHERWISH JUNE 30, 2012, 2013, 2014 AND 2015 STATE PURPOSES MANAGEMENT BEL POSITIONS WITHIN ITS FINANCIALS	O ACC CCO N A TA O N A N CERT E PO SE IS BA E LIKE PT FR ION I E EX C A RE IEVE	COUNTING FOR UNCERT UNTING FOR UNCERTAIN AX RETURN, INCLUDING ND MEASUREMENT THIS SITION CAIDS THAT THE TAX ROM FEDERAL AND NEW DESCRIBED IN SECTION ORK STATE TAX CODE INCOME UNRELATED TO ITS COME UNRELATED TO ITS STILL OPEN TO AUDIT ES THAT THERE ARE NO	AINTIE NTY IN ISSUE S SECTI N BE RE LY-THA KING AU ECHNIC X POSIT YORK I N 501(C NEVERT IS EXEN THE TAX FOR BO	ES IN INCOME I TAX POSITIONS ES RELATING TO ION PROVIDES ECOGNIZED IN THE N-NOT" TO BE UTHORITY THE CAL MERITS OF THE TION MAY BE INCOME TAXATION E(3) OF THE IRC FHELESS, THE MPT PURPOSE, K YEARS ENDED

SCHEDULE D, PART XI, LINE 2D Change in Beneficial interest in trusts \$(32,114)

SCHEDULE D, PART XI, LINE 4B SCHOLARSHIP EXPENSE \$25,358,580

SCHEDULE D, PART XII, LINE 4B SCHOLARSHIP EXPENSE \$25,358,580

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if

concade by (commission) 2015		
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493022002216

OMB No 1545-0047

Department of the Treasury

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

Open to Public

Internal Revenue Service

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

Inspection **Employer identification number**

Name of the organization ST JOSEPH'S COLLEGE Employer ident if ic		Employer identificati	ion nur	nber	
		11-1733439			
Pa	rtI			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in in other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student ad programs, and scholarships?			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broad-	rast media during	2	Yes	
9	the period of solicitation for students, or during the registration period if it has no solicitation pro				ĺ
	that makes the policy known to all parts of the general community it serves? If "Yes," please des	scribe If"No,"			ĺ
	please explain If you need more space use Part II		3	Yes	
			1		
4	Does the organization maintain the following?		1		
а	Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially	nondiscriminatory			
	basis?		4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the pu	ıblıc dealıng			ĺ
	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	<u> </u>
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?		5a		No
Ŀ	Admissions policies?		5b		No
c	Employment of faculty or administrative staff?		5c		No
d	Scholarships or other financial assistance?		5d		No
€	Educational policies?		5e		No
f	Use of facilities?		5f		No
g	Athletic programs?		5g		No
H	Other extracurricular activities?		5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II		-		
6-	Does the organization receive any financial aid or assistance from a governmental agency?		- 6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?		6b	165	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 Pa		7	Yes	

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

Return Reference	Explanation
FORM 990, SCHE, LINE 3	THE COLLEGE MAKES CERTAIN TO PUBLICIZE ITS NONDISCRIMINATORY POLICY IN AS MANY PUBLICATIONS AS POSSIBLE, INCLUDING, BUT NOT LIMITED TO, ITS COLLEGE CATALOGUE, BULLETINS & BROCHURES, NEWSPAPER ADS, AND IN OTHER PUBLIC COMMUNICATIONS
FORM 990, SCHE, LINE 6A	THE COLLEGE ADMINISTERS STUDENT FINANCIAL AID THROUGH GOVERNMENT FUNDED PROGRAMS SUCH AS THE PERKINS PROGRAM AND PELL GRANTS

Schedule E (Form 990 or 990-EZ) (2014)

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DLN: 93493022002216

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

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

Supplemental Information Regarding

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

Inspection

Name of the organization ST JOSEPH'S COLLEGE **Employer identification number**

						11-1/33439	
	undraising Activalers are not requir			janizatio	n answered "Yes" to	Form 990, Part IV,	line 17. Form 990-EZ
1 Indica	ite whether the organi	zatıon raısed funds t	through ar	ny of the f	following activities Che	eck all that apply	
а Г м	aıl solıcıtatıons			e	Solicitation of non	-government grants	
b	ternet and email solic	itations		f	☐ Solicitation of gov	ernment grants	
c P	none solicitations			g	Special fundraisin	g events	
d ┌ Ir	ı-person solicitations						
					vidual (including officei tion with professional f		Г Yes Г No
	s," list the ten highes compensated at least			undraise	rs) pursuant to agreem	ents under which the fu	ndraiser is
	e and address of ndividual ity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No			
1							
2							
3			1				
J							
4							
5							
6							
7							
/							
8							
•							
9							
10							
otal				.			
	l states in which the d ration or licensing	organization is regist	tered or li	censed to	solicit contributions o	r has been notified it is	exempt from

Pai	t II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		3 1 3	(a) Event #1 Dinner Dance (event type)	(b) Event #2 Golf Outing (event type)	(c) O ther events 0 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	215,718			342,889
Revenue	2	Less Contributions	172,055			254,196
~ 	3	Gross income (line 1 minus line 2)	43,663			88,693
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs	26,968	31,944	1	58,912
ВĞ	7	Food and beverages .				
Direct	8	Entertainment				
Δ	9	Other direct expenses .	42,836	9,194		52,030
	10	Direct expense summary Add lir	nes 4 through 9 ın column	ı(d)		(110,942)
	11	Net income summary Subtract li	ne 10 from line 3, columr	n (d)		-22,249
Par	t III	Gaming. Complete if the oil \$15,000 on Form 990-EZ, lii	rganization answered ne 6a.	"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1	Gross revenue				
Expenses	2	Cash prizes				
× be	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteerlabor	┌ Yes %	┌ Yes %	│ Yes %	
		Direct expense summary Add line	-	•		
	8	Net gaming income summary Subt	tract line 7 from line 1, co	olumn (d)	<u> </u>	
9 a b	Ist If"[er the state(s) in which the organization licensed to conduction." No," explain	t gaming activities in eac	h of these states?		
10a b	Wer	re any of the organization's gaming Yes," explain	licenses revoked, susper	nded or terminated during	g the tax year?	· · 「Yes 「No

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3			
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity					
	formed to administer charitable gaming	J ²		Г _{Yes} Г	— No			
13	Indicate the percentage of gaming acti		1 1	,				
а	The organization's facility		13a		%			
b	An outside facility				%			
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records					
	Name ▶							
	Address ►							
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming					
154				┌ Yes 「	– _{No}			
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization > \$ and the					
С	If "Yes," enter name and address of the	e third party						
	Name ▶							
	Address 🏲							
16	Gaming manager information							
	Name 🟲							
	Gaming manager compensation 🕨 \$		······					
	Description of services provided							
	Director/officer	_ Employee	☐ Independent contractor					
17	Mandatory distributions							
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to							
	retain the state gaming license?							
b	Enter the amount of distributions requi	Enter the amount of distributions required under state law distributed to other exempt organizations or spent						
	ın the organization's own exempt activi		·					
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr					
	Return Reference		Explanation					

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493022002216 Schedule I OMB No 1545-0047 Grants and Other Assistance to Organizations, (Form 990) 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 Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization ST JOSEPH'S COLLEGE 11-1733439 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance grant cash orassistance or government assistance (book, FMV, appraisal, other)

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

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

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) STUDENT AID/SCHOLARSHIPS	3642	25,358,580			

Part IV Supplemental I	nformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
MONITORING THE USE OF GRANT FUNDS IN THE UNITED	SCHEDULE I, PART I, QUESTION 2 The College provides scholarships to students matriculating at the College Certain criteria are established that each student is required to meet to retain their scholarship. The College does not need to monitor the use of scholarship funds as those amounts are directly spent to defray the cost of tuition. There is no opportunity for the funds to be directed to another purpose.
STATES	

Schedule I (Form 990) 2014

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OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization ST JOSEPH'S COLLEGE

Employer identification number

11-1733439 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 payments not described in lines 5 and 6? If "Yes," describe in Part III Yes Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Nο If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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		(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation in	
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

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

so complete the part of any additional morniation							
Return Reference	Explanation						
	President Calareso received a housing allowance from the College in the calendar year ending December 31, 2014 The College has determined that the housing allowance is taxable to the President and included the value of the housing in his wages. The amount is disclosed in Schedule J, Part II, column (b)(iii) Form 990, Schedule J, Part I, Line 7 President Calareso received two bonuses in the calendar year ending December 31, 2014 a signing bonus and a performance bonus. The performance bonus was granted based on objective criteria established by the College's Board of Directors. The determination to award the bonus was memorialized in the Board of Directors minutes. President Calareso did not have any input into the bonus he was awarded.						

Schedule J (Form 990) 2014

Additional Data

Software ID: **Software Version:**

EIN: 11-1733439

Name: ST JOSEPH'S COLLEGE

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

(A) Name and Title	(B) Breakd (i) Base Compensation	down of W-2 and/or 1099-M (ii) Bonus & Incentive compensation	IISC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(1)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
John C Roth, Chief Financial Officer	(1) 267	7,808 0	0 1,876 0 0	15,473	9,063	294,220	0
Kenneth McCollum, Chief Information Officer	(I) 20! (II)	5,155 0	0 1,402 0 0	11,853	7,946 0	226,356 0	0
Nancy Connors, VP for Institutional adv	(I) 207 (II)	07,927	0 1,016 0 0	12,014	9,069	230,026	0
Theresa La Rocca-Meyer, VP for Enrollment management	(1) (11)	8,851	0 893	10,999	8,313 0	239,056 0	0
Susan Hudec, Dean of Students	(I) 177 (II)	77,828	0 725 0 0	5 10,473 0 0	8,674 0	197,700 0	0
Christopher Frost, Dean- Patchogue	(I) 198 (II)	08,623	0 2,157 0 0	7 11,476 0 0	0 0	212,256	0
Georgia-Lynne Lamens, Associate Vice President	(I) 177 (II)	77,172	0 0 0	10,237	8,674 0	196,083	0
Jackson Taylor, FACULTY	(I) 17:	71,000	0 0	9,060	8,674 0	188,734 0	0
Gail Lamberta, Faculty	(I) 146 (II)	6,213	0 0 0	6,046	8,674 0	160,933	0
Heather Barry, Faculty	(I) 14!	5,005	0 0 0	5,845	20,660	171,510 0	0
Jack P Calareso, President (6 Months salary)	(ı) (ıı)	05,846 0 69,06	51 18,554 0 0	5,986	11,790 0	301,237 0	0

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

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.

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

OMB No 1545-0047

2014

DLN: 93493022002216

Open to Public **Inspection Employer identification number**

Name of the organization ST JOSEPH'S COLLEGE

Department of the Treasury

Internal Revenue Service

(Form 990)

11-1733439 Part I Bond Issues (a) Issuer name (d) Date issued (g) Defeased (b) Issuer EIN (c) CUSIP # (e) Issue price (f) Description of purpose (h) On (i) Pool behalf of financing ıssuer Yes No Yes No Yes No Χ DORMITORY AUTHORITY OF 14-6000293 649905POO 08-11-2010 28,057,516 CONSTRUCTION OF Χ Х THE STATE OF NEW YORK ATHLETIC FACTILITY Part III Proceeds

_	1100000									
		Α		В	}	(С		D	
1	A mount of bonds retired		2,725,000							
2	A mount of bonds legally defeased		0							
3	Total proceeds of issue	2	8,057,516							
4	Gross proceeds in reserve funds		2,007,464							
5	Capitalized interest from proceeds		0							
6	Proceeds in refunding escrows		0							
7	Issuance costs from proceeds		515,945				,			
8	Credit enhancement from proceeds		0							
9	Working capital expenditures from proceeds		0							
10	Capital expenditures from proceeds	2	5,343,355							
11	O ther spent proceeds		0							
12	O ther unspent proceeds		0							
13	Year of substantial completion	201	4					-		
		Yes	No	Yes	No	Yes	l No	Yes		No

		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		x						
15	Were the bonds issued as part of an advance refunding issue?		Х						
16	Has the final allocation of proceeds been made?		Х						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	Х							
Pai	rt IIII Private Business Use					_	_		

			В		В	С		Ι)	
		Yes	No	Yes	No	Yes	No	Yes	No	
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		×							
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X							
For D	appropriate Poduction Act Notice, see the Instructions for Form 900		at No 501	0.2 E			Sch	odulo K (For	000\ 201/	

Sche	dule K (Form 990) 2014									Page 2
Par	Private Business Use (Continued)		•				_			
			A			В		<u>c</u>		D
2-	Are there any management or service contracts that may result in private	husiness use	Yes	No	Yes	No	Yes	No	Yes	No
3a	of bond-financed property?	business use		Х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?			х						
С	Are there any research agreements that may result in private business use financed property?	e of bond-		Х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance									
4	Enter the percentage of financed property used in a private business use bother than a section $501(c)(3)$ organization or a state or local government			0 %		•				•
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5									
7	Does the bond issue meet the private security or payment test?			Х						
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a 501(c)(3) organization since the borussued?			х						
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		1				<u>'</u>		
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections		×						
9	Has the organization established written procedures to ensure that all none bonds of the issue are remediated in accordance with the requirements unclean Regulations sections 1 141-12 and 1 145-2?		Х							
Pai	t IV Arbitrage									
		А	_		В		С		D	
		Yes	No	Yes	No) Y	'es	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		Х							
2	If "No" to line 1, did the following apply?									
_a	Rebate not due yet?	Х								
b	Exception to rebate?		Х							
С	No rebate due?		Х							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?		Х							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х							
ь	Name of provider	0								
С	Term of hedge									
d	Was the hedge superintegrated?		Х							
e	Was the hedge terminated?		Х							
		<u> </u>	1							

Pa	rt IV Arbitrage (Continued)								
	· · · · · · · · · · · · · · · · · · ·	А		В	В		С		
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		х						
b	Name of provider	0							
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		х						
7	Has the organization established written procedures to monitor the requirements of section 148?		x						
Pa	rt V Procedures To Undertake Corrective Action								
		Α		В		C	:	D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	Х							

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

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DLN: 93493022002216

OMB No 1545-0047

2014

Open to Public Inspection

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Department of the Treasury
Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ 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 ST JOSEPH'S COLLEGE

Employer identification number

11-1733439

990 Schedule O, Supplemental Information

Return Reference	Explanation							
FORM 990, PART VI, LINE 11								
FORM 990, PART VI, LINE 12C	ENFORCEMENT OF CONFLICT OF INTEREST POLICY Each officer, director, trustee and key employe e of the College is required to annually disclose any conflicts of interest that arise by virtue of their employment, board service, or position with the College. The College monit ors compliance with its conflict of interest policy through an annual questionnaire/disclosure statement that is distributed to these individuals. Potential conflicts are investigated immediately.							
FORM 990, PART VI, LINE 15A & 15B	PROCESS FOR DETERMINING COMPENSATION The College undertakes a thorough process to ensure t hat the executive compensation it pays to its top management official and all of its offic ers and key employees is reasonable given the market in which the College operates. In rel evant part, the Board of Directors has established a Compensation Committee of independent persons that have no personal interest in the proposed compensation agreement. The Compensation committee compares data from other institutions to ensure that the College compensates its executives commensurate with the market.							
FORM 990, PART VI, LINE 19	AVAILABILITY OF DOCUMENTS TO THE PUBLIC The organization makes its Form 990 available to the public by retaining a copy at its place of business. The Form 990 is likewise published on the internet at www guidestar org. The organization's financial statements, governing documents and conflict of interest policy are not ordinarily made available to the public, but, if requested, will be provided at management's discretion.							
FORM 990, PART XI, LINE 9	RECONCILIATION OF NET ASSETS Change in Beneficial Interest of Trusts \$32,114							