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### **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047 2014

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

Open to Public

			ue Service	▶ Information about Form 990 and its instructions is at www.irs.gov/form9	90	Inspection	
	A	For the	2014 cale	ndar year, or tax year beginning 07/01 , 2014, and ending (	06/30	, 20 15	
	В	Check if	applicable	C Name of organization WHEELING JESUIT UNIVERSITY INC	D Employer identification number		
		Address	change	Doing business as	1	55-0394213	
	_	Name ch	•	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telepho	ne number	
		Initial ret	-	316 Washington Ave		304-243-2000	
	_		n/terminated	City or town, state or province, country, and ZIP or foreign postal code	$\overline{}$		
	_	Amende		Wheeling, WV, 26003	<b>G</b> Gross re	eceipts \$ 62,650,909	
						subordinates? Yes No	
		пррисац	on pending ,			s included? Yes No	
		Taysever	npt status			ee instructions)	
:		Website			p exemption		
7				✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation 1954	<del> </del>	of legal domicile. WV	
.) -==>		art I	Summ		, III Glato	or regar derritation gray	
MΛΥ		1		scribe the organization's mission or most significant activities: The university is	a Catholic	liboral arte university	
<	9	•	_	in 1954. The purpose of the Jesuit education is to provide students who can contribute		***************************************	
>	nc			in 1934. The purpose of the Desait education is to provide students who can continuut	: intemgen	uy to trie wellare of	
<b>)</b>	Governance	^	society.	is box ▶☐ if the organization discontinued its operations or disposed of more that	n 25% of	ita not nacota	
2	ove				1 - 1		
ξ				of voting members of the governing body (Part VI, line 1a)	<del></del>	27	
•	Activities &			of independent voting members of the governing body (Part VI, line 1b)	· 1	26	
	vitie			nber of individuals employed in calendar year 2014 (Part V, line 2a)	<u> </u>	894	
	cti			nber of volunteers (estimate if necessary)	. 6	2	
	⋖	i e		elated business revenue from Part VIII, column (C), line 12	. 7a	37,687	
	_	b	Net unrei	ated business taxable income from Form 990-T, line 34	. 7b		
		_					
	e n	8		ions and grants (Part VIII, line 1h)	6,898,385	6,386,036	
	Revenue	9			10,180,131	39,253,653	
	Re	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)	487,000	734,962	
\$	-	11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	489,044	305,236	
2016	_	12			18,054,560	46,679,887	
ယ					13,174,295	14,043,116	
<b>©</b>		14		paid to or for members (Part IX, column (A), line 4)	0	0	
	es	15			20,038,067	17,835,088	
APR	Expenses	i e		nal fundraising fees (Part IX, column (A), line 11e)	0	0	
	X			draising expenses (Part IX, column (D), line 25) 704.833			
	-	17	Other exp	penses (Part IX, column (A), lines 11a-11d, RE24E VED	<u>16,637,</u> 379	15,610,111	
₩ č3		18	Total exp		19,849,741	47,488,315	
2:3		19	Revenue		-1,795,181	-808,428	
7,5	sets or					End of Year	
٠; =	Sset	20			59,930,895	68,380,120	
5	Net As Fund Ba				16,011,909	45,764,457	
				s or fund balances. Subtract line 21 from line 20	23,918,986	22,615,663	
		irt II		ure Block			
				ry, I declare that I have examined this return, including accompanying schedules and statements, and to ete. Declaration of preparer (other than officer) is based on all information of which preparer has any know		ny knowledge and belief, it is	
			T k	The Declaration of prepared futfor trial officery is based on all morniation of which prepared has any whole		· · · · · · · · · · · · · · · · · · ·	
	c:-		_	ature of officer			
	Sig		Sign	Date			
	He	re	Eug				
				or print name and title		DTM	
	Pa	id	Print/Tyl	pe preparer's name Preparer's signature Date	Check [		
	Pre	pare	r		self-emp	ployed	
		e Onl		m's EIN ▶			
			Firm's a		none no		
	May	/ the IP	S discuss	s this return with the preparer shown above? (see instructions)		🔲 Yes 🗌 No	

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2014)

_	(2014)	Page 2
Part		
	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
1	Briefly describe the organization's mission.  The University is a Catholic liberal arts university founded in 1954, the purpose of the Jesuit education is to provide students.	who
	can contribute intelligently to the welfare of society	1110
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	☑ No
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?	☑ No
	If "Yes," describe these changes on Schedule O.	<b>▼ 140</b>
4	Describe the organization's program service accomplishments for each of its three largest program services, as meas expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	ured by others,
4a	(Code: ) (Expenses \$ 38,665,219 including grants of \$ 14,043,116) (Revenue \$ 44,881,518	)
	Education, General/other: Postsecondary Education: Wheeling Jesuit is a liberal arts university. The purpose is to produce	·
	students who can contribute intelligently to the welfare of society.	
		· <b></b>
		·
4b	(Code: ) (Expenses \$ 1,729,999 including grants of \$ 0 ) (Revenue \$ 1,798,369	)
	Postsecondary education Research: Wheeling Jesuit University received federal dollars for the National Technology Research	
	Center, the Center for Educational Technology Transfer Center and faculty research.	
		<b></b>
		<del>-</del>
		·
		,
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$	.)

Part	V Checklist of Required Schedules			Page 3
			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	✓	
2 3	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	2	✓	
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	3		<b>√</b>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<b>√</b>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	<b>√</b>	
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	<b>✓</b>	
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		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	1	
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	1	<b> </b>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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	:	✓
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		1
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		1
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		1
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		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Part	Checklist of Required Schedules (continued)			<u>, , , , , , , , , , , , , , , , , , , </u>
1			Yes	No
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		1
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	1	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	1	
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	1	
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
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		1
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		1
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		1
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):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		✓ ✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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_		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		<b>✓</b>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>			,
38	Part VI	37	<b>✓</b>	<b>√</b>
				Ь.

Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			. $\sqcap$
	Official Contract Con		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   124			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	<b>√</b>	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
b	Statements, filed for the calendar year ending with or within the year covered by this return  2a 894  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		w. >
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		**	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a `	<b>7</b> _	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	1	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶	Tu		<del>                                     </del>
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	Telena zv	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
b	organization solicit any contributions that were not tax deductible as charitable contributions?	_6a		<b>/</b>
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	***** -4	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>✓</b>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		-
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8	/	, e v mai
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	~	Ĭ
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			, ,
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] Section 501(c)(12) organizations. Enter:			Ì
''a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			[;
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
þ	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 140	Enter the amount of reserves on hand			
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓_

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See ins	struct	ions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		. 🗸
Secti	on 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 1a 27	] !		,
	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.		` `	
þ	Enter the number of voting members included in line 1a, above, who are independent . 1b 26	4 1		
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?		٠.	,
3	Did the organization delegate control over management duties customarily performed by or under the direct	2		-
3	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u>_</u>	1
4 5	Did the organization make any significant changes to its governing documents since the prior roll 950 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<b>V</b>
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		1
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		1
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		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	<u> </u>		
_	the year by the following:			ľ
а	The governing body?	8a	<b>1</b>	
b	Each committee with authority to act on behalf of the governing body?	8b	1	
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		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
44.	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		ļ
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	
b 400	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10-	· ", ·	264
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	<b>√</b>	<del> </del>
		120	<b>V</b>	_
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	<b>✓</b>	-
14	Did the organization have a written document retention and destruction policy?	14	<u> </u>	
15	Did the process for determining compensation of the following persons include a review and approval by		<u> </u>	ļ .
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	<b>\</b>	
b	Other officers or key employees of the organization	15b	1	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	****	<b>V</b>
b	,			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		*******	
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► wv			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	1 501(	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 int	erest	policy	, and
00	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 re-	cords:	<b>&gt;</b>	
	Steve Criniti. (304)243-2424			

Part VII	Compensation of Officers, Directors	, Trustees, Key Employees,	Highest Compensated Employees, and
<del></del>	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, and 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 no	r any relate	d org	aniz	atic	n c	ompe	nsa	ated any currer	t officer, directo	r, or trustee
					C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average hours per	(do not check more than one box, unless person is both an officer and a director/trustee)					n an tee)	Reportable compensation	Reportable compensation from related	Estimated amount of other
	week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
James Dissen	0									
Board Member	0	✓						0	0	0
Jane Straub Friday	0			_					1	
Board Member	0	✓				l		0	0	0
Thomas Gaunt SJ	0									
Board Member	0	✓			L.			0	0	0
Simon Hendry SJ	0									
Board Menber	0 _	✓						0	0	0
Adam Monks	0									
Board Member	0	1						0	0	0
Brian O' Donnell SJ	0									
Board Member	0	✓	_					0	0	. 0
James O' Malley	0									
Board Member	0	✓						0	0	. 0
James Smith	0									
Board Member	0	✓	L	_				0	0	0
Patricia Weitzel-O' Neill	0									
Board Member	0_	✓						0	0	0
James Will	0									
Board Member	0	✓					<u>l</u> .	0	0	0
Jessica Ybanez-Morano	0									
Board Member	0	✓	l					0	0	. 0
Robert Young	0									
Board Member	0	✓	L					0	0	0
Susan Donavon	0						_			
Board Member	0	✓						0	0	0
Carlos Jimenez	0									
Board Member	0	✓_	_		_	<u></u>		O	0	0

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

	<del></del>	Γ-			C)					
		ļ			etion			<b> </b>		<b>(5)</b>
(A)	(B)	(do not check more				re than one		(D)	(E)	(F)
Name and Title	Average hours per					is both or/trust		Reportable compensation	Reportable compensation from	Estimated amount of
	week (list any		7		_			from	related	other
	hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	필출	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	eg de	utio	ů,	mg	est o	Ĩ	(W-2/1099-MISC)	(44-2/1099-141130)	organization
	below dotted	우를	nal		ij	l <sup>e</sup> Si	1	ľ	i '	and related
	line)	ste	trus		ď	Pen	1			organizations
		0	tee			Highest compensated employee				
					Γ			† <del>-</del>		
Rudy Bilich	0	,				ĺ				
Board Member	00	<b>✓</b>			_		<u> </u>	0	0	0
William Bresnahan	0		ŀ							
Board Member	00	/	<u> </u>	<u> </u>	<u> </u>		_	0	0	0
Christopher Helmrath	0									
Board Member	0	✓	<u> </u>	_		ļ	<u> </u>	0	0	
Robert Knott	0		1		ĺ		ĺ	1		
Board Member	0	/	<u> </u>				_	0	0	0
James J Fleming SJ	40			1						
Board Member	0	1	_	1			_	0	0	0
Harry Geib SJ	0		1	İ						
Board Member	0	<b>/</b>			<u></u>	<u> </u>	_	0	0	0
Edward Schmitt	0				]	ļ	1	1	ļ	
Board Member	0	1		<u> </u>				0	0	0
George Schroer	0					1		1		
Board Member	0	✓	<u> </u>					0	0	0
Christopher Hearing	o			ĺ						
Board Member	0	1						0	0	0
Lawrence Bandi	0									
Board Member	0	✓						0	0	0
James Conroy	0									
Board Member	0	1	L				L	0	0	0
John Peck	0					}				
Board Member	0	✓	L		L			o	0	0
Richard Riley	0									
Board Member	0	1	]	ļ		]	]	o	o	O
Donald Kamınski	40									
VP of Human Resources	0	]		✓				100,161	o	17,963

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mplo	yees	s, aı	nd F	lighe	st C	ompensated E	mployees (	contin	ued)
-	•				(6	C)						
	(B)	(B) Position						(D)	(E)		(F)	
	Average					e than e		Reportable	Reportable	e	Estimated	
	hours per					is both or/trus		compensation	compensation		amount of	
		week (list any		_				<del>-</del>	from	related		other
		hours for related	호호	ıstıt	Officer	Key employee	프	Former	the organization	organizatio (W-2/1099-M		compensation from the
		organizations	5 g	<del>[</del>	۳ ا	푥	oye	1	(W-2/1099-MISC)	(11 23 1000 11	,	organization
		below dotted	익축	nal		ŏ	m Si					and related
		line)	Individual trustee or director	Institutional trustee		8	Pen					organizations
			(a)	tee			Highest compensated employee				İ	
						<u> </u>	8	├—				
	Phillips	40			1		1		100 407		o	19,956
-	Academics	40			<b>V</b>			-	106,497			
Eugen	e Griii Tinancial Officer	0			1				162,342		o	0
Sarah	Volle	40			Ť				102,342			
	Advancement	0			1				151,716		o	15,135
	Israngani	40			Ť	i			101,710			
Profes	V	0					✓		96,431		o	20,956
Craig F		40						•		_		
	or of Physical Therapy	0	1			1	✓		107,233		0	5,589
	ne Ohl-Gigliotti	40										
Dean o	f Student Development	0				L	✓		96,555		0	5,162
Rebeco	ca Forney	40										
Directo	or of Prof Graduate Studies	0			_		<b>/</b>	_	87,241		0	18,522
	na Abraham	40			1							
Profes	sor	0			ļ	-	/	ļ	81,761		0	21,072
			]								Ì	
					-	<del>                                     </del>				<u> </u>		
					1							
											-	
							i				İ	
1b	Sub-total		<u> </u>	•	•			<b></b>	989,937		0	124,355
	Total from continuation sheets to Part		n A					▶				
d	Total (add lines 1b and 1c)							▶	989,937		0	124,355
	Total number of individuals (including but							e) w	ho received m	ore than \$1	00,00	0 of
	reportable compensation from the organi	zation 🕨 5	ı								-	
												Yes No
	Did the organization list any former of							emp	oloyee, or high	est compe	nsate	P . / / /
	employee on line 1a? If "Yes," complete							•				3 🗸
	For any individual listed on line 1a, is the											
	organization and related organizations	greater the	an \$1	150,	,uuc	)7 [	t "Ye	s,"	complete Scr	edule J to	r suc	
	individual		• •	•			•	•				4 1
	Did any person listed on line 1a receive of									ration or inc	lividu	
	for services rendered to the organization	rii res, c	ompi	ete	SCI	ieai	ule J 1	ors	such person	· · · ·	• •	5 ✓
	n B. Independent Contractors					I II			41-44		- 640	20,000 -4
	Complete this table for your five highest compensation from the organization. Rep	•		•								
	year.	ort compe	115au	יו ווכ	Of ti	ie c	alenc	iai y	year ending wit	II OF WILLIII	iiie oi	yanızatıon s tax
	(A)								(B)	1		(C)
	Name and business add	ress							Description of s	ervices		Compensation
Parkhu	ırst Dining Services, PO Box 6440914, Pittsb	ourgh, PA 1	5264		-			Dir	ning Services			1,799,177
	n, 4375 Fair Lakes Ct, Fairfax, VA 22033								ftware Services			257,138
					150,724							
Tobey	Karg Service Agemcy, 4640 Campbell Run I	Road, Pittsb	urgh,	PΑ	152	05		Ma	intenance and i	epairs		157,779
	Total number of independent contractor							o th	nose listed abo	ove) who		
	received more than \$100,000 of compens	sation from	me o	rgar	ııza	เเดท			4			

Part	VIII	Statement of Revenue  Check if Schedule O contains a response or note to any line in this Part VIII									
		Check ii Schedule C	contains a res	ponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514			
nts nts	1a	Federated campaigns	s 1a	0				,			
irar	b	Membership dues .	1b	0							
s, G	С	Fundraising events .	1c	0			:				
ar /	d	Related organizations	i 1d	0							
s, G	е	Government grants (con		2,114,195				,			
ion r Si	f	All other contributions, g	ifts, grants,								
but		and similar amounts not inc	luded above 1f	4,271,841							
5 C	g	Noncash contributions include	ded in lines 1a-1f: \$	0							
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1	f	•	6,386,036	*					
				Business Code							
/eni	2a	Gross Tuition and fee	s	611310	34,504,488	34,504,488	0	0			
Rev	b	Auxiliary Enterprises		721000	4,363,024	4,363,024	0	0			
Program Service Revenue	c				.,,						
erv	d	•••••		<del> </del>							
m S	e										
gra	f	All other program ser	vice revenue .	<u> </u>	386,141	386,141	0	0			
Pro	g	Total. Add lines 2a-2		>	39,253,653		· · · · · · · · · · · · · · · · · · ·				
	3	Investment income	(including divid	ends, interest,			No. 1 and 1				
		and other similar amo	ounts)		357,750	357,750	o	o			
	4	Income from investmen	t of tax-exempt b	ond proceeds ►	0	0	0	0			
	5	Royalties			267,549	0	0	267,549			
		,	(i) Real	(II) Personal							
	6a	Gross rents	131,252	0				,			
	Ь	Less: rental expenses	93,565				,	,			
	С	Rental income or (loss)	37,687	<del>                                     </del>							
	d	Net rental income or			37,687	0	37,687	0			
	7a	Gross amount from sales of	(ı) Securities	(II) Other		<del>-</del>					
		assets other than inventory	16,254,669	0							
	b	Less: cost or other basis						,			
		and sales expenses .	15,877,457	· 0	,		,				
	С	Gain or (loss)	377,212	0							
	d	Net gain or (loss) .		▶	377,212	377,212	0	0			
								, !			
venue	8a	Gross income from fu	ındraising			`	, ,				
Ve		events (not including \$	0			y	~				
		of contributions reporte	ed on line 1c).		*	*					
ē		See Part IV, line 18 .	$\cdots$ a					,			
Other Re	b	Less: direct expenses	s <b>b</b>				4				
	С	Net income or (loss) f	rom fundraising	events . ►		, , , , , , , , , , , , , , , , , , ,					
	9a	Gross income from ga	aming activities.			*		`			
		See Part IV, line 19 .	a				₹	· • •			
		Less: direct expenses				د ب د مرسور <sub>و ال</sub> ور مرس		in was a real of			
	С	Net income or (loss) f		ivıtıes ▶							
	10a					, , ,	*	, ,			
		returns and allowance	_					î.			
	b	Less: cost of goods s			a shiisansiidaa aa oo aa	užena a sena ni e vo .	#1# TF1 . V %				
	<u> </u>	Net income or (loss) f		entory ▶							
		Miscellaneous R	Revenue	Business Code	amountation ( )	1 2000 000 000 000 000		**************************************			
	11a										
	b				_						
	C										
	d	All other revenue .					-1/				
	е	Total. Add lines 11a-			0			^			
	12	Total revenue. See in	nstructions	🕨	46,679,887	39,988,615	37,687	267,549			

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising expenses Do not include amounts reported on lines 6b, 7b, (A) Total expenses (B) Program service expenses Management and general expenses 8b. 9b. and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . . 14,043,116 14,043,116 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . 4 Benefits paid to or for members . . . . 0 Compensation of current officers, directors, trustees, and key employees . . . . . 989,937 469,221 369,000 151,716 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 10,116,790 2,352,433 306,135 12,775,358 7 Other salaries and wages 0 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 104,477 80,347 20,655 3,475 9 Other employee benefits . . . . . . . 2,202,019 566,091 95,239 2,863,349 10 Payroll taxes . . . . . . . . . 1,101,967 847,452 217,862 36,653 11 Fees for services (non-employees): a Management . . . . . . . 40,055 40,055 0 0 0 118,765 0 118,765 C Accounting . . . . . . . . 71.075 0 71.075 0 0 **d** Lobbying . . . . . . . 0 0 Professional fundraising services. See Part IV, line 17 0 0 Investment management fees . . . . . n 0 Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) . . . 3,209,135 2,553,165 619,615 36,355 12 Advertising and promotion . . . . . . 131,915 59,652 72,263 13 Office expenses . . . . . . 359,334 234,976 85,858 38.500 Information technology . . . . 391,794 14 746,578 354,784 0 15 Royalties . . . . . . . . . . 0 0 0 0 1,980,969 16 398.538 2,379,507 17 813,086 <u>70,8</u>15 729,438 12,833 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 0 0 0 19 Conferences, conventions, and meetings . 0 0 20 2,611,630 2,421,358 190,272 0 21 Payments to affiliates . . . . . . . O 0 0 2,191,476 22 Depreciation, depletion, and amortization . 2,191,476 0 0 23 349,791 332 349,459 0 Other expenses. Itemize expenses not covered 24 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.) Supplies а 271,863 269,132 1,668 1,063 h Repairs 404,305 370,135 33,381 789 Special Programs 252,085 101,634 147,582 2,869 Athletic Expenses 485,161 485,161 0 0 e All other expenses
Total functional expenses. Add lines 1 through 24e 1,174,350 884,061 271,083 19,206 25 47,488,315 40,395,218 6,388,264 704,833 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 following SOP 98-2 (ASC 958-720) . . . . .

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) Beginning of year End of year Cash—non-interest-bearing . . . . . . . . . . . . 1 1,670,912 968,892 2 2 Savings and temporary cash investments . . . . . . 3 Pledges and grants receivable, net . . . . 1,055,586 3 2,758,623 4 1,255,981 1,106,173 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 0 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . . . . . . O 6 0 Assets Notes and loans receivable, net . . . . . . 2,548,910 7 2,485,783 8 R Inventories for sale or use . . . . . . 0 0 9 Prepaid expenses and deferred charges 731,193 9 711,902 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 111,704,231 10b Less: accumulated depreciation . . . . 66,136,491 47,120,341 10c 45,567,740 Investments—publicly traded securities . . . 11 14,426,429 11 12.173.325 12 12 Investments—other securities. See Part IV, line 11 0 0 13 13 Investments—program-related. See Part IV, line 11. 0 0 14 14 0 0 15 Other assets. See Part IV, line 11 . . . . . . 15 1,823,563 1,905,662 16 16 Total assets. Add lines 1 through 15 (must equal line 34) . . 69,930,895 68,380,120 17 Accounts payable and accrued expenses . . . . . . 17 1,592,703 2,143,280 18 Grants payable . . . . . . . . . . . . . . . . . 0 18 0 Deferred revenue . . . . . . . . . 19 19 1,491,119 1,347,231 20 20 12,232,150 12,058,182 21 Escrow or custodial account liability. Complete Part IV of Schedule D. ol 21 0 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . 22 0 0 27,181,621 23 Secured mortgages and notes payable to unrelated third parties . . . 23 26,677,606 24 Unsecured notes and loans payable to unrelated third parties . . . 24 0 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 3,514,316 3,538,158 25 Total liabilities. Add lines 17 through 25 26 46,011,909 45,764,457 Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . . . . . . . . . . . 27 6,053,551 7,155,405 28 28 7,721,523 6,484,924 29 10,143,912 8,975,334 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . 32 33 23,918,986 33 22,615,663 34 Total liabilities and net assets/fund balances . . 69,930,895 34 68,380,120 Form **990** (2014)

Form	990	(2014)
		· ·

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Page 12

Par	XI Reconciliation of Net Assets					
	. Check if Schedule O contains a response or note to any line in this Part XI				. 🗆	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			9,887	
2	Total expenses (must equal Part IX, column (A), line 25)	2		47,48	8,315	
3	<del></del>					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		23,91	8,986	
5	Net unrealized gains (losses) on investments	5		-49	4,895	
6	Donated services and use of facilities	6			0	
7	Investment expenses	7			0	
8	Prior period adjustments	8			0	
9	Other changes in net assets or fund balances (explain in Schedule O)	9		_	0	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		22,61	5,663	
Part	XII Financial Statements and Reporting				_	
	Check if Schedule O contains a response or note to any line in this Part XII	•	<u> </u>	· · · ·		
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other	-1	_	1	1	
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	olain	in			
Δ-				x	.,	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were complete.				<b>✓</b>	
	reviewed on a separate basis, consolidated basis, or both:	JIIEG (	"			
	Separate basis Consolidated basis Both consolidated and separate basis				1	
h	Were the organization's financial statements audited by an independent accountant?		. 2b	1		
U	If "Yes," check a box below to indicate whether the financial statements for the year were audited.	d on		<del>  •</del>	74	
	separate basis, consolidated basis, or both:		~		` ,	
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersial	ht		اس با	
	of the audit, review, or compilation of its financial statements and selection of an independent account			1		
	If the organization changed either its oversight process or selection process during the tax year, ex			<del>  •</del>	,	
	Schedule O.	•				
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?		. За			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rgo th	ie			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b	✓		
			Fo	rm <b>990</b>	(2014)	

### **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

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

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

2014

OMB No 1545-0047

Open to Public Inspection

lame	of the organization					Employer identification	number		
WHE	WHEELING JESUIT UNIVERSITY INC 55-0394213								
	t I Reason for Public Cha						ons		
The c 1 2	- 高								
3 4									
5	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)								
6 7									
9									
10 11	☐ An organization organized and ☐ An organization organized and one or more publicly supported the box in lines 11a through 11	operated exclusi d organizations d	vely for the benefit of, escribed in section 50	to perfor <b>09(a)(1)</b> o	m the fun r section	ctions of, or to carry 509(a)(2). See sect	<b>ion 509(a)(3).</b> Check		
а	☐ Type I. A supporting organization(sorganization. You must contain the supported organization. You must contain the support of the supp	) the power to re	egularly appoint or ele						
b	☐ Type II. A supporting organic control or management of the organization(s). You must control to the organization organization organization organization organization.	e supporting org	janization vested in th						
C	Type III functionally integra its supported organization(s)						y integrated with,		
d	☐ Type III non-functionally in that is not functionally integr requirement (see instructions	ated. The organi	zation generally must	satisfy a	distributi	on requirement and			
е	Check this box if the organiz functionally integrated, or Ty						I, Type III		
f g	Enter the number of supported or Provide the following information	organizations .							
	(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1–9 above or IRC section (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
	<del></del>			Yes	No				
A)					 				
B)									
(C)			·						
D)									
E)									

Schedul	le A (Form 990 or 990-EZ) 2014						Page <b>2</b>
Part	<ul> <li>(Complete only if you checked the Part III. If the organization fails to</li> </ul>	e box on line	5, 7, or 8 of	Part I or if the	e organizatior	n failed to qua	) alify under 
Secti	on A. Public Support	<del></del>	<del></del>	( ) 0040	1-D 0040	(=) 0014	(f) Total
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(i) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)						
6 Soot	Public support. Subtract line 5 from line 4. ion B. Total Support			l	<u> </u>	<u> </u>	<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the organization, check this box and stop he	he organizatio	n's first, secor	nd, third, fourth	n, or fifth tax y	12 ear as a section	on 501(c)(3)
Sect	ion C. Computation of Public Suppo			· · · · · · · · · · · · · · · · · · ·	<del></del>	·	
14	Public support percentage for 2014 (line	6, column (f) d	ivided by line	11, column (f))		14	%
15	Public support percentage from 2013 Sc	hedule A. Part	II. line 14 .			15	%
16a		ization did not	check the box	con line 13, an	id line 14 is 33	1/3% or more, o	check this ► □

7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10		<u> </u>		<u> </u>			<del></del>
12	Gross receipts from related activities, etc	. (see instructi	ons)			12	504(-)(0)	
13	First five years. If the Form 990 is for the organization, check this box and stop he	re	<u></u>	nd, third, fourth	n, or fifth tax y	year as a section	on 501(c)(3) ►	
Secti	on C. Computation of Public Suppo					T 44		%
14	Public support percentage for 2014 (line	6, column (f) d	ivided by line	11, column (f))		14		
15	Public support percentage from 2013 Sc	hedule A, Part	II, line 14 .			15	hadi thia	<u>%</u>
16a	33 <sup>1</sup> /3% support test—2014. If the organi	zation did not	check the box	on line 13, an	d line 14 is 33	31/3% or more, c	eneck triis	П
	box and stop here. The organization qua	unies as a pub	nciy supported	organization	 . 100 and lin			ш
b	331/3% support test—2013. If the orga check this box and stop here. The organ	ization qualifie	es as a publicly	supported or	ganization		▶	
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the " organization	ets the "facts-	and-circumsta	ances" test, ch	eck this box a zation qualifies	and stop here.	Explain in	
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza	tion meets the	e "facts-and-c	ircumstances'	' test, check '	this box and <b>s</b> t	top here.	
	Explain in Part VI how the organization in supported organization						🕨	

### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	If the organization falls to quality	under the te	ista lista pel	ow, piease ce	mpicte rait	,	
Secti	on A. Public Support		·				
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise					_	
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the		<del> </del> -				
•	organization's benefit and either paid			ļ	1		
	to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge			[			
6	Total. Add lines 1 through 5	<del></del> -	<del> </del>				
	Amounts included on lines 1, 2, and 3		<del>                                     </del>	<del></del>			
14	received from disqualified persons .			ĺ	Ì		
	· · ·						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000		1	1	}		
	or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b		<del> </del>				
8	Public support (Subtract line 7c from		<del> </del>				
Ü	line 6.)			1			
Sacti	on B. Total Support		<u> </u>	<u> </u>	L		<u> </u>
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	(a) 2010	(6) 2011	(0) 2012	(4) 2010	(6) 2014	(i) rotal
10a		·					
iva	payments received on securities loans, rents,		1		1		
	royalties and income from similar sources .						
b	Unrelated business taxable income (less		<del></del>	-			
-	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С			<del>                                     </del>				
11	Net income from unrelated business		<del>                                     </del>				
••	activities not included in line 10b, whether				1		
	or not the business is regularly carried on						
12	Other income. Do not include gain or		<del> </del>		<del> </del>		<u> </u>
	loss from the sale of capital assets		1				
	(Explain in Part VI.)					]	
13	Total support. (Add lines 9, 10c, 11,			-		-	
	and 12.)			ĺ	ľ		
14	First five years. If the Form 990 is for the	e organizatio	n's first, secon	d. third. fourth	or fifth tax ve	ear as a sectio	on 501(c)(3)
	organization, check this box and stop he						
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2014 (line 8			3, column (f))		15	%
16	Public support percentage from 2013 Sch	nedule A, Part	III, line 15 .			16	%
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2014 (			y line 13, colui	mn (f))	17	%
18	Investment income percentage from 2013		* *	•		18	%
19a	331/3% support tests-2014. If the organ					ore than 331/39	%, and line
	17 is not more than 331/3%, check this box	and <b>stop here</b>	. The organizati	on qualifies as	a publicly supp	orted organizati	ion . ▶ 🗆
b	331/3% support tests-2013. If the organiz	ation did not o	check a box on	line 14 or line	19a, and line 16	is more than 3	
	line 18 is not more than 331/3%, check this I						
20	Private foundation If the organization du	d not chack a	hoy on line 14	10a or 10h	check this hav	and cap inetru	ctions 🕨 🗔

### 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.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete P	an v	<u>)                                     </u>	
Section	on A. All Supporting Organizations			
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	Yes	No
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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	t a wate	1
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	 3a	. 06 200800 .	, , , , , , , , , , , , , , , , , , ,
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 <b>Part VI</b> when and how the organization made the determination.	3b	a + 4.56	, , , , , , , , , , , , , , , , , , ,
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c	*	
	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	<i></i>	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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)? If "Yes," explain in <b>Part VI</b> 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 <b>Part VI</b> , 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).			2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	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?  Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 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 <b>Part VI.</b>	6	and the state of the	- / -
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 I of Schedule L (Form 990).	8	ult nam	, , ,
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 <b>Part VI</b> .	9a		
b c	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? If "Yes," provide detail in <b>Part VI</b> .  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 <b>Part VI</b> .	9b 9c		
10a	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	- 10PL 10	i
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		

determine whether the organization had excess business holdings.)

Part	Supporting Organizations (continued)		,	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	ĺ		
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	N	· ·
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI.</b>	11c		<del>                                     </del>
	on 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 <b>Part VI</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	adox	allow de the
Secti	on 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
<u>Secti</u>	on D. All Type III Supporting Organizations			г
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?		Yes	No
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	- XX Y	15. 003000400 A
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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3	,	7 L
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1 a b c	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in 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 (see in the content of the conten			
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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 <b>Part VI identify</b> 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 <b>Part VI</b> 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	Parent of Supported Organizations. Answer (a) and (b) below.	,		
а	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? <i>Provide details in Part VI.</i>	3a		446. ~ J
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b	2	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional rt V Type III Non-Function Part V Type III Non-Funct	gan	izations	
1 . Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must co			
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)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</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			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	×	
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	y-in	tegrated Type III support	ing organization (see

Part		s) Supporting Organia	zations (continued)	O
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	<del></del>		
2	Amounts paid to perform activity that directly furthers exe	rted		
	organizations, in excess of income from activity	nizations		
	Administrative expenses paid to accomplish exempt purp	oses of supported organ	mzations	
4_	Amounts paid to acquire exempt-use assets  Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in <b>Part VI</b> ). See instructions.			
	Total annual distributions. Add lines 1 through 6.			
	Distributions to attentive supported organizations to which	h the organization is res	ponsive	
8	(provide details in <b>Part VI</b> ). See instructions.	in the organization to rec		
9	Distributable amount for 2014 from Section C, line 6			
-	Line 8 amount divided by Line 9 amount			
	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
	District Continue Con			
1_2	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			. ,
3	Excess distributions carryover, if any, to 2014:			
<u></u>	Excess distributions carryover, if any, to 2014.			
<u>a</u>	\$ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\			
<u>c</u>	1			*
<del>_</del> d	ł			» »
	From 2013			1
f	Total of lines 3a through e			, \
g_	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
<u>i</u>	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: \$		,	
<u>a</u>	Applied to underdistributions of prior years			<u> </u>
<u>b</u>	Applied to 2014 distributable amount  Remainder. Subtract lines 4a and 4b from 4.			· · · · · · · · · · · · · · · · · · ·
с	Remaining underdistributions for years prior to 2014, if			
5	any. Subtract lines 3g and 4a from line 2 (if amount	٧	`	γ
•	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h		. **	
-	and 4b from line 1 (if amount greater than zero, see	* * *	w	
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.		^2 ** ,	, ,
8	Breakdown of line 7:		*	
а	¥			
b			5	`` <u> </u>
С	· · · · · · · · · · · · · · · · · · ·	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
d	Excess from 2013		,	
е	Excess from 2014		<u> </u>	<u> </u>

Schedule A (i	Page C
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)
,	
<del></del>	
·	
·	

### SCHEDULE D (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

4

6

7

▶\$

**Supplemental Financial Statements** 

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

55-0394213 WHEELING JESUIT UNIVERSITY INC Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year . . . . . . . 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3

## In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

Number of states where property subject to conservation easement is located ▶

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization elected as permitted under SEAS 116 (ASC 958), not to report in its revenue statement and ball

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- **b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

Yes No 3a(i) 3a(ii) **b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment
--

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a	Land	0	1,071,817	> '、	1,071,817			
b	Buildings	0	73,325,136	32,836,462	40,488,674			
C	Leasehold improvements	0	5,067,852	3,422,817	1,645,035			
d	Equipment	0	31,967,657	29,696,046	2,271,611			
е	Other	0	271,769	181,166	90,603			
Total.	Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶							

Part VII	Investments—Other Securities					
	Complete if the organization answ	vered "Yes" to For	m 990, I	Part IV, line	11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) B	ook value		nod of valuation -of-year market value
(1) Financial	derivatives					
(2) Closely-h	eld equity interests					
(3) Other						
(A)						
(B)						
(C)			<del> </del>			
(D)			<del></del>			
(E) (F)			ļ			
(G)						
(H)						
	o) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII	Investments—Program Related	1.	1		<u></u>	
Test Vill	Complete if the organization answ	 wered "Yes" to For	m 990, I	Part IV, line	11c. See Form	990, Part X, line 13.
	(a) Description of investment	<u> </u>		ook value		hod of valuation
				ļ	Cost or end	-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)			<u> </u>			
_(6)						
_(7)			<u> </u>			
(8)						
(9)	b) must equal Form 990, Part X, col (B) line 13.)		<u> </u>			
Part IX	Other Assets.		<u> </u>			<u></u>
raitix	Complete if the organization answers	wered "Yes" to For	m 990 l	Part IV. line	11d. See Form	990. Part X. line 15.
<del></del>		) Description	000, .		114700010111	(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)	mn (b) must equal Form 000. Bort V. o	ol (D) line 15 )				
	mn (b) must equal Form 990, Part X, co Other Liabilities.	oi. (B) line 15.)	<u> </u>	<del></del>	<u> ▶ </u>	<del></del>
Part X	Complete if the organization ans	wered "Ves" to For	m 000 l	Part IV line	110 or 11f Sec	Form 990 Part Y
	line 25.	weled les tolo	111 330, 1	art IV, IIIIC	. 116 01 111. 066	TOTTI 990, Fart A,
1.	(a) Description of liability	(b) Book value			······································	······································
(1) Federal ır			0			× •
(2) Agency	Funds	4	75,504		£	•
	ble advances from the US Govt		10,358		* *	ن .
	rement Obligation		52,296			,
(5)					*	,
(6)				*		***************************************
(7)						, s
(8)						w.
(9)						, v ,
	b) must equal Form 990, Part X, col (B) line 25.) ►		38,158		J. C	
	r uncertain tax positions. In Part XIII, provi					
organization	s liability for uncertain tax positions under	FIN 40 (ASC 740). CHE	ock nere n	ule text of th	ie loothote has bee	n provided in Part XIII

Part	· ·			Retur	n.
	Complete if the organization answered "Yes" to Form 990, F			ГаТ	
1	Total revenue, gains, and other support per audited financial statements	• •		1	46,278,557
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	۔ ما	1		
a	Net unrealized gains (losses) on investments	2a	-494,895		
b	Donated services and use of facilities	2b	0		
C	Recoveries of prior year grants	2c 2d	0 505		
d	Other (Describe in Part XIII.)		93,565	2e	401 220
e	Add lines 2a through 2d	• •		3	-401,330 46,679,887
3 4	Amounts included on Form 990, Part Vill, line 12, but not on line 1:	i .	 I	-	40,073,007
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	0		
C	Add lines <b>4a</b> and <b>4b</b>			4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	46,679,887
Part				r Ret	
	Complete if the organization answered "Yes" to Form 990, F				
1	Total expenses and losses per audited financial statements			1	47,581,880
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
С	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	93,565		
е	Add lines 2a through 2d			2e	93,565
3	Subtract line 2e from line 1			3	47,488,315
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	<u>4a</u>	0		
b	Other (Describe in Part XIII.)	4b_	0	W - 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
C	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 16.)	<u> </u>	5	47,488,315
Part	XIII Supplemental Information. le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4 4· D	art IV lines 1h and 2h	· Dort \	V line 4: Port V line
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part				
	lule D, Part V, Line 4 - The Endowment is used to provide Scholarships to the s				
301100	inie b, Part V, Line 4 - The Endownient is used to provide Scholarships to the s		ts of the university		
Scher	lule D, Part X, Line 2 - Accounting principles generally accepted in the United S	States	of America prescribes	recoan	ition thresholds
	easurement attributes for the financial statement recognition and measuremen				
	turn. Tax benefits are recognized only if a tax position is more-likely-than-not s				
	presumed to occur. The amount recognized is the largest amount of tax benef				
	nation. For tax positions not meeting the more-likely-than-not test, no tax bene				
are ur	naware of any tax benefits or liabilities to be recognized at June 30, 2015 or 201	4, res	pectively. The Universi	у гесо	gnizes interest
and p	enalties related to unrecognized tax benefits in interest and income tax expens	e, res	pectively. The Universi	y has i	no amounts
ассги	ed for interest or penalties for the tax year ended June 30, 2015 or 2014, respec	tively	. The University is no lo	onger s	ubject to
exami	nation by taxing authorities for years before 2012. The University does not exp	ect th	e total amount of unrec	ognize	d tax benefits, if
any, t	o significantly change in the next 12 months.	<u>-</u>			
Sched	lule D, Part XI, Line 2d - Reclassified Unrelated business expenses				
				·	
Sched	lule D, Part XII, Line 2d - Reclassified Unrelated business expenses				
		·			
				·	
- <b></b>					••••

### SCHEDULE E (Form 990 or 990-EZ)

### **Schools**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization Employer identification number WHEELING JESUIT UNIVERSITY INC 55-0394213 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 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, 2 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 ~~~ 3 Wheeling Jesuit University has a policy of providing equal opportunity to its employees, students, and applicants for employment. Accordingly no person will be denied admission based on race, color, religion, gender, sexual orientation, national origin, ethnicity, age, marital status, blindness, handicap disability, or disable veteran. This policy is reiterated in all solicitations, newspaper advertisements, and media broadcasts for employment and when soliciting for students. Does the organization maintain the following? 1 a Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . . 4a b Records documenting that scholarships and other financial assistance are awarded on a racially 4b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c 4d 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: 5a 5b 5c Scholarships or other financial assistance? . . . 5d Educational policies? . 5e Use of facilities? 5f Athletic programs? . . . . . . 5g 5h 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? . . . . . . 6b If you answered "Yes" to either line 6a or line 6b, explain on Part II. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through

4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II. . .

Schedule E (l	Form 990 or 990-EZ) (2014)	Page 2
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).	
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		<i>-</i>
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- <b></b>		
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<del></del>		
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	·	

# SCHEDULEI

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

Open to Public Inspection

OMB No. 1545-0047 2014

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

Ivalie of the organization							Employer identification number
WHEELING JESUIT UNIVERSITY INC		:					55-0394213
Part I General Information on Grants and Assistance	on Grants and	Assistance					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ain records to sub	stantiate the amou	nt of the grants or	assistance, the g	rantees' eligibility for	or the grants or assist	
	award the grants	or assistance?			•		· · · · · · · · · · · · · · · · · · ·
esc	ization s procedur	es ror monitoring t	ne use or grant fur	ids in the United	States.		L - : : : : : : : : : : : : : : : : : :
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	ssistance to Do ny recipient that	mestic Organiza received more th	ations and Dom an \$5,000. Part I	<b>estic Governm</b> I can be duplica	<b>lents.</b> Complete II ated if additional s	the organization al space is needed.	<b>Organizations and Domestic Governments.</b> Complete if the organization answered "Yes" to Form 990, I more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(6)							
(4)							
(5)							
(9)							
ω							
(8)							
(6)							
(10)							
(11)							
(12)							
<ul><li>Enter total number of section 501(c)(3) and government organizat</li><li>Enter total number of other organizations listed in the line 1 table</li></ul>	n 501(c)(3) and gov organizations listed	ernment organization in the line 1 table	organizations listed in the line 1 table ie 1 table	ne 1 table			<b>A A</b>
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruction	s for Form 990.		Ö	Cat. No. 50055P		Schedule I (Form 990) (2014)

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. Schedule I (Form 990) (2014)

Part III Grants an

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Dean's Award	191	1,552,700			
2 Presidential Scholarship	119	1,135,800			
3 Graduate Tuition Discount	11	30,733			
4 Bernard McDonough Scholarship	-	6,250			
5 Laut Scholarship	7	185,280			
6 Maier Foundation	2	6,814			
림					
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. Schedule I, Part I, Line 2 - The University monitors their respective grants by establishing a separate accounting for each individual grant. All transactions are reviewed and approved by	the information respective grants b	equired in Part I, line y establishing a separat	e 2, Part III, columr te accounting for each	i (b), and any other additi individual grant. All transact	onal information.
applique personnel production to submission to processing to ensure uney meet are treductions of the grant.	in censure mey m	פבר תוב ובלחוובווובים			
					Schedule 1 (Form 990) (2014)

### **SCHEDULE J** (Form 990)

Compensation Information

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

▶ Complete if the organization answered "Yes" on 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.

OMB No 1545-0047 2014

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Name of the organization WHEELING JESUIT UNIVERSITY INC Employer identification number

55-0394213

Part	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.	1		į
	First-class or charter travel  Housing allowance or residence for personal use			( ;
	Travel for companions Payments for business use of personal residence			1
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (e.g., maid, chauffeur, chef)	}		!
				]
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			i
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	ا م	1	
	ехріані	1b		<del>                                     </del>
2	Did the experiention require substantiation prior to reimburging or allowing expenses incurred by all	·············		- 1
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			
	1a?	2	1	
		-		<del></del>
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			1 1
J	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a	<u> </u>		
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			1
	✓ Compensation committee     ✓ Written employment contract			;
	☐ Independent compensation consultant ☐ Compensation survey or study			!
	☐ Form 990 of other organizations ☐ Approval by the board or compensation committee			
		ł		
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:		. "	<u></u>
а	Receive a severance payment or change-of-control payment?	4a	1	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		<b>✓</b>
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	7	<b>/</b>
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Out I'm F04/ \( \( \) \( \			. ,
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.  For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			, ,
3	compensation contingent on the revenues of:			i
_	The organization?		* 6	1
a b	Any related organization?	5a 5b		1
	If "Yes" to line 5a or 5b, describe in Part III.	35		-
	iii 100 to iiio od of obj desoribo iii i dit 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:			1
а	The organization?	6a	× 105.8	~ ^
b	Any related organization?	6b		1
	If "Yes" to line 6a or 6b, describe in Part III.			
		412.55		_ (
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		<b>✓</b>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			,
	in Part III	8		<b>✓</b>
9	If "Voo" to line Q did the exempiration also fallow the valuable management and the line of the line o	] .		
J	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?			
		, ya 1		1

Page 2

Schedule J (Form 990) 2014

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. Part II

(B) Breakdown of V	5	(B) Breakdown o	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation			//	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	(c) netification other deferred compensation	( <b>D</b> ) Nontaxable benefits	(E) lotal of columns (B)(I)+(D)	(r) Compensation in column (B) reported as deferred in prior Form 990
Eugene Grilli, Chief Financial	8	162,342	0		0	0	162,342	0
1 Officer	8	0		0			0	0
Sarah Kelly, VP of Advancement	3	151,716	0	0		15,135	166,851	0
2	€	0			0			0
	8							
3	€							
	3							
4	€							
	8							
5								
	(1)							
9	€							
	8							
7	<b>(E)</b>				9 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6			
	(2)							
8	(ii)							
	(3)							
6	(ii)							
	9							
10	⊞							
	8							
11	(E)							
	8							
12	(E)							
	(3)							
13	(II)							
	(3)							
14	<b>E</b>							
	8							
15	<b>(E</b> )							
	8							
16	€							

Schedule J (Form 990) 2014

•	2. accd	) of i	

اق
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.
Schedule J, Part I, Line 1a - Sarah Kelly had a housing allowance
Schedule J, Part I, Line 4 - Christine Ohl Gigliotti received a severance payment of \$82,167. Wheeling Jesuit also paid compensation and benefits of \$737,079 to the Wheeling Jesuit
community of the society of Jesus, the founders of Wheeling Jesuit University for instructional, administrative and institutional services.
Schadula - I (Exm 900) 2014

SCHEDULE K (Form 990) WHEELING JESUIT UNIVERSITY INC

Department of the Treasury Internal Revenue Service Name of the organization

**Supplemental Information on Tax-Exempt Bonds** 

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

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.

2014

OMB No. 1545-0047

Open to Public Inspection

55-0394213

Employer identification number

(i) Pooled financing Yes No ŝ ž (h) On behalf of issuer Yes No ۵ Yes Yes (g) Defeased Yes No ŝ ŝ ပ O (f) Description of purpose Yes Yes Restructure Debt ŝ ŝ œ ø Yes Yes 11,986,149 (e) Issue price 5,000 0 2032 11,986,149 10,240,683 245,466 1,500,000 ŝ ŝ ⋖ (d) Date Issued Yes Yes 12/05/2006 ♂ Does the organization maintain adequate books and records to support the Are there any lease arrangements that may result in private business use 677318BD8 (c) CUSIP# Was the organization a partner in a partnership, or a member of an LLC, Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? (b) Issuer EIN 55-6009203 which owned property financed by tax-exempt bonds? . Has the final allocation of proceeds been made? Working capital expenditures from proceeds County Commission of Ohio County West Virginia Credit enhancement from proceeds Capital expenditures from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Year of substantial completion . Gross proceeds in reserve funds Proceeds in refunding escrows. Issuance costs from proceeds . **Private Business Use** final allocation of proceeds? bond-financed property? . Other unspent proceeds Amount of bonds retired Other spent proceeds. (a) Issuer name Total proceeds of issue Bond Issues Proceeds Partl Part II Part 4 S ဖ ω 9 42 4 5 9 8 2 O F 4 ပ

Schedule K (Form 990) 2014

Cat, No. 50193E

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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	q	)	
	Ç	2	)
ż	9	v	

Schedule K (Form 990) 2014

Part III Private Business Use (Continued)

	There beamers Ose (Continued)								
ć	A 41	<b>▼</b>	4	25	2	ر درگار	Ž	ر دور	2
T	Are there any management of service contracts that may result in private business use of bond-financed property?	168	<u> </u>	69		5	2	Sp	
a	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
U	Are there any research agreements that may result in private business use of bond-financed property?		`						
ס									
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		%0		%		%		%
က	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		% 0		%		%		%
9	Total of lines 4 and 5		%0		%		%		%
7	Does the bond issue meet the private security or payment test?	,							
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		`	_					
Q	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
O	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
o	as the organization established vonqualified bonds of the issue ar quirements under Regulations so	`							
Part IV	V Arbitrage								
		1	V	8			S	٥	
-	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	Yes	% >	Yes	No	Yes	S.	Yes	No No
7	If "No" to line 1, did the following apply?								
C3			>						
۵			•						
٥	No rebate due?		>						
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
ო	issue a variable		>						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		<i>*</i>			i			
q	1 1								
ပ									
ס									
٥	Was the hedge terminated?								
								Schedule K (Form 990) 2014	orm 990) 2014

### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

WHEELING JESUIT UNIVERSITY INC 55-0394213 Form 990, Part VI, Section B, Line 11b - The university uses a software program to prepare the 990 which runs a series of edit checks on the return. The return is then reviewed by the controller and CFO. The university reviews the 990 with the Audit Committee and the Board of Directors for approval prior to submission to the Internal Revenue Service. Form 990, Part VI, Section B, Line 12c - The University obtains conflict of interest statements annually from all trustees and Board members. It also obtains conflict of interest statements from officers and key employees upon hiring. All Employees working in sponsored research sign a conflict of interest statement upon hiring. Form 990, Part VI, Section B, Line 15 - Salary ranges are determined by a comparability study performed by the Human Resources Department. All positions are graded upon respective job descriptions to ensure the respective jobs are properly classified per the University policies. Salaries for officers and key employees are determined and approved by the President and CFO of the University. The Salary for the President is approved by the Board of Directors. Form 990, Part VI, Section C, Line 19 - The University submits its financial statements to the Municipal Market Access for public viewing on a quarterly basis. A code of ethics statement is posted to the University's website. The code of ethics statement contains verbiage that addresses our position with the appearance of conflict between personal and institutional interests.