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DLN: 93493097000266

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)

 \blacktriangleright 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 2	2014 ca	lendar year, or tax year beginning 07-01-2014 , and ending 06-30-2015				
B Ch	eck ıf a _l	pplicable	C Name of organization WESTMINSTER COLLEGE		D Emplo	yer ide	ntification number
┌ Add	ress ch	ange	WESTPHINSTER COLLEGE		25-09	981156	5
┌ Na	me chai	nge	Doing business as				
┌ Init	ıal retu	rn			E Toloph	one num	hor
_ Fin			Number and street (or P O box if mail is not delivered to street address) Room/suite 319 S MARKET STREET	:	,		
_		nınated			(724)	946-7	141
_	ended		City or town, state or province, country, and ZIP or foreign postal code NEW WILMINGTON, PA 16172		G Gross i	receints ¢	5 73,477,949
App	olication	pending			0.000	- cccipto 4	. 73, 177, 313
			F Name and address of principal officer DR RICHARD DORMAN	H(a) Is the			
			319 S MARKET STREET	subol	rdınates?		Γ Yes Γ No
			NEW WILMINGTON, PA 16172	H(b) Are a	ıll subord	ınates	┌ Yes ┌ No
		npt status	5	inclu			/
				11 10	o, attacr	i a iist	(see instructions)
J W	ebsite	::► W\	WW WESTMINSTER EDU	H(c) Grou	ıp exempt	tion nur	mber ►
K For	n of org	ganızatıo	n	L Year of fo	rmation 18	352 M	State of legal domicile PA
Pa	rt I	Sun	nmary				
			describe the organization's mission or most significant activities				
	<u> </u>	PROMO	TE EDUCATION, THE DEVELOPMENT OF SKILLS, KNOWLEDGE, AND	PERSONAL	_ QUALIT	ΓΙΕS	
≗							
E .	-						
Governance	2 (Check t	this box 🔰 if the organization discontinued its operations or disposed of	more than 2	5% of its	net as	sets
	2	Number	r of voting members of the governing body (Part VI, line 1a)			з	30
න් ගු			r of independent voting members of the governing body (Part VI, line 1b)			4	
Activities			umber of individuals employed in calendar year 2014 (Part V, line 2a)			5	1,181
ŧ			umber of volunteers (estimate if necessary)			6	569
∢	1		nrelated business revenue from Part VIII, column (C), line 12			7a	-26,531
			elated business taxable income from Form 990-T, line 34			7b	-121,920
				Prio	r Year		Current Year
	8	Contr	ributions and grants (Part VIII, line 1h)		5,821,933		6,324,104
Revenue	9	Progr	ram service revenue (Part VIII, line 2g)		50,069,	572	47,014,207
9.5	10	Inves	stment income (Part VIII, column (A), lines 3, 4, and 7d)		2,893,	580	3,206,988
立	11		r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		154,	652	161,551
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		58,939,	737	56,706,850
	13		ts and similar amounts paid (Part IX, column (A), lines 1–3)		21,206,		20,499,798
	14		fits paid to or for members (Part IX, column (A), line 4)			0	0
	15		ries, other compensation, employee benefits (Part IX, column (A), lines		21 000	F 0 6	21 710 051
8		5-10			21,890,	500	21,719,051
Expenses	16a		ssional fundraising fees (Part IX, column (A), line 11e)			0	0
ੜੇ	Ь	Total f	fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 1,327,584$				
	17	Othe	r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		16,376,	354	16,227,023
	18	Total	expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		59,473,	159	58,445,872
	19	Reve	nue less expenses Subtract line 18 from line 12		-533,	422	-1,739,022
Net Assets or Fund Balances				Beginning	g of Curre 'ear	nt	End of Year
2008 2008 2008	20	Total	assets (Part X, line 16)		207,514,	731	203,246,086
A B	21		liabilities (Part X, line 26)		32,786,		32,506,652
2 E	22		ssets or fund balances Subtract line 21 from line 20	<u> </u>	174,728,		170,739,434
Pai	t II		nature Block		/ /		
my ki prepa	nowled arer ha	dge and is any k	nature of officer	n officer) is			
Here	E		INETH J ROMIG VP OF FINANCE/TREASURER e or print name and title				
		<u> </u>	Print/Type preparer's name Preparer's signature Date	e Cho	ck 🗀 ıf	PTIN	
Paid	4	L	EUGENÉ J LOGAN EUGENE J LÓGAN	self-	-employed	P00227	
	a pare		Firm's name ► SCHNEIDER DOWNS & CO INC	Firm	n's EIN 🟲 2	5-140870	03
Use	•		Firm's address ► ONE PPG PLACE SUITE 1700	Pho	ne no (412	2) 261-36	544

PITTSBURGH, PA 15222

54.097.118

Total program service expenses ►

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? 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	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🤩	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was			No
29	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
30	Did the organization receive more than \$25,000 in non-cash contributions. If res, complete schedule is	29	1 65	
	conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a		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	36		No
37	organization? If "Yes," complete Schedule R, Part V, line 2	30		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🔞	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1,693			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 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	
	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 <u>F</u> 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? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N o
	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).	7-		NI a
	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 7b		No
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	76		
	file Form 8282?	7c		No
u	The standard the number of forms 6202 med 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
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	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?			
0-	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	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)			
17=	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		-,,,
	,			

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

Check if Schedule O contains a response or note to any line in this Part VI	Check if Schedule () contains a response	or note to an	v line in this Part \	'I .												
-----------------------------------------------------------------------------	---------------------	-----------------------	---------------	-----------------------	------	--	--	--	--	--	--	--	--	--	--	--	--

Se	ection A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year						
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No			
6	Did the organization have members or stockholders?	6		No			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		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	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod Yes	e.) No			
	Ection B. Policies (<i>This Section B requests information about policies not required by the Internal R</i> 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 12a	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	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?	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?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No			
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes 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 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes	No No			

- 17 List the States with which a copy of this Form 990 is required to be filed ►OH, 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 ☑ Upon request ☐ Other (explain in Schedule O)

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

319 S MARKET STREET NEW WILMINGTON, PA 16172 (724) 946-7141

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

any hours for related organizations (W- organizations (W- organizations (W- organization (W- 2/1099-MISC) organization related	(A) Name and Title	for related organizations below		•	` `	organization and
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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 (ne l both	oox, an	heck unless officer stee)	3	(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 trusties or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	╸			
С	Total from continuation sheets to Part VII, Section A	۲			
d	Total (add lines 1b and 1c)	<u>•</u> [987,895	0	214,371

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►6

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	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		Νo

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SODEXO INC & AFFILIATES PO BOX 360170 PITTSBURGH, PA 15251	ENGINEERING AND FOOD SERVICES	3,258,822
EBSCO PO BOX 204661 DALLAS, TX 75320	ELECTRONIC SERVICES	332,537
BD&E 681 ANDERSON DRIVE PITTSBURGH, PA 15220	PROFESSIONAL FEES	286,663
FIRE ENGINE RED INC PO BOX 1017 HAVERTOWN, PA 19083	PROFESSIONAL FEES	188,225
K-12 TEACHERS ALLIANCE 20624 ABBEY WOODS COURT NORTH FRANKFORT, IL 60423	PROFESSIONAL FEES	175,857
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 12

Part V		Statement o	f Revenue					r age 3
			ule O contains a respor	nse or note to any lir		 ,		<u> </u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
u 2	1a	Federated cam	paigns 1a					
ant	ь	Membership du	es 1b					
بة ق	С	Fundraising ev	ents 1c					
ifts, ar A	d	Related organiz	zations 1d					
ı E	e	Government grant	s (contributions) 1e	727,622				
ons Sii	f	All other contribution	ons, gifts, grants, and 1f	5,596,482				1
Contributions, Gifts, Grants and Other Similar Amounts	g	sımılar amounts no	ot included above	100,042				
ng T	h	Total. Add line:	s 1a-1f		6,324,104			
				Business Code				
Шe	2a	INSTRUCTIONAL		611710	27,699,814	27,699,814		
æ. ₹	ь	EDUCATIONAL/AU)	(ILIARY	611710	9,470,157	9,470,157		
е. П	С	STUDENT SERVICE	ES	900099	6,185,620	6,185,620		
Ē.	d	ACADEMIC SUPPO	RT	900099	3,658,616	3,658,616		
Program Service Revenue	е							
∑ Ta	f	All other progra	am service revenue					
š	g	Total. Add lines	s 2a – 2f		47,014,207			
	3		ome (including dividen		5,285,440		-26,531	5,311,971
	4		ar amounts) stment of tax-exempt bond p		3,283,440		-20,551	3,311,971
	5	Royalties .		proceeds				
		,	(ı) Real	(II) Personal				
	6a	Gross rents	164,275					
	b	Less rental expenses	127,214					
	С	Rental income or (loss)	37,061					
	d	· · ·	me or (loss)		37,061			37,061
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	14,221,794					
	b	Less cost or other basis and	15,992,302	307,944				
	c	sales expenses Gaın or (loss)	-1,770,508	-307,944				
	d		l		-2,078,452			-2,078,452
e n	8a	events (not inc	_					
Other Revenue		\$of contributions See Part IV, lir	s reported on line 1c) ne 18					
her	ь	Less direct ex	penses b					
δ	С		(loss) from fundraising	events 🛌				
	9a		rom gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	c		(loss) from gamıng actı: -	vities				
	10a	Gross sales of returns and allo		468,129				
	ь	Less costofa	oods sold b	343,639				
			(loss) from sales of inve		124,490			124,490
		Miscellaneou	s Revenue	Business Code				
	11a							
	b							
	С							
	d	All other reven	L L					
	e		s 11a-11d					
	12	Total revenue.	See Instructions		56,706,850	47,014,207	-26,531	3,395,070

Form 990 (2014) Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizati	ons must complete all columns	s All other organizations must complete column (A)

	Check if Schedule O contains a response or note to any line in this	Part IX			
	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				
2	Grants and other assistance to domestic individuals See Part IV, line 22	20,471,241	20,471,241		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	28,557	28,557		
4	Benefits paid to or for members	20,337	20,337		
5	Compensation of current officers, directors, trustees, and				
,	key employees	504,933	280,216	83,244	141,473
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	16,056,390	14,433,044	1,055,031	568,315
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	794,250	686,613	64,974	42,663
9	Other employee benefits	3,110,018	2,701,183	246,788	162,047
10	Payroll taxes	1,253,460	1,090,080	98,622	64,758
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting	97,845		97,845	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	109,581		109,581	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,531,737	1,298,712	153,150	79,875
12	Advertising and promotion	97,782	42,852	52,821	2,109
13	Office expenses	3,354,026	2,911,821	349,914	92,291
14	Information technology	533,034	500,335	10,714	21,985
15	Royalties				
16	Occupancy	1,986,208	1,750,036	226,113	10,059
17	Travel	1,116,924	969,592	91,943	55,389
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	43,645	37,888	3,593	2,164
20	Interest	787,442	787,442		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,622,329	2,506,442	89,036	26,851
23	Insurance	333,363	138,781	194,582	
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	FOOD SERVICE	3,065,707	3,015,528	24,002	26,177
Ь	OTHER	411,389	386,822		24,567
c	PLANT FACILITIES	136,011	59,933	69,217	6,861
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	58,445,872	54,097,118	3,021,170	1,327,584
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)		-		
				Fo	rm 990 (2014)

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line i	n this	Part X			
					(A) Beginning of year	, , , , , , , , , , , , , , , , , , ,	(B) End of year
	1	Cash-non-interest-bearing			894,480	1	3,513,635
	2	Savings and temporary cash investments			12,185,145	2	6,976,950
	3	Pledges and grants receivable, net			1,073,541	3	691,263
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete Schedule L	Part II	of		5	
Assets	6	Loans and other receivables from other disqualified persons $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedul	d conti emplo	buting employers		6	
88	7	Notes and loans receivable, net			2,273,109	7	2,452,401
⋖	8	Inventories for sale or use			476,415	8	515,252
	9	Prepaid expenses and deferred charges			970,242	9	1,175,997
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	102,800,189			
	Ь	Less accumulated depreciation	10b	30,659,374	74,565,889	10c	72,140,815
	11	Investments—publicly traded securities			89,500,299	11	89,709,290
	12	Investments—other securities See Part IV, line 11			25,429,081	12	25,797,501
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			146,530	15	272,982
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			207,514,731	16	203,246,086
	17	Accounts payable and accrued expenses			2,354,674	17	2,498,352
	18	Grants payable				18	
	19	Deferred revenue			2,640,974	19	2,550,631
	20	Tax-exempt bond liabilities			17,385,000	20	16,855,000
S	21	Escrow or custodial account liability Complete Part IV of Sc	hedule	D		21	
Liabilities	22	Loans and other payables to current and former officers, directly employees, highest compensated employees, and disquare	ctors,				
æ		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third part	ies .			23	
	24	Unsecured notes and loans payable to unrelated third parties	s .			24	
	25	Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete FD	art X		10,405,739	25	10,602,669
	26	Total liabilities. Add lines 17 through 25			32,786,387	26	32,506,652
<u></u>		Organizations that follow SFAS 117 (ASC 958), check here ▶					
ġ		lines 27 through 29, and lines 33 and 34.	·				
Fund Balances	27	Unrestricted net assets			70,820,230	27	67,431,136
8	28	Temporarily restricted net assets			45,745,125	28	41,418,605
2	29	Permanently restricted net assets			58,162,989	29	61,889,693
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here F	- │ and			
2	30	Capital stock or trust principal, or current funds				30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund	١.			31	
Ą	32	Retained earnings, endowment, accumulated income, or othe	r funds			32	
Net	33	Total net assets or fund balances			174,728,344	33	170,739,434
	34	Total liabilities and net assets/fund balances			207,514,731	34	203,246,086
							Form 990 (2014)

Par	TEXT Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)				
2	Total expenses (must equal Part IX, column (A), line 25)	1		56,7	706,850
2		2		58,4	445,872
3	Revenue less expenses Subtract line 2 from line 1	3		-1,7	739,022
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		174,7	728,344
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-1	471,449
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			739,434
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. F
				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 separate basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
За	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?	ie	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Additional Data

Software ID: Software Version:

EIN: 25-0981156

Name: WESTMINSTER COLLEGE

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

(Code) (Expenses \$ 4,632,160 including grants of \$) (Revenue \$ 3,715,801)

ACADEMIC SUPPORT - SUPPORT FOR INSTRUCTION AND RESEARCH BY THE FOLLOWING DEPARTMENTS DEAN OF THE COLLEGE, LIBRARY AND INFORMATION SYSTEMS, FACULTY DEVELOPMENT, ART GALLERY, HONORS PROGRAM, CHEMICAL HYGIENE, CULTURAL ARTIFACTS AND THE LEARNING CENTER

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

Compensated Employees, and Inde	1	ntracto	rs					I	1	ı
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth	ox, ι an o	ınless fficer	;	(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-14130/	2/1099-1413C)	organization and related organizations
(1) PETER M ANDINO	1 50					_				
TRUSTEE (ENTER 7/14)		Х						0	0	0
(1) GEORGE R BERLIN TRUSTEE	1 50	х						0	0	0
(2) WHITNEY F BOHAN	1 50	x						0	0	0
TRUSTEE	1.50	^						Ů	•	
(3) GARY D BROWN	1 50	х						0	0	0
TRUSTEE (ENTER 7/14) (4) ROBERT W BUEHNER	1 50									
TRUSTEE		Х						0	0	0
(5) ASHLEY E DAVIS	1 50	х						0	0	0
TRUSTEE (6) RALPH A DISE JR	1 50									
TRUSTEE (ENTER 7/14)		х						0	0	0
(7) DAVID M FARNER	1 50	X						0	0	0
TRUSTEE (8) ROBIN W GOOCH	1 50									
TRUSTEE		х						0	0	0
(9) BARBARA B GUFFEY	1 50	х						0	0	0
TRUSTEE		^						Ů	0	
(10) STEPHEN G HARTLE	1 50	х						0	0	0
TRUSTEE (11) HAROLD V HARTLEY III	1 50									
TRUSTEE		Х						0	0	0
(12) ROBERT C JACKSON	1 50	x						0	0	0
TRUSTEE (13) ROBERT C JAZWINSKI	1 50									
TRUSTEE		Х						0	0	0
(14) LINDA C JENKINS	1 50	х						0	0	0
TRUSTEE								, and the second	•	
(15) THOMAS S MANSELL TRUSTEE	1 50	x						0	0	0
(16) DOREEN A MCCALL	1 50	x						0	0	0
TRUSTEE								, i	<u> </u>	
(17) JEFFREY A MCCANDLESS	1 50	х						0	0	0
TRUSTEE (18) W KEITH MCCAULEY	1 50									
TRUSTEE		Х						0	0	0
(19) STEPHEN D MCCONNELL	1 50	x						0	0	0
TRUSTEE (20) WAYNE A MILLER	1 50							_	_	_
TRUSTEE		Х						0	0	0
(21) WILLIAM W RANKIN	1 50	x						0	0	0
TRUSTEE (22) THOMAS K RITTER	1 50									
TRUSTEE (ENTER 7/14)		X						0	0	0
(23) LINDA WRIGHT SIMPSON	1 50	x						0	0	0
TRUSTEE (ENTER 7/14) (24) GLENN H THOMPSON	1 50									
TRUSTEE		х						0	0	0
	1				1	ı		1		

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

(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th persoi and a	ion (d nan o n is b dired	ne booth a	ox, u an of trus	nless ficer 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
(26) JOHN T WEISEL TRUSTEE	1 50	х						0	0	0
(1) JEFFREY T WILEY TRUSTEE	1 50	х						0	0	0
(2) THOMAS A TUPITZA CHAIR	3 50	х		х				0	0	0
(3) DEBORAH P MAJORAS 	2 00	Х		Х				0	0	0
(4) RICHARD H DORMAN PRESIDENT	40 00	Х		Х				270,383	0	89,292
(5) KENNETH J ROMIG TREASURER/VP FOR FINANCE	40 00			X				171,420	0	31,242
(6) JOEANN MILLER SECRETARY	40 00			Х				38,645	0	3,969
(7) JANE WOOD VICE PRESIDENT FOR ACADEMIC AFFAIRS	40 00					x		172,083	0	25,141
(8) GRADY B JONES VP FOR INSTITUTIONAL ADVANCEMENT	40 00					х		128,887	0	18,819
(9) NEAL EDMAN VICE PRESIDENT FOR STUDENT AFFAIRS	40 00					х		104,652	0	28,918
(10) THOMAS STEIN VP FOR ENROLLMENT IN ADMISSIONS	40 00					х		101,825	0	16,990

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DLN: 93493097000266

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the

Internal Revenue Service

Treasury

Total

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

		he organization ER COLLEGE					Employer identifica	ation number
							25-0981156	
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	tions must co	mplete this p	oart.) See instruction	ons.
The	organı	zation is not a private f	oundation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)	
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(b)(1)(A)(i).	
2	<u>~</u>	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)			
3	Γ	A hospital or a cooper	atıve hospıtal	service organization (described in sec	tion 170(b)(1)(A)(iii).	
4	Γ	A medical research or hospital's name, city,		erated in conjunction v	vith a hospital d	lescribed in se c	ction 170(b)(1)(A)(iii	i). Enter the
5	Г	An organization opera	ted for the ber	nefit of a college or uni	versity owned o	or operated by	a governmental unıt d	escribed in
		section 170(b)(1)(A)	(iv). (Complet	e Part II)				
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in se	ection 170(b)(:	1)(A)(v).	
7	_	An organization that n described in section 1	70(b)(1)(A)(v	vi). (Complete Part II)	_	ental unit or from the o	general public
8		A community trust de	scribed in sect	tion 170(b)(1)(A)(vi)	(Complete Par	tII)		
9	Г	An organization that n	ormally receiv	es (1) more than 33:	1/3% of its supp	ort from contri	butions, membership	fees, and gross
		receipts from activitie	s related to its	s exempt functions—s	ubject to certai	n exceptions, a	and (2) no more than 3	331/3% of
		its support from gross						n businesses
	_	acquired by the organ		•			•	
10		An organization organ	•	·	•	•		
11	ı	An organization organ one or more publicly s the box in lines 11a th	upported orga	nızatıons described in	section 509(a)(1) or section	509(a)(2) See section	on 509(a)(3). Check
a	Γ	Type I. A supporting of supported organization	organization op	perated, supervised, o	r controlled by 1	ts supported o	rganization(s), typica	lly by giving the
	_	organization You mus	t complete Pa	rt IV, Sections A and	В.			
b		Type II. A supporting						
		management of the su must complete Part I'			same persons t	nat control or i	nanage the supported	organization(s) You
С	Г	Type III functionally	•		n operated in c	onnection with	, and functionally inte	grated with, its
	· 	supported organizatio	_		•			,
d	Г	Type III non-function						
		not functionally integr (see instructions) Yo					ement and an attentiv	eness requirement
e	Г	Check this box if the					s a Type I. Type II. T	vpe III functionally
	•	ıntegrated, or Type II					7 7 7 7 7 -	,,, ,
f		Enter the number of s	upported orgar	nizations				
g		Provide the following i	nformation abo	out the supported orga	inization(s)			
		ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org		(v) A mount of	(vi) A mount of
		organization		organization (described on lines 1-9 above or IRC section (see	listed in your docume		monetary support (see instructions)	other support (see instructions)
				instructions))	Yes	No		

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support	•	•		, ,	1	
Cal	endar year (or fiscal year beginning 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")	7,155,396	8,929,378	9,351,276	5,821,933	6,324,104	37,582,087
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit						
4 5	to the organization without charge Total. Add lines 1 through 3 The portion of total contributions	7,155,396	8,929,378	9,351,276	5,821,933	6,324,104	37,582,087
5	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						7,450,394
6	(f) Public support. Subtract line 5 from line 4						30,131,693
S	ection B. Total Support					<u> </u>	
Cal	endar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	A mounts from line 4	7,155,396	8,929,378	9,351,276	5,821,933	6,324,104	37,582,087
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	4,511,493	4,269,583	4,242,392	4,933,944	5,476,246	23,433,658
9	Net income from unrelated business activities, whether or not the business is regularly carried on			1,716			1,716
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						61,017,461
12	Gross receipts from related activiti	es, etc (see instr	ructions)			12	262,682,570
13	First five years. If the Form 990 is organization, check this box and st	op here	<u> </u>		•		· . —
	ection C. Computation of Pub						
14	Public support percentage for 2014			11, column (f))		14	49 380 %
15	Public support percentage for 2013	•				15	50 650 %
16a	33 1/3% support test—2014. If the and stop here. The organization qua				ine 14 is 33 1/3%	or more, check	this box
17a	33 1/3% support test—2013. If the box and stop here. The organization 10%-facts-and-circumstances test-is 10% or more, and if the organization part VI how the organization meeorganization	organization did n qualifies as a pu — 2014. If the orga tion meets the "fa ets the "facts-and	not check a box of blicly supported inization did not of icts-and-circums i-circumstances"	on line 13 or 16a, organization check a box on lin ctances" test, che test The organiz	ie 13, 16a, or 16 eck this box and s zation qualifies as	b, and line 14 s top here. Explain s a publicly suppo	▶ □
b 18	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ Explain in Part VI how the organiza supported organization Private foundation. If the organizationstructions	nization meets the tion meets the "fa	e "facts-and-circu icts-and-circums	umstances" test, tances" test The	check this box are e organization qua	nd stop here. alifies as a public	y ▶⊏

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

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

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

Section D. Computation of Investment Income Percentage

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

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

18

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

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

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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

11c

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

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

3b

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

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

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 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: 93493097000266

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

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

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

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

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

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

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

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

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

Grassroots lobbying expenditures

	filed Form 5768 (election under section 501(h)).		- \		L
	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		a) 	T	b)
activ	ity.	Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
С	Media advertisements?		No		
d	Mailings to members, legislators, or the public?		No		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		No		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			1,001
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	O ther activities?	Yes			4,619
j	Total Add lines 1c through 1i				5,620
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		Νo		
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)(5),	or sec	tion
	501(c)(6).			Υ.	es No
1	Were substantially all (90% or more) dues received nondeductible by members?		ſ	1	es 140
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		ŀ	2	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
	t III-B Complete if the organization is exempt under section 501(c)(4), section	501(c)(5).	or sec	tion
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				
	line 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2a			
a	Current year	-	<u> </u> 		
D	Carryover from last year Total	2b 2c			
C	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	<u> </u>			
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
	political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
Pa	art IV Supplemental Information				
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro see instructions), and Part II-B, line 1 Also, complete this part for any additional information	up list),	, Part I	I-A, line	s 1 and
	Return Reference Explanation				
PAR	T II-B, LINE 1 EXPENSES INCURRED IN CONNECTION WITH A MEETING WITH A OFFICIAL OTHER EXPENSES WERE INCURRED FOR STUDENT LOS			OVERN	MENT

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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

DLN: 93493097000266

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

nal Revenue Service Information about Schedule D (Form 990) and its instructions is at <u>www</u>	<u>.irs.gov/form990</u> . Inspection
ame of the organization ESTMINSTER COLLEGE		Employer identification number
ESTITION EN COLLEGE		25-0981156
art I Organizations Maintaining Donor		Funds or Accounts. Complete if
organization answered "Yes" to Form		(b) 5d. and atheres a second
Total number at end of year	(a) Donor advised funds	(b) Funds and other accounts
Aggregate value of contributions to (during year)		
Aggregate value of grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and donor a	dvisors in writing that the assets held in a	donor advised
funds are the organization's property, subject to t		
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the l		
conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	☐ Yes ☐ I
rt III Conservation Easements. Comple	te if the organization answered "Yes	" to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by th		
Preservation of land for public use (e g , recre		an historically important land area
Protection of natural habitat) Preservation of	a certified historic structure
Preservation of open space		
Complete lines 2a through 2d if the organization heasement on the last day of the tax year	neld a qualified conservation contribution	in the form of a conservation
casement on the last day of the tax year		Held at the End of the Year
Total number of conservation easements		2a
Total acreage restricted by conservation easeme	nts	2b
Number of conservation easements on a certified	historic structure included in (a)	2c
Number of conservation easements included in (c historic structure listed in the National Register) acquired after 8/17/06, and not on a	2d
Number of conservation easements modified, tran	nsferred, released, extinguished, or termin	ated by the organization during
the tax year ►	, , ,	, -
Number of states where preparty subject to some	amustian assament is located .	
Number of states where property subject to conse		
Does the organization have a written policy regard enforcement of the conservation easements it hol		Yes [
Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation eas	sements during the year
A mount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easeme	ents during the year
► \$		
Does each conservation easement reported on lir and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy the requirements of s	section 170(h)(4)(B)(i)
In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financ	
t III Organizations Maintaining Collect Complete if the organization answere	tions of Art, Historical Treasure	
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footr	AS 116 (ASC 958), not to report in its re assets held for public exhibition, education	venue statement and balance sheet on, or research in furtherance of public
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	AS 116 (ASC 958), to report in its reven assets held for public exhibition, education	ue statement and balance sheet
(i) Revenue included in Form 990, Part VIII, line	1	► \$
(ii) Assets included in Form 990, Part X		► \$
If the organization received or held works of art, he following amounts required to be reported under S	•	- · · · · · · · · · · · · · · · · · · ·
Revenue included in Form 990, Part VIII, line 1	-	▶ \$
Assets included in Form 990, Part X		▶ \$

Part	Organizations Maintaining Co	llections of Art,	Histo	rical Tr	easures, or	<u>Othe</u>	r Similar Ass	ets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, che	ck any of t	the following that	are a	a significant use	of its	
а	Public exhibition		d	✓ Loan	or exchange pro	grams	5		
b	Scholarly research		e	Othe	r				
c	Preservation for future generations								
4	Provide a description of the organization's co Part XIII	ollections and explai	n how t	hey furthe	er the organization	n's e	xempt purpose ır	1	
5	During the year, did the organization solicit							_	_
Do	assets to be sold to raise funds rather than t	·					<u>'</u>	Yes	✓ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar					eu 1	res to ronn 9:	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					sets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	I and complete the f	followir	ng table					
							Am	ount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, fo	r escrow c	or custodial acco	unt li	ability? \(\bullet	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	I Check here if the	explan	ation has	been provided in	Part	XIII		Γ
Pa	rt V Endowment Funds. Complete	ıf the organızatıon							
		(a)Current year		or year	b (c)Two years ba	-			ears back
1a	Beginning of year balance	114,824,985	1	01,607,103		_	90,910,277		78,557,979
Ь	Contributions	4,093,114		1,780,276	6,485,3	81	4,944,109		1,160,761
С	Net investment earnings, gains, and losses	1,309,464		15,999,781	10,931,9	02	-4,397,082		14,976,165
d	Grants or scholarships	2,058,551		1,795,292	1,647,8	82	1,473,300		1,547,958
e	Other expenditures for facilities and programs	2,803,504		2,766,883	2,075,7	60	2,070,542		2,236,670
f	Administrative expenses	115 265 500		14.024.005	101 607 1	0.0	07.042.462		
g	End of year balance	115,365,508		14,824,985		03	87,913,462		90,910,277
2	Provide the estimated percentage of the cur	•	e (line	1g, colum	n (a)) held as				
а	Board designated or quasi-endowment 🕨	12 730 %							
b	Permanent endowment ► 53 420 %								
C	Temporarily restricted endowment ► 33 to The percentages in lines 2a, 2b, and 2c sho	350 % uld equal 100%							
3a	Are there endowment funds not in the posse	ssion of the organiza	tıon th	at are held	d and admınıster	ed for	the		
	organization by (i) unrelated organizations						3a(i	Yes Yes	+
	(ii) related organizations						3a(ii	_	No
ь	If "Yes" to 3a(II), are the related organization		• on Scl	٠. hedule R?		٠.	3b		1
4	Describe in Part XIII the intended uses of the	ne organization's end	lowmer	nt funds				<u>'</u>	
Par	t VI Land, Buildings, and Equipme		he org	anızatıoı	n answered 'Ye	s' to	Form 990, Par	t IV, I	ine
	11a. See Form 990, Part X, line Description of property	10.		(a) Cost or pasis (invest			(c) Accumulated depreciation	(d) B	ook value
	land.		\dashv			\a_ = - ·	-		200 ===
	Land					02,700			302,700
	Buildings		. -		84,70	1,052	19,915,395	'	64,785,657
	Leasehold improvements		. -		44.00	12.446	7.052.453		2 570 525
	Equipment		. -			23,118		 	3,570,634
	O ther	aual Form 990 Part V	Colum	n (R) line		73,319		+	3,481,824 72,140,815
1014	. Add illes to chlough te (Column (a) must e	guarionii 330, Fail A	, colulli	(<i>ט),</i> וווופ	10(C)-/ · · ·	•			
							Schedule D	(Form S	990) 2014

Part VII Investments—Other Securities. Com	plete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests (3)Other		
(A) COMMINGLED FUNDS	18,734,799	F
(B) FIXED INCOME	7,062,702	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	25,797,501	
Part VIII Investments—Program Related. Co		answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total (Column (B) must equal from 550, fact X, col (B) mic 15)	•	
Part IX Other Assets. Complete if the organization (a) Descrip		, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15		
Part X Other Liabilities. Complete if the organ Form 990, Part X, line 25.	mzation answered res to	Form 990, Part IV, line TTE or TTI. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
DEPOSITS HELD IN CUSTODY FOR OTHERS	422,303	
ANNUITIES PAYABLE	245,553	
POSTRETIREMENT BENEFIT OBLIGATIONS GOVERNMENT STUDENT LOAN FUNDS	7,424,476 2,210,076	
CAPITAL LEASES	300,261	
Total (Column (h) must organ Form 200 Part V and (0) for 25)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	10,602,669	o organization's financial statements that wanguts the

	lule D (Form 990) 2014			Page 4
Par		Revenue per Audited Financial Statements With Revenue poswered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete if
1		ner support per audited financial statements	1	34,316,267
2	, - ,	out not on Form 990, Part VIII, line 12		31,313,237
a) on investments 2a -1,778,439		
b	Donated services and use of	facilities 2b		
c	Recoveries of prior year gran	nts		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d		2e	-1,779,035
3			3	36,095,302
4		90, Part VIII, line 12, but not on line 1		
a b	·	cluded on Form 990, Part VIII, line 7b . 4a 109,581		
b c	•		4c	20,611,548
5		nd 4c. (This must equal Form 990, Part I, line 12)	5	56,706,850
		Expenses per Audited Financial Statements With Expenses		
		nswered 'Yes' to Form 990, Part IV, line 12a.	-	·
1	·	er audited financial statements	1	38,305,177
2		out not on Form 990, Part IX, line 25		
a		facilities		
b c	· •			
d)		
e			2e	470,853
3	-		3	37,834,324
4	Amounts included on Form 9	90, Part IX, line 25, but not on line 1:		
а	Investment expenses not inc	cluded on Form 990, Part VIII, line 7b 4a 109,581		
b	Other (Describe in Part XIII) 4b 20,501,967		
C	Add lines 4a and 4b		4c	20,611,548
5		and 4c. (This must equal Form 990, Part I, line 18)	5	58,445,872
	Supplemental In	nformation or Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b		
Part		(I, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	Return Reference	Explanation		
PART	III, LINE 1A	THE COLLEGE OWNS A NUMBER OF PIECES OF ART AND HISTORIC	TREA	SURES. NONE OF
	,	WHICH ARE RECORDED IN THE FINANCIAL STATEMENTS THESE IT	EMS	HAVE BEEN GIVEN
		TO THE COLLEGE OVER A NUMBER OF YEARS, ARE GENERALLY DIS	PLAY	ED IN VARIOUS
PART	III, LINE 4	THE COLLEGE'S COLLECTION OF ARTIFACTS OF CULTURAL AND E		
		SIGNIFICANCE RANGE FROM STONE TOOLS (6,000 B C) THROUGH (2,000 B C), AN EGYPTIAN MUMMY (300 B C), COPTIC ITEMS (5TH		
		JAPANESE SAMURAI ARMOR (18TH CENTURY A D) TO CURRENCY B	EARI	NG THE PORTRAIT
		OF SADDAM HUSSEIN (2003 A D) THE COLLECTION PROVIDES A COMPAST FOR STUDENTS OF HISTORY AND CULTURE, BOTH ON CAMPU		
		SURROUNDING COMMUNITY IN ADDITION, SOME ITEMS IN THE CO	OLLE	CTION HAVE BEEN
		LOANED TO MUSEUMS AND HISTORICAL SOCIETIES EXPANDING T REACH SOME OF THE COLLECTION IS HIGHLIGHTED ONLINE ALOR		
		MATERIALS (CT SCANS, DESCRIPTIONS, EDUCATIONAL MATERIAL	S) A	FORENSIC
		SCULPTOR RECONSTRUCTED A BUST OF THE 2,000+YEAR-OLD MU STUDENTS OF HISTORY TO SEE THE VISAGE OF A WOMAN WHO LIV		
		ALL OF THE ARTIFACTS ENCOURAGE RESEARCH AND STUDY BY BR		
		AS STUDENTS SEE FIRSTHAND THE ITEMS ABOUT WHICH THEY REA		
PART	V, LINE 4	THE COLLEGE'S ENDOWMENT CONSISTS OF VARIOUS INVESTMENT FOR SUPPORT OF THE COLLEGE'S MISSION ITS ENDOWMENT INCL		
		RESTRICTED ENDOWMENT FUNDS, AND FUNDS DESIGNATED BY TH	Е ВО	ARD OF TRUSTEES
		TO FUNCTION AS ENDOWMENTS AS REQUIRED BY GENERALLY ACC PRINCIPLES, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS		
		DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDO	WME	NTS, ARE
		CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSEN RESTRICTIONS THE BOARD OF TRUSTEES HAS ELECTED TO BE GO		
		COMMONWEALTH OF PENNSYLVANIA'S ACT 141 (ACT 141) ACT 14	1 IS	A TOTAL RETURN
		POLICY THAT ALLOWS A NONPROFIT ENTITY TO CHOOSE TO TREA AVERAGE MARKET VALUE OF THE ENDOWMENT'S PERMANENTLY RE		
		AS INCOME EACH YEAR HOWEVER, THE LONG-TERM PRESERVATION	NOF	THE REAL VALUE
		OF THE ASSETS MUST BE TAKEN INTO CONSIDERATION WHEN THE SPENDING RATE ON AN ANNUAL BASIS, THE BOARD OF TRUSTEES		
		WRITING, A SPENDING RATE OF BETWEEN 2% AND 7% FOR THE YE	ARE	NDED JUNE 30, 2015,
		THE COLLEGE UTILIZED A 5% SPENDING RATE ON RESTRICTED EN 7% SPENDING RATE ON UNRESTRICTED ENDOWMENT ASSETS, BAS		
		MOVING AVERAGE OF HISTORICAL END-OF-QUARTER ENDOWMEN	ТМА	RKET VALUES THE
		LAST QUARTER USED TO DETERMINE THE TRANSFER FOR THE FISC 2015 WAS THE QUARTER ENDED DECEMBER 31, 2013 THE COLLEG		•
		PERMANENTLY RESTRICTED NET ASSETS THE ORIGINAL VALUE OF	GIFT	S DONATED TO THE
		ENDOWMENT AND THE ORIGINAL VALUE OF SUBSEQUENT GIFTS T UNDISTRIBUTED AMOUNTS EARNED ARE INCLUDED IN UNRESTRIC		
		ACCORDANCE WITH ACT 141, THE COLLEGE HAS ADOPTED A WRIT	TEN	INVESTMENT
		POLICY, OF WHICH A SECTION SPECIFICALLY RELATES TO THE EN CONSIDERS THE FOLLOWING FACTORS IN MAKING A DETERMINAT		
		RATE 1 PROTECTING THE CORPUS OF THE ENDOWMENT FUND 2 F	PRESI	ERVING THE
		SPENDING POWER OF THE ASSETS 3 OBTAINING MAXIMUM INVES REASONABLE RISK AND OPERATIONAL CONSIDERATION 4 COMPL		
		LAWS		
PART	X, LINE 2	THE COLLEGE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SI INTERNAL REVENUE CODE (IRC) OF 1986 ACCORDINGLY, NO PROV		
		TAXES HAS BEEN MADE IN THE ACCOMPANYING FINANCIAL STATE	MEN	TS THE COLLEGE
		ACCOUNTS FOR INCOME TAXES UNDER THE INCOME TAXES TOPIC ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDAR		
		THIS TOPIC PRESCRIBES A RECOGNITION THRESHOLD AND MEAS	UREM	ENT PRINCIPLES
		FOR FINANCIAL STATEMENTS DISCLOSURE OF TAX POSITIONS TA TAKEN ON A TAX RETURN THE COLLEGE HAS ASSESSED THE TAX F		
		OR EXPECTS TO TAKE IN ITS TAX RETURNS AND NO LIABILITY HAS	BEE	N RECORDED FOR
		UNCERTAIN TAX POSITIONS, FURTHER, THE COLLEGE HAS NO UNF BENEFITS THE COLLEGE IS NO LONGER SUBJECT TO EXAMINATIO		
		FOR YEARS BEFORE 2012		
	XI, LINE 2D - OTHER STMENTS	COST OF GOODS SOLD 343,639 RENTAL EXPENSES 127,214 CHAN PENSION BENEFIT PLAN COSTS -471,449	IGES	IN UNRECOGNIZED
-	XI, LINE 4B - OTHER	SCHOLARSHIPS AND GRANTS 20,499,798 BANK SERVICE FEES REC	CLAS	5 2,169
<u>A D J U</u>	STMENTS			
	XII, LINE 2D - OTHER STMENTS	COST OF GOODS SOLD 343,639 RENTAL EXPENSES 127,214		

Schedule B (Form 330) 2015		age 💆
Part XIII Supplemental	Information (continued)	
Return Reference	Explanation	
PART XII, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS AND GRANTS 20,499,798 BANK SERVICE FEES RECLASS 2,169	

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493097000266

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE E

Department of the Treasury

Internal Revenue Service

(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.

Name of the organization WESTMINSTER COLLEGE

Employer identification number

25-0981156 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to Νo a Students' rights or privileges? 5a **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? No_ 5g h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a h Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

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

	de any other additional information (see instructions)					
Return Reference	Explanation					
SCHEDULE E, PART I, LINE 3	THE WESTMINSTER COLLEGE NONDISCRIMINATION POLICY IS INCLUDED ON THE COLLEGE WEBSITE, IN OFFICIAL PUBLICATIONS, IN EMPLOYEE ADVERTISING, AND IN STUDENT RECRUITMENT MATERIALS					
SCHEDULE E, PART I, LINE 6	IN THE COURSE OF OUR BUSINESS AS A COLLEGE, THE INSTITUTION RECEIVES FEDERAL GRANTS AND PARTICIPATES IN THE FOLLOWING GOVERNMENTAL AGENCY FINANCIAL AID OR ASSISTANCE PROGRAMS FEDERAL PELL GRANT PROGRAM, FEDERAL PERKINS LOAN PROGRAM, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT, FEDERAL WORK STUDY GRANT, FEDERAL DIRECT LOAN PROGRAM, PENNSYLVANIA INSTITUTIONAL ASSISTANCE GRANT, PENNSYLVANIA NEW ECONOMY TECHNOLOGY SCHOLARSHIP (NETS), PENNSYLVANIA PARTNERSHIP FOR ACCESS TO HIGHER EDUCATION (PATH), PENNSYLVANIA, FEDERAL TEACH GRANT PROGRAM, PA STATE GRANT PROGRAM, OHIO COLLEGE OPPORTUNITY GRANT PROGRAM, WEST VIRGINIA HIGHER EDUCATION GRANT PROGRAM, MASSACHUSETTS MASS GRANT PROGRAM, PA MATCHING FUNDS PROGRAM, THE CHAFEE PROGRAM (ADMINISTERED THROUGH PHEAA), PENNSYLVANIA NATIONAL GUARD EDUCATIONAL ASSISTANCE PROGRAM (ADMINISTERED THROUGH PHEAA), FEDERAL VA BENEFIT PROGRAMS, AMERICORPS AND OVR (OFFICE OF VOCATIONAL REHABILITATION)					

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

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493097000266

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.

rt IV, line 14b, 15, or 16.

▶ Attach to Form 990.

2014

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

WES	TMINSTER COLLEGE					
		25-0981156				
Pa	General Information on Activities Outside the United States. Complete "Yes" to Form 990, Part IV, line 14b.	e if the organiza	tion	answe	red	
1	For grantmakers. Does the organization maintain records to substantiate the amount and other assistance, the grantees' eligibility for the grants or assistance, and the sel used to award the grants or assistance?	ection criteria	▽	Yes	Г	No

- **2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space 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	
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	0			15,221,099
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			15,221,099

Schedule F (Form 990) 2014

Pa						ited States. Comp duplicated if additioi	9		to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2						es by the foreign co (c)(3) equivalency l			
3	Enter total num	nber of other or	ganizations or ent	ities					

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. (e) Manner of cash (a) Type of grant or (b) Region (c) Number of (d) A mount of (f) A mount of (g) Description (h) Method of disbursement of non-cash valuation assistance recipients cash grant non-cash assistance assistance (book, FMV, appraisal, other) (1) STUDY ABROAD EUROPE 5 28,557 CREDIT TO STUDENTS' 0 N/A N/A **GRANTS AND** ACCOUNT FOR (INCLUDING SCHOLARSHIPS ICELAND AND FINANCIAL AID GREENLAND) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Part IV Foreign Forms

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

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page 5

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation									
PART I, LINE 2	FINANCIAL AD IS AWARDED TO INCOMING FIRST YEAR STUDENTS ON THE BASIS OF THE RESULTS OF TH EFREE APPLICATION FOR FEDERAL STUDENT AD (FAFSA) AND BY THE USE OF A FINANCIAL AID MATRIX X THE FINANCIAL AD MATRIX IS BASED ON ACADEMIC ABILITY AND FINANCIAL AID MATRIX X THE FINANCIAL AD MATRIX IS BASED ON ACADEMIC ABILITY AND FINANCIAL AID MATRIX X THE FINANCIAL AD MATRIX IS BASED ON ACADEMIC ABILITY AND FINANCIAL AID MATRIX X THE FINANCIAL AND MATRIX IS BASED ON ACADEMIC ABILITY AND FINANCIAL AID MATRIX CLL BASED ON ROTH HIGH SCHOOL ALL FUNDS AS STUDENTS BASED AND AND ALL AD AND ASSOCIATION AS STUDENT BANK AND AND ALL ADD AS SELECTED AND AND ASSOCIATION AS STUDENTS BANK AND									

Additional Data

Software ID: Software Version:

EIN: 25-0981156

Name: WESTMINSTER COLLEGE

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region			
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS	N/A	15,083,955			
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0		GREECE TRAVEL COURSE	75,984			
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	STUDENT TRAVEL	750			

Form 990 Schedule F Part I - Activities Outside The United States												
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region							
CENTRAL AMERICA AND THE CARIBBEAN	0	0		STUDENT ATHLETES AND COACHES (MENS BASKETBALL AND WOMENS VOLLEYBALL) TRAVELING TO BELIZE	41,252							
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	FACULTY/STAFF TRAVELING OUTSIDE OF THE US	13,005							
NORTH AMERICA	0	0		FACULTY/STAFF TRAVELING OUTSIDE OF THE US INCLUDING STUDENTS ATTENDING CONFERENCE	2,433							

Form 990 Schedule F	Part I - Activi	<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
NORTH AMERICA	0	0	PROGRAM SERVICES	FACULTY/STAFF TRAVELING OUTSIDE OF THE US INCLUDING STUDENTS ATTENDING CONFERENCE	2,220
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	FAULTY/STAFF TRAVELING OUTSIDE OF THE US	1,500

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493097000266 Schedule I OMB No 1545-0047 Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization WESTMINSTER COLLEGE 25-0981156 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

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) ACADEMIC AND FINANCIAL ASSISTANCE/SCHOLARSHIPS	1114	20,471,241	0	N/A	N/A

Return Reference

Explanation

PART I, LINE 2

WESTMINSTER COLLEGE FINANCIAL AID AWARDING PROCESS FINANCIAL AID IS AWARDED TO INCOMING FIRST YEAR STUDENTS ON THE BASIS OF THE RESULTS OF THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) AND BY THE USE OF A FINANCIAL AID MATRIX THE FINANCIAL AID MATRIX IS BASED ON ACADEMIC ABILITY AND FINANCIAL NEED WITHIN EACH CELL OF THE MATRIX THERE IS A FLOOR AND A CEILING RANGE USED FOR THE AWARDING OF INSTITUTIONAL FUNDS A STUDENT IS PLACED INTO A FINANCIAL AID MATRIX CELL BASED ON BOTH HIGH SCHOOL GRADE POINT AVERAGE AND SAT AND/OR ACT SCORES THE AMOUNT A STUDENT IS AWARDED BETWEEN THE FLOOR AND CEILING VALUE IN THE CELL IS BASED ON FINANCIAL NEED AS DETERMINED BY THE FAFSA INSTITUTIONAL MERIT AWARDS (AWARDED BY ADMISSIONS) THESE ARE AWARDED TO STUDENTS REGARDLESS OF FINANCIAL NEED MERIT SCHOLARSHIPS (UNFUNDED AID) ACCEPTED FIRST YEAR STUDENTS ARE AWARDED A MERIT SCHOLARSHIP DETERMINED BY WHERE THEY FALL IN THE MATRIX BASED ON HIGH SCHOOL GRADE POINT AVERAGE AND SAT AND/OR ACT SCORES THE MERIT SCHOLARSHIP AWARD IS THE FLOOR VALUE FROM THE RESPECTIVE MATRIX CELL STUDENTS WHO FALL IN THE TOP 20% OF THE APPLICANT POOL MAY BE SELECTED BY THE ADMISSIONS STAFF AS A WESTMINSTER SCHOLAR SELECTED STUDENTS ARE GUARANTEED A MERIT AWARD WHICH IS THE FLOOR VALUE FROM THE MATRIX CELL THE WESTMINSTER SCHOLAR IS ALSO GIVEN AN OPPORTUNITY TO COMPETE FOR A LARGER FOUR YEAR AWARD THROUGH THE SCHOLARS COMPETITIONS HELD ON THE WESTMINSTER CAMPUS THIS COMPETITION HAS FACULTY INVOLVEMENT AND STUDENT ESSAYS THE LARGER AWARDS INCLUDE FULL TUITION PRESIDENTIAL SCHOLARSHIPS, VANCE SCHOLARSHIPS, LEMMON SCHOLARSHIPS AND TITAN SCHOLARSHIPS (WITH A RANGE OF VALUES) NOMINATED MERIT BASED SCHOLARSHIPS (UNFUNDED AID) THE NOMINATED SCHOLARSHIPS AVAILABLE TO INCOMING FIRST YEAR STUDENTS ARE 1) THE YOUNG PRESBYTERIAN SCHOLARSHIP -TO BE ELIGIBLE A STUDENT MUST BE A MEMBER OF THE PRESBYTERIAN CHURCH USA, BE NOMINATED BY HIS/HER CHURCH AND PRESENT A MINIMUM GPA OF 3 5 2) JERB MILLER SCHOLARSHIP -TO BE ELIGIBLE A STUDENT MUST BE NOMINATED BY AN EDUCATOR WHO IS A WESTMINSTER COLLEGE GRADUATE AND PRESENT A MINIMUM GPA OF 3 5 3) LEGACY SCHOLARSHIP (FUNDED AID) -TO BE ELIGIBLE A STUDENT MUST PRESENT A CUMULATIVE GPA OF 3 0 AND HAVE A PARENT OR GRANDPARENT WHO EARNED A DEGREE FROM WESTMINSTER COLLEGE MERIT SCHOLARSHIPS ARE RENEWABLE FOR UP TO THREE YEARS THE STUDENT NEEDS TO MAINTAIN THE REQUIRED SCHOLARSHIP GPA (IF ONE EXISTS), OTHERWISE REMAIN IN GOOD ACADEMIC STANDING INSTITUTIONAL NEED BASED AWARDS (UNFUNDED AID) NEED BASED INSTITUTIONAL FINANCIAL AID IS AWARDED TO STUDENTS BASED ON THE RESULTS OF THE FAFSA AND THE DETERMINATION OF THE STUDENTS DEMONSTRATED NEED A STUDENT IS REQUIRED TO FILE A FAFSA FORM IN ORDER TO BE CONSIDERED FOR NEED BASED FINANCIAL AID THE RESULTS OF THE FAFSA DETERMINE THE STUDENT'S EXPECTED FAMILY CONTRIBUTION (EFC) THE CALCULATION USED TO DETERMINE THE STUDENT'S FINANCIAL NEED IS DIRECT COST OF ATTENDANCE* - EFC = STUDENT'S NEED (*DIRECT COST OF ATTENDANCE TUITION & FEES, ROOM & BOARD FOR RESIDENT AND OFF CAMPUS STUDENTS, TUITION & FEES ONLY FOR COMMUTERS) THE CALCULATED STUDENT NEED IS REDUCED BY FEDERAL NEED BASED FINANCIAL AID STATE NEED BASED FINANCIAL AID FUNDED GIFT AID INSTITUTIONAL MERIT THE REMAINING UNMET NEED, AFTER THE REDUCTIONS, IS MET BY USING INSTITUTIONAL NEED BASED GIFT AID WITH THE TOTAL OF INSTITUTIONAL AID BEING CAPPED BY THE CEILING VALUE FROM THE MATRIX CELL FOR THE STUDENT INSTITUTIONAL NEED BASED AWARDS ARE USUALLY RENEWED PROVIDED THAT THE STUDENT CONTINUES TO DEMONSTRATE FINANCIAL NEED FINANCIAL AID PACKAGING STUDENTS RECEIVE A FINANCIAL AID PACKAGE ANNUALLY WHICH INCLUDES ALL SOURCES OF FINANCIAL AID THAT THEY ARE ELIGIBLE AND QUALIFY FOR AWARDS THAT MAY BE INCLUDED IN A FINANCIAL AID PACKAGE ARE FEDERAL GRANTS (PELL AND SEOG) STATE GRANTS INSTITUTIONAL MERIT AWARDS INSTITUTIONAL NEED BASED AWARDS INSTITUTIONAL ENDOWED AWARDS FEDERAL LOANS (STAFFORD AND PERKINS) FEDERAL WORK STUDY THE COLLEGE CONTROLLER DETERMINES THE AMOUNT AVAILABLE IN ALL INSTITUTIONAL FUNDS ON AN ANNUAL BASIS WESTMINSTER COLLEGE UNFUNDED AND FUNDED AID IS PORTABLE FOR OFF-CAMPUS STUDIES IF THE PROGRAM IS REQUIRED BY THE STUDENT'S MAJOR THESE FUNDS ARE PORTABLE UP TO THE LESS OF 1)THE TUITION OF THE OFF CAMPUS STUDIES PROGRAM, OR 2) THE LIMIT OF A STUDENT'S WESTMINSTER COLLEGE AWARDED AID WHERE A PARTICULAR STUDY-ABROAD PROGRAM'S TUITION IS GREATER THAN THE WESTMINSTER COLLEGE AID THE STUDENT IS ELIGIBLE TO RECEIVE FOR THE SAME PERIOD OF ENROLLMENT BEFORE THESE FUNDS WILL BE PAID TO THE STUDY ABROAD PROGRAM ON THE STUDENT'S BEHALF, THE STUDENT IS REQUIRED TO PROVIDE A COPY OF THE INVOICE FOR THE STUDY ABROAD PROGRAM, WITH A SEPARATE LINE ITEM FOR TUITION STUDENTS ARE REQUIRED TO HAVE THE INSTITUTION PROVIDE A COPY OF THE ACADEMIC TRANSCRIPTS FOR THE TERM(S) ABROAD TO WESTMINSTER COLLEGE WESTMINSTER COLLEGES FINANCIAL AID OFFICE USES THE FINANCIAL AID MANAGEMENT SYSTEM POWERFAIDS TO MAINTAIN FINANCIAL AID AWARD RECORDS AND AMOUNTS

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DLN: 93493097000266

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

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

Open to Public Inspection

Name of the organization WESTMINSTER COLLEGE

Employer identification number

25-0981156

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

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

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

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

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	incentive reportable		benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 RICHARD H DORMAN, PRESIDENT	(i) (ii)	247,869 0	0	22,514 0	54,102 0	35,190 0	359,675 0	0
2 KENNETH J ROMIG, TREASURER/VP FOR FINANCE	(i) (ii)	158,782 0	0	12,638 0	12,446 0	18,796 0	202,662	0
3 JANE WOOD, VICE PRESIDENT FOR ACADEMIC AFFAIRS	(i) (ii)	171,993 0	0	90	12,750 0	12,391 0	197,224 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

Miso complete tins pare for any dadien	onar mormación
Return Reference	Explanation
PART I, LINE 1A	HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE FOR THE CONVENIENCE OF THE COLLEGE, THE PRESIDENT OCCUPIES THE RESIDENCE PROVIDED (MACK MANSE) BY THE COLLEGE IN ACCORDANCE WITH HIS EMPLOYMENT AGREEMENT PERSONAL SERVICES (E.G., CLEANING SERVICES) THE COLLEGE MANSE IS THE PROPERTY OF WESTMINSTER, THEREFORE IT IS MAINTAINED BY WESTMINSTER'S PHYSICAL PLANT DEPARTMENT CLUB MEMBERSHIPS IN ORDER THAT THE PRESIDENT MAY ENTERTAIN POTENTIAL DONORS AND OTHER BUSINESS ASSOCIATES OF THE COLLEGE, THE COLLEGE PAYS OR REIMBURSES THE PRESIDENT FOR, THE PERIODIC DUES FOR MEMBERSHIP IN THE DUQUESNE CLUB, THE NEW CASTLE COUNTRY CLUB, AND THE AVALON COUNTRY CLUB DIRECT EXPENSES FOR UTILIZATION OF THE CLUBS IS THE PRESIDENT'S RESPONSIBILITY, EXCEPT WHEN ATTRIBUTABLE TO COLLEGE BUSINESS
PART I, LINE 4B	RICHARD H DORMAN \$35,000
FORM 990, SCHEDULE J, PART II	WESTMINSTER COLLEGE ACCOUNTED FOR THE PERSONAL USE OF VEHICLE ON BEHALF OF RICHARD H DORMAN ON HIS 2014 FORM W-2 THE AMOUNT OF THE PERSONAL USE OF THE VEHICLE WAS \$1,054 FOR THE 2014 CALENDAR YEAR

Schedule J (Form 990) 2014

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DLN: 93493097000266

2014

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

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

Open to Public **Inspection**

Nam	e of the organization									Emp	oloyer id	entifica	tion num	ber																	
WES	STMINSTER COLLEGE									25-	09811	56																			
Pa	Bond Issues																														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price (f)		te issued (e) Issue price (f) Description of purpo	sue price (f) D		(e) Issue price ((e) Issue price (f)		(e) Issue price (f) D		(e) Issue price (f) Description of p		(f) Description of purpose		(f) Description of purpose		(f) Description of purpose		(f) Description of purpos		(g) De	feased	ed (h) O n behalf of issuer		(i) Pool financing	
									Yes	No	Yes	No	Yes	No																	
A	NEW WILMINGTON MUNICIPAL AUTHORITY- SERIES 2007	25-1739535	64920RAS2	06-27-2007	17,1	102,753	SEE	SEE PART V			×		X		X																
В	NEW WILMINGTON MUNICIPAL AUTHORITY- SERIES 2011	25-1739535		04-28-2011	3,6	000,000	SEE	SEE PART V		PART V		E PART V		PART V			Х		Х		X										
Pa	rt III Proceeds			•	•																										
						A		E	3		С		D																		
1	A mount of bonds retired																														
	A mount of bonds legally defea	sed																													
3	Total proceeds of issue					17,102,																									
4	Gross proceeds in reserve fun					1,301,	944																								
_5	Capitalized interest from proc																														
6	Proceeds in refunding escrows					12,302,716																									
7_	Issuance costs from proceeds					207,525 41,000																									
8	Credit enhancement from proc				281,203																										
9	Working capital expenditures	from proceeds																													
10	Capital expenditures from pro	ceeds			3,009,365 2,959,000		2,959,000																								
11	Other spent proceeds																														
12	Other unspent proceeds																														
13	Year of substantial completion	า			20	009		2011																							
					Yes	No		Yes	No	Yes	N	ю	Yes	\bot	No																
14	Were the bonds issued as part	t of a current refundır	ng issue?		х				x																						
15	Were the bonds issued as part of an advance refunding issue?								Х																						
16	Has the final allocation of proceeds been made?							Х																							
17								Х																							
Pa	rt IIII Private Business U	lse				•			<u> </u>			<u>'</u>																			
						A			3		Ç			D																	
_	Man the summer to the second			C	Yes	No	-+	Yes	No	Yes	N	0	Yes	+	No																
Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?						×			х																						

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

financed property?

Χ

Sche	dule K (Form 990) 2014									Page 2	
Par	Private Business Use (Continued)						_				_
				4		В		С		D	_
		Ļ	Yes	No	Yes	No	Yes	No	Yes	No	_
3a	Are there any management or service contracts that may result in private of bond-financed property?			×		×					
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?										
С	Are there any research agreements that may result in private business us financed property?	e of bond-		Х		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										
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anoth 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5										
7	Does the bond issue meet the private security or payment test?			Х		Х					
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a 501(c)(3) organization since the bounds sued?			Х		х					-
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		•		•		•		•	
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections									_
9	Has the organization established written procedures to ensure that all non bonds of the issue are remediated in accordance with the requirements un Regulations sections 1 141-12 and 1 145-2?		Х		х						_
Par	t IV Arbitrage										
		Α			В		С		D		
		Yes	No	Yes	No	Y	es	No	Yes	No	
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		х		Х						
2	If "No" to line 1, did the following apply?										
а	Rebate not due yet?		X	X							
b	Exception to rebate?		Х	Х							
С	No rebate due?	Х			Х						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed				•	•	•	•			
3	Is the bond issue a variable rate issue?		Х	Х							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х						
b	Name of provider										
С	Term of hedge										
d	Was the hedge superintegrated?										
e	Was the hedge terminated?										_
_											

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

Return Reference

	Til Bitting (Continued)								
		Α	АВ		С		D		
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b	Name of provider								
C	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		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?	Х		x					

Part V Procedures To Undertake Corrective Action

	Α		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 self-remediation is not available under applicable regulations?	Х		X					

Part VI	Supplemental Info	ormation. Provide additiona	I information for respoi	nses to questions on S	Schedule K (see instructions).

Explanation DATE REBATE COMPUTATION ISSUER NAME NEW WILMINGTON MUNICIPAL AUTHORITY-SERIES 2007 DATE THE REBATE COMPUTATION WAS PERFORMED 05/01/2015 PERFORMED

Return Reference	Explanation
SCHEDULE K SUPPLENTAL INFORMATION	(A) PURPOSE (I) THE ADVANCE REFUNDING OF THE AUTHORITY'S COLLEGE REVENUE BONDS (WESTMINSTER COLLEGE) SERIES 1998 - THE PROCEEDS OF WHICH WERE USED TO FINANCE INSTALLATION OF A CAMPUS DATA NETWORK, INSTALLATION OF A SATELLITE AND VIDEO RESOURCES, UPGRADING TELEPHONE CAPABILITIES, AND ELECTRICAL REFURBISHMENT OF THE COLLEGE'S RESIDENCE HALLS, (II) THE CURRENT REFUNDING OF THE AUTHORITY'S WESTMINSTER COLLEGE NOTE, SERIES OF 2006, THE PROCEEDS OF WHICH WERE USED TO FINANCE THE CONSTRUCTION AND EQUIPPING OF STUDENT HOUSING FACILITIES LOCATED ON THE COLLEGE'S CAMPUS, (III) THE RENOVATION OF APPROXIMATELY EIGHT STUDENT RESIDENCE HALLS AND MCGILL LIBRARY, IMPROVEMENTS TO THE ATHLETIC FIELD AND CERTAIN MISCELLANEOUS CAPITAL EXPENDITURES, (IV) THE FUNDING OF A DEBT SERVICE RESERVE FUND, AND (V) THE PAYMENT OF THE COSTS OF ISSUING AND INSURING THE BONDS (B) PURPOSE TO FUND THE CONSTRUCTION OF STUDENT HOUSING

DLN: 93493097000266

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Transactions with Interested Persons

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

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

WESTMINSTER COLLEGE 25-0981156 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only) Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes No 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (b) Relationship (f)Balance (a) Name of (c) (d) Loan to (e)Original (g) In (h) (i)Written interested with organization Purpose of or from the principal due default? Approved agreement? organization? by board or person loan amount committee? Τо From Yes Yes No No Yes No Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (c) A mount of assistance (a) Name of interested (b) Relationship between (d) Type of assistance (e) Purpose of assistance interested person and the person organization (1)20,300 SCHOLARSHIP EDUCATIONAL

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.										
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	zation's					
				Yes	No					

Part V	Supplemental Inform	upplemental Information						
	Provide additional information for responses to questions on Schedule L (see instructions)							
	Return Reference	Explanation						

Schedule L (Form 990 or 990-EZ) 2014

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DLN: 93493097000266

OMB No 1545-0047

Inspection

SCHEDULE M (Form 990)

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

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

Noncash Contributions

Department of the Treasury Internal Revenue Service

Name of the organization WESTMINSTER COLLEGE

Employer identification number

				25	-0981156			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of o noncash contri		_	nts
1	Art—Works of art	X	1					
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Х		6.5	FAIR MARKET V	ALUE		
5	Clothing and household							
_	goods				-			
	Boats and planes				-			
	Intellectual property							
	Securities—Publicly traded .	X	14	99 510	FAIR MARKET V	ΔΙΙΙΕ		
	Securities—Closely held stock .		- 1	33,310	TATIOTA AND THE TOTAL AND THE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	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							
22	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other►(NT TICKETS)	X	6	467	FMV			
26	O ther ▶()							
27	O ther ▶()							
	O ther ▶ ()				<u> </u>			
29	Number of Forms 8283 received by the for which the organization completed F				9			0
							Yes	No
30a	During the year, did the organization							
	it must hold for at least three years fr			•	i to be used			
	for exempt purposes for the entire ho		?			30a		No
b	If "Yes," describe the arrangement in	Part II						
31	Does the organization have a gift acc			•		31	Yes	
32a	Does the organization hire or use thir contributions?	d parties or	related organizations to s	olicit, process, or sell no	ncash • • •	32a		No
b	If "Yes," describe in Part II							
	If the organization did not report an a	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			
	describe in Part II		, , , , , , , , , , , , , , , , , , ,	. (. ,	,			

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

number of items received, of a combination of both. Also complete this part for any additional information							
Return Reference	Explanation						
	THE COLLEGE OWNS A NUMBER OF PIECES OF ART AND HISTORIC TREASURES, NONE OF WHICH ARE RECORDED IN THE FINANCIAL STATEMENTS THESE ITEMS HAVE BEEN GIVEN TO THE COLLEGE OVER A NUMBER OF YEARS, ARE GENERALLY DISPLAYED IN VARIOUS LOCATIONS AROUND CAMPUS AND ARE INSURED THE VALUE OF NON-CASH CONTRIBUTIONS IS NOT DETERMINED BY THE COLLEGE AND NO GIFT CREDIT IS ISSUED TO THE DONOR IN ORDER TO RECEIVE GIFT CREDIT, A DONOR MUST HAVE THE ITEM APPRAISED BY AN INDEPENDENT OUTSIDE APPRAISER THIS PROCESS DOES NOT APPLY TO THE RECEIPT OF A PUBLICLY TRADED STOCK GIFT WHEN WESTMINSTER COLLEGE RECEIVES A STOCK GIFT, THE GIFT IS VALUED AT THE AVERAGE OF THE STOCK'S HIGH AND LOW TRADING PRICE, AS INDICATED IN THE WALL STREET JOURNAL, ON THE DATE OF TRANSFER TO THE COLLEGE THIS METHOD PROVIDES AN OBJECTIVE DETERMINATION OF THE VALUE OF THE GIFT						

Schedule M (Form 990) (2014)

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OMB No 1545-0047

2014

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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
WESTMINSTER COLLEGE

Employer identification number
25-0981156

Return Reference	Explanation
FORM 990, PART III, LINE 3	WESTMINSTER COLLEGE IS NO LONGER PARTNERED WITH THE K-12 TEACHERS ALLIANCE (KTA) THIS PARTNERSHIP WAS USED TO REACH A LARGER POPULATION OF STUDENTS BY OFFERING OFF-CAMPUS COHORTS AT VARIOUS LOCATIONS THE GRADUATE SCHOOL AT WESTMINSTER COLLEGE IS NOW HANDLING EVERYTHING INTERNALLY TWO NEW POSITIONS WERE CREATED TO ASSIST IN THIS TRANSITION

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE EXECUTIVE COMMITTEE SHALL BE INVESTED WITH ALL THE POWERS OF AUTHORITY OF THE BOARD OF TRUSTEES WHEN THE BOARD IS NOT IN SESSION EXCEPT AS MAY OTHERWISE BE PROVIDED IN THESE BY LAWS, PROVIDED THAT THE EXECUTIVE COMMITTEE SHALL HAVE NO AUTHORITY TO RESCIND OR CANCEL ANY RESOLUTION THERETOFORE ADOPTED BY THE BOARD OF TRUSTEES RELATING TO THE MEMBERSHIP, POWERS OR DUTIES OF THE EXECUTIVE COMMITTEE OR TO AMEND THE ARTICLES OF INCORPORATION THE EXECUTIVE COMMITTEE DID NOT EXERCISE THIS AUTHORITY DURING THE FISCAL YEAR

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	CHANGES TO BY-LAWS SECTION 5 NO PERSON SHALL BE ELIGIBLE FOR RE-ELECTION AS A TRUSTEE AFTER SERVING TWO (2) CONSECUTIVE TERMS (REGARDLESS OF THE LENGTH OF THE INITIAL TERM) UNTIL AFTER ONE YEAR'S ABSENCE FROM THE BOARD AN EXCEPTION TO THIS RULE SHALL BE FOR THE CHAIR AND VICE CHAIR, WHOSE YEARS OF SERVICE WHILE CHAIR OR VICE CHAIR SHALL NOT BE COUNTED TOWARD ONE'S TERM OF SERVICE AS PRESCRIBED IN ARTICLE II, SECTION 3 SECTION 1 THERE SHALL BE THE STANDING COMMITTEES SPECIFIED IN THIS ARTICLE. IN ADDITION, THERE MAY BE SUCH OTHER SPECIAL OR AD HOC COMMITTEES OR SUBCOMMITTEES OF STANDING COMMITTEES AS THE BOARD OF TRUSTEES MAY ESTABLISH FROM TIME TO TIME FOR THE DISCHARGE OF PARTICULAR DUTIES. THE CHAIR SHALL BE A VOTING MEMBER OF EACH COMMITTEE ESTABLISHED BY OR UNDER THE AUTHORITY OF THIS ARTICLE. EXCEPT AS IS OTHERWISE PROVIDED IN SECTION 2 BELOW, THE CHAIR AND VICE CHAIR OF EACH STANDING OR OTHER COMMITTEE SHALL BE ELECTED BY THE BOARD AT LEAST ANNUALLY AND ALL OTHER MEMBERS OF STANDING OR OTHER COMMITTEES SHALL BE APPOINTED BY THE BOARD CHAIR. THE CHAIR OF ANY COMMITTEE MAY INVITE SUCH OFFICERS, FACULTY MEMBERS, STAFF MEMBERS, STUDENTS OR OTHERS TO ATTEND AND PARTICIPATE IN THE MEETINGS OF THE COMMITTEE, WITHOUT A VOTE, AS THE CHAIR SHALL DESIRE TO ASSIST THE COMMITTEE IN THE PERFORMANCE OF ITS DUTIES IN EXCEPTIONAL CASES IN WHICH A COMMITTEE WOULD BENEFIT GREATLY IN FULFILLING ITS DUTIES (E.G., WHEN PARTICULAR EXPERTISE IS NEEDED), THE BOARD MAY, UPON THE RECOMMENDATION OF THE RELEVANT COMMITTEE CHAIR AND AS APPROVED BY THE GOVERNANCE COMMITTEE; ELECT A NON-TRUSTEE TO SERVE ON THE RELEVANT COMMITTEE (EXCEPTING THE EXECUTIVE AND GOVERNANCE COMMITTEES)

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE WESTMINSTER FINANCIAL MANAGEMENT TEAM REVIEWS THE FORM 990 AND SEEKS INPUT REGARDING THE SAME FROM THE PRESIDENT THE COLLEGE'S TRUSTEES ARE PROVIDED WITH ACCESS TO A SECURE WEBSITE WHERE THEY ARE ABLE TO REVIEW A DRAFT OF THE COLLEGE'S TAX RETURN FOR THE YEAR ENDED JUNE 30, 2015 THE COLLEGE'S TRUSTEES ARE INVITED TO PARTICIPATE IN A TELECONFERENCE WITH MEMBERS OF THE COLLEGE'S ADMINISTRATION WHO ARE RESPONSIBLE FOR PREPARING THE COLLEGE'S TAX RETURN DURING THE TELECONFERENCE, THE COLLEGE'S FINANCIAL ADMINISTRATORS REVIEW THE DRAFT OF THE TAX RETURN WEBSITE ACCESS TO A COMPLETE COPY OF THE FORM 990 IS PROVIDED TO THE TRUSTEES PRIOR TO THE FILING OF THE RETURN WITH THE INTERNAL REVENUE SERVICE

FORM 990, PART VI, SECTION B, LINE 12C THE COLLEGE HAS A FORMAL CONFLICT OF INTEREST POLICY EVERY TRUSTEE AND OFFICER ALONG WITH EMPLOYEES WHO MEET THE CRITERIA AS DEFINED EMPLOYEE AN EMPLOYEE OF THE COLLEGE WHO HAS AUTHORITY TO EXPEND COLLEGE FUNDS OR TO INCUR CONTRACTUAL LIABILITY ON BEHALF OF THE COLLEGE ARE REQUIRED TO ANNUALLY (1) REVIEW THE COLLEGE'S CONFLICT OF INTEREST POLICY, (2) DISCLOSE TO THE BEST OF HIS/HER KNOWLEDGE ANY BUSINESS, PERSONAL, FAMILY AND NOT-FOR-PROFIT RELATIONSHIPS THAT COULD REASONABLY GIVE RISE TO A CONFLICT OF INTEREST, (3) SUMMARIZE IN WRITING ANY POTENTIAL CONFLICT OF INTEREST AS MAY ALREADY EXIST, AND (4) ACKNOWLEDGE BY SIGNATURE ON A DISCLOSURE FORM THAT HE OR SHE ACTED IN ACCORDANCE WITH THE LETTER AND SPIRIT OF THE POLICY THE EMPLOYEE DISCLOSURE FORMS ARE SUBMITTED TO THE COLLEGE'S DIRECTOR OF HUMAN RESOURCES AND THE DISCLOSURE FORMS FOR TRUSTEES, OFFICERS AND KEY EMPLOYEES ARE SUBMITTED TO THE CHAIR OF THE COLLEGE'S FINANCE, AUDIT AND COMPLIANCE COMMITTEE. THE CHAIR OF THE BOARD OF TRUSTEES AND THE CHAIR OF THE FINANCE, AUDIT AND COMPLIANCE COMMITTEE ARE RESPONSIBLE FOR DETERMINING WHETHER OR NOT CERTAIN RELATIONSHIPS GIVE RISE TO CONFLICTS OF INTEREST THE CHAIR OF THE FINANCE, AUDIT AND COMPLIANCE COMMITTEE ARE RESPONSIBLE FOR DETERMINING WHETHER OR NOT CERTAIN RELATIONSHIPS GIVE RISE TO CONFLICTS OF INTEREST THE CHAIR OF THE FINANCE, AUDIT AND COMPLIANCE COMMITTEE OF THE BOARD OF TRUSTEES AND IALLY.	Return Reference	Explanation
110011207111101121	PART VI, SECTION B,	WHO MEET THE CRITERIA AS DEFINED EMPLOYEE AN EMPLOYEE OF THE COLLEGE WHO HAS AUTHORITY TO EXPEND COLLEGE FUNDS OR TO INCUR CONTRACTUAL LIABILITY ON BEHALF OF THE COLLEGE ARE REQUIRED TO ANNUALLY (1) REVIEW THE COLLEGE'S CONFLICT OF INTEREST POLICY, (2) DISCLOSE TO THE BEST OF HIS/HER KNOWLEDGE ANY BUSINESS, PERSONAL, FAMILY AND NOT-FOR-PROFIT RELATIONSHIPS THAT COULD REASONABLY GIVE RISE TO A CONFLICT OF INTEREST, (3) SUMMARIZE IN WRITING ANY POTENTIAL CONFLICT OF INTEREST AS MAY ALREADY EXIST, AND (4) ACKNOWLEDGE BY SIGNATURE ON A DISCLOSURE FORM THAT HE OR SHE ACTED IN ACCORDANCE WITH THE LETTER AND SPIRIT OF THE POLICY THE EMPLOYEE DISCLOSURE FORMS ARE SUBMITTED TO THE COLLEGE'S DIRECTOR OF HUMAN RESOURCES AND THE DISCLOSURE FORMS FOR TRUSTEES, OFFICERS AND KEY EMPLOYEES ARE SUBMITTED TO THE CHAIR OF THE COLLEGE'S FINANCE, AUDIT AND COMPLIANCE COMMITTEE. THE CHAIR OF THE BOARD OF TRUSTEES AND THE CHAIR OF THE FINANCE, AUDIT AND COMPLIANCE COMMITTEE ARE RESPONSIBLE FOR DETERMINING WHETHER OR NOT CERTAIN RELATIONSHIPS GIVE RISE TO CONFLICTS OF INTEREST. THE CHAIR OF THE FINANCE, AUDIT AND

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION FOR THE PRESIDENT OF THE COLLEGE WAS DETERMINED BY A SPECIALLY APPOINTED COMMITTEE OF THE BOARD OF TRUSTEES WHO WAS EMPOWERED BY THE BOARD OF TRUSTEES TO NEGOTIATE AN EMPLOY MENT CONTRACT WITH THE PRESIDENT. THE MEMBERS OF THE SPECIAL COMPENSATION COMMITTEE WERE INDEPENDENT, NONE WERE COMPENSATED BY THE COLLEGE, NOR DOES A COMPENSATION ARRANGEMENT EXIST BETWEEN THE COLLEGE, FAMILY MEMBERS OF THE COMPENSATION COMMITTEE OR ANY BUSINESS IN WHICH ANY OF THEIR FAMILY MEMBERS HAVE AN INTEREST. WHEN THE PRESIDENT'S EMPLOY MENT A GREEMENT WITH WESTMINSTER COLLEGE WAS RENEWED ON NOVEMBER 1, 2010, THE COMMITTEE REVIEWED THE COMPENSATION PAID TO THE PRESIDENTS OF THE 30 COLLEGES TO WHICH WESTMINSTER REGULARLY COMPARES ITSELF WITH RESPECT TO TUITION AND FEES, BNDOWMENT RETURNS AND OTHER METRICS. BASED ON THIS DATA, THE COMMITTEE WAS SATISFIED THAT THE COMPENSATION OFFERED TO DR. DORMAN REFLECTED THE FAIR MARKET VALUE FOR THE SERVICES TO BE RENDERED TO THE COLLEGE. THE AGREEMENT EXECUTED BETWEEN WESTMINSTER COLLEGE AND DR. DORMAN EXTENDED THE EMPLOY MENT OF DR. DORMAN TO SERVE THE COLLEGE PURSUANT TO TERMS AND CONDITIONS OF THE AGREEMENT AS PRESIDENT OF THE COLLEGE UNTIL JUNE 30, 2016. THE PRESIDENT'S BASE SALARY SHALL BE SUBJECT TO ANNUAL REVIEWS BY THE GOVERNANCE COMMITTEE OR ITS DESIGNEE, AND MAY BE INCREASED WITH THE APPROVAL OF THE EXECUTIVE COMMITTEE FOR KEY EMPLOYEES THE COLLEGE DETERMINES THE COMPENSATION FOR ITS KEY EMPLOYEES BASED ON THE COMPENSATION REPORTED ON FORM 990 FOR THE COLLEGE'S PEER INSTITUTIONS. THE COLLEGE HAS IDENTIFIED 30 PEER INSTITUTIONS THAT HAVE CHARACTERISTICS IN ADDITION, THE COLLEGE ALSO USES A COMPENSATION SURVEY OF HIGHER EDUCATION INSTITUTIONS WHICH PROVIDES A BROADER BASIS TO HELP ASSESS THE REASONABLENESS OF THE COMPENSATION OF THE COLLEGE'S KEY EMPLOYEES.

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST IN ADDITION, THE COLLEGE'S FINANCIAL STATEMENTS MAY BE VIEWED ON THE ELECTRONIC MUNICIPAL MARKET ACCESS WEBSITE AT HTTP://EMMA MSRB ORG/

Return Reference	Explanation
FORM 990, PART VII	THE FOLLOWING MEMBERS SERVE ON THE WESTMINSTER BOARD OF DIRECTORS AS ASSOCIATE TRUSTEES BUT HAVE NO VOTING RIGHTS TIMOTHY CUFF, KAREN CAMPMAN EMMETT, CHRISTIAN FRIDAY, PATRICK KRANTZ, MARIA MCTIGHE, KATHERINE ROBERTSON, BRET ZIMMERMAN THE FOLLOWING MEMBERS SERVE ON THE WESTMINSTER BOARD OF DIRECTORS AS TRUSTEES EMERITI BUT HAVE NO VOTING RIGHTS ROBERT BRUCE, LEONARD CARROLL, JAMES DEWAR, ROBERT GARDNER, GEORGE GREER, ANN HALDEMAN, GEORGE HERCHENROETHER, CAROLYN JONES, JOSEPH MACK, ROBERT PATTON, J FRED RENTZ, RICHARD WHITE, MARTHA WILE, DONALD CARDINAL WUERL

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGES IN UNRECOGNIZED PENSION BENEFIT PLAN COSTS -471,449

Return Referen	ice	Explanation
FORM 990, PART XII, QUI FINANCIAL STATEMENTS REPORTING	SAND	THE COLLEGE'S FINANCE, AUDIT AND COMPLIANCE COMMITTEE ASSUMES THE RESPONSIBLITY FOR OVERSIGHT OF THE AUDIT AND OF ITS FINANCIAL STATEMENTS AND ITS SELECTION OF THE INDEPENDENT AUDITORS THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

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Related Organizations and Unrelated Partnerships

201

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

► Attach to Form 990.

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Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

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

Name of the organization **Employer identification number** WESTMINSTER COLLEGE 25-0981156 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (c) (e) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity

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

or more related tax exempt organizations during the	tax yearr						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g Section (13) cor entil	512(b) ntrolled
						Yes	No
•							

Part III	Identification of Related Organizations Taxable a	s a Partne	rship	Complete i	f the organiz	ation ansv	wered "Ye	s" on Form	990, Part	IV, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.				·	-	
	(-)	/L- \	1-1	(4)	(-)	(6)	(-)	71-3	(:)	(2)	Т

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h))	(i)	(j)	_	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Genera	al or	Percentage
related organization	1 '	domicile	controlling	ıncome(related,	total income	end-of-year	allocat	:ions?	amount in box	manag	ging	ownership
	1 '	(state or	entity	unrelated,	·	assets	İ		20 of	partne	er?	,
	1 '	foreign	i	excluded from		!	İ		Schedule K-1	1		
	1 '	country)	i	tax under		!	İ		(Form 1065)	1		
	1 '	1 1	i	sections 512-		!	İ		'	1		
1	1 '	1 1	i	514)	·	,			. '	<u> </u>	\longrightarrow	
	<u> </u>	1	<u> </u>				Yes	No		Yes	No	
1			i									
1												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(1 contro entit	1 512 13) olled
							Yes	No
(1) INTERESTS IN TRUSTS (8)	PHILANTHROPY	PA	N/A	T				No

Part V Transactions With Related Organizations Complete if the organization answer	red "Yes" on Forn	n 990, Part IV, line	e 34, 35b, or 36.	1 4	ge J
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more rel	ated organizations li	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
b Gift, grant, or capital contribution to related organization(s)			1b		No
c Gift, grant, or capital contribution from related organization(s)			1c		No
d Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Dividends from related organization(s)			1f		No
g Sale of assets to related organization(s)			1 g		No
h Purchase of assets from related organization(s)			1h		No
i Exchange of assets with related organization(s)			1i		No
j Lease of facilities, equipment, or other assets to related organization(s)			<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)			1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)			11		No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)			1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n		No
• Sharing of paid employees with related organization(s)			10		No
Reimbursement paid to related organization(s) for expenses			1p		No
q Reimbursement paid by related organization(s) for expenses			1q		No
r Other transfer of cash or property to related organization(s)			1r		No
s Other transfer of cash or property from related organization(s)			1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	ınvolved	ĺ

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

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

1 <u> </u>																	
(a) Name, address, and EIN of entity	(b) Primary activity	domicile (state or foreign	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	so 50 organ		(f) Share of total income	(g) Share of end-of-year assets	e of Disproprtionate -year allocations?		Disproprtionate		of Disproprtionate rear allocations?	7	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
	<u> </u>	<u> </u>	514)	Yes	No	1	<u> </u>	Yes	No	<u> </u>	Yes	No					
									\Box	1							

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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