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DLN: 93493137108166

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public ► Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A Fo	r the	2014 ca	lendar year, or tax year beginn	ing 07-01-2014 , and ending 06-30)-2015				
B Che	eck ıf a	pplicable	C Name of organization GEORGIAN COURT UNIVERSITY				D Employ	yer iden	itification number
┌ Add	lress ch	nange					21-06	34981	
┌ Nai	ne cha	ınae	% John Sommer VP Finance & Ac Doing business as	<u> </u>				31301	•
	ıal retu	_	boing business as						
,		1111	Number and street (or P.O. box i	mail is not delivered to street address) Ro	om/suite		E Telepho	ne numb	oer
Fin ret		mınated	900 LAKEWOOD AVENUE	, , , ,	,		(732)	987-2	200
☐ Am	ended	return	City or town, state or province, or	ountry, and ZIP or foreign postal code					
•		n pending	LAKEWOOD, N1 08701	suntry, and 21 or foreign poster code			G Gross re	eceipts \$	72,188,664
ו ייף	neation	r penamg							
			F Name and address of p JOSEPH R MARBACH PH	·	H(this a group bordinates?	return	for
			900 LAKEWOOD AVENU			Su	bolulliates		i tesit No
			LAKEWOOD, NJ 08701		H(b) Ar	e all subordi	nates	┌ Yes ┌ No
			 				cluded?		, , , , ,
<u> </u>	x-exem	npt status	5 501(c)(3) 501(c)() •	(insert no) 4947(a)(1) or 527		11	"No," attach	a list ((see instructions)
J W	ebsite	e: ► W\	WW GEORGIAN EDU		н	c) G	roup exempt	on num	nber ►
K Forr	n of or	ganızatıoı	Corporation Trust Associa	tion	<u> </u>	. Year o	f formation 190	08 M	State of legal domicile NJ
	rt I		nmary						-
	1	Briefly (tescribe the organization's mis-	sion or most significant activities					
		,	HEDULE O	sion of most significant delivities					
8									
Ě	.								
E	,	Chack t	this boy - if the organization	discontinued its operations or dispo	sod of mo	ro tha	n 25% of its	not acc	cotc
Governance		CHECK	ins box F in the organization	discontinued its operations of dispo	sed of file	ie tila	11 23 /0 01 103	net as:	3613
చ - భ	3	Number	of voting members of the gove	rning body (Part VI, line 1a)				3	35
99 40				s of the governing body (Part VI, lin				4	35
Activities			· -	n calendar year 2014 (Part V , line 2	-			5	1,006
ਹੁੰ				fnecessary)				6	243
4			•	Part VIII, column (C), line 12 .				7a	527,906
	l			from Form 990-T, line 34				7b	-56,680
				·			rior Year		Current Year
	8	Contr	ubutions and grants (Part VIII.	line 1h)	🗀		2,633,8	340	3,045,409
₫	9						51,134,		54,519,183
Revenue	10	_	·	mn (A), lines 3, 4, and 7d)	—		3,125,1		4,262,395
걆	11			.), lines 5, 6d, 8c, 9c, 10c, and 11e	—		996,2		1,042,828
	12			.1 (must equal Part VIII, column (A	· —		,		
							57,889,5	30	62,869,815
	13	Grant	s and sımılar amounts paıd (Pa	rt IX, column (A), lines 1-3)	· · _		13,908,2	284	16,308,056
	14			t IX, column (A), line 4)	_			0	0
ch.	15			yee benefits (Part IX, column (A), li	nes		23,571,4	106	26,095,805
Expenses	16a	5-10		X, column (A), line 11e)	-		20,5	2.0	18,397
কু					` ' ⊢		20,2	,30	10,337
짚	Ь	Total f	undraising expenses (Part IX, column	(D), line 25) • 1,000,440	— <u> </u>				
	17	Othe	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	· · L		20,300,4	01	19,834,918
	18	Total	expenses Add lines 13-17 (n	nust equal Part IX, column (A), line 2	25)		57,800,6	529	62,257,176
	19	Reve	nue less expenses Subtract lır	e 18 from line 12			88,9	01	612,639
Net Assets or Fund Balances						Beginr	ning of Curre	nt	End of Year
9 gg		.	nanta (Dest V. L. 15)		<u> </u>		Year		
Ass Be	20		assets (Part X, line 16)		'		125,055,8		122,948,493
₹ <u>₩</u>	21						33,214,0		32,451,194
	22	_		ct line 21 from line 20	•		91,841,7	38	90,497,299
	t II	_	nature Block						
				examined this return, including according according to the complete Declaration of preparer (ot					
			nowledge			,			
		<u> </u>					I		
C:		*** Sign	*** nature of officer				2016-05-16 Date		
Sign Here],							
	_		N SOMMER VP FINANCE & ADM e or print name and title						
		<u> 17 - </u>	Print/Type preparer's name	Preparer's signature	Date	Τ.	Check I If	PTIN	
Paid	4	L	KPMG LLP	KPMG LLP	2016-0	5-16	self-employed	P00634	378
Pre			Firm's name 🕨 KPMG LLP				Firm's EIN 🟲		
	on On		Firm's address 🟲 1676 International D	rive			Phone no (703)	286-80	000
USE	UII	עי	McLean, VA 22102						

✓ Yes ☐ No

4e

Total program service expenses ▶

43,733,808

orm	(2014)	Page 2
Part		
_	Check if Schedule O contains a response or note to any line in this Part III	F
1 Seorc	efly describe the organization's mission Court University, which provides a comprehensive liberal arts education and is open to students of all faiths, offers a curricu	lum
hat p servic	otes scholarship, service, leadership, and personal development Driven by the Sisters of Mercy's core values of respect, intustice, and compassion, Georgian Court provides students with unique opportunities to discover their talents, explore their	
<u>eade</u>	p potential, and use their education to build contributive, successful lives and careers	
	the organization undertake any significant program services during the year which were not listed on prior Form 990 or 990-EZ?	lo
	Yes," describe these new services on Schedule O	
	the organization cease conducting, or make significant changes in how it conducts, any program vices?	No
	Yes," describe these changes on Schedule O	
	scribe the organization's program service accomplishments for each of its three largest program services, as measured by enses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, total expenses, and revenue, if any, for each program service reported	
4a	ode) (Expenses \$ 34,283,094 including grants of \$ 16,306,806) (Revenue \$ 55,035,750)	
	2014-2015, Georgian Court University served more than 2,300 students in more than 31 undergraduate and 9 distinctive graduate programs through the Business, School of Education, and School of Arts and Sciences, as well as the GCU-Mendian Health School of Nuising. The university also offers online did specialty certificates in such fields as holistic health, homeland security, and education Georgian Court, located in historic Lakewood, New Jersey, is the thick institution of higher education serving residents throughout Central and Southern New Jersey. The university has historic roots as a women's collegion of the property of the	egrees e only e, and became nes and ratio led at ess and or older) enefited ryears, ehavior whom g the t from sible For us also alified es culty egy enior I-East I- I-ssion d spiritua ughout ininity so of celeaders in cerve aid ing allowed
4b	ode) (Expenses \$ 6,720,342 including grants of \$) (Revenue \$)	
	UDENT SERVICE SUPPORT -OTHER EXPENDITURES TO SUPPORT THE OPERATION OF OFFICES DEDICATED TO STUDENT SERVICE ACTIVITIES	
4c	ode) (Expenses \$ 2,730,372 including grants of \$) (Revenue \$)	
	UDENT ATHLETES & PROGRAMS - AS A MEMBER OF THE CENTRAL ATHLETIC COLLEGIATE CONFERENCE, GEORGIAN COURT UNIVERSITY FIELDS 204 ATHLETA DIVISION II SPORTS, INCLUDING BASKETBALL, CROSS COUNTRY, LACROSSE, SOCCER, SOFTBALL, VOLLEYBALL, TENNIS, AND BOTH INDOOR AND OUT ACK & FIELD IN 2015, THE UNIVERSITY ALSO DECIDED TO ADD MEN'S LACROSSE, EFFECTIVE SPRING 2016 THE GCU ATHLETICS PROGRAM IS DISTING ITS COMMITMENT TO BUILDING WELL-ROUNDED ATHLETES WHO ACHIEVE ON THE FIELD AND IN THE CLASSROOM IN KEEPING WITH THEIR PEERS NATURE TO STUDENT-ATHLETES CULTIVATE LEADERSHIP SKILLS IN THEIR INDIVIDUAL SPORTS AND IN THEIR CLASSROOM AND COMMUNITY INVOLVEMENT THE EVERY ACTIVE IN COMMUNITY SERVICE THROUGH THE SUSAN B KOMEN WALK FOR THE CURE, CANCER RESEARCH PROGRAMS, TEAM IMPACT, MAKE UNDATION, AND NATIONAL GIRLS AND WOMEN IN SPORTS DAY THEY ALSO ACHIEVE IN THE CLASSROOM IN 2014-2015, THE GCU LIONS ATHLETIC PROCEIVED THE NCAA'S PRESIDENT'S AWARD FOR ACADEMIC EXCELLENCE, BASED ON THE ACADEMIC SUCCESS RATE (92 PERCENT) OF GCU STUDENT-ATHO GRADUATE WITHIN SIX YEARS	TDOOR GUISHED FIONALLY, TEAMS -A-WISH OGRAM
4d	ther program services (Describe in Schedule O)	
	xpenses \$ including grants of \$) (Revenue \$)	

Form **990** (2014)

Part IV	Checklist of	Required	Schedules

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20h		

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 IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

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			厂_
1-	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 135		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
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)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b	Yes	
40	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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	- 55		
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
·	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
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		
10	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			
11	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)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O c	ontains a resi	onse or note	to anv li	ine in this Pa	rt VI .						.IV

Se	ction 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		Νo
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		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	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)			
	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
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			

- 17 List the States with which a copy of this Form 990 is required to be filed►AK, KY, MD, MA, MI, NH, NJ, NY, OK, OR, PA, TN
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.
 - Own website Another's website Vipon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records
 - ►John Sommer VP Finance Ad
 - 900 Lakewood Avenue
 - Lakewood, NJ 08701 (732) 987-2416

Form 990 (2014)	
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age 7	7
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

any hours for related organizations (W- organizations (W- organizations (W- organization (W- 2/1099-MISC) organization related	(A) Name and Title	for related organizations below		•	` `	organization and
--	-----------------------	---------------------------------------	--	---	-----	------------------

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	more t perso	han d n is l	ne l both	box, an d	officer stee)	į	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	•			
C	Total from continuation sheets to Part VII, Section A	• [
d	Total (add lines 1b and 1c)	<u> </u>	1,405,561	0	244,164

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►21

			Yes	No			
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee						
	on line 1a? If "Yes," complete Schedule I for such individual	3	Yes				
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	ı			
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 J 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
ELLUCIAN COMPANY LP, 4 COUNTRY VIEW ROAD MALVERN, PA 19355	Management Services	1,075,561
CKW ASSOCIATES INC, 157 FOX ROAD MEDIA, PA 19063	Contractors	997,945
COGNITIVE MARKETING INC, 46 PRINCE STREET ROCHESTER, NY 14607	Consulting	397,028
WANK ADAMS SLAVIN ASSOCIATES LLP, 740 BROADWAY FLOOR 4 NEW YORK, NY 10003	Contractors	276,428
MP CONSULTING SERVICES LLC, 366 DERRINGER DRIVE HOWELL, NJ 07731	Consulting	205,395
2 Total number of independent contractors (including but not limited to those listed above) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶9

Part V	Ш	Statement o		aca ar nota to any lir	ie in this Part VIII								
		Check if Schedi	ure o contains a respon	ise of flote to ally in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514					
(4)	1a	Federated cam	paigns 1a										
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	ıes 1b										
3ra not				114,354									
s, (An	С	Fundraising eve											
Sift Iar	d	Related organiz	zations 1d										
s, (imi	e	Government grants (contributions) 1e		903,498									
ion r S	f	All other contribution	ons, gifts, grants, and 1f	2,027,557									
tributions, Gifts, Grants Other Similar Amounts		similar amounts no	ot included above ons included in lines		ļ								
ntri 4 O	g	1a-1f \$	ons included in lines	180,045									
Cont and	h	Total. Add lines	s 1a-1f	· · ·	3,045,409								
				Business Code									
in i	2a	TUITION AND FEES	6	900099	50,113,670	50,113,670							
je ve	ь	RESIDENCE HALLS	AND DINING SERVICES	900099	4,335,452	4,335,452							
e F	С	BOOKSTORE COM	MISSION	900099	70,061	70,061							
7 W K	d			1	, -	, -							
Program Serwce Revenue	e			 									
Iran	f	All other progra	am service revenue										
,													
	g 3		s 2a-2f		54,519,183								
	3		ome (including dividen ar amounts)		2,994,726		3,298	2,991,428					
	4		stment of tax-exempt bond		0								
	5	Royalties	<u></u>	🕨	0								
			(ı) Real	(II) Personal									
	6a	Gross rents	287,330	22,487									
	Ь	Less rental expenses											
	С	Rental income or (loss)	287,330	22,487									
	d	, ,	me or (loss)		309,817		309,817						
			(ı) Securities	(II) O ther									
	7a	Gross amount from sales of assets other	10,502,424	32,932									
	ь	than inventory Less cost or											
		other basis and sales expenses	9,249,491	18,196									
	С	Gain or (loss)	1,252,933	14,736									
	d	Net gain or (los	ss)		1,267,669			1,267,669					
Other Revenue	8a	T	luding ,354 s reported on line 1c) ne 18										
<u>.</u>	L	المحمد المحادث	a noncos h	43,065									
Ě			penses b (loss) from fundraising	46,287 events . ⊾	-3,222			-3,222					
J			rom gaming activities		, -			,					
		See Part IV, lin											
			a	9,750									
	Ь		penses b	4,875	4 975			4 075					
		Gross sales of returns and allo		vities	4,875			4,875					
			a										
			oods sold b										
	С		(loss) from sales of inv		0								
	11-	Miscellaneous		Business Code 900099	359,704	359,704							
	11a b	OTHER STUDE <u>ACTIVITIES/N</u> CATERING	ENT MISCELLANEOUS	900099	214,791	333,704	214,791						
	c	LEADERSHIP T	TRAINING	900099	127,863	127,863							
	d		ue		29,000	29,000							
	e	Total. Add lines		🕨	72. 22.								
	12	Total revenue	See Instructions .	🕨	731,358								
			· · -		62,869,815	55,035,750	527,906	4,260,750					

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must compl	ete column (A	()
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	Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>	<u> </u>	Г
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and				
	domestic governments See Part IV, line 21	1,250	1,250		
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22	15,714,401	15,714,401		
3	Grants and other assistance to foreign organizations, foreign				
	governments, and foreign individuals See Part IV, lines 15 and 16	592,405	592,405		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and				
	key employees	909,040	283,647	453,548	171,845
6	Compensation not included above, to disqualified persons				
	(as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	67,623	67,623		
7	Other salaries and wages	19,140,527	14,843,853	3,616,162	680,512
8	Pension plan accruals and contributions (include section 401(k)	23,213,321	2.,0.0,000	3,010,101	
	and 403(b) employer contributions)	868,773	615,521	221,186	32,066
9	Other employee benefits	3,371,099	2,275,705	976,894	118,500
10	Payroll taxes	1,738,743	1,308,572	359,182	70,989
11	Fees for services (non-employees)				
а	Management	59,000	59,000		
b	Legal	77,718		77,718	
С	Accounting	120,350		120,350	
d	Lobbying	26,298		26,298	
e	Professional fundraising services See Part IV, line 17	18,397			18,397
f	Investment management fees	272,720		272,720	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	784,818	339,159	408,511	37,148
12	Advertising and promotion	750,931	159,852	583,084	7,995
13	Office expenses	1,066,139	812,618	159,097	94,424
14	Information technology	2,041,769	1,430,717	515,586	95,466
15	Royalties	0			
16	Occupancy	1,412,897	254,115	1,158,782	
17	Travel	387,223	323,804	35,286	28,133
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	·		
19	Conferences, conventions, and meetings	162,839	119,989	34,678	8,172
20	Interest	1,732,995		1,732,995	<u> </u>
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,000,260		2,968,427	31,833
23	Insurance	974,644	74,317	900,327	·
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	Dining hall	1,608,714	1,608,714		
b	Equipment R&M	1,093,056	226,223	864,739	2,094
c	Student program services	913,759	861,219	28,718	23,822
d	Bad debt expense	865,515		865,515	
e	All other expenses	2,483,273	1,761,104	263,117	459,052
25	Total functional expenses. Add lines 1 through 24e	62,257,176	43,733,808	16,642,920	1,880,448
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)			-	

Part X Balance Sheet

Pal	rt X	Check if Schedule O contains a response or note to any line in the	nıs F	Part X				
					(A) Beginning of year		(B) End of year	
	1	Cash-non-interest-bearing			0	1	0	
	2	Savings and temporary cash investments			5,384,864	2	3,162,055	
	3	Pledges and grants receivable, net			860,955	3	1,317,654	
	4	Accounts receivable, net		•	2,093,091	4	2,003,074	
	5	Loans and other receivables from current and former officers, diversity employees, and highest compensated employees. Complete Par Schedule L	tΙΙ	of	o	5	0	
ŝ	6	Loans and other receivables from other disqualified persons (as $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and coand sponsoring organizations of section $501(c)(9)$ voluntary emorganizations (see instructions) Complete Part II of Schedule L	ibuting employers	0	6	0		
4ssets	7	Notes and loans receivable, net			17,842	7	12,908	
4	8	Inventories for sale or use			4,135	8	810	
	9	Prepaid expenses and deferred charges			92,127	9	250,832	
	10a	Land, buildings, and equipment cost or other basis	equipment cost or other basis					
	ь	· · · · · · · · · · · · · · · · · · ·	.0b	42,748,480	61,559,643	10c	60,787,164	
	11	Investments—publicly traded securities		44,292,764	11	44,815,064		
	12	Investments—other securities See Part IV, line 11			10,252,456	12	10,071,861	
	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			497,925	15	527,071	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			125,055,802	16	122,948,493	
	17	Accounts payable and accrued expenses			4,459,814	17	4,500,683	
	18	Grants payable			130,272	18	135,171	
	19	Deferred revenue			188,081	19	177,100	
	20	Tax-exempt bond liabilities			26,442,661	20	25,645,818	
φ.	21	Escrow or custodial account liability Complete Part IV of Scheo			0	21	0	
Liabilities	22	Loans and other payables to current and former officers, director key employees, highest compensated employees, and disqualific	rs, t					
аę		persons Complete Part II of Schedule L			0	22	0	
	23	Secured mortgages and notes payable to unrelated third parties			846,484	23	724,871	
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part	t X c		4 440 750	25	4 207 554	
	2.	D		• •	1,146,752	25	1,267,551	
<u>ب</u> ش	26	Total liabilities. Add lines 17 through 25			33,214,064	26	32,451,194	
ř	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets			68,889,827	27	66,487,180	
<u>ଅ</u>	28	Temporarily restricted net assets	•		10,247,793	28	10,554,633	
<u> </u>	29	Permanently restricted net assets	•	• •	12,704,118	29	13,455,486	
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.			12,754,110	23	.0,400,400	
ō	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		
45 S	32	Retained earnings, endowment, accumulated income, or other fu				32		
Net 4	33	Total net assets or fund balances		_	91,841,738	33	90,497,299	
ž	34	Total liabilities and net assets/fund balances	•	•	125,055,802	34	122,948,493	
	1	Total habilities and het assets/fully balances	•	• •	123,000,002	54	Form 900 (3.0.1.4.)	

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		62,8	369,815
2	Total expenses (must equal Part IX, column (A), line 25)	2		62,2	257,176
3	Revenue less expenses Subtract line 2 from line 1	3		6	512,639
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		91,8	341,738
5	Net unrealized gains (losses) on investments	5		-1,9	74,566
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			17,488
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		90,4	197,299
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	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	า			
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?	е	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: 21-0634981

Name: GEORGIAN COURT UNIVERSITY

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 for related	Posit more th perso and a	ion (nan o n is b	ne b oth ctor/	ox, u an of trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations	
(1) Lesa Lardieri-Wright	1 0	X						0	0	0	
Board Chair (1) John W Seazholtz	0 0										
(-)		х						0	0	0	
Board Vice Chair (2) Tessa M Breslin	0 0										
Individual Trustee	0 0	Х						0	0	0	
(3) Jeffrey S Chiesa	1 0	V								0	
Individual Trustee	0 0	Х						0	0	0	
(4) Francis G Coleman	1 0	X						0	0	0	
Individual Trustee	0 0								_		
(5) Frank DeMiro CPA	1 0	X						0	0	0	
Individual Trustee (6) James H Dickerson	0 0										
Individual Trustee	0 0	Х						0	0	0	
(7) Joseph G DiCorcia Esq	1 0										
Individual Trustee	0 0	X						0	0	0	
(8) Elizabeth Fontenelli	1 0	V						0		0	
Individual Trustee	0 0	Х						0	0	0	
(9) Fiah Gussin	1 0	X						0	0	0	
Individual Trustee	0 0										
(10) Patricia Smith Heanue	1 0	Х						0	0	0	
Individual Trustee (11) Reverend Paul A Holmes	0 0										
Trustee Emeritus	0 0	Х						0	0	0	
(12) James J Knipper	1 0							_	_	_	
Individual Trustee	0 0	Х						0	0	0	
(13) Monsignor Casimir H Ladzinski	1 0	×						0	0	0	
Individual Trustee	0 0	^						, , ,	, , , , , , , , , , , , , , , , , , ,		
(14) Michael J Laferrera	1 0	X						0	0	0	
Individual Trustee (15) Eugenia E Lawson	0 0										
Individual Trustee	0 0	Х						0	0	0	
(16) Steven G Littleson	1 0										
Individual Trustee	0 0	Х						0	0	0	
(17) John K Lloyd	1 0	V									
Individual Trustee	0 0	Х						0	0	U	
(18) Amelia A McTamaney	1 0	x						0	0	0	
Individual Trustee	0 0										
(19) Mary Meehan PhD	1 0	Х						0	0	0	
Individual Trustee (20) Robert E Mulcahy III	0 0										
Individual Trustee	0 0	Х						0	0	0	
(21) Deirdre Mullan RSM PhD	1 0	<u> </u>									
Individual Trustee	0 0	Х						0	0	0	
(22) Elizabeth Mulvihill	1 0	х						0	0	0	
Individual Trustee	0 0									<u> </u>	
(23) Edward Nadworny	1 0	x						0	0	О	
Individual Trustee (24) Linda M Orlando	0 0			_			-				
		х						0	0	0	
Individual Trustee	0 0	L			<u> </u>		<u> </u>				

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) A verage hours per week (list any hours for related	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- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-M13C)	2/1099-M13C)	related organizations		
(26) Judy Persichilli	1 0	x						0	0	0		
Individual Trustee	0 0	^						0	0	0		
(1) Mark N Ricca	1 0	×						0	0	0		
Individual Trustee	0 0	^						0	0	0		
(2) Judge Eugene D Serpentelli	1 0	x						0	0	0		
Individual Trustee	0 0	^						0	0	0		
(3) Peter R Strohm Esq	1 0	x						0	0	0		
Individual Trustee	0 0	_ ^						U	U	0		
(4) Thomas J Sykes AIA PP	1 0	x						0	0	0		
Individual Trustee	0 0	_ ^						0	0	0		
(5) Patricia Talone RSM PhD	1 0	x						0	0	0		
Individual Trustee	0 0	_ ^						U	U	0		
(6) Regina Ward RSM	1 0	х						0	0	0		
Individual Trustee	0 0	_ ^						0	0	0		
(7) M Deborah Hanley Williams	1 0							0				
Individual Trustee	0 0	X						0	0	0		
(8) Sister Rosemary Jeffries	35 0							_	_	_		
President	0 0	×		Х				0	0	0		
(9) RAYMOND F SHEA JR ESQ	1 0											
Individual trustee	0 0	×						0	0	0		
(10) Evelyn Saul Quinn	35 0											
VP for Mission(was Provost)	0 0			Х				144,406	0	26,684		
(11) WILLIAM Behre	35 0											
Provost	0 0			Х				138,768	0	30,406		
(12) John Sommer start 81114	35 0											
VP Finance & Administration	0 0			Х				55,104	0	3,992		
(13) John McAuliffe	35 0											
VP for Enrollment	0 0			Х				131,232	0	29,577		
(14) Lisa Kuhnle-Biagas	35 0											
Special Asst to the President	0 0			Х				128,951	0	8,283		
(15) Mellissia Zanjani	35 0											
	0 0			Х				133,280	0	35,540		
VP for Institutional Advanceme (16) LYNN DECAPUA	35 0											
						x		122,351	0	15,387		
Dean School of Education (17) Rita Kipp	0 0 35 0											
						X		119,806	0	15,769		
Dean School Of Arts & Science (18) JAMES CARROLL	0 0 35 0											
						x		113,575	0	5,906		
Professor School of Business (19) Steve Carol	0 0 35 0											
						×		109,177	0	20,605		
Chief Information Officer (20) Maureen Ryan-Hoffman	0 0 35 0					<u> </u>						
(20) Maureen Ryan-Hoffman						×		105,670	0	34,748		
Asst VP for Finance/Controller	0.0					<u> </u>						
(21) Joseph F Gower	35 0						х	103,241	0	17,267		
Former Officer	0 0					<u> </u>						

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As Filed Data -

DLN: 93493137108166

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		ne organization				Employer identification number						
GEUR	GIAN C	OURT UNIVERSITY					21-0634981					
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	itions must co	mnlete this r		nns				
		zation is not a private fo						71101				
1	Ī	•		urches, or association of churches described in section 170(b)(1)(A)(i).								
2	ন	A school described in					-,(-,(-,,-,-					
3	Ė	A hospital or a cooper				tion 170(b)(1)	(A)(iii).					
4	Ė	A medical research or		_				i). Enter the				
•	'	hospital's name, city,			men a moopicar a			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
5	Γ	An organization opera		nefit of a college or uni	versity owned o	r operated by	a governmental unıt d	escribed in				
		section 170(b)(1)(A)	(iv). (Complete	e Part II)								
6	Γ	A federal, state, or loc	al government	t or governmental unit	described in se	ection 170(b)(1)(A)(v).					
7	Γ	An organization that n				om a governme	ental unit or from the o	jeneral public				
_	_	described in section 1				>						
8	<u> </u>	A community trust de										
9	ı	An organization that n										
		receipts from activitie										
		its support from gross						n businesses				
	_	acquired by the organ		·			•					
10	<u> </u>	An organization organ	•	•	•	•						
11	J	An organization organ one or more publicly s										
		the box in lines 11a th										
а	\sqcap	Type I. A supporting of										
		supported organizatio				ty of the dırect	ors or trustees of the	supporting				
ь	_	organization You mus Type II. A supporting				with its suppo	erted erganization(s)	ay haying control or				
U	,	management of the su	-	•								
		must complete Part I			ourne persons c	inde conteror or i	nanage the supported	organization(5) 104				
c	Γ	Type III functionally	_		•			grated with, its				
_	_	supported organization										
d	ı	Type III non-function not functionally integr										
		(see instructions) Yo					ement and an accentiv	eness requirement				
е	Γ	Check this box if the o	organization re	ceived a written deter	mination from t	he IRS that it i	s a Type I, Type II, T	ype III functionally				
		integrated, or Type II										
f 		Enter the number of su										
g		Provide the following i	mormation abo	out the supported orga	inization(s)							
	(i)N:	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	nanization	(v) A mount of	(vi) A mount of				
		organization	(, 21.1	organization	listed in your		monetary support	other support (see				
		•		(described on lines	docume		(see instructions)	instructions)				
				1 - 9 above or IRC								
				section (see instructions))								
				instructions //	Yes	No						
			I		I		1	l				

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 organizations	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 evergice a substantial degree of direction over the policies, programs and activities of each			l

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	plish exempt purposes		
2 Amounts paid to perform activity that directly furthexcess 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: 93493137108166

OMB No 1545-0047

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

Political Campaign and Lobbying Activities

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) (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.

Na	me of the organization DRGIAN COURT UNIVERSITY			Employer iden 21-0634981	tification number	
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(organization.	
1 2 3	Provide a description of the org Political expenditures Volunteer hours	ganization's direct and indirect pol	itical campaign act	ivities in Part IV ▶	\$	
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).		
1	Enter the amount of any excise	e tax incurred by the organization	under section 4955	.	\$	
2	Enter the amount of any excise	e tax incurred by organization man	agers under section	n 4955 🕨	\$	
3	If the organization incurred a s	ection 4955 tax, did it file Form 4	720 for this year?		┌ Yes ┌ No	
4a	Was a correction made?				┌ Yes ┌ No	
b	If "Yes," describe in Part IV					
Par		ganization is exempt unde			1(c)(3).	
1 2	·	ended by the filing organization for organization's funds contributed to	·		\$	
3	·	tures Add lines 1 and 2 Enter he	re and on Form 112	0-POL, line 17b	\$	
4	Did the filing organization file F	Form 1120-POL for this year?			☐ Yes ☐ No	
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.						
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-	

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 legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
е	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	Subtract line 1g from line 1a If zero or less, ente	er-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

chedule e (i	51111 330 01 330 EZ/2014		raye
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has	NOT	
	filed Form 5768 (election under section 501(h)).		

	filed Form 5768 (election under section 501(h)).	(a	1)		(b)	
For e activ	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity.	Yes	No	Aı	moun	t
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				
C	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
e	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				1,901
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	O ther activities?	Yes			2	4,397
j	Total Add lines 1c through 1i				2	6,298
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					
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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), oı	r se	ctio	n
				,	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."					

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

- Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political
- expenses for which the section 527(f) tax was paid).
- Current year
- Carryover from last year
- Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?
- Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, 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, PART II-B, LINE 1	The university engaged MWW Public Affairs to undertake lobbying and grant-writing assistance on its behalf. The total fees pursuant to this contract for the year ended June 30, 2015, were \$36,794. The firm expended 50 percent of effort on lobbying and 50 percent on grant-writing assistance. In addition, the university secured the services of Komjathy Stewart (\$6,000) for state lobbying activities. University personnel and students, during the course of various activities throughout the year, met with legislators to discuss education-related topics. The amount of time spent is not material.

1

2a

2b

2c

3

4

5

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493137108166

OMB No 1545-0047

Supplemental Financial Statements

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► 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 PRGIAN COURT UNIVERSITY	Employer identification number					
ULU	THE COURT ONLY LIGHT	21-	21-0634981				
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990,	Part IV, line 6.		·			
	Total number of ordeferen	(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 or the organization of			rsed ⊤Yes ⊤N o			
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benefi conferring impermissible private benefit?	t of the donor or donor advisor, or fo	r any othe	r purpose Yes N			
aı	t II Conservation Easements. Complete if	the organization answered "Yes	" to Forn	n 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 Complete lines 2a through 2d if the organization held a	or education) Preservation of Preservation	f a certifie	ically important land area d historic structure			
	easement on the last day of the tax year	qualified conservation contribution	iii tile lolli	ii oi a conservation			
				Held at the End of the Year			
3	Total number of conservation easements		2a				
)	Total acreage restricted by conservation easements		2b				
	Number of conservation easements on a certified histo	2c					
	Number of conservation easements included in (c) acquired historic structure listed in the National Register	2d					
	Number of conservation easements modified, transferre	ed, released, extinguished, or termin	nated by th	ne organization during			
	the tax year 🛌						
	Number of states where property subject to conservation	on easement is located 🕨					
	Does the organization have a written policy regarding the enforcement of the conservation easements it holds?		nandling of	violations, and			
	Staff and volunteer hours devoted to monitoring, inspec	ting, and enforcing conservation ea	sements o	during the year			
	A mount of expenses incurred in monitoring, inspecting,	and enforcing concervation easeme	ente durin	g the year			
	► \$	and emoreing conservation easeme	ches danin	g cho year			
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)?) above satisfy the requirements of	section 17	70(h)(4)(B)(ı) Yes N			
	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	footnote to the organization's financ					
ar	Complete if the organization answered "Ye			her Similar Assets.			
3	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asset service, provide, in Part XIII, the text of the footnote to	s held for public exhibition, education	on, or rese	earch 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 reven is held for public exhibition, education	ue statem	nent 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:						
l	Revenue included in Form 990, Part VIII, line 1			► \$			
5	Assets included in Form 990, Part X			▶ \$			
	A 33EL3 MICIUUEU III FUIIII 33U, FAIL A			- →			

Part	Organizations Maintaining Co	<u>llections of Art,</u>	His	torica	l Treas	sures, or O	<u>the</u>	<u>r Similar As</u>	sets (d	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, ch	neck an	y of the fo	ollowing that a	re a	significant use	e of its	
а	Public exhibition		d	Γι	oan or ex	change progr	ams			
b	Scholarly research		e	Γ	ther					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n hov	w they f	urther the	e organization	's ex	empt purpose	ın	
5	During the year, did the organization solicit							ılar	_	_
Do	assets to be sold to raise funds rather than t				_			!! t- F (Г Yes	☐ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar					on answered	J Y	es to Form	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					s or other ass	ets r	not	┌ Yes	
b	If "Yes," explain the arrangement in Part XI	I and complete the f	follov	ving tab	le					
								1A	mount	
C	Beginning balance						1 c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21,	for esc	ow or cus	stodial accour	nt Iıa	bility?	☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI:	I Check here if the	expla	anation	has been	n provided in P	art)	KIII		Γ
Pa	rt V Endowment Funds. Complete				"Yes" to	Form 990,	Par	t IV, line 10.		
		(a)Current year	(b)	Prior yea		Two years back	(d)⊺		(e)Four	years back
1a	Beginning of year balance	52,512,250		47,20		43,085,315		44,363,193		37,753,402
b	Contributions	765,004		313	3,523	105,194		186,376		145,999
С	Net investment earnings, gains, and losses	2,003,320		6,72	,435	5,738,609		207,094		7,873,124
d	Grants or scholarships									
e	Other expenditures for facilities	1,987,463		1,73	3 777	1,721,049		1,671,348		1,409,332
_	and programs	2,20.7.00			,,,,,	2,122,013		1,0,1,0.0		
7	Administrative expenses End of year balance	53,293,111		52,51	250	47,208,069		43,085,315		44,363,193
g	•	· · ·	- /1	•				13,003,313		
2	Provide the estimated percentage of the cur	rent year end balanc 59817%	e (IIN	ie 1g, c	olumn (a)	i) neid as				
а	Board designated or quasi-endowment ► Permanent endowment ► 25 248 %	39 817 70								
b	T diffiditelle diddwiffelle P	225.04								
C	remporarily restricted endowment F	935 %								
a -	The percentages in lines 2a, 2b, and 2c sho			Ll L		1 - 4	ı c	Ll		
3a	Are there endowment funds not in the posse organization by	ssion of the organiza	tion	tnat are	e neid and	i administered	iror	tne	Yes	s No
	(i) unrelated organizations							За		No
	(ii) related organizations							3a	(ii) Yes	;
b	If "Yes" to 3a(II), are the related organization	•						3	b Yes	<u> </u>
4	Describe in Part XIII the intended uses of the					1.07				
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		ne o	rganız	ation an	swered Yes	to	Form 990, Pa	art IV, I	line
	Description of property				ost or other investment			(c) Accumulated depreciation	i (d) B	Book value
	Land			+		4,457,	.947		+	4,457,947
	Buildings					76,813,		24,844,83	34	51,968,527
	Leasehold improvements					1,879,		1,783,87		95,349
	Equipment					17,212,	_	14,795,55	_	2,417,353
	Other					3,172,		1,324,22	_	1,847,988
	I. Add lines 1a through 1e (Column (d) must e		, colu	mn (B),	line 10(c					60,787,164
								Schedule I	 D (Form	990) 2014

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization a	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year	
(1)Financial derivatives		,	
(2)Closely-held equity interests (3)Other			
(A) HEDGE FUND	163,965	F	
(B) INVESTMENTS HELD BY TRUSTEE	2,474,960	F	
(C) PRIVATE EQUITY FUNDS	1,654,247	F	
(D) STRUCTURED CREDIT FUNDS	1,841,984	F	
(E) SPECIAL SITUATIONS FUNDS	1,704,868	F	
(F) PERPETUAL TRUSTS	681,837	F	
(G) CORE PROPERTIES FUNDS	1,550,000	F	
Part VIII Investments—Program Related. Con	, ,		orm 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	
(a) Description or investment	(b) Book Value	Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. Complete if the organization (a) Descrip		, Part IV, line 11d See	Form 990, Part X, line 15 (b) Book value
(2)			(-)
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		
Part X Other Liabilities. Complete if the organ		Form 990, Part IV,	ine 11e or 11f. See
Form 990, Part X, line 25. 1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
OTHER LIABILITIES CONDITIONAL ASSET RETIREMENT	205,659 931,070		
ANNUITY PAYMENT LIABILITY	130,822		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,267,551		

RECONCILIATION OF EXPENSES

Part	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.								
1		r support per audited financial statements	1	44,333,211					
2	· - ·	t not on Form 990, Part VIII, line 12		· · ·					
а	Net unrealized gains (losses) o	1 1							
b	= '	icilities 2b							
С									
d									
e	Add lines 2a through 2d .		2e	-1,957,078					
3	J		3	46,290,289					
4	Amounts included on Form 990	D, Part VIII, line 12, but not on line 1	_	,					
a		ided on Form 990, Part VIII, line 7b . 4a 272,720							
b	·								
c			4c	16,579,526					
5		4c. (This must equal Form 990, Part I, line 12)	5	62,869,815					
		xpenses per Audited Financial Statements With Expenses	_						
	ıf the organization an	swered 'Yes' to Form 990, Part IV, line 12a.		·					
1	Total expenses and losses per	audited financial statements	1	45,677,650					
2	Amounts included on line 1 but	not on Form 990, Part IX, line 25							
а	Donated services and use of fa	cilities							
b	Prior year adjustments	<u>2b</u>							
C	Other losses	<u>2</u> c							
d	Other (Describe in Part XIII)								
e	_		2e						
3	Subtract line ${f 2e}$ from line ${f 1}$.		3	45,677,650					
4	Amounts included on Form 990), Part IX, line 25, but not on line 1:							
а	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b 4a 272,720							
b	Other (Describe in Part XIII)								
C	Add lines 4a and 4b		4c	16,579,526					
5		d 4c. (This must equal Form 990, Part I, line 18)	5	62,257,176					
	Supplemental Inf	ormation Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b							
Part		lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional					
	Return Reference	Explanation							
ENDO	WMENT FUNDS	FORM 990, SCHEDULE D, PART V, LINE 4 THE UNIVERSITY HAS ADDICTED THAT IS INTENDED TO PROVIDE A PREDICTABLE STREAM							
		PROGRAMS FROM ITS ENDOWMENT WHILE SEEKING TO MAINTAIN							
		OF THE ENDOWMENT ASSETS ENDOWMENT ASSETS INCLUDE THO							
		RESTRICTED FUNDS THAT THE UNIVERSITY MUST HOLD IN PERPE							
			BOARD-DESIGNATED FUNDS 1 DONOR-RESTRICTED ENDOWMENT FUNDS ARE ESTABLISHED BY DONOR-RESTRICTED GIFTS AND RECORDED AS PERMANENTLY						
		RESTRICTED WITHIN THE UNIVERSITY FINANCIAL STATEMENTS THE AMOUNT OF EACH							
		INDIVIDUAL FUND IS COMPRISED OF THE ORIGINAL GIFT, SUBSECTION	-						
		BY THE DONOR'S GIFT DOCUMENTS THESE FUNDS MUST BE RETA!	NED:	IN ACCORDANCE					
		WITH THE EXPLICIT DONOR STIPULATIONS 2 EARNINGS ON THE							
		REGARDED AS NET APPRECIATION AND CLASSIFIED AS TEMPORARILY RESTRICTED NET ASSETS THESE AMOUNTS ARE APPROPRIATED FOR EXPENDITURE CONSISTENT WITH THE							
		DONOR GUIDELINES DONOR FUNDED SCHOLARSHIPS ARE AWARD		•					
		ACCORDANCE WITH DONOR STIPULATED GUIDELINES AND ARE A UNIVERSITY'S FINANCIAL AID BUDGET 3 BOARD DESIGNATED FU							
		ENDOWMENT, FUNCTIONING AS ENDOWMENTS ARE MADE UP OF A	DEBT	Γ FUND, INTENDED					
		TO OFFSET FUTURE DEBT BORROWINGS, A PLANT FUND, INTENDED							
		OPERATIONAL EXPENSES RELATED TO FACILITIES' NEEDS SUCH AS DEFERRED MAINTENANCE OR CAPITAL ITEMS, AND A SPECIAL PROJECTS FUND WITH THE ABILITY TO							
		REACT TO THE CHANGING NEEDS AND DEMANDS OF THE HIGHER EDUCATION							
INCO	ME TAXES	ENVIRONMENT The University is classified as a 501(c)(3) organization and is exempt from	om fod	eral incomo tavos					
INCO	ME TAXES	The University is classified as a 501(c)(3) organization and is exempt from federal income taxes under Section 501(a) of the Internal Revenue Code and a similar provision of the New Jersey State							
		income tax law Accordingly, no provision for income taxes has been refle	ected i	n the accompanying					
		financial statements There are certain transactions that could be deeme and would result in a tax liability Management reviews transactions to es							
		liabilities using a threshold of more likely than not. It is management's es	stımat						
		material tax liabilities that need to be recorded at June 30, 2015 and 20							
RECO	NCILIATION OF REVENUE	FORM 990, SCHEDULE D, PART XI, LINE 2D SPLIT INTEREST AGREE SURRENDER VALUE \$17,488 FORM 990, SCHEDULE D, PART XI, LIN							
		EXPENSE (RECLASS) \$ 16,306,806							

FORM 990, SCHEDULE D, PART XII, LINE 4B SCHOLARSHIP EXPENSE (RECLASS) \$ 16,306,806

Jenedale 2 (1 31111 33 3) 23 13		1 age 5		
Part XIII Supplemental Information	on (continued)			
Return Reference	Explanation			
l				
-				

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493137108166

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

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

Open to Public Inspection

Name of the organization **Employer identification number** GEORGIAN COURT UNIVERSITY 21-0634981 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to Νo a Students' rights or privileges? 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? No_ 5g h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a h Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

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
NONDISCRIMINATION POLICY	Form 990, Schedule E, Part I, Line 3 THE UNIVERSITY'S NOTICE OF NONDISCRIMINATION POLICY IS PRINTED ON ALL BROCHURES, WEB PAGES, AND PUBLICATIONS THAT ADVERTISE GCU PROGRAMS AND ADMISSIONS STANDARDS
FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENTAL AGENCY	Form 990, Schedule E, Part I, Line 6a U S DEPARTMENT OF EDUCATION STUDENT FINANCIAL ASSISTANCE CLUSTER - FEDERAL PELL GRANT PROGRAM FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT FEDERAL WORK STUDY PROGRAM FEDERAL DIRECT STUDENT LOANS TEACHER EDUCATION ASSISTANCE FOR COLLEGE AND HIGHER EDUCATION GRANTS (TEACH GRANTS) OTHER U S DEPARTMENT OF EDUCATION AID - TRIO STUDENT SUPPORT SERVICES NJ SEA GRANT-RAIN GARDEN NEW JERSEY DEPARTMENT OF EDUCATION STUDENT FINANCIAL AID CLUSTER - TUITION AID GRANT GEAR UP GRANT NJ STARS PROGRAM GARDEN STATE OTHER NJ DEPARTMENT OF EDUCATION ASSISTANCE - EDUCATION OPPORTUNITY FUND-GRANT EDUCATION OPPORTUNITY FUND-ARTICLE IV TRISTATE & STUDENT LEADERSHIP SPECIAL PROJECT EDUCATION OPPORTUNITY FUND-SUMMER NEW JERSEY DEPARTMENT OF HEALTH AND HUMAN SERVICES VOCATIONAL REHABILITATION DIRECT SERVICES NEW JERSEY COMMISSION FOR THE BLIND NEW JERSEY DEPARTMENT OF TREASURY AID TO INDEPENDENT COLLEGES & UNIVERSITIES NON-CASH AWARDS NJEFA-DORMITORY SAFETY TRUST FUND, SERIES 2003A - INTEREST SUBSIDY NJEFA-DORMITORY SAFETY TRUST FUND, SERIES 2003A - INTEREST SUBSIDY NJEFA-DORMITORY EQUIPMENT LEASING FUND, SERIES 2014B - EQUIPMENT LEASING

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

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SCHEDULE F

Department of the Treasury

Internal Revenue Service

Name of the organization

(Form 990)

As Filed Data -

DLN: 93493137108166

Staten

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,

Part IV, line 14b, 15, or 16. ► Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Employer identification number

CEA	RGIAN COURT UNIVERSITY				Linployer lucile.	rication namber		
GEU	RGIAN COURT UNIVERSITY				21-0634981			
Pa	rt I General Information "Yes" to Form 990, Par			e United States. Co	omplete if the organiza	ation answered		
1	For grantmakers. Does the o	rganization m	aıntaın records	s to substantiate the a	mount of its grants			
	and other assistance, the gra	ntees' eligibili	ty for the gran	ts or assistance, and	the selection criteria			
	used to award the grants or assistance?							
2	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.							
3	Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ce is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1)) See Add'l Data			.=3,				
(2								
(3								
(4)								
(5								
3a	Sub-total					592,405		
Ŀ	Total from continuation sheets							
	to Part I							
(: Totals (add lines 3a and 3b)					592,405		

Ľ				ived more than \$5,0					to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2				ed above that are re or counsel has pro					
3	Enter total nu	mber of other or	ganizations or ent	ities					

Schedule F (Form 990) 2014

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

Part III can b	<u>oe duplicated if additio</u> i	<u>√nal space is n</u> €	ટeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) FINANCIAL AID	East Asia and the Pacific	3	83,297	Credit Acct		N/A	N/A
(2) FINANCIAL AID	North America	1	22,332	Credit Acct		N/A	N/A
(3) FINANCIAL AID	Europe (Including Iceland and Greenland)	11	346,770	Credit Acct		N/A	N/A
(4) FINANCIAL AID	South América	2	49,500	Credit Acct		N/A	N/A
(5) FINANCIAL AID	Mıddle East and North Afrıca	1	40,162	Credit Acct		N/A	N/A
(6) FINANCIAL AID	Sub-Saharan Africa	2	50,344	Credit Acct		N/A	N/A
(7)	1		·				
(8)						 	
(9)	+		,			+	
(10)	+						
(11)	+						
(12)	+				+		
(13)	+		·		+	+	
(14)	+		·		+	+	+
(15)	+		·		+	+	+
(16)	+				 	+	
(17)	+	+			 	+	
(18)		+	,	-	 	+	+
	'					Schi	edule F (Form 990) 2014

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	V	Yes	Г	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Γ	Yes	∀	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	দ	Yes	Γ	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	্ব	Yes	Γ	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	্ব	Yes	Г	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713: do not file with Form 990)	Г	Yes	অ	No

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	THE UNIVERSITY GRANTS LISTED ON SCHEDULE F REPRESENT INSTITUTIONAL AID PROVIDED TO STUDENT S WHO MATRICULATE AT THE UNIVERSITY THE AID PROVIDED TO THE STUDENTS IS APPLIED BY THE UN IVERSITY DIRECTLY TO THE STUDENTS' ACCOUNT AS SUCH, NO MONITORING OF THE GRANT FUNDS ARE REQUIRED BECAUSE THE STUDENT MAY ONLY USE THE SCHOLARSHIP FUNDS TO DEFRAY THE COST OF TUIT ION

Additional Data

Software ID: Software Version:

EIN: 21-0634981

Name: GEORGIAN COURT UNIVERSITY

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Grantmaking		50,344
East Asia and the Pacific			Grantmaking		83,297
North America			Grantmaking		22,332

Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region						
South America			Grantmakıng		49,500						
Middle East and North Africa			Grantmakıng		40,162						
Europe (Including Iceland and Greenland)			Grantmakıng		346,770						

DLN: 93493137108166

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

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

Open to Public Inspection

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

Employer identification number

						24 0624004	
	iiiiiaa Camanlata					21-0634981	
	ured to complete th		janızatıo	n answered "Yes" to	Form	990, Part IV, l	ine 17. Form 990-E2
Indicate whether the orga	nization raised funds	through ar	ny of the 1	following activities Che	eck all th	nat apply	
a 🔽 Mail solicitations			е	Solicitation of non	-govern	ment grants	
b 🔽 Internet and email so	licitations		f	Solicitation of gov	ernmen	t grants	
c 🔽 Phone solicitations			g	Special fundraisin	g events	5	
d 🔽 In-person solicitation	าร						
 Did the organization have or key employees listed i 							V Yes I N
b If "Yes," list the ten higher to be compensated at lea			fundraise	rs) pursuant to agreeme	ents und	der which the fur	draiser is
(i) Name and address of	(ii) Activity	(iii)) Dıd	(iv) Gross receipts	(v) A	mount paid to	(vi) A mount paid to
ındıvıdual	(3,71131117)	fundrais	ser have	from activity	(orı	retained by)	(or retained by)
or entity (fundraiser)			ody or rol of:		fundra	aiserlisted in col (i)	organization
			utions?			coi (i)	
		Yes	No				
1 MWW GROUP LLC ONE MEADOWLANDS PLAZA	GRANT ASSISTANCE		No			18,397	
EAST RUTHERFORD, NJ 07073							
2							
3							
4							
5							
6							
7							
8							
9							
0							
otal			<u> </u>			18,397	
List all states in which the registration or licensing	e organization is regis	tered or li	censed to	solicit contributions o	r has be	en notified it is	exempt from
registration of licensing							

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contribut							
		<u> </u>	(a) Event #1 Golf May 2015 (event type)	(b) Event #2	(c) O ther events 0 (total number)	(d) Total events (add col (a) through col (c))				
₽	1	Gross receipts	157,419		, ,	157,419				
Revenue	2	Less Contributions	114,354			114,354				
<u>~</u>	3	Gross income (line 1 minus line 2)	43,065			43,065				
	4	Cash prizes								
د. د	5	Noncash prizes								
anse.	6	Rent/facility costs								
Expenses	7	Food and beverages .								
Direct	8	Entertainment								
à	9	Other direct expenses .	46,287	7		46,287				
	10	Direct expense summary Add lir	nes 4 through 9 ın column	(d)		(46,287)				
	11	Net income summary Subtract li	ne 10 from line 3, columr	(d)		-3,222				
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than				
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))				
		Cash prizes								
Expenses		·								
ă	3	Non-cash prizes								
Direct	4	Rent/facility costs								
<u>ā</u>	5	Other direct expenses								
	6	Volunteer labor	┌ Yes	✓ Yes						
		Direct expense summary Add line Net gaming income summary Subt	-	•						
9 a b	Enter the state(s) in which the organization conducts gaming activities Is the organization licensed to conduct gaming activities in each of these states?									
10a b	Wer	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No If "Yes," explain								

Sche	edule G (Form 990 or 990-EZ) 2014 Page
1	Does the organization conduct gaming activities with nonmembers?
.2	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
3	Indicate the percentage of gaming activities conducted in
а	The organization's facility
b	An outside facility
4	Enter the name and address of the person who prepares the organization's gaming/special events books and records
	Name ▶
	Address 900 LAKEWOOD AVENUE LAKEWOOD,NJ 08701
.5a	Does the organization have a contract with a third party from whom the organization receives gaming
	revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the
	amount of gaming revenue retained by the third party 🟲 \$
c	If "Yes," enter name and address of the third party
	Name •
	Address ►
6	Gaming manager information
	Name 🟲
	Gaming manager compensation 🕨 \$
	Description of services provided 🟲
	Director/officer Employee Independent contractor
7	Mandatory distributions
a	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
ь	Enter the amount of distributions required under state law distributed to other exempt organizations or spent
_	in the organization's own exempt activities during the tax year 🕨 \$
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493137108166 OMB No 1545-0047 Schedule I 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. Name of the organization Employer identification number GEORGIAN COURT UNIVERSITY 21-0634981 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 or assistance grant cash 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) Institutional Grant Aid	2264	15,714,401			

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
	Part I Line 2 THE UNIVERSITY GRANTS LISTED ON SCHEDULE I REPRESENT SCHOLARSHIPS PROVIDED TO STUDENTS WHO MATRICULATE AT THE UNIVERSITY AS SUCH, NO MONITORING OF THE GRANT FUNDS ARE REQUIRED BECAUSE THE STUDENT MAY ONLY USE THE SCHOLARSHIP FUNDS TO DEFRAY THE COST OF TUITION

Schedule I (Form 990) 2014

DLN: 93493137108166

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

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

Name of the organization GEORGIAN COURT UNIVERSITY

Employer identification number

21-0634981

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	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)			
b	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		No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	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			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization			
7	or a related organization			
а	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		No
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		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.			
5	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?			N
a		5a		No
D	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	5b		No
6	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			
а	The organization?	6a		No
ь	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	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		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
Evelyn Saul Quinn, VP for Mission(was Provost)	(i) (ii)	144,406 0	0	0	8,104 0	18,580	171,090 0	0
2 WILLIAM Behre, Provost	(i) (ii)	138,768 0	0	0	8,201 0	22,205 0	169,174 0	0
3 John McAuliffe, VP for Enrollment	(i) (ii)	84,640 0	0	46,592 0	4,814	24,763	160,809	0
4 Mellissia Zanjani, VP for Institutional Advanceme	(i) (ii)	133,280	0	0	7,806 0	27,734 0	168,820	0
5 Joseph F Gower, Former Officer	(i) (ii)	103,241 0	0	0	5,164	12,103	120,508	0

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

Return Reference	Explanation
	Form 990, Sch J, Part I Line 1a HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE AND PERSONAL SERVICES THE PRESIDENT IS PROVIDED USE OF A UNIVERSITY RESIDENCE BUILDING THE COSTS ARE INCURRED BY THE UNIVERSITY AND CONSIDERED PART OF THE COSTS CUSTOMARY WITH SAID POSITION IN ORDER TO CARRY OUT VARIOUS JOB FUNCTIONS RELATED PERSONAL SERVICES SUCH AS MAINTENANCE AND HOUSEKEEPING ON THE ENTIRE FACILITY ARE PERFORMED BY THE UNIVERSITY
FORM 990, SCH J, PART I, LINE 4A	JOHN MCAULIFFE WAS PAID A SEVERANCE OF \$46,592 ON 2014 AMOUNT IS REFLECTED ON SCH J, PART II, COLUMN III

Schedule J (Form 990) 2014

DLN: 93493137108166

OMB No 1545-0047

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.

Open to Public **Inspection**

Internal Revenue Service Name of the organization

Department of the Treasury

(Form 990)

GEORGIAN COURT UNIVERSITY

Employer identification number

21-0634981

	one, and one of the contract o									21	-06349	81			
P	Part I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) Desci	ription o	of purpose	(g) De	efeased	beha	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	New Jersey Educational Fac Auth 2007 Series D	22-1829511	646065KQ4	07-19-2007	27,19	, I	Refund Serie Constructio		3 &		Х		Х		Х
В	New Jersey Educational Fac Auth 2006A	22-1829511	64605LZ43	10-26-2006	12,03	6,146	Refund 2004 Bond Issue			Х		Х	Х		
c ¯	New Jersey Educational Fac Auth 2007 Series H	22-1829511		09-28-2007	1,05	0,000	Purchase Pr	Purchase Property			Х		Х		Х
D ⁻	New Jersey Educational Facilities Auth ELF 2014B	22-1829511	6460658J4	01-30-2014	8,13		Purchase of Equipment	f Scienti	fic		Х		Х	Х	
P	art III Proceeds														-
		Proceeds						В			С			D	
1						3,067,6	,621 409,582				43	4,595	564,7		
2	Amount of bonds legally defea	ased					0 0					0		0	
3	Total proceeds of issue				7	27,196,	,077 803,604				1,05	0,000		686,040	
4	Gross proceeds in reserve fur				0		0			0			0		
5	Capitalized interest from proc	ceeds					0 0					0	(
6	Proceeds in refunding escrow	VS					0 0			0					0
7	Issuance costs from proceed	ls				443,4	,446 6,607		6,607	C		0			4,621
8	Credit enhancement from prod	ceeds					0 6,582		6,582	0			0		
9	Working capital expenditures	from proceeds					0		0	()		0
10	Capital expenditures from pro	oceeds			1	11,220,	,886		0		1,05	0,000	681,4		681,419
11	Other spent proceeds			-	1	15,531,	,745		790,415			0			0
12	O ther unspent proceeds						0		0			0			0
13	Year of substantial completio	n			200	07		2005		2	007			2016	
					Yes	No	Yes	5	No	Yes	N	ło	Yes	;	No
14	. Were the bonds issued as par	rt of a current refund	ing issue?]	Х			х			x			X
15	Were the bonds issued as par	rt of an advance refu	nding issue?		Х		Х				7	x			X
16	Has the final allocation of pro-	ceeds been made?			Х		Х			Х	 		Х		
17	Does the organization mainta allocation of proceeds?	ıın adequate books a	nd records to supr	port the final	Х		х			Х			Х		
Pa	art IIII Private Business l							<u>'</u>							
					<u> </u>	<u> </u>		В		c			D		
					. V	4 BI-		_	NI.	V	1 P		V	. !	NI-

property financed by tax-exempt bonds?

financed property?

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

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

No

Χ

Х

Yes

No

Χ

Χ

Yes

No

Χ

Χ

Yes

Yes

No

Χ

Χ

Part Private Business Use (Continued) C D В Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Х Х Χ Х of bond-financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed Х property? Are there any research agreements that may result in private business use of bondc Χ Χ Χ Χ financed property? If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? Enter the percentage of financed property used in a private business use by entities 4 0 % 0 % 0 % 0 % other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 Does the bond issue meet the private security or payment test? 7 Χ Χ Х Χ Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c Х Χ Х Χ 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Х Χ Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage Α В С Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Χ Χ Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due vet? а Exception to rebate? b Χ No rebate due? Χ c Х Χ If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Χ Has the organization or the governmental issuer entered 4a Х Χ Χ Χ into a qualified hedge with respect to the bond issue? Name of provider Term of hedge C Was the hedge superintegrated? d Was the hedge terminated?

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

	A							
	Α		В		С		<u>D</u>	
	Yes	No	Yes	No	Yes	No	Yes	No
Were gross proceeds invested in a guaranteed investment contract (GIC)?		х		х		Х		Х
Name of provider	0		0		0		0	
Term of GIC								
Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
Were any gross proceeds invested beyond an available temporary period?		Х		×		Х		х
Has the organization established written procedures to monitor the requirements of section 148?	X		×		×		×	
	contract (GIC)? Name of provider Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor	contract (GIC)? Name of provider Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor	contract (GIC)? Name of provider Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor	contract (GIC)? Name of provider Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor	contract (GIC)? Name of provider Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor	contract (GIC)? Name of provider O O O Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor	contract (GIC)? Name of provider O O O Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor	Contract (GIC)? Name of provider Term of GIC Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary period? Has the organization established written procedures to monitor

Part V Procedures To Undertake Corrective Action

DONE 07/06/2015

	Α		В		<u> </u>		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?	X		X		Х		Х	

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

Return Reference Explanation

SCHEDULE K

BOND A - New Jersey Educational Facilities Authority, Project Revenue Bonds, 2007 Series D. ON JULY 10, 2007, THE UNIVERSITY ISSUED NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY 2007 SERIES PROJECT D BONDS IN THE AMOUNT OF \$27,196,077 (PAR AMOUNT OF \$26,980,000 PLUS ORIGINAL ISSUE PREMIUM OF \$216,077) THE PROCEEDS FROM THIS ISSUE WERE USED FOR THE PURPOSES OF FINANCING THE COSTS TO CONSTRUCT AND EQUIP THE WELLNESS CENTER AND AN ADVANCE REFUNDING OF A PORTION OF SERIES 2003C BONDS PART III, LINE 3A $\,$ ALL CONTRACTS FALL UNDER REV $\,$ PROC $\,$ 97-13 AND DO NOT GENERATE UBI $\,$ PART IV, LINE $\,$ 2C $\,$ THE LAST COMPUTATION WAS DONE 06/30/2015 BOND B -NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY CAPITAL IMPROVEMENT FUND, 2006 $oxed{A}$ ON OCTOBER 26, 2006, THE NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY ISSUED ITS CAPITAL IMPROVEMENT FUND BONDS, 2006A TO REFUND PART OF THE CAPITAL IMPROVEMENT FUND 2004A BONDS AND PART OF SEVERAL OTHER ISSUES OF CAPITAL IMPROVEMENT BONDS DEBT SERVICE ON THE 2004A BONDS WAS ADJUSTED TO TAKE ACCOUNT OF THE DEBT SERVICE SAVINGS THAT RESULTED FROM THE REFUNDING PART II, LINE 3 BOND 2006A IS A POOLED FINANCING BOND THE PORTION REPORTED ON SCHEDULE K, PART II IS REFLECTIVE OF ONLY GEORGIAN COURT UNIVERSITY'S PORTION PART IV, LINE 2C THE LAST COMPUTATION WAS DONE 09/29/2014 BOND C- NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY, PROJECT REVENUE BONDS, 2007 SERIES H, DATE ISSUED 9/28/2007 THESE BONDS WERE ISSUED BY THE NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY PURSUANT TO A NEW JERSEY STATE PROGRAM TO FINANCE CAPITAL IMPROVEMENTS AT INSTITUTIONS OF HIGHER EDUCATION IN NEW JERSEY THE BONDS WERE SOLD BASED ON THE CREDIT OF THE STATE OF NEW JERSEY IN THE AGGREGATE PRINCIPAL AMOUNT OF \$76,725,000 THIS AMOUNT WAS ALLOCATED TO BOTH PUBLIC AND PRIVATE INSTITUTIONS A FORM 8038 WAS FILED FOR THE PORTION OF THE ISSUE ALLOCATED TO THE PRIVATE INSTITUTIONS AND A SEPARATE FORM 8038-G WAS FILED FOR THE PORTION ALLOCATED TO PUBLIC INSTITUTIONS GEORGIAN COURT RECEIVED AN AMOUNT OF $\$1,050,000\,$ THE AMOUNTS REPORTED ON SCHEDULE K CORRESPONDS TO THE FORM $8038\,$ FILED $\,$ BOND D- NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY, EQUIPMENT LEASING FUND PROJECT REVENUE BONDS, SERIES 2014 B $\,$ ON JANUARY 1, 2014 THE NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY ISSUED BONDS FOR THE PURPOSE OF FUNDING THE HIGHER EDUCATION EQUIPMENT LEASING FUND THE PROCEEDS FROM THE ISSUE WERE ALLOCATED TO NEW JERSEY INSTITUTIONS FOR THE PURPOSE OF FINANCING HIGHER EDUCATION EOUIPMENT PART II.LINE 3 BOND 2014B IS A POOLED FINANCING BOND THE PORTION REPORTED ON SCHEDULE K, PART II IS REFLECTIVE OF ONLY GEORGIAN COURT UNIVERSITY'S PORTION $\,$ PART IV, LINE 2C $\,$ THE LAST COMPUTATION WAS DONE 08/18/2015 BOND E - NEW JERSEY EDUCATIONAL FACILITIES AUTHORITY, HIGHER EDUCATION CAPITAL IMPROVEMENT FUND, SERIES 2014 D PART II, LINE 3 BOND 2014D IS A POOLED FINANCING BOND THE PORTION REPORTED ON SCHEDULE K PART II IS REFLECTIVE OF ONLY GEORGIAN COURT UNIVERSITY'S PORTION PART IV, LINE 2C THE LAST COMPUTATION WAS

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: 93493137108166

Open to Public Inspection

Name of the organization
GEORGIAN COURT UNIVERSITY

(Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number 21-0634981

Р	art I Bond Issues																														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issue	price	(f	Descriptio	n of purpose	(g) De	feased	beh	On alf of suer		Pool ncing																
								JND 2004 ISSUE		Yes	No	Yes	No	Yes	No																
Α	new jersey educational fac auth 2014D	22-1829511	646066DG2	04-29-2014	19,36	59,367	REFU	JND 2004 ISSUE		ND 2004 ISSUE		JND 2004 ISSUE		JND 2004 ISSUE		JND 2004 ISSUE		JND 2004 ISSUE		UND 2004 ISSUE		IND 2004 ISSUE		IND 2004 ISSUE			Х		Х	×	
Pa	art II Proceeds	<u> </u>	_	<u>'</u>																											
						4		В			С			D																	
1	A mount of bonds retired					519,2	229																								
2	Amount of bonds legally defea	sed					0																								
3	Total proceeds of issue					944,4	442																								
4	Gross proceeds in reserve fun	ds					0																								
5	Capitalized interest from proce	eeds			0																										
6	Proceeds in refunding escrows	3			0																										
7	Issuance costs from proceeds	3			5,526																										
8	Credit enhancement from proc	eeds			0																										
9	Working capital expenditures t	from proceeds			0																										
10	Capital expenditures from pro	ceeds				751,266																									
11	Other spent proceeds					187,6	650																								
12	O ther unspent proceeds						0																								
13	Year of substantial completion	1			•																										
					Yes	No		Yes	No	Yes	1	No	Ye	s	No																
14	Were the bonds issued as part	t of a current refund	ing issue?			Х																									
15	Were the bonds issued as part	t of an advance refu	nding issue?		X																										
16	Has the final allocation of proc				X																										
_							\dashv				+																				
17	allocation of proceeds?				X																										
Pa	rt IIII Private Business U	lse																													

property financed by tax-exempt bonds?

financed property?

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

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

No

Χ

В

No

Yes

Α

Yes

Yes

D

No

С

No

Yes

Sche	dule K (Form 990) 2014									Page 2
Par	Private Business Use (Continued)						•			
				Α		B		<u>C</u>		D
За	Are there any management or service contracts that may result in private	hiisiness iise	Yes	No	Yes	No	Yes	No	Yes	No
	of bond-financed property?			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?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		×						
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 t nongovernmental person other than a 501(c)(3) organization since the bor issued?			х						
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of								-
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections		х						
9	Has the organization established written procedures to ensure that all non- bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		Х							
Pai	t IV Arbitrage									
		А			В		С		D	
		Yes	No	Yes	No	· \	'es	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X							
2	If "No" to line 1, did the following apply?		•	•	•	•	•			
a	Rebate not due yet?									
ь	Exception to rebate?									
С	No rebate due?	Х								
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed			.		<u>'</u>	<u> </u>			
3	Is the bond issue a variable rate issue?		Х							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х							
b	Name of provider	0								
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was the hedge terminated?									
			1							

Pai	rt IV Arbitrage (Continued)								
	<u> </u>	Δ.	\	В	}	C	·	D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
b	Name of provider	0							
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
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?	х							
Pa	rt V Procedures To Undertake Corrective Action	•							
		Δ.	1	В	3	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	х							

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

Schedule K (Form 990) 2014

DLN: 93493137108166

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

Transactions with Interested Persons

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

► Attach to Form 990 or Form 990-EZ. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at Internal Revenue Service www.irs.gov/form990. Name of the organization Employer identification number

Open to	
Inspe	ction

	T UNIVERSITY												
								34981					
				501(c)(3), section 501(406			
	piete if the organiza ne of disqualified pe			n Form 990, Part IV, line ip between disqualified	(c) Desc						rected		
1 (a) Nam	ie oi disqualified pe	(6)		and organization	(C) Desc	ription	ortia	iisactioii	' ⊦	(d) Correc			
										Tes	No		
4958 .				inagers or disqualified pe • • • • • • • • • • • • • • • • • • •			r unde • •	rsectior ▶ \$ ▶ \$) 				
oans to a	nd/or From Int				or Form 990	Part IV	line :	26 orıf	the ora	anızatıor	1		
Loans to a Complete If the reported an al a) Name of		vered "Yes"	on Form 9 5, 6, or 2: (d) Loan	90-EZ, Part V, line 38a, 2 to (e)Origina the principal		Part IV (g) defa	In	(h) Appro-	ved rd or	anızatıor (i)Wrı agreen	tten		
Complete if the reported an air	ne organization answ mount on Form 990 (b) Relationship	vered "Yes" , Part X, line (c) Purpose of	on Form 9 ^s 5, 6, or 2: (d) Loan or from t	90-EZ, Part V, line 38a, 2 to (e)Origina the principal	(f)Balance	(g)	In	(h) Appro	ved rd or	(i)Wrı	tten		
Loans to a Complete if the reported an air (a) Name of interested person tal	(b) Relationship with organization ants or Assista implete if the organized (b) Relationship with organization	vered "Yes" , Part X, line (c) Purpose of loan	(d) Loan or from torganizati To fiting In nswered petween	to (e)Origina principal amount	(f)Balance due	(g) defa Yes	In ult?	(h) A pproving by boar commit Yes	ved rd or tee? No	(i)Wrı agreen	tten nent?		

Complete if the organizatio	Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.													
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	f zation's									
				Yes	No									
(1) ERIN QUINN CRITCHETT BONCZEK	SEE PART V	55,502	EMPLOYEE COMPENSATION		No									
(2) CAITLIN PITTENGER	SEE PART V	12,660	EMPLOYEE COMPENSATION		No									

Part V	Supplemental	Information
raitv	Supplemental	Till Of Illa tion

Provide additional information	for responses to question	s on Schedule Li	(see instructions)

Return Reference	Explanation
FORM 990, PART VI	ERIN QUINN CRITCHETT BONCZEK AND CAITLIN PITTENGER ARE EMPLOYED BY THE
	UNIVERSITY AND FAMILY MEMBERS OF EVELYN SAUL QUINN, PROVOST

Schedule L (Form 990 or 990-EZ) 2014

DLN: 93493137108166

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

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

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

Noncash Contributions

Open to Public Inspection

Name of the organization	
GEORGIAN COURT UNIVERSITY	

Employer identification number

21-0634981

Pa	rtI Typ	es of Property			•				
			(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermı		ts
1	Art—Works	ofart			- 9				
2	Art—Histori	cal treasures .							
3	Art—Fractio	nal interests							
4	Books and p	oublications							
5	Clothing and	d household							
	_								
	Cars and ot								
		lanes							
		property							
		Publicly traded .	X		11,047	MARKET VALUE			
		Closely held stock	•						
11		Partnership, LLC, rests	X		168,998	PROJ FMV OF TRU	STS		
12		Miscellaneous							
13	Qualified co contribution								
14	Qualified co								
	contribution	—Other							
15	Real estate-	—Residential .							
		—Commercial							
		—Other							
		ory							
		nedical supplies .							
		rtıfacts							
		pecimens							
		al artifacts							
	Other►(Other►(
	Other (/							
	Other ► (/							
	`	/ orms 8283 received	by the orga	ı ınızatıon durıng the tax yea	r for contributions				
				283, Part IV, Donee Ackn		29			0
								Yes	No
30a	During the	year, dıd the organıza	atıon receiv	e by contribution any prope	erty reported in Part I, lines	1 through 28, that			
		·			ıtıon, and which is not requi	red to be used			
	for exempt	purposes for the enti	ire holding p	period?			30a		Νo
b	If "Yes," de	escribe the arrangem	ent in Part :	II					
31	Does the o	rganızatıon have a gı	ft acceptan	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
32a	Does the o	=	•	ies or related organizations	to solicit, process, or sell	noncash • • •	32a		No
ь	If "Yes," de	escribe in Part II							
33		nization did not repor	t an amount	: in column (c) for a type of	property for which column (a) ıs checked,			

Page 2

Schedule M (Form 990) (2014)

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

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

Return Reference Explanation

Schedule M (Form 990) (2014)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493137108166

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 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
GEORGIAN COURT UNIVERSITY

Employer identification number
21-0634981

Return Reference	Explanation
	Georgian Court offers a comprehensive liberal arts education in the Roman Catholic tradition, with a special concern for women, and is committed to its core values of justice, respect, integrity, service, and compassion

FORM 990, PART VI, SECTION A, LINE 7 IN APRIL 2006, THE SISTERS OF MERCY OF THE REGIONAL COMMUNITY OF NEW JERSEY TRANSFERRED THE SPONSORSHIP OF GEORGIAN COURT TO THE CONFERENCE FOR MERCY HIGHER EDUCATION (CMHE) CMHE COORDINATES COLLABORATION AMONG THE 16 MERCY COLLEGES AND UNIVERSITIES THROUGHOUT THE COUNTRY ON BEHALF OF THE INSTITUTE OF THE SISTERS OF MERCY OF THE AMERICAS GEORGIAN COURT UNIVERSITY HAS A TWO-TIERED GOVERNANCE STRUCTURE, THE FIRST TIER CONSISTING OF CMHE (AS THE UNIVERSITY'S SOLE MEMBER) AND THE SECOND BEING THE DULY ELECTED BOARD OF TRUSTEES, WHICH INCLUDES THE PRESIDENT OF THE UNIVERSITY AS AN EX-OFFICIO MEMBER CONTROL OF THE UNIVERSITY AND ITS AFFAIRS AND PROPERTY IS VESTED IN THE BOARD OF TRUSTEES PURSUANT TO THE UNIVERSITY'S BY-LAWS, SUBJECT TO THE POWERS RESERVED TO CMHE, INCLUDING AMONG OTHERS, THE POWER TO ESTABLISH THE PHILOSOPHY AND MISSION OF THE UNIVERSITY, ELECT OR REMOVE WITH OR WITHOUT CAUSE THE UNIVERSITY PRESIDENT AND MEMBERS OF THE BOARD OF TRUSTEES, APPROVE EXPENDITURES THAT ARE IN EXCESS OF A LEVEL REQUIRING APPROVAL OF THE HOLY SEE AND MERGE, CONSOLIDATE, DISSOLVE, OR CHANGE THE CORPORATE STRUCTURE OF THE UNIVERSITY EXCEPT TO THE EXTENT RESERVED TO CMHE, THE BOARD OF TRUSTEES IS EMPOWERED TO MANAGE THE PROPERTY AND BUSINESS OF THE UNIVERSITY, INCLUDING WITHIN SUCH AUTHORITY, THE POWER TO DELEGATE SUCH RESPONSIBILITIES AND DUTIES TO THE OFFICERS OF GEORGIAN COURT UNIVERSITY AS THE BOARD OF TRUSTEES DEEMS APPROPRIATE	Return Reference	Explanation
	PART VI, SECTION A,	OF GEORGIAN COURT TO THE CONFERENCE FOR MERCY HIGHER EDUCATION (CMHE) CMHE COORDINATES COLLABORATION AMONG THE 16 MERCY COLLEGES AND UNIVERSITIES THROUGHOUT THE COUNTRY ON BEHALF OF THE INSTITUTE OF THE SISTERS OF MERCY OF THE AMERICAS GEORGIAN COURT UNIVERSITY HAS A TWO-TIERED GOVERNANCE STRUCTURE, THE FIRST TIER CONSISTING OF CMHE (AS THE UNIVERSITY'S SOLE MEMBER) AND THE SECOND BEING THE DULY ELECTED BOARD OF TRUSTEES, WHICH INCLUDES THE PRESIDENT OF THE UNIVERSITY AS AN EX-OFFICIO MEMBER CONTROL OF THE UNIVERSITY AND ITS AFFAIRS AND PROPERTY IS VESTED IN THE BOARD OF TRUSTEES PURSUANT TO THE UNIVERSITY'S BY-LAWS, SUBJECT TO THE POWERS RESERVED TO CMHE, INCLUDING AMONG OTHERS, THE POWER TO ESTABLISH THE PHILOSOPHY AND MISSION OF THE UNIVERSITY, ELECT OR REMOVE WITH OR WITHOUT CAUSE THE UNIVERSITY PRESIDENT AND MEMBERS OF THE BOARD OF TRUSTEES, APPROVE EXPENDITURES THAT ARE IN EXCESS OF A LEVEL REQUIRING APPROVAL OF THE HOLY SEE AND MERGE, CONSOLIDATE, DISSOLVE, OR CHANGE THE CORPORATE STRUCTURE OF THE UNIVERSITY EXCEPT TO THE EXTENT RESERVED TO CMHE, THE BOARD OF TRUSTEES IS EMPOWERED TO MANAGE THE PROPERTY AND BUSINESS OF THE UNIVERSITY, INCLUDING WITHIN SUCH AUTHORITY, THE POWER TO DELEGATE SUCH RESPONSIBILITIES AND DUTIES TO THE OFFICERS OF GEORGIAN COURT UNIVERSITY AS THE

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE UNIVERSITY'S FORM 990 WAS PREPARED BY AN INDEPENDENT PUBLIC ACCOUNTING FIRM IN CONJUNCTION WITH THE UNIVERSITY'S FINANCE DEPARTMENT A DRAFT IS PREPARED AND DISTRIBUTED TO THE FULL AUDIT COMMITTEE FOR REVIEW THE AUDIT COMMITTEE RECOMMENDS AND APPROVES FOR FILING THE FORM 990 THE FORM 990, AS ULTIMATELY FILED WITH THE IRS, IS DISTRIBUTED TO THE FULL BOARD IN ADVANCE OF ITS FILING

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12	EACH TRUSTEE, OFFICER, AND KEY EMPLOYEE OF THE UNIVERSITY IS REQUIRED TO ANNUALLY DISCLOSE ANY CONFLICTS OF INTEREST THAT ARISE BY VIRTUE OF THEIR EMPLOYMENT, BOARD SERVICE, FAMILY OR BUSINESS RELATIONSHIPS, OR POSITION WITH THE UNIVERSITY THE UNIVERSITY MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY THROUGH A CONFLICT OF INTEREST STATEMENT THAT IS COMPLETED BY EACH BOARD MEMBER AT THE ANNUAL JUNE MEETING THESE ARE REVIEWED BY THE EXECUTIVE COMMITTEE OF THE BOARD IN ADDITION TO THE BOARD MEMBERS, THE EXECUTIVE LEVEL, ALL FINANCE STAFF, AS WELL AS ANY ONE IN POSITIONS IDENTIFIED BY FUNCTION TO HAVE POSSIBLE INFLUENCE WITH CONTRACT OR FINANCIAL TRANSACTIONS OR SYSTEMS WITHIN THE UNIVERSITY, COMPLETE THE QUESTIONNAIRE ANNUALLY THESE ARE REVIEWED BY THE CHIEF FINANCIAL OFFICER AND DIRECTOR OF HUMAN RESOURCES ANY DISCLOSED RELATIONSHIPS ARE COMMUNICATED TO THE CONTROLLER FOR THE PURPOSE OF AUDIT, INTERNAL CONTROLS AND COMPLETING THE FORM 990 POTENTIAL CONFLICTS ARE INVESTIGATED IMMEDIATELY

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE UNIVERSITY UNDERTAKES A THOROUGH PROCESS TO ENSURE THAT THE EXECUTIVE COMPENSATION IT PAYS TO ITS TOP MANAGEMENT OFFICIAL AND ALL OF ITS OFFICERS AND KEY EMPLOYEES OF ORGANIZATION IS REASONABLE GIVEN THE MARKET IN WHICH THE UNIVERSITY OPERATES CEO COMPENSATION THE EXECUTIVE COMMITTEE OF THE BOARD, REVIEWS THE COMPENSATION PACKAGE OF THE PRESIDENT ANNUALLY AT ITS JUNE MEETING COMPENSATION LEVEL IS DECIDED UPON UTILIZING COMPARATIVE DATA RECEIVED FROM THE HUMAN RESOURCE DEPARTMENT OFFICER POSITIONS ARE ASSIGNED A SALARY RANGE ESTABLISHED BY A COMPENSATION STUDY DONE BY AN OUTSIDE FIRM AND THE EXECUTIVE COMMITTEE OF THE BOARD ALSO REVIEWS THE COMPENSATION FOR THESE EMPLOYEES WHO ARE CONSIDERED HIGHEST-PAID EMPLOYEES THE OFFICERS RESIDE ON THE PRESIDENT'S ADMINISTRATIVE TEAM, CATEGORIZED AS THE EXECUTIVE LEVEL OF THE UNIVERSITY

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST FINANCIAL STATEMENTS ARE LISTED WITH BOND REPORTING AGENCIES

Return Reference	Explanation
FORM 990, PART VII	PRESIDENT, SISTER ROSEMARY JEFFRIES IS REPRESENTED AS HAVING RECEIVED NO COMPENSATION FROM THE UNIVERSITY BECAUSE THE ORDER SHE REPRESENTS RECEIVES ALL COMPENSATION SHE WOULD OTHERWISE BE PAID THE SISTERS OF MERCY FULFILL VARIOUS ROLES WITHIN THE UNIVERSITY SOME POSITIONS, WHICH WOULD OTHERWISE BE FILLED WITH LAY PERSONS, ARE ASSIGNED A VALUE FOR COMPENSATION AND PAYMENTS FOR THESE SERVICES ARE MADE TO THE SISTERS OF MERCY THE PAYMENTS MADE FOR THE CALENDAR YEAR 2014 TOTALED \$617,210 AND THE COMPENSATION FOR THIS POSITION IS INCLUDED IN THIS FIGURE THIS COMPENSATION IS NOT TREATED AS TAXABLE INCOME TO THE SISTERS SINCE THEY ARE MEMBERS OF A RELIGIOUS ORDER THEREFORE, SISTER ROSEMARY JEFFRIES IS STILL DEEMED TO BE AN INDEPENDENT MEMBER OF THE GOVERNING BODY FOR PURPOSES OF PART VI OF THE FORM 990

Return Reference	Explanation
FORM 990, PART XI, LINE 9	Split interest agreements/life ins surrender value 17,488

DLN: 93493137108166

2014

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

Name of the organization GEORGIAN COURT UNIVERSITY

Department of the Treasury

Internal Revenue Service

Employer identification number

21-0634981

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.											
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity						
		·			1						

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	512(b) ntrolled
						Yes	No
(1) Conference for Mercy Higher Education 8630 Fenton Street 934	Sponsorship	MD	501(c)(3)	1	NA		No
Silver Spring, MD 20190 43-1973007							

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 3
	because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(i))	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Gener	al or	Percentage
related organization		domicile	controlling	income(related,	total income	end-of-year	allocati	ions?	amount in box	mana	ging	ownership
		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from					Schedule K-1			
		country)		tax under					(Form 1065)			
		1		sections 512-								
		1		514)						L		
							Yes	No		Yes	No	
									ı			

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(i) contro entil	n 512 13) olled
								Yes	No
(1) Paul Delaurentis Perpetual Scholarship 400 Locust Street Lakewood, NJ 08701 23-7814490	Trust	NJ	NA	Trust	13,000	258,961	100 000 %	Yes	
(2) Peter Delaurentis Perpetual Scholarship 400 Locust Street Lakewood, NJ 08701 22-6640205	Trust	NJ	NA	Trust	16,000	422,876	100 000 %	Yes	

					age J
Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Form	n 990, Part IV, line	e 34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more re	ated organizations li	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
b Gift, grant, or capital contribution to related organization(s)			1b	Yes	
c Gift, grant, or capital contribution from related organization(s)			1c		No
d Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Dividends from related organization(s)			1f		No
g Sale of assets to related organization(s)			1g		No
h Purchase of assets from related organization(s)			1h		No
i Exchange of assets with related organization(s)			1i		No
j Lease of facilities, equipment, or other assets to related organization(s)			<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)			1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)			11		No
m Performance of services or membership or fundraising solicitations by related organization(s)			1n	Yes	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n		No
• Sharing of paid employees with related organization(s)			10		No
p Reimbursement paid to related organization(s) for expenses					No
q Reimbursement paid by related organization(s) for expenses			1q		
r Other transfer of cash or property to related organization(s)			1r		No
s Other transfer of cash or property from related organization(s)			1s	Yes	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	ınvolve	:d
	1	1			

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

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	, , , , , , , , , , , , , , , , , , ,
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
/		 .	<u> </u>							

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

Page **5**