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DLN: 93493130003406

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

Open to Public Inspection

A Fo	r the :	2014 ca	lendar year, or tax year beginning	07-01-2014 , and ending 06-30-20	015			
B Ch	eck if a	pplicable	C Name of organization Philadelphia University			D Emplo	yer ide	entification number
☐ Add	lress ch	nange	, , , , , , , , , , , , , , , , , , ,			23-13	35229	4
┌ Na	me cha	nge	% JAMES HARTMAN Doing business as					
┌ Ind	ial retu	m				E Talant		
Fin	al			ail is not delivered to street address) Room,	/suite	E Telepho	one nun	nber
ret	urn/terr	minated	School House Lane and Henry Avenu	e		(215)	951-	2700
☐ Am	ended	return	City or town, state or province, cour	try, and ZIP or foreign postal code				
┌ Ap	olication	pending	Philadelphia, PA 19144			G Gross r	eceipts	\$ 140,506,200
			F Name and address of prin	cipal officer	H(a)	Is this a group	retur	n for
			James Hartman		"(=)	subordinates?		┌ Yes ┌ No
			School House Lane and Henr Philadelphia, PA 19144	y A v				
					Н(Б)	Are all subordi	nates	│ Yes │ No
I Ta	x-exem	npt status	s ▼ 501(c)(3)	nsert no) 4947(a)(1) or 527			a list	(see instructions)
1 W	eheite	• • 140	ww philau edu		┥、	C		
			·		H(c)	Group exempt	lon nu	ımber F
			n 🔽 Corporation 🗆 Trust 🗀 Association	n	L Yea	ar of formation 19	49 N	1 State of legal domicile PA
Pa	rt I	Sun	nmary					
Activities & Governance	1	PHILA	describe the organization's mission DELPHIA UNIVERSITY IS A STU RS IN AN EVOLVING GLOBAL M	DENT- CENTERED INSTITUTION	THAT PRI	EPARES GRAD	UATE	S FOR SUCCESSFUL
<u> </u>	-							
₹	2 (Check	this box 🛏 if the organization dis	scontinued its operations or dispose	d of more t	han 25% of its	net a	ssets
উ			, -					
න් රා	3 1	Numbei	r of voting members of the govern	ng body (Part VI, line 1a)			3	28
ĕ	4 1	Numbei	r of independent voting members o	of the governing body (Part VI, line 1	lb)		4	27
¥	5	Total n	umber of individuals employed in o	calendar year 2014 (Part V, line 2a)			5	2,127
ă	6	Total n	umber of volunteers (estimate if n	ecessary)			6	
				art VIII, column (C), line 12			7a	296,574
	ь	Net unr	elated business taxable income fr	om Form 990-T, line 34	<u> </u>		7b	50,291
						Prior Year		Current Year
Q)	8			ne 1h)		9,872,	_	6,086,033
Revenue	9			ne 2g)		121,118,	_	128,418,905
Š	10		·	(A), lines 3, 4, and 7d)	•	1,393,		909,150
_	11		, , , , , , , , , , , , , , , , , , , ,	lines 5, 6d, 8c, 9c, 10c, and 11e)		-389,	758	-554,718
	12			(must equal Part VIII, column (A), l	line	131,994,	762	134,859,370
	13			IX, column (A), lines 1-3)		35,980,	486	39,651,183
	14			X, column (A), line 4)		, ,	0	0
	15			e benefits (Part IX, column (A), line		45,217,	022	46,607,938
82		5-10	•			45,217,	922	40,007,936
<u>€</u>	16a	Profe	ssional fundraising fees (Part IX,	column (A), line 11e)	·		0	0
Expenses	ь	Total f	fundraising expenses (Part IX, column (D)	, line 25) ▶ 1,130,648	-			
	17	Othe	r expenses (Part IX, column (A), l	ınes 11a-11d, 11f-24e)		39,630,	241	39,275,678
	18			st equal Part IX, column (A), line 25		120,828,	549	125,534,799
	19	Reve	nue less expenses Subtract line	18 from line 12		11,166,	113	9,324,571
উউ						inning of Curre	nt	End of Year
Not Assets or Fund Balances						Year	$-\!\!\!\!\!+$	
88	20					230,157,		235,702,718
10 PE	21					87,834,		84,734,768
	22			line 21 from line 20		142,322,	772	150,967,950
	rt II		nature Block					
my k	nowled	dge and		imined this return, including accomp iplete Declaration of preparer (othei				
		I B	***			2016-05-16		
Sigr		Sign	nature of officer			Date		
Her	e		nes Hartman CFO and Treasurer					
		17	e or print name and title		Ta :		T ====	
			Print/Type preparer's name Andrea Kyzyma	Preparer's signature Andrea Kyzyma	Date	Check If self-employed	PTIN P0127	⁷ 3279
Paid		-	Firm's name FGRANT THORNTON LLP		ı	Firm's EIN 🕨		
	pare	r				Dhoma == (215) FC1	1200
Use	Onl	ly	Firm's address ► 2001 MARKET STREET			Phone no (215) 561- ²	+∠UU
			PHILADELPHIA, PA 191	03				

✓ Yes No

Form 990 (2014)	Page 2
Part III	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	দ
1 Brief	ly describe the organization's mission	
	PHIA UNIVERSITY IS A STUDENT-CENTERED INSTITUTION THAT PREPARES GRADUATES FOR SUCCESSFUL CA	REERS

PHILADELPHIA UNIVERSITY IS A STUDENT-CENTERED INSTITUTION THAT PREPARES GRADUATES FOR SUCCESSFUL CAREERS IN AN EVOLVING GLOBAL MARKETPLACE -BY BLENDING THE LIBERAL ARTS AND SCIENCES, PROFESSIONAL STUDIES, INTERDISCIPLINARY LEARNING AND COLLABORATIONS IN AND OUT OF THE CLASSROOM, STUDENTS LEARN TO THRIVE IN DIVERSE AND CHALLENGING ENVIRONMENTS -OUR STUDENTS ARE ENCOURAGED TO FORM SUPPORTIVE RELATIONSHIPS WITH EACH OTHER AS WELL AS FACULTY, STAFF AND ALUMNI IN AN ACADEMICALLY RIGOROUS SETTING THAT IS FOCUSED ON INTELLECTUAL AND PERSONAL GROWTH -PHILADELPHIA UNIVERSITY IS AN EXPERIENTIAL LEARNING COMMUNITY WHERE INTEGRITY, CREATIVITY, CURIOSITY, ETHICS, RESPONSIBILITY AND THE FREE EXCHANGE OF IDEAS ARE VALUED

2	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 69,385,100 including grants of \$ 35,504,067) (Revenue \$ 103,260,406)

INSTRUCTION THE UNIVERSITY IS COMMITTED TO PROVIDING AN EXPERIENTIAL EDUCATION AND IS RECOGNIZED AS A LEADER IN THE ARCHITECTURE, DESIGN, ENGINEERING & TEXTILES, BUSINESS AND HEALTH SCIENCE FIELDS THE UNIVERSITY IS FULLY ACCREDITED BY THE MIDDLE STATES ASSOCIATION OF COLLEGES AND SCHOOLS PHILADELPHIA UNIVERSITY GRADUATES' CAREER PLACEMENT RATE IN MAJOR-RELATED JOBS OR GRADUATE SCHOOLS HAS CONSISTENTLY BEEN ABOVE 90% WITHIN A FEW MONTHS OF GRADUATION FOR MORE THAN 20 YEARS AS A SMALL PRIVATE UNIVERSITY, PHILADELPHIA UNIVERSITY MAINTAINS AN AVERAGE CLASS SIZE OF 20 AND A 12 1 STUDENT/FACULTY RATIO THAT ENABLES CLOSE RELATIONSHIPS BETWEEN FACULTY AND STUDENTS THE UNIVERSITY PROVIDES MORE THAN 20 LABORATORIES AND STUDIOS FOR HANDS-ON EXPERIENCE IN ARCHITECTURE AND INTERIOR DESIGN, ENGINEERING, TEXTILE DESIGN, FASHION DESIGN, GRAPHIC DESIGN, INDUSTRIAL DESIGN, PHYSICIAN ASSISTANT STUDIES AND OTHER ALLIED HEALTH FIELDS, AS WELL AS FACULTY ACCESS TO THE MOST SOPHISTICATED TECHNOLOGY AVAILABLE IN JANUARY 2013 PHILADELPHIA UNIVERSITY FORMALLY OPENED THE KANBAR COLLEGE OF DESIGN, ENGINEERING AND COMMERCE BUILDING (THE DEC CENTER) THE 38,500 SQUARE FOOT BUILDING, BUILT TO LEED STANDARDS, BOASTS A LARGE TWO-STORY FORUM SPACE FOR DESIGN EXHIBITS, PRESENTATIONS, LARGE LECTURES AND SOCIAL EVENTS. IT WAS DESIGNED TO SUPPORT THE COLLEGE'S INNOVATIVE CURRICULUM, WHICH STRESSES TRANSDISCIPLINARY, PROJECT-BASED LEARNING AND COLLABORATIVE PROBLEM SOLVING WITH A DISTINCTIVE METALLIC SHELL FOR CLIMATE CONTROL, THE BUILDING INCLUDES FLEXIBLE SPACE FOR STUDIOS, SEMINARS, CONFERENCE MEETINGS AND TEAM PROJECTS, ALLOWING TEACHING AND WORK SPACE TO BE RECONFIGURABLE AS PROJECTS AND CURRICULA EVOLVE THE UNIVERSITY PROVIDED EDUCATION TO 2,380 AND 2,205 FULL TIME UNDERGRADUATE STUDENTS IN THE FALL 2014 AND SPRING 2015 SEMESTERS, RESPECTIVELY SUMMER, GRADUATE AND EVENING STUDENTS ENROLLED IN A TOTAL OF 31,054 CREDIT HOURS IN KEEPING WITH THE UNIVERSITY'S MISSION OF PREPARING STUDENTS FOR AN EVOLVING GLOBAL MARKETPLACE, MORE THAN 130 STUDENTS WERE PROVIDED THE OPPORTUNITY TO EXPERIENCE THE WORLD BEYOND THE BORDERS OF OUR CAMPUS AND COUNTRY STUDENTS OF PHILADELPHIA UNIVERSITY MAY STUDY ABROAD AND RECEIVE CREDIT FOR COURSES THAT APPLY DIRECTLY TO THEIR CHALLENGING, PROFESSIONALLY-ORIENTED CURRICULA OPPORTUNITIES FOR STUDY ABROAD ARE AVAILABLE FOR FALL, SPRING AND SUMMER SEMESTERS AT LOCATIONS ALL AROUND THE WORLD STUDYING ABROAD HELPS OUR STUDENTS TO GROW PROFESSIONALLY BY BEING EXPOSED TO DRAMATICALLY DIFFERENT PERSPECTIVES IN THEIR FIELD OF **STUDIES**

4b (Code) (Expenses \$ 12,284,831 including grants of \$) (Revenue \$)

STUDENT SERVICES THE UNIVERSITY PROVIDES COUNSELING, INTER-COLLEGIATE ATHLETICS, HEALTH ADVISING, STUDENT GOVERNING AND STUDENT LIFE SERVICES FOR ALL STUDENTS. THE DIVISION OF STUDENT LIFE OFFERS COMPREHENSIVE PROGRAMS AND SERVICES THAT FOSTER AN EDUCATIONAL ENVIRONMENT CONDUCTIVE TO THE HOLISTIC DEVELOPMENT OF STUDENTS BY BUILDING BRIDGES BETWEEN THE CURRICULAR AND CO-CURRICULAR EXPERIENCES, STUDENT LIFE EDUCATORS PROVIDE OPPORTUNITIES FOR STUDENTS TO BECOME SUCCESSFUL, COMPETENT, LIFELONG LEARNERS. THE UNIVERSITY OFFERS MANY INTERCOLLEGIATE SPORTS COMPETING AT THE NCAA DIVISION II LEVEL THE ATHLETICS PROGRAM AFFORDS OUR STUDENT-ATHLETES THE OPPORTUNITY TO PARTICIPATE IN A CHALLENGING ATHLETIC PROGRAM, WHILE ENSURING THAT THEY ARE PROVIDED A QUALITY EDUCATION A PROFESSIONALLY-MANAGED AND WELL-ROUNDED ATHLETICS PROGRAM SERVES TO ENRICH THE STUDENT'S LIFE IN COLLEGE AND ENHANCES HIS OR HER PREPARATION FOR A FULL AND REWARDING LIFE AFTER COLLEGE

4c (Code) (Expenses \$ 18,502,015 including grants of \$ 4,147,116) (Revenue \$ 18,960,961)

AUXILIARY PHILADELPHIA UNIVERSITY DINING SERVICES ARE MANAGED BY PARKHURST DINING SERVICES WITH A TEAM OF EMPLOYEES WHO HAVE A SINCERE INTEREST IN THE SATISFACTION OF OUR CAMPUS COMMUNITY THE UNIVERSITY PROVIDED 1,224 AND 1,106 MEAL PLANS FOR STUDENTS IN THE FALL 2014 AND SPRING 2015 SEMESTERS, RESPECTIVELY THE UNIVERSITY PROVIDES SEVERAL HOUSING OPTIONS FOR FULL-TIME DAY UNDERGRADUATE STUDENTS INCLUDING TRADITIONAL RESIDENCE HALL HOUSING, TOWNHOUSES AND APARTMENT LIVING THE UNIVERSITY PROVIDED HOUSING FOR 1,463 AND 1,350 STUDENTS FOR THE FALL 2014 AND SPRING 2015 SEMESTERS, RESPECTIVELY THE UNIVERSITY BOOKSTORE OFFERS A PLEASANT SHOPPING EXPERIENCE OFFERING A WIDE ARRAY OF TEXTBOOKS, SUPPLIES, TECHNOLOGY AND UNIVERSITY-BRANDED CLOTHING

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses \$ 9,139,022 including grants of \$) (Revenue \$ 1,989,260)

Total program service expenses ► 109,310,968

art TV	Check	list 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	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		Νo
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
LO	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
L1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	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	
L2a	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
L3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
L4a	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	
L5	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	Yes	
L6	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	
L 7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
L8	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	
L9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u> </u>	厂_		
	Estable sumbar assistator Barra 2 (Farm 1996 Fator 9 (Factor also be 1996 Fator 1996 Fat		Yes	No		
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 210 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0					
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable					
	gaming (gambling) winnings to prize winners?	1 c	Yes			
Za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes			
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No		
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for 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		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No		
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	5c 6a		No		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b				
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes			
	b If "Yes," did the organization notify the donor of the value of the goods or services provided?					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo		
d	If "Yes," indicate the number of Forms 8282 filed during the year					
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 required?	7g				
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. 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				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b				
10	Section 501(c)(7) organizations. Enter					
	Initiation fees and capital contributions included on Part VIII, line 12 10a					
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.					
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a				
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans					
	Enter the amount of reserves on hand					
	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				

Section A. Governing Body and Management

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	contains a response	or note to an	v line in this Part VI	_	_	_	_	_	_	_	_	_	_	_	_	Ī
Check ii Schedule O	contains a response	or note to an	y nine in this i are vi	•		•		•	•	•	•	•	•	•	•	-,

			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		Νo			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No			
6	Did the organization have members or stockholders?	6		N o			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No			
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		No			
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	b Each committee with authority to act on behalf of the governing body?						
9	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						
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	<i>ye Cod</i>	e.) No			
	Did the organization have local chapters, branches, or affiliates?	evenu 10a					
10a				No			
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No			
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No			
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No			
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No			
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No			
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No			
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No			
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No			
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No			
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No			

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶PA
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website Vupon request Other (explain in Schedule O)
- 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 ►JAMES HARTMAN

SCHOOL HOUSE LANE AND HENRY AVE

Form 990 (2014)	
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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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t perso	han d n ıs l	ne l both	box, an d	heck unless officer stee)	;	(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)	▶	1,938,098	0	584,380

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►64

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

Section B. Independent Contractors

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

(A)	(B)	(C)		
Name and business address	Description of services	Compensation		
Parkhurst Dining Services, 285 WATERFRONT DR EAST Suite 200 HOMESTEAD, PA 15120	DINING SERVICES	4,789,753		
Daniel J Keating Company, 134 N NARBERTH AVENUE NARBERTH, PA 19072	BLDG CONSTRUCTION	3,007,514		
The Arthur Jackson Company, 7025 WEST CHESTER PIKE UPPER DARBY, PA 19085	BLDG MAINTENANCE	2,060,226		
MR Rose Inc, 463 KENTWOOD ROAD HUNTINGDON VALLEY, PA 19006	BLDG CONSTRUCTION	1,330,447		
McGinn Security Inc, 1341 N DELAWARE AVENUE 506 PHILADELPHIA, PA 19125	SECURITY SERVICES	1,053,411		
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 ▶59

art V	* * *	Statement of			no in this Doub VIII			
		C neck if Schea	ule O contains a respor	ise or note to any ii	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(0	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Memhershin dii	ues 1b					
<u> </u>		·		217,214				
, E	С	Fundraising ev	ents 1c					
[[d	Related organiz	zations 1d					
ςŒΙ	e	Government grant	s (contributions) 1e	963,865				
트인	f		ons, gifts, grants, and 1f	4,904,954				
1 the E		similar amounts no	ot included above ons included in lines					
들으	g	1a-1f \$	ons included in lines	11,328				
5 6 1	h	Total. Add line:	s 1 a - 1 f	🙀	6,086,033			
				Business Code				
Program Serwce Revenue	2a	TUITION AND FEES	5	900099	107,379,655	107,302,130		77,52
ese l	b	ROOM AND BOARD)	611710	16,688,720	15,224,440		1,464,28
ё П	С	UNIVERSITY BOOK	STORE	611710	2,037,245	1,684,057		353,188
ž	d	SALES AND SERVIO	CES	611710	18,777			18,77
જુ	e	MICELLANEOUS		900099	2,294,508		243,145	2,051,363
<u> </u>	f		am service revenue	300033	2,254,500		243,143	2,031,30
ဦ	•							
-	g		s 2a-2f		128,418,905			
	3		ome (including dividen ar amounts)		1,346,600		-1,805	1,348,40
	4		stment of tax-exempt bond	l l	0			
	5	Royalties .		🕨	0			
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income	0	0				
	d	or (loss) Net rental inco	me or (loss)		0			
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	4,537,968					
	b	Less cost or other basis and sales expenses	4,975,418					
	C	Gain or (loss)	-437,450					
	d	Net gain or (los	ss)		-437,450		55,234	-492,684
omer nevenue	8a	т	luding 7,214 s reported on line 1c)	446.604				
<u> </u>	Ь	Less direct ev	penses b	116,694 671,412				
5	c		(loss) from fundraising	•	-554,718			-554,718
	9a	Gross income f	from gaming activities ne 19					
	b	Less direct ov	penses b					
			(loss) from gaming acti	vities	o			
		Gross sales of returns and allo	ınventory, less	·				
	b	less costofa	oods sold b					
			(loss) from sales of inve	entory 🛌	0			
ŀ		Miscellaneou		Business Code				
ŀ	11a							
	b							
	c							
	d	All other reven	ue					
	e			▶				
					0			
	12	rocar revenue.	See Instructions .	· · · · •	134,859,370	124,210,627	296,574	4,266,136

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete col	umn (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>	<u></u> .
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	37,054,238	37,054,238		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	2,596,945	2,596,945		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,522,478		2,522,478	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	33,178,334	26,955,775	5,438,595	783,964
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,875,710	1,486,958	326,213	62,539
9	Other employee benefits	6,619,031	4,185,340	2,349,078	84,613
10	Payroll taxes	2,412,385	1,857,799	501,443	53,143
11	Fees for services (non-employees)	2,112,303	1,031,199	551,775	33,143
a	Management	0			
b	Legal	302,754		302,754	
6	Accounting	283,051		283,051	
d	Lobbying	94,999		94,999	
	Professional fundraising services See Part IV, line 17	94,999		94,999	
e	- · · · · · · · · · · · · · · · · · · ·			00.520	
f g	Other (If line 11g amount exceeds 10% of line 25, column (A)	98,538		98,538	
12	amount, list line 11g expenses on Schedule O)	26,899	667.001	26,899	
	Advertising and promotion	700,595	667,001	33,594	11.002
13	Office expenses	5,466,906	5,188,390	266,624	11,892
14 	Information technology	1,273,602	388,110	885,492	
15	Royalties	0			
16	Occupancy	12,396,933	11,445,015	918,663	33,255
17	Travel	1,106,130	762,520	296,937	46,673
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	427,422	333,466	61,500	32,456
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	5,262,170	5,245,648	16,522	
23	Insurance	111,076	47,145	63,931	
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	CONTRACTED DINING SERVICES	5,265,435	5,265,435		
b	STUDY ABROAD TUITION AND HOUSI	793,067	793,067		
c	BOOKSTORE	1,615,633	1,615,633		
d	CONTRACTED SECURITY	1,395,998	1,395,998		
e	All other expenses	2,654,470	2,026,485	605,872	22,113
25	Total functional expenses. Add lines 1 through 24e	125,534,799	109,310,968	15,093,183	1,130,648
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 Fig. 1 following SOP 98-2 (ASC 958-720)		. ,	. , :	, , , ,

Part X Balance Sheet

Par	τχ	Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	29,223	1	21,315
	2	Savings and temporary cash investments	23,814,143		27,439,629
	3		20,992,354	3	21,195,361
		Pledges and grants receivable, net	488,243		787,757
	4	Accounts receivable, net		4	787,757
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		_	0
8	7	Notes and loans receivable, net	1,924,322	<u> </u>	1,339,189
ď	8	Inventories for sale or use	1,411,309		1,438,645
			1,411,509	$\overline{}$	1,413,106
	9	Prepaid expenses and deferred charges	1,313,534	9	1,413,100
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 203,621,372	4		
	b	Less accumulated depreciation	· ' '		134,436,981
	11	Investments—publicly traded securities	36,712,336		39,582,991
	12	Investments—other securities See Part IV, line 11	3,439,749		3,543,881
	13	Investments—program-related See Part IV, line 11	0		0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	4,536,267	15	4,503,863
	16	Total assets. Add lines 1 through 15 (must equal line 34)	230,157,714	16	235,702,718
	17	Accounts payable and accrued expenses	8,016,137	17	6,988,395
	18	Grants payable	0	18	0
	19	Deferred revenue	5,540,945	19	5,732,747
	20	Tax-exempt bond liabilities	71,333,436	20	69,305,860
SO.	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	2,944,424		2,707,766
	26	Total liabilities. Add lines 17 through 25	87,834,942	26	84,734,768
S do		Organizations that follow SFAS 117 (ASC 958), check here ▶ ▽ and complete lines 27 through 29, and lines 33 and 34.			
ä	27	Unrestricted net assets	103,504,523	27	113,014,772
<u>ස</u>	28	Temporarily restricted net assets	25,269,042	28	23,272,167
귤	29	Permanently restricted net assets	13,549,207	29	14,681,011
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
2 S S	32	Retained earnings, endowment, accumulated income, or other funds		32	
뷺	33	Total net assets or fund balances	142,322,772	33	150,967,950
Ş	34	Total liabilities and net assets/fund balances	230,157,714	34	235,702,718
	J-4	i otal napinties and het assets/juliu palances	230, 157,714		Z35,702,718

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
	Check it Schedule O Contains a response of note to any line in this Part XI	· ·	•		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		134,8	359,370
2	Total expenses (must equal Part IX, column (A), line 25)	2	12!		34,799
3	Revenue less expenses Subtract line 2 from line 1	3		9,3	324,571
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		142,3	322,772
5	Net unrealized gains (losses) on investments	5		- 6	579,393
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		150,9	967,950
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. Г</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or 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 it Schedule O	1			ı
3 a	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	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Additional Data

Software ID:

Software Version:

EIN: 23-1352294

Name: Philadelphia University

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	9,139,022	including grants of \$) (Revenue \$	1,989,260)
SEE SCHEDULE O					

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 Tıtle	(B) A verage hours per week (list any hours for related	Posit more th persoi and a	ion (d nan o n is b	ne booth a	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) STEPHEN SPINELLI PRESIDENT	40 0	х		х				329,449	0	164,292
(1) EILEEN MARTINSON CHAIR	1 0	х						0	0	0
(2) WENDY BEETLESTONE	1 0	х						0	0	0
TRUSTEE (3) CYNTHIA HOOK	1 0	x						0	0	0
TRUSTEE (4) D WALTER COHEN	0 0									
TRUSTEE (5) A LOUIS DENTON	0 0	Х						0	0	0
TRUSTEE (6) GEORGE T DOWNS III	0 0	X						0	0	0
TRUSTEE	0 0	х						0	0	0
(7) WILLIAM A FINNVICE CHAIR	0 0	x						0	0	0
(8) ESTEFANO ISAIAS SR TRUSTEE	1 0	х						0	0	0
(9) LIONG KENG KWEE	1 0	×						0	0	0
TRUSTEE (10) ROBERT C LOCKYER	1 0	x						0	0	0
TRUSTEE (11) EDWARD P MARRAM	0 0	х						0	0	0
TRUSTEE (12) WILLIAM JASPER	0 0								_	
TRUSTEE (13) CHRISTOPHER K MCHUGH	0 0	X						0	0	0
TRUSTEE	0 0	х						0	0	0
(14) CARSON KRESSLEY TRUSTEE	1 0	х						0	0	0
(15) HANDSEL B MINYARD TRUSTEE	1 0	×						0	0	0
(16) ANDREW MORRISROE	1 0	х						0	0	0
TRUSTEE (17) VIRGINIA M PALMIERI	1 0	х						0	0	0
TRUSTEE (18) ROBERT L NYDICK JR	0 0	X						0	0	0
TRUSTEE (19) DAVID R REA	0 0									
TRUSTEE (20) ALLEN E SIRKIN	0 0	Х						0	0	0
TRUSTEE	0 0	Х						0	0	0
(21) ANDREW VECCHIONE TRUSTEE	0 0	Х						0	0	0
(22) ANTHONY J VITULLO JR TRUSTEE	1 0	х						0	0	0
(23) LARRY A WITTIG	1 0	х						0	0	0
TRUSTEE (24) CLARENCE WOOTEN	1 0	Х						0	0	0
TRUSTEE	0 0	<u> </u>								

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below	Posit more th person and a	nan (d nan o n is b dired	ne b	ox, u an of trus	nless ficer tee)	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	dotted line)	Individual trustee or director	Institutional Trustee	Φ	emplo)ee	Highest compensated employee	ıer			organizations
(26) L TADD SCHWABTRUSTEE	1 0	×						0	0	0
(1) FRANCIS J SHAMMO TRUSTEE	1 0	х						0	0	0
(2) ARTHER RUBENSTEIN TRUSTEE	1 0	х						0	0	0
(3) JAMES P HARTMAN VP OF FINANCE & CFO	40 0			х				203,329	0	57,870
(4) G GEOFFREY CROMARTY SECRETARY & COO	40 0			х				209,169	0	37,919
(5) HOWARD R SWEARER PROVOST	40 0				х			212,841	0	33,368
(6) BARBARA KLINKHAMMER EXEC DEAN OF ACADEMICS	40 0					х		193,369	0	39,952
(7) SUSAN LEHRMAN ACADEMIC DEAN	40 0					х		223,612	0	76,249
(8) MATT D BAKER EXEC DEAN OF ACADEMICS	40 0					х		197,151	0	19,523
(9) RONALD KANDER EXEC DEAN OF ACADEMICS	40 0					х		195,266	0	105,745
(10) JESSE R SHAFER VP OF DEVELOPMENT	40 0					х		173,912	0	49,462

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As Filed Data -

DLN: 93493130003406

Employer identification number

LN: 93493130003406

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

2014

Open to Public Inspection

Philade	elphia (University								
Do.		Dancan fan Dubli	a Charita C	tatua (All ouganisa		andata this i	23-1352294	· · · · · · · · · · · · · · · · · · ·		
	t I	zation is not a private for	_	itatus (All organiza				ons.		
	ryaiii	·		•	- '	•	•			
1	 	A church, convention				n section 170()	D)(1)(A)(I).			
			section 170(b)(1)(A)(ii). (Attach Schedule E) rative hospital service organization described in section 170(b)(1)(A)(iii).							
3										
4	ı	A medical research or		erated in conjunction v	vith a hospital d	lescribed in se	ction 170(b)(1)(A)(iii	i). Enter the		
5	Г	hospital's name, city, An organization opera	and state	ofit of a collogo or uni	vorcity owned o	r operated by	a governmental unit d	oscribod in		
3	,				versity owned t	or operated by	a governmentar unit u	escribed III		
_	_	section 170(b)(1)(A)				: 470/L\/:	4)/4)/)			
6	<u> </u>	A federal, state, or loc						1 11		
7	ı	An organization that n described in section 1	•		• •	om a governme	ental unit or from the g	jeneral public		
8	Г	A community trust de				tII)				
9	<u></u>	An organization that n					butions, membership	fees, and gross		
-	•	receipts from activitie								
		its support from gross								
		acquired by the organi						, pasinesses		
10	_			·			•			
An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purpose				out the nurneses of						
11	,	one or more publicly s								
		the box in lines 11a th								
а	Γ	Type I. A supporting o								
		supported organization				ty of the direct	ors or trustees of the	supporting		
L	_	organization You mus				th ita ailmna	utod organization(s)	au bauma aantral ar		
Ь	1	Type II. A supporting								
		must complete Part IV	upporting organization vested in the same persons that control or manage the supported organization(s) You IV, Sections A and C. Integrated. A supporting organization operated in connection with, and functionally integrated with, its							
c	\sqcap									
	_	supported organization								
d	ı		ionally integrated. A supporting organization operated in connection with its supported organization(s) that is egrated The organization generally must satisfy a distribution requirement and an attentiveness requirement							
		(see instructions) Yo					ement and an attentiv	eness requirement		
e	Г	Check this box if the o					s a Type I, Type II, T	ype III functionally		
	·	integrated, or Type II					,, , ,, ,	,		
f		Enter the number of s	upported orgar	nizations						
g		Provide the following i	nformation abo	out the supported orga	ınızatıon(s)					
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of		
		organization		organization	listed in your	-	monetary support	other support (see		
				(described on lines 1-9 above or IRC	docume	entz	(see instructions)	instructions)		
				section (see						
				instructions))		Γ	1			
					Yes	No				
Total			l	l	i	I	I	I		

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	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

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

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

Section D. Computation of Investment Income Percentage

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

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

18

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

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

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

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

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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

11c

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

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

3b

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

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

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom			
2 A mounts paid to perform activity that directly 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: 93493130003406

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

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

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

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

	Section 501(c)(4), (5), or (6) orga	anzadono complete i art ili		Employer ide	ntification number
	ladelphia University				
)ar	t IEA Complete if the or	ganization is exempt unde	er section 501(23-1352294 c) or is a section 52 7	
					organization:
1 2	Political expenditures	ganization's direct and indirect pol	ntical campaign act	ivities in Part IV	.
3	Volunteer hours			•	\$
Par		ganization is exempt unde			
1	,	e tax incurred by the organization			\$
2	Enter the amount of any excise	e tax incurred by organization man	nagers under section	n 4955 ►	\$
3	If the organization incurred a s	section 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				
	•	ganization is exempt unde)1(c)(3).
1		ended by the filing organization for			\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	other organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	re and on Form 112	0-POL, line 17b	\$
4	Did the filing organization file I	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments l amount of political contribution	nd employer identification number For each organization listed, enter ns received that were promptly and political action committee (PAC)	the amount paid fro d directly delivered	om the filing organization's to a separate political orga	funds Also enter the anization, such as a
	(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 receive and promptly and directly delivered to a separate political organization. If none enter - 0-

section 4911 tax for this year?

┌ Yes ┌ No

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- **B** Check ▶ ☐ If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	94,999	
c	Total lobbying expenditures (add lines 1a and 1b	o)	94,999	
d	Other exempt purpose expenditures		125,439,800	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	125,534,799	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-		
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -		
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 472	0 reporting	

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) Total beginning in) 1,000,000 1,000,000 1,000,000 1,000,000 4,000,000 Lobbying nontaxable amount Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) Total lobbying expenditures 121,155 115,875 61,990 94,999 394,019 Grassroots nontaxable amount 250,000 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) Grassroots lobbying expenditures

	art II-B Complete if the organization is exempt under s filed Form 5768 (election under section 501(h)).	-			
For e	each "Yes" response to lines 1a through 11 below, provide in Part IV a detailed	description of the lobbying	(8	a) I	(1	b)
activ	ıvıty.		Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, legislation, including any attempt to influence public opinion on a legisl through the use of Volunteers?					
b c		on lines 1c through 1i)?				
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a le	gıslatıve body?				
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or Other activities?	any sımılar means?				
j	Total Add lines 1c through 1i					
2a	5	section 501(c)(3)?				
b	, , , , , , , , , , , , , , , , , , , ,					
C	, , , , , ,					
	If the filing organization incurred a section 4912 tax, did it file Form 47	-				
Par	art III-A Complete if the organization is exempt under s	ection 501(c)(4), section !	501(c))(5), c	r sect	ion
	501(c)(6).				Ye	es No
1	Were substantially all (90% or more) dues received nondeductible by n	nembers?		Г	1	-3 1
2	Did the organization make only in-house lobbying expenditures of \$2,0			⊢	2	
3	Did the organization agree to carry over lobbying and political expendit				3	
Pai	art III-B Complete if the organization is exempt under s	ection 501(c)(4), section !				
	501(c)(6) and if either (a) BOTH Part III-A, line line 3, is answered "Yes."	es I and 2, are answered	NO C	ж (в)	Рагі	11-A,
1			1			
2		ot include amounts of political				
а	Current year		2a			
b	Carryover from last year		2b			
C			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondec	uctible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on does the organization agree to carryover to the reasonable estimate of					
	political expenditure next year?		4			
5	, 5 1 , , ,	5)	5			
	Part IV Supplemental Information					
	rovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I- (see instructions), and Part II-B, line 1 Also, complete this part for any accomplete the part for accomplete the part for any accomplete the part for accomplete th		ıp lıst),	Part II	-A , lines	s 1 and
	Return Reference Explanati	on				

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493130003406

OMB No 1545-0047

Open to Public

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

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

Inspection

	e of the organization		Er	nployer ident if ica	tion numbe	r
rnilad	delphia University		2:	3-1352294		
Par	t I Organizations Maintaining Donor Adv				. Complet	e if the
	organization answered "Yes" to Form 990	, Part IV, line 6. (a) Donor advised fund	do	(b) Funds and	other access	nto
_	Total number at end of year	(a) Donor advised fund	us	(b) Fullus allu	other accoun	IILS
	Aggregate value of contributions to (during year)					
	Aggregate value of contributions to (during year)					
	Aggregate value of grants from (duffing year)					
			ald in donor of	duicod		
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	ganızatıon's exclusive legal co	ntrol?		☐ Yes	┌ No
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef conferring impermissible private benefit?				┌ Yes	┌ No
ar	Conservation Easements. Complete if	the organization answered	l "Yes" to Fo	rm 990, Part I\	/, line 7.	
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space	or education) Preservat	tion of an hist	orically importan		
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contrib	oution in the fo	orm of a conserva	tion	
				Held at the	End of the	Year
1	Total number of conservation easements		2a			
)	Total acreage restricted by conservation easements		2b			
	Number of conservation easements on a certified histo	oric structure included in (a)	2c			
	Number of conservation easements included in (c) acc historic structure listed in the National Register	uired after 8/17/06, and not or	n a 2d			
	Number of conservation easements modified, transferr	ed, released, extinguished, or t	terminated by	the organization	during	
	the tax year ▶					
	Number of states where property subject to conservat	on easement is located ►				
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?		tion, handling	of violations, and	│ ├ Yes	┌ No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservati	ion easement	s during the year		
	^					
	A mount of expenses incurred in monitoring, inspecting \$ \$, and enforcing conservation ea	asements dur	ing the year		
	Does each conservation easement reported on line 2(o	d) above satisfy the requiremer	nts of section	170(h)(4)(B)(ı)	□ Yes	⊏ No
	and section 170(h)(4)(B)(ii)?				,	1 140
	In Part XIII, describe how the organization reports col balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organization's				
	Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Trea		Other Similar	Assets.	
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, ed	lucation, or re	search in furthera		
)	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	16 (ASC 958), to report in its ts held for public exhibition, ed	revenue state	ement and balanc		С
	(i) Revenue included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X				3,81	
	If the organization received or held works of art, histor following amounts required to be reported under SFAS					
	Revenue included in Form 990, Part VIII, line 1	-		► \$		
ь	Assets included in Form 990 Part Y			L ¢		

Part	Organizations Maintaining Co	llections of Art, F	listorical	Treas	ures, or Ot	ner Similar As	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	_		_	-	e of its
а	Public exhibition	•	d Lo	an or ex	change progra	ms	
b	Scholarly research	•	e Fo	ther			
c	Preservation for future generations						
4	Provide a description of the organization's co Part XIII	ollections and explain	how they fu	rther the	organızatıon's	exempt purpose	ın
5	During the year, did the organization solicit						F F
Day	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold at the sold to the	<u> </u>					Yes No
Pai	Part IV, line 9, or reported an an				JII aliswereu	res to rottilis	990,
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?				or other asse		┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fol	lowing tabl	e			
							nount
С	Beginning balance					c	
d	Additions during the year				_	d	
e •	Distributions during the year					e e	
f	Ending balance	000 0			<u> 1</u>		
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	1, for escr	ow or cus	todial account	liability?	☐ Yes ☐ No
ь	If "Yes," explain the arrangement in Part XII				-		<u>'</u>
Pa	rt V Endowment Funds. Complete		nswered (b)Prior year			Part IV, line 10. (d)Three years back	(e)Four years back
1a	Beginning of year balance	27,630,437	24,580,		22,564,115	23,091,265	20,003,504
b	Contributions	1,823,304	409,	481	236,257	328,770	208,077
c	Net investment earnings, gains, and losses	21.606	2 002	472	2.052.551	264.907	4.046.103
d	Grants or scholarships	31,696 1,220,482	3,883, 1,148,	_	2,952,551 1,093,226	264,897 1,031,925	4,046,192 1,064,728
e	Other expenditures for facilities	, ,			, ,	, ,	
	and programs						
f	Administrative expenses	98,538		369	78,907	88,892	101,780
g	End of year balance	28,166,417	27,630,		24,580,790	22,564,115	23,091,265
2	Provide the estimated percentage of the cur	*	(lıne 1g, co	lumn (a)) held as		
а	board designated or quasi-endowment	28 000 %					
b	Permanent endowment ► 52 000 %						
С	remporarily restricted endownences	000 %					
	The percentages in lines 2a, 2b, and 2c sho	·					
3a	Are there endowment funds not in the posse organization by	ssion of the organization	on that are	held and	administered	for the	Yes No
	(i) unrelated organizations					3a(
	(ii) related organizations					3a(
b	If "Yes" to $3a(II)$, are the related organization	·				3	b
4	Describe in Part XIII the intended uses of the						
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		organiza	tion ans	swered 'Yes'	to Form 990, Pa	art IV, line
	Description of property	10.		t or other vestment)	(b)Cost or other)	(c) Accumulated depreciation	(d) Book value
1a	Land				3,870,5	62	3,870,562
	Buildings				159,649,2		+
	Leasehold improvements				321,8		
d I	Equipment				39,661,7	20 29,259,51	3 10,402,207
	Other				117,9	72	117,972
	l. Add lines 1a through 1e <i>(Column (d) must e</i>		column (B), i	ine 10(c)).)		134,436,981
		<u> </u>				Schedule [O (Form 990) 2014

See Form 990, Part X, line 12.	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category	(b) Book value	(c) Method of va	
(including name of security)		Cost or end-of-year	market value
(1)Financial derivatives (2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. Cor	nplete if the organization	n answered 'Yes' to Fo	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13.	· -		
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	
		Cost of ella of year	market value
Total. (Column (h) must equal Form 990, Part X col (B) line 13.)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization		Dart IV line 11d See	Form 990 Part V line 15
(a) Descrip		, raitiv, ille iiu See	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)		
Part X Other Liabilities. Complete if the organ			ine 11e or 11f. See
Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Book value		
Federal income taxes	0		
US GOVERNMENT ADVANCE FOR STUDENTS	1,047,137		
CONTRACT LIABILITY	841,640		
ASSET RETIREMENT OBLIGATIONS	679,203		
ANNUITIES PAYABLE	124,491		
ESCHEATABLE PROPERTY	33,972		
MISCELLANEOUS	-18,677		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	2,707,766		
	, ,		

OTHER

OTHER

OTHER

Fin 48 Footnote

SUPPLEMENTAL DESCRIPTION -

SUPPLEMENTAL DESCRIPTION -

Par		evenue per Audited Financial Sta vered 'Yes' to Form 990, Part IV, line :		ents With Revenue p	er R	eturn Complete If
1		r support per audited financial statements			1	97,150,335
2	Amounts included on line 1 bu	t not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	on investments	2a	-679,393		
b	Donated services and use of fa	acilities	2b			
c	Recoveries of prior year grants	5	2c			
d	Other (Describe in Part XIII)		2d	-37,701,053		
e	Add lines 2a through 2d .		-		2e	-38,380,446
3	Subtract line 2e from line 1 .				3	135,530,781
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)		4b	-671,411		
С	Add lines 4a and 4b		٠		4c	-671,411
5	Total revenue Add lines 3 and	l 4c. (This must equal Form 990, Part I, line	12)		5	134,859,370
Par		xpenses per Audited Financial Sta swered 'Yes' to Form 990, Part IV, lind			s per	Return. Complete
1	Total expenses and losses pe	raudited financial statements			1	88,505,157
2	Amounts included on line 1 bu	t not on Form 990, Part IX, line 25				
а	Donated services and use of fa	acılıtıes	2a			
b	Prior year adjustments		2b			
С	Otherlosses		2c			
d	Other (Describe in Part XIII)		2d	671,411		
e	Add lines 2a through 2d				2e	671,411
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	87,833,746
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)		4b	37,701,053]	
С	Add lines 4a and 4b				4c	37,701,053
5	Total expenses Add lines 3 ai	nd 4c. (This must equal Form 990, Part I, lir	ne 18)	5	125,534,799
Par	Supplemental Inf	ormation				
Part	V, line 4, Part X, line 2, Part XI mation	Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and				de any additional
<u> </u>	Return Reference	Explanation				
Colle	ription of O rganization's ctions	Schedule D, Part III, Line 4 The University memorabilia to be exhibited and used for sidonation, the University opened the Arlen Specter Center for Public Service at Phila service and civic education in a cross-distriction of Pittsburgh, the Center will phistoric archive of papers, photographs, a scholars and the public. The home of the Archive of House at Philadelphia University important touchstone to both Philadelphia ideal location for the Center.	Spectodelphicoplina reserved pol Arlen S Built	rly research In honor of ter Center for Public Serva University is to facilita ary, nonpartisan setting e, organize, and provide a stical documents for the 1 Specter Center for Public circa 1800, the house waterica's origins by Sena	Senativice To the and In colling access penefit Services corrected to Services to Services corrected to Servic	or Arlen Specter's he mission of the Arlen promote public laboration with the s to Senator Specter's of researchers and ce is in the historic nsidered a historic and pecter, making it the
	ded Uses of Endowment Funds LEMENTAL DESCRIPTION -	Schedule D, Part V, Line 4 THE INTENDE TO OFFER STUDENT SCHOLARSHIPS A Schedule D, Part XI, Line 2d Reclassification	ND S	UPPORT ACADEMIC PR	OGRA	
OTHE		Defined die D, 1 alt A1, Eine Zu Reciassificat			,	
SUPP	LEMENTAL DESCRIPTION -	Schedule D, Part XI, Line 4b Direct expen	ses fo	r fundraising expenses (\$671,	411)

Schedule D, Part XII, Line 2d Direct expenses for fundraising expenses \$671,411

Schedule D, Part X, Line 2 The University has been recognized by the Internal Revenue Service as tax-exempt under Section 501(c)(3) of the Internal Revenue Code and is exempt from federal income taxes under Section 501(a) The University recognizes or derecognizes a tax position based on a "more likely than not" threshold This applies to positions taken or expected to be taken in a tax return. The University does not believe its financial statements include any material uncertain tax positions. As of June 30, 2015, the University's tax periods ended June 30, 2014 through June 30,

Schedule D, Part XII, Line 4b Reclassification of scholarships (\$37,701,053)

2015 for the federal tax jurisdiction remain open to examination

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

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493130003406

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 Philadelphia University			mployer identification number				
		23-1352294						
Pa	rtI	r		YES	NO			
1	Does the organization have a racially nondiscriminatory policy toward students by statement in in other governing instrument, or in a resolution of its governing body?	ts charter, bylaws,	1	Yes				
2	Does the organization include a statement of its racially nondiscriminatory policy toward student brochures, catalogues, and other written communications with the public dealing with student address, and scholarships?		2	Yes				
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broads the period of solicitation for students, or during the registration period if it has no solicitation pro that makes the policy known to all parts of the general community it serves? If "Yes," please desplease explain If you need more space use Part II	gram, ın a way	3	Yes				
			3	103				
4 a	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes				
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially basis?	nondiscriminatory	4b	Yes				
c	Copies of all catalogues, brochures, announcements, and other written communications to the puwith student admissions, programs, and scholarships?	blic dealing	4c	Yes				
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	Yes				
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?		5a		No			
	Admissions policies?		5b		No			
c	Employment of faculty or administrative staff?		5c		Νo			
d	Scholarships or other financial assistance?	-	5d		No			
e	Educational policies?	-	5e		Νo			
f	Use of facilities?		5f		No			
g	Athletic programs?		5g		No			
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II		5h		No			
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?		6a 6b	Yes	No			
	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Pa	_	7	Yes	140			

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
Publication of Racially Nondiscriminatory Policy	Schedule E, Part I, Line 3 AN EQUAL OPPORTUNITY EMPLOYMENT POLICY WAS PUBLICIZED IN FY2014-2015 IN THE LOCAL NEWSPAPER, THE PHILADELPHIA INQUIRER
Government Assistance	Schedule E, Part I, Line 6a THE UNIVERSITY RECEIVED \$963,865 IN GOVERNMENTAL GRANTS FOR THE YEAR ENDED JUNE 30, 2015

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

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As Filed Data -

DLN: 93493130003406

SCHEDULE F (Form 990)

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.

Internal Revenue Service

Name of the organization

Department of the Treasury

▶ 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

hila	idelphia University				23-1352294			
Pa	rt I General Information "Yes" to Form 990, Pai			ne United States. Co	emplete if the organiz	ation answered		
1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?							
2	For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitorii	ng the use of its grant	s and other		
3	Activites per Region (The follow	ing Part I, line 3	table can be di	uplicated 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		-					
(2))							
(3)								
(4)								
(5)								
	Sub-total Total from continuation sheets to Part I					2,596,945		
•	Totals (add lines 3a and 3b)					2.596.945		

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

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) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as
	tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

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

Part III can be duplicated if additional space is needed.

Part III can be	duplicated if additio	nal space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) International Scholarships	Central America and the Caribbean	3	26,000	Direct Pay		N/A	N/A
(2) International Scholarships	East Asia and the Pacific	12	58,750	Direct Pay		N/A	N/A
(3) International Scholarships	Europe (Including Iceland and Greenland)	8	143,090	Direct Pay		N/A	N/A
(4) International Scholarships	Middle East and North Africa	12	78,500	Direct Pay		N/A	N/A
(5) International Scholarships	North America	3	27,500	Direct Pay		N/A	N/A
(6) International Scholarships	Russia	4	75,435	Direct Pay		N/A	N/A
(7) International Scholarships	South America	6	101,250	Direct Pay		N/A	N/A
(8) International Scholarships	South Asia	6	52,680	Direct Pay		N/A	N/A
(9) International Scholarships	Sub-Saharan Africa	6	83,610	Direct Pay		N/A	N/A
(10) Faculty Travel for Prog	East Asia and the Pacific	37	49,731	CK/DD		N/A	N/A
(11) Faculty Travel for Prog Exp	Europe (Including Iceland and Greenland)	91	104,048	CK/DD		N/A	N/A
(12) Faculty Travel for Prog	North America	8	5,140	CK/DD		N/A	N/A
(13) Faculty Travel for Prog	South America	21	16,874	CK/DD		N/A	N/A
(14) Faculty Travel for Prog	Sub-Saharan Africa	1	2,251	CK/DD		N/A	N/A
(15)							
(16)							
(17)							
(18)							
	•	<u> </u>				· Coh	edulo E (Form 990) 2014

Part IV Foreign Forms

1	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)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>\</u>	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)	Г	Yes	<u> </u>	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)	Г	Yes	<u>\</u>	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)	Г	Yes	▼	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	<u> </u>	Νo

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
Procedure for Monitoring Use of Grant Funds Outside US	Schedule F, Part I, Line 2 Federal grant funds are awarded in compliance with federal regulations applicable to the specific program Institutional procedures allow for separation of awarding and disbursing of funds. Students who receive scholarships and federal workst udy funds are monitored each semester for academic progress. Annual audits are conducted by an independent certified public accounting firm to ensure compliance with all programs.

Additional Data

Software ID: Software Version:

EIN: 23-1352294

Name: Philadelphia 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
Central America and the Caribbean			Program Services	FA/Intl Study/Courses	48,950
East Asia and the Pacific			Program Services	FA/Intl Study/Courses	175,481
Europe			Program Services	FA/Intl Study/Courses	1,909,045

Form 990 Schedule F F	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						
Middle East & North Africa			Program Services	FA/Intl Study/Courses	78,500						
North America			Program Services	FA/Intl Study/Courses	43,559						
Russia and the Newly Independent States			Program Services	FA/Intl Study/Courses	75,435						

Form 990 Schedule F	<u>Part I - Activi</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(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			Program Services	FA/Intl Study/Courses	119,934
South Asia			Program Services	FA/Intl Study/Courses	52,680
Sub-Saharan Africa			Program Services	FA/Intl Study/Courses	93,361

Form 990 Schedu	le F Part II	Grants or Entities Outside The United States							
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	· · · · · · ·		(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
		Central America and the Caribbean	Study Abroad	22,950	Wire/Check		N/A	N/A	
		East Asia and the Pacific	Study Abroad	67,000	Wire/Check		N/A	N/A	
		Europe (Including Iceland and Greenland)	Study Abroad	954,512	Wire/Check		N/A	N/A	
		Sub-Saharan Africa	Supplies	7,500	Wire/Check		N/A	N/A	
1									

Form 990 Schedule F Part II - Grants or Entities Outside The United States												
(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	(ı) Method of valuatıon (book, FMV, appraısal, other)				
		Europe (Including Iceland and Greenland)	SA Housing/Meals	684,606	Wire/Check		N/A	N/A				
		Europe (Including Iceland and Greenland)	SUPPLIES	22,789	Check		N/A	N/A				
		North America	SUPPLIES	10,919	Check		N/A	N/A				

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DLN: 93493130003406

Employer identification number

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

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.

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

Open to Public Inspection

hıla	delphia University						23-1352294	
ar	Fundraising Acti filers are not requi			ganızatıo	n answered "Yes" to	Form 9	90, Part IV,	line 17. Form 990-EZ
	Indicate whether the orgar	ization raised funds	through a	ny of the f	ollowing activities Che	eck all tha	at apply	
a	Mail solicitations			е	Solicitation of non	ı-governn	nent grants	
b	☐ Internet and email sol	cıtatıons		f	Solicitation of gov	ernment	grants	
c	Phone solicitations			g	Special fundraisin	g events		
d	☐ In-person solicitations	5						
	Did the organization have a or key employees listed in							Г _{Yes} Г _N
b	If "Yes," list the ten highes to be compensated at leas			fundraıseı	rs) pursuant to agreeme	ents unde	er which the fu	ndraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or re fundra:	nount paid to stained by) ser listed in tol (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
1								
2								
3								
4								
5								
6								
7								
8								
9								
. 0								
otal				.				
	List all states in which the registration or licensing	organization is regis	tered or li	censed to	solicit contributions o	r has bee	n notified it is	exempt from
4								

Cat No 50083H

Sche	dule	e G (Form 990 or 990-EZ) 2014				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
			(a) Event #1 Evening of Innv	(b) Event #2 Golf Outing	(c) O ther events	(d) Total events (add col (a) through col (c))
_			(event type)	(event type)	(total number)	
₹	1	Gross receipts	291,572	19,009	23,327	333,908
Revenue	2	Less Contributions	215,73	979	500	217,214
<u>~</u>	3	Gross income (line 1 minus line 2)	75,837	7 18,030	22,827	116,694
	4	Cash prizes				
ဟ	5	Noncash prizes				
euse	6	Rent/facility costs	405,757	11,000	33,062	449,819
Direct Expenses	7	Food and beverages .	32,122	2	33,167	65,289
<u>ਹ</u>	8	Entertainment	1,550			1,550
ā	9	Other direct expenses .	127,202	8,009	19,543	154,754
	10	Direct expense summary Add lir	nes 4 through 9 in columr	n (d)		(671,412)
	11	Net income summary Subtract li	ne 10 from line 3, columi	n (d)		-554,718
Par	t II	I Gaming. Complete if the o	rganızatıon answered	"Yes" to Form 990, Pa	rt IV, line 19, or repo	
Revenue		\$15,000 on Form 990-EZ, li	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Æ	1	Gross revenue				
Ses	2	Cash prizes				
xpenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
ă	5	Other direct expenses				
	6	Volunteer labor		┌ Yes %		
	7	Direct expense summary Add line	es 2 through 5 in column ((d)		
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		
9 a b	Is	ter the state(s) in which the organiz the organization licensed to conduc 'No," explain	t gaming activities in eac	th of these states?		
10a b		re any of the organization's gaming	licenses revoked, suspe	nded or terminated during		

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493130003406 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 Philadelphia University 23-1352294 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance grant cash orassistance or government assistance (book, FMV, appraisal, other) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

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

(a)Type of grant or assistance	(b)Number of (c)A mount of recipients cash grant n		(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Student Grants and Scholarships	2354	36,712,390		N/A	N/A
(2) Federal Work Study	532	341,848		N/A	N/A

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.										
Return Reference	Explanation									
Grant Funds Inside U S	Schedule I, Part I, Line 2 FEDERAL GRANT FUNDS ARE AWARDED IN COMPLIANCE WITH FEDERAL REGULATIONS APPLICABLE TO THE SPECIFIC PROGRAM INSTITUTIONAL PROCEDURES ALLOW FOR SEPARATION OF AWARDING AND DISBURSING OF FUNDS STUDENTS WHO RECEIVE SCHOLARSHIPS AND FEDERAL WORK STUDY FUNDS ARE MONITORED EACH SEMESTER FOR ACADEMIC PROGRESS ANNUAL AUDITS ARE CONDUCTED BY AN EXTERNAL AUDIT FIRM TO ENSURE COMPLIANCE WITH ALL PROGRAM GUIDELINES									

Schedule I (Form 990) 2014

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DLN: 93493130003406

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

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

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

Open to Public Inspection

Name of the organization Philadelphia University

Employer identification number

23-1352294

Pa	rt I Questions Regarding Compensation	n	<u>.</u>			
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	굣	Housing allowance or residence for personal use			
	Travel for companions	\vdash	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u> </u>	Health or social club dues or initiation fees			
	Discretionary spending account	ᅜ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de			1b	Yes	
2	Did the organization require substantiation prior to r directors, trustees, officers, including the CEO/Exec			2	Yes	
				-	100	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all thused by a related organization to establish compens	nat apply	y Do not check any boxes for methods			
	Compensation committee	\sqcap	Written employment contract			
		굣	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	tions mu	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A compensation contingent on the revenues of					
а	The organization?			 5a		No
	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					110
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of	, lıne 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		No
8	Were any amounts reported in Form 990, Part VII, p					
-	subject to the initial contract exception described in					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$?	e rebutta	able presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 STEPHEN SPINELLI, PRESIDENT	(i) (ii)	321,238 0	4,945 0	3,266 0	23,400	140,892 0	493,741 0	0
2 HOWARD R SWEARER, PROVOST	(i) (ii)	208,289	3,168	1,384	19,079	14,289	246,209	0
3 JAMES P HARTMAN, VP OF FINANCE & CFO	(i) (ii)	171,615 0	27,651	4,063	15,969	41,901	261,199	0
4 BARBARA KLINKHAMMER, EXEC DEAN OF ACADEMICS	(i) (ii)	190,006 0	2,925 0	438	17,618 0	22,334	233,321	0
5 SUSAN LEHRMAN, ACADEMIC DEAN	(i) (ii)	182,814 0	27,803 0	12,995 0	16,881 0	59,368 0	299,861 0	0
6 MATT D BAKER, EXEC DEAN OF ACADEMICS	(i) (ii)	189,412 0	2,830	4,909 0	17,047 0	2,476 0	216,674 0	0
7 RONALD KANDER, EXEC DEAN OF ACADEMICS	(i) (ii)	187,392 0	2,879 0	4,995 0	17,337 0	88,408 0	301,011	0
8 JESSE R SHAFER, VP OF DEVELOPMENT	(i) (ii)	167,497 0	2,614	3,801	25,745 0	23,717	223,374 0	0
9 G GEOFFREY CROMARTY, SECRETARY & COO	(i) (ii)	154,717 0	2,424	52,028 0	14,600 0	23,319 0	247,088 0	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

The second contract and addition	enal internation
Return Reference	Explanation
Health or social club dues or initiation fees	Schedule J, Part I, Line 1a ANNUAL MEMBERSHIP TO A SOCIAL CLUB IN THE AMOUNT OF \$4,460 IS PROVIDED TO THE UNIVERSITY PRESIDENT
Housing	Schedule J, Part I, Line 1a HOUSING IS PROVIDED TO THE UNIVERSITY PRESIDENT, THE DIRECTOR OF SAFETY & SECURITY AND THE DEAN OF STUDENTS AS PART OF THEIR EMPLOYMENT AGREEMENTS THE UNIVERSITY DEEMS IT NECESSARY THAT THESE INDIVIDUALS LIVE ON CAMPUS IN ORDER TO BE ABLE TO IMMEDIATELY PROVIDE LEADERSHIP TO THE CAMPUS COMMUNITY AT ANY TIME, 24 HOURS A DAY, 7 DAYS A WEEK
personal services (e g maid, chauffeur, chef, etc)	Schedule J, Part I, Line 1a ANNUAL housekeeping SERVICES IN THE Amount OF \$3,600 ARE PROVIDED TO THE UNIVERSITY PRESIDENT'S HOUSE ON CAMPUS

Schedule J (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 23-1352294

Name: Philadelphia University

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

(A) Name and Title	(B)	, Breakdown of	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 & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred in prior Form 990
STEPHEN SPINELLI, PRESIDENT	(ı) (ıı)	321,238 0	4,945 0	3,266 0	23,400 0	140,892 0	493,741	0 0
HOWARD R SWEARER, PROVOST	(ı) (ıı)	208,289 0	3,168 0	1,384 0	19,079 0	14,289 0	246,209	0
JAMES P HARTMAN, VP OF FINANCE & CFO	(ı) (ıı)	171,615 0	27,651 0	4,063 0	15,969 0	41,901 0	261,199 0	0
BARBARA KLINKHAMMER, EXEC DEAN OF ACADEMICS	(ı) (ıı)	190,006	2,925 0	438 0	17,618 0	22,334 0	233,321	0
SUSAN LEHRMAN, ACADEMIC DEAN	(ı) (ıı)	182,814 0	27,803 0	12,995 0	16,881 0	59,368 0	299,861	0
MATT D BAKER, EXEC DEAN OF ACADEMICS	(ı) (ıı)	189,412 0	2,830 0	4,909 0	17,047 0	2,476 0	216,674	0
RONALD KANDER, EXEC DEAN OF ACADEMICS	(ı) (ıı)	187,392 0	2,879 0	4,995 0	17,337 0	88,408 0	301,011	0
JESSE R SHAFER, VP OF DEVELOPMENT	(I) (II)	167,497 0	2,614 0	3,801	25,745 0	23,717 0	223,374	0
G GEOFFREY CROMARTY, SECRETARY & COO	(I) (II)	154,717 0	2,424	52,028 0	14,600 0	23,319 0	247,088	0

DLN: 93493130003406

Open to Public

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

explanations, and any additional information in Part VI.

Inspection Employer identification number

Phi	ladelphia University									-	3-1352	294			ļ
P	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f)	f) Descriptio	on of purpose		Defeased	beha Iss	On alf of suer	fina	Pool
						'	<u> </u>			Yes	_	Yes	No	Yes	No
Α	PHEFA REVENUE BOND SERIES OF 2006	23-2243852	70917RBG9	01-10-2006	11,18	· ·	0 REFUND 1996 PHEFA REVENUE BONDS			X		X	I	X	
В	Phefa Revenue Bond Series of 2007	23-2243852	70917RFK1	05-18-2007	15,05			REFUND 2000 PHEFA REVENUE BOND			Х		X	1	Х
c	Phefa Revenue Bond Series 2011	23-2243852	70917RV51	04-28-2011	17,78			ISTRUCT & F LDING	FURNISH		Х		×	 	Х
D	2011B Phefa Revenue Bond	23-2243852		05-25-2011	11,80			UND 2009 V E BOND	ARIABLE		Х		Х		Х
Pa	Part II Proceeds														
	A mount of bonds retired					A	_	В			С			D	
1	Amount of bonds legally defea				 				0			0			0
<u>2</u> 3	Total proceeds of issue				+	11 225	500		1 5 250 772		172	1 40 5			0 000
4	Gross proceeds in reserve fun				 	829,			1,501,977			21,485			
5	Capitalized interest from proce				+	025,	,123		1,301,377		1,43	2,230			0
6	Proceeds in refunding escrows								0				0 0		
7	Issuance costs from proceeds				 	214,	.127		101,348		27	75,000			
8	Credit enhancement from proc	ceeds			 		0		0		· ·	0			
9	Working capital expenditures t	from proceeds					0		0			0			0
10	Capital expenditures from pro	ceeds		-		4,250,	,000		0	15,004,229					
11	Other spent proceeds					5,932,	,344		13,756,448		65	50,000		11	,695,000
12	Other unspent proceeds						0		0			0			0
13	Year of substantial completion	n			20	06		200	07		2012			2011	
					Yes	No	,	Yes	No	Yes	T r	No	Yes	\Box	No
14	Were the bonds issued as part	t of a current refund	ing issue?		Х	1			Х			х	Х	\perp	
15	Were the bonds issued as part	t of an advance refu	ındıng ıssue?			Х		Х				Х			Х
16	Has the final allocation of proc	ceeds been made?			Х			Х		Х			Х		
17	Does the organization maintai	n adequate books a	nd records to supp	port the final	х			Х		Х			Х		
Pa	rt IIII Private Business U	Jse													
						Ą	\rightarrow	l .	В		С			D	
					Yes	No	<u>, </u>	Yes	No	Yes	'	No	Yes	<u>_</u>	No

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-

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Part Private Business Use (Continued) В C D Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Х Х 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 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 0 % 0 % 0 % 0 % 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 0 % 0 % 0 % 0 % Does the bond issue meet the private security or payment test? 7 Χ Χ Χ 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 0 % 0 % If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c Χ Χ Χ 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 В C Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Х 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 No rebate due? c 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?

Par	Part IV Arbitrage (Continued)												
		А		В		С		D					
		Yes	No	Yes	No	Yes	No	Yes	No				
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?	Х			Х		X		X				
b	Name of provider	wells fargo &	FSA	0		0		0					
С	Term of GIC		29 1										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	Х											
6	Were any gross proceeds invested beyond an available temporary period?		х		Х		x		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?	X		Х		Х		x					

Part V Procedures To Undertake Corrective Action

	Α	Α		В		С		
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	Х		Х		X		х	

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

Schedule K (Form 990) 2014

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Schedule K

(Form 990)

Department of the Treasury

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: 93493130003406

Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** Philadelphia University 23-1352294 Part I Bond Issues (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing ıssuer Yes No Yes No Yes No 23-2243852 70917SDD2 04-11-2013 Refund Series 2004A Bonds Χ PHEFA REVENUE BOND 24,090,000 SERIES 2013 **Proceeds** Part II В C Α D Amount of bonds retired 0 Amount of bonds legally defeased 2 0 Total proceeds of issue 3 29,113,325 Gross proceeds in reserve funds 4 5 Capitalized interest from proceeds Proceeds in refunding escrows 6 Issuance costs from proceeds 368,744 Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 Capital expenditures from proceeds 10 Other spent proceeds 28,744,581 11 Other unspent proceeds 12 Year of substantial completion 13 2013 Yes No Yes No Yes Yes No No Were the bonds issued as part of a current refunding issue? Χ 14 Were the bonds issued as part of an advance refunding issue? Χ 15 Has the final allocation of proceeds been made? Χ 16 Does the organization maintain adequate books and records to support the final Χ allocation of proceeds? **Private Business Use** Part III Α В C D Yes No No No No Yes Yes Yes Was the organization a partner in a partnership, or a member of an LLC, which owned Χ property financed by tax-exempt bonds?

financed property?

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

Sche	dule K (Form 990) 2014									Page 2
Par	Private Business Use (Continued)									•
				١		В		c		D
		ļ	Yes	No	Yes	No	Ye	s No	Yes	No
3a	Are there any management or service contracts that may result in private 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 use of bond-financed property?			Х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance									
4	Enter the percentage of financed property used in a private business use be other than a section $501(c)(3)$ organization or a state or local government			0 %				·		·
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government			2 000 %						
6	Total of lines 4 and 5			2 000 %						
7	Does the bond issue meet the private security or payment test?			Х						
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?			X						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of						•		•
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?			×						
9	Has the organization established written procedures to ensure that all none bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		Х							
Par	t IV Arbitrage	•		•		•	•		·	•
	<u> </u>	Α			В		С		D	
		Yes	No	Yes	No	,	Yes	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?									
а	Rebate not due yet?									
b	Exception to rebate?									
С	No rebate due?									
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed			1		<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?									

Pai	rt IV Arbitrage (Continued)								
	<u> </u>	A		В		С		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	•		•					
		A		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if	х							

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

Schedule K (Form 990) 2014

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DLN: 93493130003406

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** Philadelphia University

23-1352294 Part I Types of Property (a) (b) (c) (d) Check Number of contributions Noncash contribution Method of determining ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, lıne 1 g 1 Art-Works of art . . . 2 Art—Historical treasures **3** Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes 8 Intellectual property . . . Securities—Publicly traded . Χ 4,707 FMV 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . . . 15 Real estate—Residential . 16 Real estate—Commercial . . 17 Real estate—Other . . . 18 Collectibles **19** Food inventory . . . 20 Drugs and medical supplies . **21** Taxidermy Historical artifacts 23 Scientific specimens . . 24 Archeological artifacts . . . 6.621 FMV **25** Other ▶ (Furnishings, lighting & decorative accessories) **26** Other ▶(__ **27** Other ► (__ **28** Other ► (Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a Νo **b** If "Yes," describe the arrangement in Part II 31 Yes Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Yes **b** If "Yes," describe in Part II 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part III Supplem

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.

namber of items rec	served, or a combination or both. Also complete this part for any additional information.
Return Reference	Explanation
,	Schedule M, Part I, Line 32B SECURITIES ARE PROCESSED AND SOLD FOR THE UNIVERSITY BY WELLS FARGO ADVISORS

Schedule M (Form 990) (2014)

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DLN: 93493130003406

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 Philadelphia University	Employer identification number
	23-1352294

Return Reference	Explanation
Form 990	Form 990, Part VI, Line 11b THE FINAL VERSION OF THE FORM 990 AND REQUIRED SCHEDULES WERE E-MAILED TO EACH
Review	MEMBER OF THE UNIVERSITY'S BOARD-APPOINTED AUDIT COMMITTEE A WEEK PRIOR TO FILING THE RETURN THE AUDIT
Process	COMMITTEE PERFORMED A HIGH LEVEL REVIEW OF THE FORM 990 AND DETAILS WERE PROVIDED BY THE CHIEF FINANCIAL
	OFFICER AS REQUESTED BY THE COMMITTEE. AFTER THE AUDIT COMMITTEE'S REVIEW IS COMPLETE AND PRIOR TO
	SUBMISSION OF THE RETURN, THE FORM 990 AND REQUIRED SCHEDULES ARE PLACED ON THE PHILADELPHIA UNIVERSITY
	BOARD OF TRUSTEE'S WEBSITE FOR THEIR DOWNLOAD AND HIGH LEVEL REVIEW

Return Reference	Explanation
Conflict of Interest Policy Monitoring & Enforcement	Form 990, Part VI, Line 12c PHILADELPHIA UNIVERSITY MONITORS COMPLIANCE WITH THEIR CONFLICT OF INTEREST POLICY BY REQUIRING EACH BOARD TRUSTEE, OFFICER AND SENIOR STAFF TO DISCLOSE ANY MATERIAL FACTS AS TO ANY FINANCIAL INTERESTS IN THE ANNUAL CONFLICT-OF-INTEREST DISCLOSURE STATEMENT SIGNED BY EACH PERSON ADDITIONALLY, FINANCIAL INTEREST DISCLOSURE IS REQUIRED WHEN MATTERS COME UP FOR ACTION BY THE BOARD OR ANY BOARD COMMITTEE. THE CONFLICT-OF-INTEREST DISCLOSURE REQUIRES ANNUAL DISCLOSURE OF INTERESTS, SUCH AS A LIST OF FAMILY MEMBERS, SUBSTANTIAL BUSINESS OR INVESTMENT HOLDINGS, AND OTHER TRANSACTIONS OR AFFILIATIONS WITH BUSINESS OR OTHER ORGANIZATIONS THE DISCLOSURE IS FILED ANNUALLY AND REVIEWED BY THE SECRETARY OF THE UNIVERSITY ALL NEW TRUSTEES AND OFFICERS MUST COMPLETE AND FILE THE DISCLOSURE WITHIN 30 DAYS OF THE INITIATION OF THEIR DUTIES AS TRUSTEE OR OFFICER A MATERIAL MATTER, FOR PURPOSES OF THE UNIVERSITY'S CONFLICT-OF-INTEREST POLICY, IS DEFINED AS ANY CONTRACT OR TRANSACTION FOR WHICH THE CONSIDERATION EXCEEDS \$5,000 SINGULARLY OR IN THE AGGREGATE OVER A ONE YEAR PERIOD A TRUSTEE OR OFFICER HAVING SUCH FINANCIAL INTEREST IN ANY MATERIAL MATTER SHALL NOT VOTE OR OTHERWISE PARTICIPATE WITH RESPECT TO THE MATTER THEY MAY BE COUNTED IN DETERMINING THE QUORUM FOR THE MEETING AT WHICH THE MATTER IS CONSIDERED BUT SHALL NOT BE PRESENT WHEN THE FINAL DISCUSSION IS HELD AND THE VOTE IS TAKEN MINUTES FROM THE MEETING WILL REFLECT SUCH DISCLOSURE AND ABSTENTION

Return Reference	Explanation
Process for Determining Compensation	Form 990, Part VI, Line 15a and 15b THE COMPENSATION OF THE UNIVERSITY PRESIDENT, OFFICERS, ALL MEMBERS OF THE RESIDENTS COUNCIL AND ANY OTHER EMPLOY EE OF THE UNIVERSITY DETERMINED TO BE IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF THE UNIVERSITY IS DETERMINED THROUGH A MULTI-STEP PROCESS. THE UNIVERSITY PARTICIPATES IN THE AFFAIRS OF THE UNIVERSITY IS DETERMINED THROUGH A MULTI-STEP PROCESS. THE UNIVERSITY PARTICIPATES IN THE AFFAIRS OF THE UNIVERSITY PRESIDENTS MARKET SURVEY CONDUCTED BY THE ORGANIZATION OF COLLEGE AND UNIVERSITY PERSONNEL ADMINISTRATION FOR HUMAN RESOURCES (CUPA). THIS SURVEY DATA PROVIDES COMPARABLE COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT OTHER UNIVERSITIES OR PROFESSIONS IN COMPARABLE INDUSTRIES. THE CUPA SURVEY USES SUBJECTIVE CRITERIA TO COMPILE MARKET COMPOSITES UNDER A VARIETY OF MULTI DIMENSIONAL DATA GROUPS. THE INFORMATION SUBMITTED TO LEGAL COUNSEL AND PRESENTED ANNUALLY BY THE HUMAN RESOURCE OFFICE FOR REVIEW BY THE UNIVERSITY'S EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTESS. THE COMPENSATION COMMITTEE CONSISTS OF AT LEAST THREE TRUSTESS, INCLUDING A CHAIR WHO IS THE CHAIR OF THE BOARD COMMITTEE MEMBERS MUST BE INDEPENDENT FROM THE BUSINESS OPERATIONS OF THE UNIVERSITY. THE COMMITTEE MEMBERS ARE CHOSEN BY THE CHAIR OF THE BOARD ON THE ACTIVITIES OF THE COMMITTEE FROM TIME. TO THE BOARD ON THE ACTIVITIES OF THE COMMITTEE FROM TIME TO TIME. THE COMMITTEE REPOSATIONS DO THE FULL BOARD FOR APPROVAL THE TOTAL COMPENSATION PACKAGE. INCLUDING INCENTIVES, PREREQUISITES AND FRINGE BENEFITS FOR THE PRESIDENT THE COMMITTEE ALSO REVIEWS AND APPROVES RECOMMENDED TONS BY THE PRESIDENT FOR THE TERMS OF EMPLOYMENT AND TOTAL COMPENSATION OF ALL MEMBERS OF THE COMMITTEE RESIDENT'S COUNCIL SPECIFICALLY, THE COMMITTEE REVIEWS AND APPROVES BASE SALARY RANGES AND PARTICIPATION AND BENEFIT LEVELS ASSOCIATED WITH ALL FORMS OF DISQUALIFIED PERSONS UNDER SECTION 4958 OF THE COMPENSATION THE TRANSACTION THE TRANSACTION THE TRANSACTION T

Return Reference	Explanation
How Documents are Made Available to the Public	Form 990, Part VI, Line 19 THE UNIVERSITY'S BY-LAWS, FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICIES ARE AVAILABLE UPON REQUEST THE UNIVERSITY'S 990 AND 990T TAX FORMS ARE ALSO MADE AVAILABLE TO THE PUBLIC ON THE WEBSITE GUIDESTAR ORG AND UPON REQUEST

Return Reference	Explanation
Other Program Services	Form 990, Part III, Line 4d OTHER BUILT IN 1992, THE AWARD WINNING PAUL J GUTMAN LIBRARY BLENDS A TRADITIONAL PRINT COLLECTION WITH CONTINUALLY EXPANDING DIGITAL RESOURCES GUTMAN LIBRARY STAFF WORK COLLABORATIVELY WITH THE UNIVERSITY COMMUNITY TO ENSURE STUDENTS ACHIEVE INSTITUTIONAL LEARNING OUTCOMES THE LIBRARY DEVELOPS, PRESERVES, ORGANIZES, AND MAKES ACCESSIBLE A VARIETY OF RELEVANT PHY SICAL AND DIGITAL COLLECTIONS WHICH SUPPORT THE UNIVERSITY'S CURRICULAR AND RESEARCH GOALS PHILADELPHIA UNIVERSITY'S ACADEMIC COMPUTING, HONORS PROGRAM, AND LEARNING CENTER SERVE TO ENHANCE THE STUDENT'S LEARNING EXPERIENCE AND PROMOTE SUCCESSFUL OUTCOMES OVER A CROSS SECTION OF STUDENTS