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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

Internal Revenue Service

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

Open to Public Inspection

	roi tile	and JUL 1, 2014 and	ل enaing	UN 30, 2015	
В	Check if applicable	C Name of organization		D Employer identifica	ation number
		MIDWAY UNIVERSITY, INC			
	Addres				
	Name change	Doing business as		61-04	44708
	Initial return	Number and street (or P.O box if mail is not delivered to street address)	Room/suite	E Telephone number	
	Final return/	512 EAST STEPHENS STREET		(859)	846-5701
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	20,197,620.
Γ-	Ameno			· · · · · · · · · · · · · · · · · · ·	
	return Applic		NT.	H(a) Is this a group ret	
	tion pendir	SAME AS C ABOVE	IN	for subordinates?	
				H(b) Are all subordinates inc	
		empt status X 501(c)(3)	or 527	1	st (see instructions)
		e: NWW.MIDWAY.EDU		H(c) Group exemption	
		organization: X Corporation	L Year	of formation: 1865 M	State of legal domicile: KY
نر	art I	Summary			
Revenue C. MNE P. U.M. I. 7. 2. Revenue C. M. Activities & Governance C.	1	Briefly describe the organization's mission or most significant activities MTDW			
~ટૂ	.	<u>INSPIRES THE LIVES OF STUDENTS IN KENTUC</u>	KY'S O	NLY UNIVERSI	TY FOR
₩Ĕ	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass	ets
≅₹	3	Number of voting members of the governing body (Part VI, line 1a)		3	21
=5	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	21
ွတ္တ	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	356
∰	6	Total number of volunteers (estimate if necessary)		6	21
뜿충	7 2	Total unrelated business revenue from Part VIII, column (C), line 12		7a	178,358.
*	'	Net unrelated business taxable income from Form 990-T, line 34	l		
- 	J U			7b	0.
\bigcirc		Contributions and grants (Part VIII line 1b) RECEIVED	\ <u> </u>	Prior Year	Current Year
Ę,W	8	contributions and grants (Fart VIII, line III)	! —	3,002,008.	1,720,765.
le l	9	Program service revenue (Part VIII, line 2g)	<i>∖</i> }	16,474,339.	16,049,579.
Æ	10	investment income (Part VIII, column (A), lines 4, 2, and hay 1 2010 10	<u> </u>	2,953,059.	2,181,666.
_	11 (Other revenue (Part VIII, column (A), lines 5, 6d, (ac) 9c, 10c, and 11e)	<i>y</i> –	376,831.	166,106.
	12	Total revenue · add lines 8 through 11 (must equal Part VIII) column (A), line 12)	~ <u> </u>	22,806,237.	20,118,116.
	13 (Grants and similar amounts paid (Part IX, column (A)-lines 1-3)		3,048,949.	3,577,314.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		9,292,161.	7,798,451.
Expenses	16a l	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
g	Ь.	Total fundraising expenses (Part IX, column (D), line 25) > 373,63	34.		***************************************
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		8,422,697.	8,819,197.
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		20,763,807.	20,194,962.
	i .	Revenue less expenses Subtract line 18 from line 12		2,042,430.	<76,846.
nc es		Totalida loca axpanaca cubitaci inte 10 from line 12	Pos		
Net Assets or Fund Balances	20 -	Fotal assets (Part V. line 16)		inning of Current Year	End of Year
Assu	20	Total assets (Part X, line 16)		50,167,716.	55,556,600.
et/	21	Fotal liabilities (Part X, line 26)		15,355,592.	22,969,472.
	22	Net assets or fund balances Subtract line 21 from line 20		34,812,124.	32,587,128.
_	art II	Signature Block		···.	
		ties of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is
true	, correct	, and complete. Declaration of preparer (other than officer) is based on all information of wh	nch preparer	has any knowledge.	
		of park			<u> </u>
Sig	n	Signature of officer		Date '	
Her	e	DR. JOHN P. MARSDEN, PRESIDENT			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	D	ate Check	PTIN
Paid	1	LEIGH MCKEE COA	5	5.13.2010 self-employed	P00169845
Pre	parer	Firm's name DEAN DORTON ALLEN FORD, PLLC	-	Firm's EIN	27-3858252
	Only	Firm's address 106 W. VINE STREET, SUITE 600			0000000
	-	LEXINGTON, KY 40507		Phone no / Q F	9)255-2341
May	the IP	S discuss this return with the preparer shown above? (see instructions)		CO) .un anun 11	
		5 discuss this return with the preparer shown above (see instructions)		 -	X Yes No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

<u>Form</u>	990 (2014) FKA MIDWAY COLLEGE	61-0444708	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		
	MIDWAY UNIVERSITY IS AN ACCREDITED INSTITUTION OF HIGHE	R EDUCATION	
	LOCATED IN MIDWAY, KENTUCKY, FOUNDED IN 1847 AS THE KEN	TUCKY FEMALE	
	ORPHAN SCHOOL. THE RESIDENTIAL CAMPUS REMAINS KENTUCKY'	S ONLY WOMEN	<u>'</u> S
	UNIVERSITY, BUT THE INSTITUTION ALSO OFFERS CO-ED ACCEL	ERATED PROGR	AMS
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, a	s measured by expenses	
·	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
	revenue, if any, for each program service reported	,	
4a	(Code) (Expenses \$8,007,296. including grants of \$3,577,314.) (Rever	nue \$ 14,192,	839.
	MIDWAY UNIVERSITY IS KENTUCKY'S ONLY UNIVERSITY FOR WOM		
	LIBERAL ARTS FOUNDATION THROUGH A GENERAL EDUCATION CUR		
	CAREER FOCUSED PREPARATION THROUGH MAJORS AT THE UNDERG		T.,
	IN ADDITION, THE UNIVERSITY PROVIDES COEDUCATIONAL ACCE		
	UNDERGRADUATE AND GRADUATE PROGRAMS IN THE EVENINGS AT		
	AND AT AN OFF CAMPUS SITE IN LEXINGTON AND ONLINE. ALL		
	INTENDED TO LEAD TO REWARDING CAREERS AND RESPONSIBLE C		
	INTENDED TO BEAD TO REMARDING CARBERD AND RESTONDIBLE C	TITADINOIIII.	
			
4b	(Code) (Expenses \$		
710		THE FORM OF	
	ACADEMIC ADVISORS, ACADEMIC COUNSELING, AND LIBRARY AN		
	SERVICES. THE UNIVERSITY'S 15 - 1 STUDENT-FACULTY RATI		SY
	ACCESS TO AND DEVELOPMENT OF GOOD RELATIONSHIPS WITH FA		
	ilected to the buyletimat of ecop maintinating with the	.comii.	
			, , -
4c	(Code) (Expenses \$4 , 136 , 962 . including grants of \$) (Rever	nua \$	
	THE UNIVERSITY PROVIDES STUDENTS WITH A NUMBER OF OPPOR		
	BECOME INVOLVED IN SOCIAL, RECREATIONAL, EDUCATIONAL, A		
		LAST SUPPER	
	MIDWAY CHRISTMAS VESPERS, AND GRADUATION FESTIVITIES. C		•
	AND STUDENT PRODUCTIONS ADD A CULTURAL DIMENSION TO CAM		1(10
	NUMBER OF STUDENT ACTIVITIES AND ORGANIZATIONS PROVIDE		
		EN LEADERSHIP	11
	SKILLS, AND ACTIVELY PARTICIPATE IN THE PROCESS OF PLAN		
	ORGANIZING PROGRAMS.	INTING AND	
	ONORMITE IN TROUBLES +		
		····	
	Other program services (Describe in Schedule O)		
40	0 100 000	27,413.)	
	(Expenses \$ 2,127,907 ⋅ including grants of \$) (Revenue \$ Total program service expenses ► 15,018,676 ⋅	<u>41,413•)</u>	
<u> 4e</u>	TOTAL PROGRAM SERVICE EXPENSES TO , UTO , U / U •		

		<u>-0444708</u>	<u>P</u>	age 🤇
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			ĺ
	If "Yes," complete Schedule A	1	X	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	. 2	X	 -
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidate:	l l		37
	public office? If "Yes," complete Schedule C, Part I	, 3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election		v	
_	during the tax year? If "Yes," complete Schedule C, Part II	4_	Х	\vdash
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessmen			х
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right			x
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule L	D, Part I 6	-	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
8	Schedule D, Part III	8		X
^	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian			
9	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation service	1		ĺ
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, peri			
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,			
••	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedu	ıle D.		
_	Part VI	11a	Х	ĺ
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	1		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С		al		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported	ın		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	š		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	X
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100			٠,,
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	 	X
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			\ \mathref{v}
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	-	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			- v
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_ v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17_	ļ	<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, I 1c and 8a? If "Yes," complete Schedule G, Part II	1	х	
10	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18_		
19	complete Schedule G, Part III	19		Х

20a

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Form 990 (2014) FKA MIDWAY COLLEGE
Part IV Checklist of Required Schedules (continued)

-	and a made of the dame of the		_	
^4	Did the example to prove them \$5,000 of example or other application to any democks example to any	Γ	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		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
22	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current	_22_	Λ	
23				
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		х	
04.	Schedule J	23	Λ	
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			v
	Schedule K If "No", go to line 25a	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			w
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
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			37
	Schedule L, Part I	25b		<u>X</u>
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	Х	
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			37
	of any of these persons? If "Yes," complete Schedule L, Part III	27		<u> </u>
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)			77
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		<u> </u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	v	<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			37
	contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	If "Yes," complete Schedule N, Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
20	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
24	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33_		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
25-	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		_ <u>X</u> _
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
D		256		
20	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	200		v
27	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	37_		X
38	Note. All Form 990 filers are required to complete Schedule O	38	$ \mathbf{x} $	
	Mote. Fair our 300 meio die required to complete ouriedule O			(2014)
		i Onli	220	(-UI4)

	Check if Schedule O contains a response or note to any line in this Part V			
		T	Yes	No
12	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		103	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
·	(gambling) winnings to prize winners?	1c	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Lu	filed for the calendar year ending with or within the year covered by this return 2a 356			
b		2b	x	
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	х	
		3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
		4a	i	X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	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 organization solicit		Ī	
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	1		
	to file Form 8282?	7c	Х	
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		77
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	7h		
8	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b		9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		ŀ	
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а		13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the]	
	organization is licensed to issue qualified health plans 13b			
	Enter the amount of reserves on hand	-		- -
		14a		X
b		14b	990	(2014)
		1 OLIII		(41 02)

FKA MIDWAY COLLEGE Form 990 (2014)

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

	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{x}					
Sec	tion A. Governing Body and Management			ــمــ					
000	tion 71. doverning body and management		Yes	No					
10	Enter the number of voting members of the governing body at the end of the tax year 21		162	INU					
ıa	If there are material differences in voting rights among members of the governing body, or if the governing	İ							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.								
L									
b									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			37					
	officer, director, trustee, or key employee?	2		_X_					
3									
	of officers, directors, or trustees, or key employees to a management company or other person?								
4									
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u> _					
6	Did the organization have members or stockholders?	6		X					
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		_X_					
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		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	X						
b	Each committee with authority to act on behalf of the governing body?	8b	X						
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		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	1a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b									
12a									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X X						
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	X						
13	Did the organization have a written whistleblower policy?	13		Х					
14	Did the organization have a written document retention and destruction policy?	14		X					
15	Did the process for determining compensation of the following persons include a review and approval by independent								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	х						
	Other officers or key employees of the organization	15b		Х					
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	135							
162	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		х					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	IOa							
ь	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	406							
Sec	tion C. Disclosure	16b		<u> </u>					
	T. W. J								
17	List the states with which a copy of this Form 990 is required to be filed KY Section 5104 requires an expansion to make its Forms 1002 (or 1004 if analysis) 900, and 900 T (Section 501(a)(2)) and 900 T (Section 501(a)(2)(2)) and 900 T (Section 501(a)(2)(2)(2)(2)(2)(2)(2)(2)(2)(2)(2)(2)(2)								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	ivallab	ie						
	for public inspection. Indicate how you made these available. Check all that apply								
	Own website Another's website W Upon request Other (explain in Schedule O)		_						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cıal						
	statements available to the public during the tax year								
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
	THE ORGANIZATION - 859-846-5701								
	512 EAST STEPHENS STREET, MIDWAY, KY 40347-1112								

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

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, 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

(A) Name and Title	(B) Average hours per	(do no		Pos heck ss pe	more rson	than is bot	hani	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer P		Highest compensated complexed comple		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) MIRA S. BALL	1.00									
LIFE TRUSTEE	1 00	Х				-		0.	0.	0.
(2) DR. SUVAS G. DESAI	1.00	,,						0		
TRUSTEE	1.00	X	_					0.	0.	0.
(3) ANNE E. BOLTON	1.00	x						0.	0.	^
TRUSTEE (4) BOB M. HUTCHISON	1.00	Α								0.
TRUSTEE	1.00	x						0.	0.	0.
(5) EMILY T. GABLE	1.00							<u>.</u>		
TRUSTEE		x						0.	0.	0.
(6) KEITH MATHIS	1.00									
TRUSTEE		X				'		0.	0.	0.
(7) LINDA L. GREEN	1.00									
SECRETARY		X		_				0.	0.	0.
(8) DONNA S. HALL	1.00									
TRUSTEE		X						0.	0.	0
(9) CHARLES R. HEMBREE	1.00									
TRUSTEE		X						0.	0.	0
(10) JANET L. HUNTER	1.00							•		
VICE CHAIR	1 00	X		-				0.	0.	0
(11) DONNA R. MOORE	1.00	. ,						0	0	•
CHAIR	1 00	X						0.	0.	0
(12) ELIZABETH L. JONES	1.00	x						0.	^	0
TRUSTEE (13) DENISE H. MCCLELLAND	1.00	Δ				\vdash		U •	0.	0.
TRUSTEE	1.00	х						0.	0.	0.
(14) DR. JAMES P. ROACH	1.00	27								
TRUSTEE		x						0.	0.	0.
(15) BELINDA B. METZGER	1.00							5 \$		
TRUSTEE		x						0.	0.	0.
(16) LARRY B. TAYLOR	1.00									
TRUSTEE		X			L .			0.	0.	0.
(17) DAN D. STEWART, JR.	1.00									
TRUSTEE		X						0.	0.	0

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MIDWAY UNIVERSITY, INC

Form 990 (2014)

FKA MIDWAY COLLEGE

Part VII Section A. Officers, Directors, Tru	stees, Key Em	ploy	ees,	and	d Hi	ghe	st C	ompensated Employed	es (continued)	
(A)		(C)					(D)	(E)	(F)	
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)			than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) LYLE F. WOLF TRUSTEE	1.00	Х						0.	0.	0.
(19) ANITA M. BRITTON TRUSTEE	1.00	х						0.	0.	0.
(20) SUSAN M. WALDEN TRUSTEE	1.00	х						0.	0.	0.
(21) VIRGINIA G. FOX TRUSTEE	1.00	х						0.	0.	0.
(22) DR. JOHN P. MARSDEN PRESIDENT	40.00			х				227,107.	0.	53,832.
(23) LAURA S. ARMESTO PROVOST	40.00			X				160,000.	0.	6,756.
(24) SCOTT B. FITZPATRICK VP OF DEVELOPMENT	40.00			х				110,000.	0.	6,756.
(25) ELLEN GREGORY VP OF MARKETING	40.00			х				106,563.	0.	0.
(26) MARK R. WADLINGTON VICE PRESIDENT UNTIL 5/8/15	40.00			х				150,000.	0.	6,193.
1b Sub-total c Total from continuation sheets to Part	/II, Section A						> > /	753,670. 346,185. 1,099,855.	0. 0. 0.	73,537. 20,268. 93,805.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	d al	oove	e) wh	no re			8 Ves No

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ARAMARK	FACILITIES & DINING	
P.O. BOX 7548, PHILADELPHIA, PA 19101	SERVICES	1,857,649.
KART, 1023 GARDEN CREEK CIRCLE,		
LOUISVILLE, KY 40223	ADVERTISING	528,910.
PLATTFORM ADVERTISING		
P.O. BOX 841142, DALLAS, TX 75284	ADVERTISING	189,433.
HAMBURG PROPERTIES LLC		
P.O. BOX 55470, LEXINGTON, KY 40555	BUILDING RENT	185,952.
ELLUCIAN, INC., 62814 COLLECTIONS CENTER	SOFTWARE	
DR, CHICAGO, IL 60693	INSTALLATION & MAINT	157,727.
2 Total number of independent contractors (including but not limited to those list	ed above) who received more than	
\$100,000 of compensation from the organization > 7		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2014)

hours (check all that apply) compensation from related week (list any hours for related as significant way and significant with the supply and significant way and significant with the supply and significant way and significant with the supply and signifi	
Name and title Average hours per week (list any hours for related organizations below line) (27) WILLIAM G. BROWN ASSOCIATE PROVOST (28) SALAH SHAKIR CHIEF INFORMATION OFFICER Average hours per week (list any hours for related organizations below line) Average hours (check all that apply) (check all that appl	
week (list any hours for related organizations below line) (27) WILLIAM G. BROWN ASSOCIATE PROVOST (28) SALAH SHAKIR CHIEF INFORMATION OFFICER (29) BARBARA KITCHEN Week (list any hours for related organizations below line) 109	(F) Estimated amount of
X 115,500. 0.	other mpensation from the rganization and related ganizations
(28) SALAH SHAKIR 40.00 CHIEF INFORMATION OFFICER X 106,300. (29) BARBARA KITCHEN 40.00	
CHIEF INFORMATION OFFICER X 106,300. 0. (29) BARBARA KITCHEN 40.00	6,756
(29) BARBARA KITCHEN 40.00	6 856
	6,756
DEAN	C 750
	6,756
Fotal to Part VII, Section A, line 1c 346, 185.	20,268

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Form 990 (2014)

MIDWAY UNIVERSITY, INC

FKA MIDWAY COLLEGE

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (A) (B) Related or (C) Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c 49,505 d Related organizations 1d e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 1,671,260 258,976 Q Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f 1,720,765 Business Code Program Service Revenue 2 a TUITION AND FEES 900099 14,130,297 14,130,297 144,986 AUXILIARY 722210 1,852,206 1,707,220. CAFETERIA SALES 722320 67,076 67.076. d f All other program service revenue Total. Add lines 2a-2f 16 049 579 Investment income (including dividends, interest, and other similar amounts) 211,287 211,287 4 Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross rents 43,213 b Less rental expenses 12,929 c Rental income or (loss) 30,284 d Net rental income or (loss) 30,284 33,297, <3,013.> 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory 2,006,949 11,872 b Less cost or other basis and sales expenses 48 442 c Gain or (loss) 2.006.949 <36.570 d Net gain or (loss) 1,970,379 1,970,379. 8 a Gross income from fundraising events (not Revenue including \$ 49,505, of contributions reported on line 1c) See Part IV, line 18 63,925 а Other b Less direct expenses 18,133 c Net income or (loss) from fundraising events 45,792 45,792. 9 a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities ▶ 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a RECOVERIES OF LOSSES ON UNCOLLECT 900099 62,542 62,542. **b** MISCELLANEOUS INCOME 900099 27,413 27 413 c HORSE BOARDING INCOME 721310 75 75 d All other revenue e Total. Add lines 11a-11d 90,030 Total revenue. See instructions.

178,358,

20 118 116

14,220,252

Form 990 (2014)

FKA MIDWAY COLLEGE

Part IX	Statement of Functional Expenses	

Sect	on 501(c)(3) and 501(c)(4) organizations must con			mplete column (A)					
	Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b. (A) (B) (C) (D)								
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to domestic organizations								
	and domestic governments. See Part IV, line 21								
2	Grants and other assistance to domestic								
	individuals See Part IV, line 22	3,577,314.	3,577,314.						
3	Grants and other assistance to foreign								
	organizations, foreign governments, and foreign								
	individuals See Part IV, lines 15 and 16				_				
4	Benefits paid to or for members								
5	Compensation of current officers, directors,				 				
	trustees, and key employees	571,273.	413,049.	134,530.	23,694.				
6	Compensation not included above, to disqualified								
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages	6,051,785.	4,381,698.	1,418,778.	251,309.				
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)								
9	Other employee benefits	696,429.	484,027.	184,500.	27,902.				
10	Payroll taxes	478,964.	353,361.	105,241.	20,362.				
11	Fees for services (non-employees)								
а	Management								
b	Legal	97,775.	9,739.	88,036.					
С	Accounting	54,045.		54,045.					
d	Lobbying								
е	Professional fundraising services. See Part IV, line 17								
f	Investment management fees	156,891.		156,891.	<u> </u>				
g	Other (If line 11g amount exceeds 10% of line 25,								
	column (A) amount, list line 11g expenses on Sch O.)	2,107,523.	2,066,537.	40,559.	427.				
12	Advertising and promotion	1,178,214.	1,042,163.	130,421.	<u>427.</u> 5,630.				
13	Office expenses	70,797.	45,761.	25,036.					
14	Information technology								
15	Royalties								
16	Occupancy	697,620.	192,487.	505,133.					
17	Travel	243,768.	227,446.	13,397.	2,925.				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest	589,082.		589,082.					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	1,460,394.	1,234,912.	225,482.					
23	Insurance	133,821.	10,435.	123,386.					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)								
а	MISCELLANEOUS	497,273.	261,723.	194,990.	40,560.				
b	SOFTWARE LICENSES & FEE	305,211.	28,419.	276,792.					
c	BAD DEBT EXPENSE	230,533.	230,533.						
d	SUPPLIES	196,231.	196,231.						
	All other expenses	800,019.	262,841.	536,353.	825.				
25	Total functional expenses Add lines 1 through 24e	20,194,962.	15,018,676.	4,802,652.	373,634.				
26	Joint costs. Complete this line only if the organization				0/0/0040				
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation								
	Check here if following SOP 98-2 (ASC 958-720)								
									

Form 990 (2014)
Part X Balance Sheet

FKA MIDWAY COLLEGE

Pal	π χ	balance Sneet	_		
<u>. </u>		Check if Schedule O contains a response or note to any line in this Part X			
		•	(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	436,621.	_1	2,493,969.
	2	Savings and temporary cash investments	169,100.	2	100,568.
	3	Pledges and grants receivable, net	1,351,000.	3	450,000.
	4	Accounts receivable, net	291,511.	4	6,270,577.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L	493,634.	5	512,852.
	6	Loans and other receivables from other disqualified persons (as defined under			<u>, , , , , , , , , , , , , , , , , , , </u>
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	194,429.	9	174,225.
	10a	Land, buildings, and equipment cost or other	•		
		basis Complete Part VI of Schedule D 10a 36,356,709.			
	ь	Less accumulated depreciation 10b 18,208,016.	18,562,015.	10c	18,148,693.
	11	Investments - publicly traded securities	27,123,399.	11	26,376,060.
	12	Investments - other securities See Part IV, line 11	1,202,863.	12	546,936.
	13	Investments - program-related See Part IV, line 11	• • • • • • • • • • • • • • • • • • • •	13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	343,144.	15	482,720.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	50,167,716.	16	55,556,600.
	17	Accounts payable and accrued expenses	1,415,569.	17	1,505,086.
	18	Grants payable		18	
	19	Deferred revenue	871,117.	19	6,806,852.
	20	Tax-exempt bond liabilities	9,272,336.	20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Ě		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	12,223,205.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D	3,796,570.		2,434,329.
	26	Total liabilities. Add lines 17 through 25	15,355,592.	26	22,969,472.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
es		complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	16,496,267.	27	15,479,573.
Fund Balances	28	Temporarily restricted net assets	8,758,578.	28	7,349,484.
pq	29	Permanently restricted net assets	9,557,279.	29	9,758,071.
Ŀ		Organizations that do not follow SFAS 117 (ASC 958), check here			
S OF		and complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	· · · · · · · · · · · · · · · · · · ·
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds	24 010 101	32	20 505 400
_	33	Total net assets or fund balances	34,812,124.	33	32,587,128.
	34	Total liabilities and net assets/fund balances	50,167,716.	34	55,556,600.

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form	1990 (2014)FKA MIDWAY COLLEGE	61-0	4447	708	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI			_		X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,	118	1,1	16.
2	Total expenses (must equal Part IX, column (A), line 25)	2	20,	194	. , 9	62.
3	Revenue less expenses Subtract line 2 from line 1	3				46.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	34,	812	$1,\overline{1}$	24.
5	Net unrealized gains (losses) on investments	5				69.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9	<	248	, 8	81.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	32,	587	',1	28.
<u>Pa</u>	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
			_		Yes	No
1	Accounting method used to prepare the Form 990 L Cash X Accrual Cther		_	İ		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a	İ			
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		L	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		1		
	review, or compilation of its financial statements and selection of an independent accountant?		Ļ	2c	<u>X</u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt				
	Act and OMB Circular A-133?		L	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit	İ			

Form **990** (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.

Open to Public

Inspection

OMB No. 1545-0047

Name of the organization

MIDWAY UNIVERSITY, INC

FKA MIDWAY COLLEGE

Employer identification number 61-0444708

Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 9 activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11a Type 1. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

ganization (described on lines 1-9		(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see	(vi) Amount of other support (see
	(see instructions))	Yes	No	instructions)	Instructions)
				•	
		 			
	(ii) EIN	(described on lines 1-9 above or IRC section	(described on lines 1.9 above or IRC section governing of	(described on lines 1-9 above or IRC section governing document?	(described on lines 1-9 above or IRC section governing document? Instructions)

(Form 990 or 990-EZ) 2014 FKA MIDWAY COLLEGE 61-0444708 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Se	ction A. Public Support	_						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
1	Gifts, grants, contributions, and		- "					
	membership fees received (Do not					1		
	ınclude any "unusual grants ")							
2	Tax revenues levied for the organ-							
	ızatıon'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		<u></u>					
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,		•			ļ		
	column (f)					,		
6	Public support. Subtract line 5 from line 4							
S <u>e</u>	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	
7	Amounts from line 4							
8	Gross income from interest,	1						
	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>			
12	Gross receipts from related activities,	etc (see instructive	ons)			12		
13	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth ta	ax year as a secti	on 501(c)(3)		
<u> </u>	organization, check this box and stop	here						
	ction C. Computation of Publi			·		1 1		
	Public support percentage for 2014 (I	• • • • • • • • • • • • • • • • • • • •	•	column (f))		14	<u>%</u>	
	Public support percentage from 2013	•	•			15	<u>%</u>	
16a	33 1/3% support test - 2014. If the o				14 is 33 1/3% or	more, check this bo	x and	
	stop here. The organization qualifies as a publicly supported organization							
D	b 33 1/3% support test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
47.			• • •		- 40 - 40 40 -			
17a	10% -facts-and-circumstances test							
	and if the organization meets the "fac					aπ vi now the organ	ization	
L	meets the "facts-and-circumstances"	-	•		•	170 and less 45 :	1004 au	
D	10% -facts-and-circumstances test							
	more, and if the organization meets the				= -			
12	organization meets the "facts-and-circ Private foundation. If the organization				· · · · · ·			
10	Trivate foundation, if the organization	and not check a	DOX OF HIRE 13, 10	a, 100, 17a, 01 171	•	and see instruction edule A (Form 990	_	

Schedule A (Form 990 or 990 EZ) 2014 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.)

Section A. Public Support	iow, piedeo comp	oloto Falt III				
Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not						
include any "unusual grants ")						
2 Gross receipts from admissions,	İ					
merchandise sold or services per- formed, 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 bus-			İ			
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to	ļ					
or expended on its behalf						
5 The value of services or facilities	ļ					
furnished by a governmental unit to	ļ					
the organization without charge		.,, .				
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning ın) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b, whether or not the business is	ļ					
regularly carried on						
12 Other income Do not include gain						
or loss from the sale of capital assets (Explain in Part VI)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for t	he organization's	first, second, thir	d, fourth, or fifth to	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here						_ ▶□
Section C. Computation of Public	Support Per	rcentage				
15 Public support percentage for 2014 (lin	ie 8, column (f) di	vided by line 13, c	olumn (f))		15	%
16 Public support percentage from 2013	Schedule A, Part	III <u>, l</u> ine 15			16	%
Section D. Computation of Invest	tment Income	e Percentage				
17 Investment income percentage for 201	4 (line 10c, colum	nn (f) divided by lir	ne 13, column (f))		17	%
18 Investment income percentage from 20)13 Schedule A, I	Part III, line 17			18	%
19a 33 1/3% support tests - 2014. If the o	rganization did n	ot check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and						ightharpoons
b 33 1/3% support tests - 2013. If the o			•	•		and
line 18 is not more than 33 1/3%, chec						
20 Private foundation. If the organization					-	

Schedule A (Form 990 or 990-EZ) 2014 FKA MIDWAY COLLEGE

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 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)
- 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)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 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.
 - 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)

	Yes	No
1	-	
2		
За		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b 1990 or 99	0_E7\	2014

Sche	dule A (Form 990 or 990-EZ) 2014 FKA MIDWAY COLLEGE	61-044470	8 Pa	age 5
Pa	rt IV Supporting Organizations (continued)			
•			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	•		
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	_	
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		ĺ
Sec	tion C. Type II Supporting Organizations			
-			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			İ
	the supported organization(s)	1		ĺ
Sec	tion D. Type III Supporting Organizations	· 	·	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		100	100
-	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	`		1
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
~	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			ĺ
2	the organization maintained a close and continuous working relationship with the supported organization(s) By reason of the relationship described in (2), did the organization's supported organizations have a	2		
3			;	1
	significant voice in the organization's investment policies and in directing the use of the organization's		· '	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard			1
Sec	tion E. Type III Functionally-Integrated Supporting Organizations	3		<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see ins	tm ratio no lu		
' a	The organization satisfied the Activities Test Complete line 2 below	uucuons).		
b	The organization satisfied the Activities rest Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below			
c	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.	tu laaa matriatiana	a	
	Activities Test Answer (a) and (b) below.	ly (see instructions		
2	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	<u> </u>	Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			1
	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	<u>2a</u>		\vdash
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			ĺ
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			1
	reasons for the organization's position that its supported organization(s) would have engaged in these	1		1
	activities but for the organization's involvement	2b	ļ	 _
3	Parent of Supported Organizations Answer (a) and (b) below.	1		1
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			1
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	1		-
	of its supported organizations? If "Yes." describe in Part VI, the role played by the organization in this regard	3h		1

	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting			<u>61-0444708 Page 6</u>
٠.	Type in item i anotieriany integrated ecota/(e) cupper in			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	_		ructions. All
	other Type III non-functionally integrated supporting organizations must co	omplete S	ections A through E	(D) Comment Versi
Sect	ion 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	<u> </u>	
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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
_с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		
Sect	on 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	ly-integrat	ed Type III supporting ord	ganization (see
	instructions)		,, ,,	•

Schedule A (Form 990 or 990-EZ) 2014

	dule A (Form 990 or 990-EZ) 2014 FKA MIDWAY CO			<u>61-0444708 Page7</u>
Par	t V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Orga	anizations (continued)	
Secti	on D - Distributions	<u> </u>		Current Year
1	Amounts paid to supported organizations to accomplish ex	empt purposes	 	
2	Amounts paid to perform activity that directly furthers exem	npt purposes of supported		
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purpos	ses of supported organization	is	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which	the organization is responsive	e	
	(provide details in Part VI) See instructions			ļ
9	Distributable amount for 2014 from Section C, line 6		·····	<u></u>
10	Line 8 amount divided by Line 9 amount		r	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistrıbutions	(iii) Distributable
	· · · · · · · · · · · · · · · · · · ·		Pre-2014	Amount for 2014
1_	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>a</u>				
b				
<u>c</u>	·			
d	F 0010			<u> </u>
	From 2013			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
<u>i</u>	Carryover from 2009 not applied (see instructions)		<u>-</u> -	
_	Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2014 from Section D.			
4	line 7 \$			
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount		<u> </u>	
	Remainder Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if			
•	any Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2014 Subtract lines 3h			
_	and 4b from line 1 (if amount greater than zero, see			
	instructions)			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c			
8	Breakdown of line 7			**************************************
а				
b				
С				
d	Excess from 2013			

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

MIDWAY UNIVERSITY, INC Schedule A (Form 990 or 990 EZ) 2014 FKA MIDWAY COLLEGE 61-0444708 P Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 61-0444708 Page 8 Also complete this part for any additional information (See instructions)

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2014

Open to Public Inspection

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

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

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

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

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

 Section 501(c)(4), (5)), or (6) organiza	tions Complete Part III			
Name of organization	MIDWAY	UNIVERSITY, INC		Emple	oyer identification number
	FKA MID	WAY_COLLEGE			61-0444708
Part I-A Comple	ete if the org	janization is exempt und	ler section 501(c)	or is a section 527 or	rganization.
 Provide a description Political expenditure Volunteer hours 	ū	ation's direct and indirect politic	al campaign activities		
Part I-B Comple	ete if the ord	janization is exempt und	ler section 501(c)	(3).	
		incurred by the organization und		▶\$	
	•	incurred by organization manag		_	
	•	n 4955 tax, did it file Form 4720			Yes No
4a Was a correction m	nade?	·	•		Yes No
b If "Yes," describe in	n Part IV				
Part I-C Comple	ete if the org	janization is exempt und	ler section 501(c)	, except section 501(c)(3).
1 Enter the amount d	lirectly expended	by the filing organization for se	ction 527 exempt fund	ction activities >\$	
2 Enter the amount o	of the filing organ	ization's funds contributed to ot	her organizations for s	section 527	
exempt function ac	tivities			▶\$	
3 Total exempt functi	on expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL	- 1	
line 17b				▶\$	
4 Did the filing organi	zation file Form	1120-POL for this year?			Yes No
5 Enter the names, a	ddresses and er	nployer identification number (El	N) of all section 527 p	olitical organizations to whic	h the filing organization
• •	•	tion listed, enter the amount pai			·
		omptly and directly delivered to	. , .	•	te segregated fund or a
political action com	imittee (PAC) If	additional space is needed, prov	vide information in Part	t IV	T
(a) Name	e	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter 0-	contributions received and promptly and directly
				lunus il none, enter -o-	delivered to a separate
					political organization
					If none, enter -0-
	•				
		<u>. </u>			
					
					1

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

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 F			n 501(a)(2) and file	61-0	0444708 Page 2
section 501(h)).	iiiizatioii is exe	ampi under Section	on soricitist and the	a Form 5706 (election under
	an balance to an of	filiated aroun (and list i	n Dort IV apply officeted		no address CIN
			n Part IV each affiliated	group member's nar	ne, address, Eliv,
expenses, and share	, ,	g expenditures) and "limited control" pr	overene ennh		
B Check ► if the filing organizati	on checked box A	and innited control pr	ovisions apply	(a) Filing	(b) Affiliated group
	on Lobbying Exp			organization's	totals
(The term "expendi	tures" means amo	ounts paid or incurred	.)	totals	
1a Total lobbying expenditures to influe	ence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influe			-		
c Total lobbying expenditures (add lin	-	out (under lood) mg/			
d Other exempt purpose expenditures	•		ļ		
e Total exempt purpose expenditures		d)	Ī		_
f Lobbying nontaxable amount Enter	•	•	th columns		
If the amount on line 1e, column (a) or		bbying nontaxable am			
Not over \$500,000	•-•	f the amount on line 1e			
Over \$500,000 but not over \$1,000,		000 plus 15% of the exc			
Over \$1,000,000 but not over \$1,50		000 plus 10% of the ex			
Over \$1,500,000 but not over \$17,0		\$225,000 plus 5% of the excess over \$1,500,000			
Over \$17,000,000	\$1,000	0,000			
		<u></u>			
g Grassroots nontaxable amount (ente	er 25% of line 1f)		-		
h Subtract line 1g from line 1a If zero	or less, enter -0-				
j Subtract line 1f from line 1c If zero	or less, enter -0-				
j If there is an amount other than zero	on either line 1h o	r line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this ye	ear?				Yes No
	4-Year A	veraging Period Under	section 501(h)		
(Some organizations that		, -	•	f the five columns l	below.
	<u> </u>	rate instructions for li			
	Lobbying Expe	enditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
		 			
2a Lobbying nontaxable amount					
b Lobbying ceiling amount		 			
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))		ļ			
f Grassroots lobbying expenditures					<u> </u>

Schedule C (Form 990 or 990-EZ) 2014

Schedule C (Form 990 or 990-EZ) 2014 FKA MIDWAY COLLEGE

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description (a)	(b)
of the lobbying activity Yes No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or	
local legislation, including any attempt to influence public opinion on a legislative matter	
or referendum, through the use of	
a Volunteers?	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	
c Media advertisements?	
d Mailings to members, legislators, or the public?	
e Publications, or published or broadcast statements?	
f Grants to other organizations for lobbying purposes?	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	
i Other activities?	469.
J Total Add lines 1c through 1i	469.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	
b If "Yes," enter the amount of any tax incurred under section 4912	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)	n
501(c)(6).	es No
	es No
1 Were substantially all (90% or more) dues received nondeductible by members? 1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 3	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section	n .
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-	
answered "Yes."	,,
1 Dues, assessments and similar amounts from members 1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	
expenses for which the section 527(f) tax was paid).	
a Current year	
b Carryover from last year	
c Total 2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	
expenditure next year?	
5 Taxable amount of lobbying and political expenditures (see instructions) 5	
Part IV Supplemental Information	
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2	(see
instructions), and Part II-B, line 1. Also, complete this part for any additional information	
PART II-B, LINE 1, LOBBYING ACTIVITIES:	
MIDWAY UNIVERSITY IS A MEMBER OF THE KENTUCKY CHAMBER OF COMMERCE A	ND
COMMERCE LEXINGTON, TO WHICH IT PAID DUES OF \$960, \$144 OF WHICH WE	IRE
ALLOCATED TO LOBBYING. MIDWAY UNIVERSITY IS A MEMBER OF THE NATION	IAL
ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES, TO WHICH IT I	
DUES OF \$3,077, \$215 OF WHICH WERE ALLOCATED TO LOBBYING. MIDWAY	

Schedule C (Form 990 or 990-EZ) 2014 FKA MIDWAY COLLEGE	<u>61-04447</u>	08 Page 4
Part IV Supplemental Information (continued)		
UNIVERSITY IS ALSO A MEMBER OF OTHER PROFESSIONAL ASSOCIAT	IONS, TO	
WHICH IT PAID DUES IN TOTAL OF \$2,820, \$110 OF WHICH WERE	ALLOCATED	TO
LOBBYING.		
		
		
		-

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

2014
Open to Public Inspection

Name of the organization

MIDWAY UNIVERSITY, INC FKA MIDWAY COLLEGE

Employer identification number 61 – 0444708

Part I 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 (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 4 Aggregate value at end of year 5 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? 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 conferring impermissible private benefit? Part II | 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 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 Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 R Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 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 (i) Revenue included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

a Revenue included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

		WAY COLLEG						61-04			age 2
Pa	rt III Organizations Maintaining C	collections of A	rt, H <u>is</u>	torical Tr	easures,	or Othe	r Simil	ar Asse	ts(contil	nued)	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following the	at are a sig	ınıfıcant	use of its	collectio	n item	s
	(check all that apply)										
а	Public exhibition	c	ı 🖳	Loan or exc	hange progr	ams					
b	Scholarly research	e	, 🗀	Other	<u> </u>					_	
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how tl	ney further t	he organızat	ion's exem	ıpt purp	ose in Parl	XIII		
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	sures, or oth	ner sımılar i	assets				
	to be sold to raise funds rather than to be ma								Yes		No
Pa	rt IV Escrow and Custodial Arran	gements. Compl	ete if the	organizatio	n answered	"Yes" to F	orm 990), Part IV, I	ine 9, or		
	reported an amount on Form 990, Pa	rt X, line 21									
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	is or other a	ssets not i	ncluded		_		_
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing	table							
									Amoun	t	
C	Beginning balance						1c_				
ď	Additions during the year						1d_				
е	Distributions during the year						1e				
f	Ending balance						1f		_		
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21, for	escrow or cu	ustodial acco	ount liabilit	y?		Yes		No
b	If "Yes," explain the arrangement in Part XIII	Check here if the ex	xplanation	on has been	provided in	Part XIII]
Pai	rt V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 10)		_		
		(a) Current year	(b) F	rior year	(c) Two yea	rs back (d) Three	years back	(e) Four	r years	back
1a	Beginning of year balance	28,441,930.	24	913,995.	22,46	3,422.	23.2	254,482.	18	.762.	497.
b	Contributions	823,664.		223,917.	19	1,605.	2.	768,406.		.958.	
С	Net investment earnings, gains, and losses	<122,984.	> 3	952,630.	3,20	8 656.		341,664.		355.	
d	Grants or scholarships				·				,		
е	Other expenditures for facilities										
	and programs	2,172,576.		648 612.	94	9,688.	4.4	101,130.	2	.822.	563.
f	Administrative expenses			•							
g	End of year balance	26,970,034.	28	441,930.	24.91	3,995.	22.4	163,422.	23	,254,	482.
2	Provide the estimated percentage of the curi	ent year end balanc	e (line 1	g, column (a		•	,			, ,	
а	Board designated or quasi-endowment	36.57	%	•	••						
b	Permanent endowment ► 36.18	%									
С	Temporarily restricted endowment ▶ 2	7.2 5 %									
	The percentages in lines 2a, 2b, and 2c shou										
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	nd administe	ered for the	e organı	zation			
	by									Yes	No
	(i) unrelated organizations								3a(i)	Х	
	(ii) related organizations								3a(ii)		Х
b	If "Yes" to 3a(II), are the related organizations	listed as required o	n Sche	dule R?					3b		
4	Describe in Part XIII the intended uses of the	organization's endo	wment	funds							
Par	t VI Land, Buildings, and Equipm							•			
	Complete if the organization answered	d "Yes" to Form 990	, Part IV	, line 11a S	ee Form 990), Part X, III	ne 10				
	Description of property	(a) Cost or o		(b) Cost			cumulate	ed	(d) Boo	k valu	е
	, , , , , , , , ,	basis (investr		basis			eciation	I	,_,_		
1a	Land			1,48	6,824.				1,48	6.8	24.
	Buildings				5,083.	13,1	05.5		5,26		
	Leasehold improvements				,		1 -	<u> </u>			
	Equipment			4.74	8,320.	3.7	86,3	99.	96	1,9	21.
	Other				$\frac{6,482}{6}$		$\frac{36,0}{16,0}$		43		94.
	Add lines 1s through 1s. (Column (d) must s	gual Form 000 Part	Y colur			<u> </u>		1		8 6	

Schedule D (Form 990) 2014

FKA MIDWAY COLLEGE

Complete if the organization answered "Yes" to	to Form 990 Part IV II	ne 11h See Form 900 Pod	X line 12	
(a) Description of security or category (including name of security)	(b) Book value			d-of-year market value
(1) Financial derivatives			·	
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)			-	
(D)				
(E)			-	
(F)				
(G)				
(H)				
Total (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes" t	to Form 990, Part IV, II			
(a) Description of investment	(b) Book value	(c) Method of valua	ation Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)		-		
(6)				
(7)				
(8)				
(9)				
Total (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes" t	o Form 990, Part IV, li	ne 11d See Form 990, Part	X, line 15	
(a) [Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	: 15)		>	
Part X Other Liabilities.				
Complete if the organization answered "Yes" t	o Form 990, Part IV, II		0, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) ANNUITIES PAYABLE		434,329.		
(3) LINE OF CREDIT		2,000,000.		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	25)	2,434,329.		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 FKA MIDWAY COLLEGE		61-0444708 Page 4
Part XI Reconciliation of Revenue per Audited Financial State	•	Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line	: 12a	
Total revenue, gains, and other support per audited financial statements		1 14,391,261.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1 200 250	
a Net unrealized gains (losses) on investments	2a <1,899,269.	.♪
b Donated services and use of facilities	2b	-{
c Recoveries of prior year grants	2c	-[
d Other (Describe in Part XIII)	2d 77,391.	
e Add lines 2a through 2d		2e <1,821,878.
3 Subtract line 2e from line 1		3 16,213,139.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.1 156 000	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a 156,892.	
b Other (Describe in Part XIII)	4b 3,748,085.	¬ ,
c Add lines 4a and 4b		4c 3,904,977.
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5 20,118,116.
Part XII Reconciliation of Expenses per Audited Financial Sta	· · · · · · · · · · · · · · · · · · ·	r Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line	12a	16 616 050
1 Total expenses and losses per audited financial statements		1 16,616,258.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1 - 1	
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	4
c Other losses	2c	4
d Other (Describe in Part XIII)	2d 326,273.	- I
e Add lines 2a through 2d		2e 326,273.
3 Subtract line 2e from line 1		3 16,289,985.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	1.1 156 000	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a 156,892.	
b Other (Describe in Part XIII)	4b 3,748,085.	-
c Add lines 4a and 4b		4c 3,904,977.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 Part XIII Supplemental Information.)	5 20,194,962.
<u> </u>		15.171.05.17
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4		4, Part X, line 2, Part XI,
lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide an	y additional information	
		· — ·-· ·
DADM W ITNE A.		
PART V, LINE 4:		
ENDORMENT PINDS ADE UEID DY MUE INTUEDSTM	V AND HEED BOD MHE	DIIDDOGE
ENDOWMENT FUNDS ARE HELD BY THE UNIVERSITY	I AND USED FOR THE	PURPOSE
STIPULATED BY THE DONOR. CURRENTLY, THE EN	NIDOWNEND EITHIDS OF S	NUE INTVENCTAN
SITPULATED BY THE DONOR. CURRENTLY, THE EN	NDOWMENT FUNDS OF T	THE UNIVERSITY
ADE DIDECMED BY DOMODO MO DECUIDE MILIMION	COURT ADDITED FOR A	ATDWAY
ARE DIRECTED BY DONORS TO PROVIDE TUITION	SCHOLARSHIPS FOR I	ILDWAI
UNIVERSITY STUDENTS AND OFFSET COMPENSATION	ON EVDENCE OF MIDW	V INITUEDCEMY
UNIVERSITI STUDENTS AND OFFSET COMPENSATIO	ON EXPENSE OF MIDWA	AI UNIVERSITI
FACULTY. IT IS MIDWAY UNIVERSITY'S INTENT	MO COMPLY WIND MILE	E DOMODC!
FACOLIT. II IS MIDWAI UNIVERSITI S INTENT	TO COMPLE WITH THE	E DONORS
STIPULATIONS FOR THESE FUNDS.		
SITFORMITONS FOR THESE FONDS.		
PART X, LINE 2:		
PART A, DINE 2:		
MUE INTUEDCIMY TO EVENDE EDOM INCOME MAVE	C INDED CECUTON FOI	1/G)/3) OB MUB
THE UNIVERSITY IS EXEMPT FROM INCOME TAXES	P ONDER PECITON 201	L(C)(3) OF THE
THERRIAL DEVENITE CODE AND A CIMILAD PROVIDE	CTON OF CONTROL TAGE	nomerren was
INTERNAL REVENUE CODE AND A SIMILAR PROVIS	SION OF STATE LAW.	HOWEVER, THE
TINITUPP CITY TO CITE TECH HO PEDEDAT TATOONE HE	AY ON ANY INDEFACE) DIICTNECC
UNIVERSITY IS SUBJECT TO FEDERAL INCOME TO 432054	AA ON ANI UNKELATEL	
10-01-14		Schedule D (Form 990) 2014

Schedule D (Form 990) 2014 FKA MIDWAY COLLEGE Part XIII Supplemental Information (continued)	61-0444708 Page 5
TAXABLE INCOME. THE UNIVERSITY IS NOT CONSIDERED TO BE A	PRIVATE
FOUNDATION.	
TOOMBITTON.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
EXPENSES NETTED AGAINST REVENUE ON 990	31,062.
CHANGE IN FAIR MARKET VALUE OF INTEREST RATE SWAP	46,329.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	77,391.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
	2 577 214
REVENUE NETTED AGAINST EXPENSES ON FINANCIAL STATEMENTS	_
TOTAL TO SCHEDULE D, PART XI, LINE 4B	3,748,085.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
ANNUITY LIABILITY ADJUSTMENT	10,151.
DECREASE IN ASSETS HELD IN TRUST	285,060.
EXPENSES NETTED AGAINST REVENUE ON 990	31,062.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	326,273.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
SCHOLARSHIPS AND FELLOWSHIPS	3,577,314.
REVENUE NETTED AGAINST EXPENSES ON FINANCIAL STATEMENTS	170,771.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	3,748,085.
PART V, LINE 2C	
TERM ENDOWMENT INCLUDES TEMPORARILY RESTRICTED FUNDS.	
TENE ENDOWMENT INCHODES TEMPORATILI RESTRICTED FUNDS.	

SCHEDULE E

Department of the Treasury Internal Revenue Service

Part I

(Form 990 or 990-EZ)

Schools

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

► Attach to Form 990 or Form 990-EZ.

2014

Open to Public Inspection

Name of the organization

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

MIDWAY UNIVERSITY, INC Emplo

FKA MIDWAY COLLEGE

Employer identification number

61-0444708

			YES	NO
1	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	Х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			
	period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes			
	the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain			
	If you need more space, use Part II	3	X	
	ALL PUBLIC ADVERTISEMENTS, AS WELL AS LITERATURE GIVEN TO			
	PROSPECTIVE STUDENTS, DESCRIBES THE UNIVERSITY AS BEING AN			
	EQUAL OPPORTUNITY INSTITUTION.			
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student			
	admissions, programs, and scholarships?	4c	X	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	5a		Х
b	Admissions policies?	5b		X
c	Employment of faculty or administrative staff?	5c		_X_
d	Scholarships or other financial assistance?	5d	X	
е	Educational policies?	5e		X
f	Use of facilities?	5f		<u>X</u>
g	Athletic programs?	5g		_X_
h	Other extracurricular activities?	5h		_X_
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
	MIDWAY UNIVERSITY HAS ESTABLISHED A SCHOLARSHIP FUND FOR ALL			
	MINORITY STUDENTS. MINORITY STUDENTS ARE ELIGIBLE TO RECEIVE			
	100% TUITION SCHOLARSHIPS.		:	
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Х	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		X
	If you answered "Yes" to either line 6a or line 6b, explain on Part II			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of			
	Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	

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

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

Schedule E (Form 990 or 990-EZ) (2014) FKA MIDWAY COLLEGE 61-0444708 Page 2 Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable
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
Also provide any other additional information
LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:
THE UNIVERSITY ACTS AS A CONDUIT FOR DISBURSING STUDENT FINANCIAL AID
THE CHITTENESS IN COMPOSE TON DEPONDENCE DECORAGE STREET
PAYMENTS TO STUDENTS FROM FUNDS PROVIDED BY FEDERAL AGENCIES. THE PURPOSES
OF THE FUNDS ARE DEFINED BY FEDERAL AGENCIES. THEY ARE DISBURSED BY THE
UNIVERSITY IN ACCORDANCE WITH THOSE DEFINED PURPOSES.

SCHEDULE G

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

ZU 14Open to Public

Inspection

Name of the organization

MIDWAY UNIVERSITY, INC

Employer identification number

FKA MIDWAY COLLEGE 61-0444708 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants С Phone solicitations Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) Y<u>es</u> No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

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

Schedule G (Form 990 or 990-EZ) 2014

MIDWAY UNIVERSITY, INC Schedule G (Form 990 or 990-EZ) 2014 FKA MIDWAY COLLEGE 61-0444708 Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events SPOTLIGHT NONE (add col (a) through AWARDS col (c)) (total number) (event type) (event type) Revenue Gross receipts 113,430. <u>113,430.</u> 49,505 <u>49,505.</u> 2 Less Contributions 63,925 63,925. Gross income (line 1 minus line 2) Cash prizes Noncash prizes Direct Expenses Rent/facility costs 7 Food and beverages Entertainment 8 18,133. 18,133. 9 Other direct expenses 10 Direct expense summary Add lines 4 through 9 in column (d) 18,133. Net income summary Subtract line 10 from line 3, column (d) 45.792 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses % Yes Yes Yes Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities a Is the organization licensed to conduct gaming activities in each of these states? Yes b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes b If "Yes," explain

Schedule G (Form 990 or 990-EZ) 2014

<u>Sch</u>	edule G (Form 990 or 990-EZ) 2014 FKA MIDWAY COLLEGE 6	<u>1-0444708</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	□ No
13	Indicate the percentage of gaming activity conducted in		
	The organization's facility	13a	%
	An outside facility	13b	- %
	Enter the name and address of the person who prepares the organization's gaming/special events books and records	<u> </u>	
• •	Enter the manife and address of the person time properties the organization organization of gamming operation of the person and records		
	Name >		
	Name		
	Address		
	Address >		.
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amoun	t	
	of gaming revenue retained by the third party > \$		
С	If "Yes," enter name and address of the third party		
	Name		
	Address ▶		
16	Gaming manager information		
	Name		
	Commo monocov componentum b . C		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
	biroctor/officer Employee macpendent contractor		
17	Mandatory distributions		
	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
a	retain the state gaming license?	Yes	No
h	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in		140
D	organization's own exempt activities during the tax year > \$	urie	
Рa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Par	+ III Junga 0, 0h, 10h	. 155
	15c, 16, and 17b, as applicable Also provide any additional information (see instructions)	t III, IIIIes 9, 90, TOI	J, 13D,
	100, 10, and 170, as applicable Also provide any additional information (see instructions)		
			<u> </u>
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Cabadula C	/Farm 000 at 000 F7)	MIDWAY U	NIVERSITY,	INC		61-0444708 Page4
Part IV	(Form 990 or 990 EZ) Supplemental Infor	mation (continu	VAI COLLEGE	<u> </u>		01-0444708 Page 4
i are iv	- Cupplemental intol	That on Continu	Jeu)			
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SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization MIDWAY UNIVERSITY, INC

FKA MIDWAY COLLEGE

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

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

▶ Attach to Form 990.

OMB No 1545-0047	2014	Open to Public	Inspection

Employer identification number

61-0444708

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

Part General Information on Grants and Assistance	and Assistance						00/1110
- 8	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the select	uo.
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ocedures for moni	toring the use of grant	funds in the Unite	d States		:	
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any received more than \$5,000. Bart II can be disclosed if additional space is peeded.	Domestic Organi	zations and Domesti	c Governments.	Complete if the orga	anization answered "\	res" to Form 990, Part I	V, line 21, for any
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
 2 Enter total number of section 501(c)(3) and government organizations i 3 Enter total number of other organizations listed in the line 1 table 	ind government or s listed in the line	ganizations listed in th 1 table	isted in the line 1 table				
_ ا	, see the Instruct	ions for Form 990.					Schedule I (Form 990) (2014)

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MIDWAY UNIVERSITY, INC

Page 2

61-0444708

FKA MIDWAY COLLEGE

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Schedule I (Form 990) (2014)

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV | Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information THE FUNDS ARE CREDITED DIRECTLY TO THE STUDENT'S ACCOUNT, WHICH DIRECTLY 0. (d) Amount of non-cash assistance 3,577,314. (c) Amount of cash grant (b) Number of recipients 326 OFFSETS TUITION, FEES, ROOM AND BOARD (a) Type of grant or assistance PART I, LINE 2: SCHOLARSHIPS

432102 10-15-14

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.

Open to Public

Employer identification number

61-0444708

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

FKA MIDWAY COLLEGE

Part I **Questions Regarding Compensation**

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

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

Schedule J (Form 990) 2014

61-0444708

Schedule J (Form 990) 2014

2014 FIX MIDWAI COULEGE

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

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

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

								•
		(B) Breakdown of W-2	W-2 and/or 1099-MIS	and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	compensation		(a)-(i)(a)	reported as deferred in prior Form 990
(1) DR. JOHN P. MARSDEN	€	227,107.	0	0.	0	53.832.	280,939.	0
SIDENT	: ≘	0	0	0	0	4	4	0
A S. ARMESTO	ε	160,00	0	0	0	6,756.	166,756.	0
OST	≘		0.	0	0	0.	0	
(3) MARK R. WADLINGTON	Θ	150,000.	0.	0.	0	6,193.	156,193.	
PRESIDENT UNTIL 5/8/15	▣	0	0.	0.	• 0	0	0	
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Schedule J (Form 990) 2014

Part III Supplemental Information Schedule J (Form 990) 2014

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

PART I, LINE 1A:
HEALTH AND SOCIAL CLUB DUES AND INITIATION FEES: SOCIAL CLUB DUES AND
QUARTERLY REQUIRED MEAL FEES FOR THE PRESIDENT ARE PAID BY MIDWAY COLLEGE.
THE PERSONAL PORTION OF THE DUES IS ADDED TO THE W-2 OF THE PRESIDENT.
MIDWAY COLLEGE PROVIDES FOR MEALS TO THE PRESIDENT FOR ON-CAMPUS, BUSINESS
ACTIVITIES DIRECTED BY THE BOARD.
HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE: MIDWAY COLLEGE PROVIDES
THE PINKERTON-ROUSE, A HISTORICAL RESIDENCE, TO THE COLLEGE
PRESIDENT, WHICH IS FURNISHED FOR THE CONVENIENCE OF THE COLLEGE AND IS
REQUIRED AS A CONDITION OF THE PRESIDENT'S EMPLOYMENT.

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Name of the organization

Transactions With Interested Persons

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

► Attach to Form 990 or Form 990-EZ.

INC

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

MIDWAY UNIVERSITY,

Employer identification number

Inspection

OMB No 1545-0047

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

	\$	
_	•	

Part II	Loans to and/or From	n In	terested	Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization

reported an amount on Form 990, Part X, line 5, 6, or 22 (h) Approved (d) Loan to or (a) Name of (c) Purpose (e) Original (i) Written (b) Relationship (f) Balance due (g) In by board or from the interested person of loan with organization principal amount default? agreement? committee? organization? To From Yes No Yes No Yes No DR. WILLIAM DRAFORMER PINVESTME Х 6,662. 512,852 Х Х X 512,852

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization	n answered "Yes" on Form 990, Pa	art IV, line 27		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
			-	

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

Schedule L (Form 990 or 990-EZ) 2014

SEE PART V FOR CONTINUATIONS

Schedule L (Form 990 or 990-EZ) 2014 FKA MI	UNIVERSITY, INC		61-0444	1708	Page 2
Part IV Business Transactions Involv Complete if the organization answered	=	8h or 28c			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	aring of zation's nues?
				Yes	No
				<u> </u>	
				 	
					
				-	
Part V Supplemental Information				<u></u>	<u></u>
Provide additional information for response	onses to questions on Schedule L (see	instructions)			
SCHEDULE L, PART II, LOANS	TO AND FROM INTERE	STED PERSOI	NS:	•	
(A) NAME OF PERSON: DR. WI	LLIAM DRAKE				
(B) RELATIONSHIP WITH ORGA	NIZATION: FORMER PR	ESIDENT			
(C) PURPOSE OF LOAN: INVES	TMENT				
(D) LOAN TO OR FROM ORGANI	ZATIONS - FROM				
(E) ORIGINAL PRINCIPAL AMO	OUNT \$ 6,662. (F) B	ALANCE DUE	\$ 512,852.		
(G) LOAN IN DEFAULT? = NO				·	
(H) APPROVED BY BOARD OR C	OMMITTEE? = YES				
/T WOTOMEN ACDERMENTS V	The C				
(I) WRITTEN AGREEMENT? = Y	<u> </u>				<u> </u>
				_	
		_			

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

OMB No 1545-0047

Open To Public Inspection

Name of the organization

MIDWAY UNIVERSITY, INC

FKA MIDWAY COLLEGE

Employer identification number

61-0444708

Pa	rt I Types of Property					•			
		(a) Check if applicable	(b) Number of contributions or items contributed	Noncash contr amounts report Form 990, Part V	rted on	noncash	(d) od of det contribut	ermining ion amoui	nts
1	Art - Works of art		Items ophribates	101111 000; 1 411 1	111, 11110 1	1-1			
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods		1.1						
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock							·	
11	Securities - Partnership, LLC, or								
••	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -			-					
.0	Historic structures								
14	Qualified conservation contribution - Other						•		
15	Real estate - Residential					1			
16	Real estate - Commercial								
17	Real estate - Other	-				-			
18	Collectibles								
19	Food inventory			<u> </u>					
20	Drugs and medical supplies								
21	Taxidermy					- 	,		
22	Historical artifacts								
	Scientific specimens					 	·-·		
23	Archeological artifacts					 			
24	Other (HORSES)	Х	6	247	499.	FAIR MA	DVEM	373 T TTI	
25	Other (SILENT AUCTIO)	X	44		911.				
26 27	Other (EQUINE TACK &)	X	8		214.			VALU	
	Other (EVENT TICKETS)	X	1	۷,	352.	FAIR MA		VALU	
<u>28</u> 29	Number of Forms 8283 received by the organic		L	entributions	<u> </u>	THAIR MA	KKEI	AVIO	<u>. </u>
29	for which the organization completed Form 82				29				2
	101 Which the organization completed Form 62	03, Fait IV, I	Jonee Acknowled(gement	29				$\overline{}$
30a	During the year, did the organization receive b	y contributio	on any property rep	oorted in Part I, lin	es 1 thro	ugh 28, that it	Γ	Yes	No_
	must hold for at least three years from the date	e of the initia	I contribution, and	which is not requ	iired to b	e used for			
	exempt purposes for the entire holding period		•	·				30a	X
b	If "Yes," describe the arrangement in Part II								
31	Does the organization have a gift acceptance	oolicy that re	equires the review	of any non-standa	rd contri	butions?		31 X	
	Does the organization hire or use third parties						-		T
	contributions?		<u> </u>	.,,				32a	X
b	If "Yes," describe in Part II								
33	If the organization did not report an amount in	column (c) f	or a type of prope	ty for which colun	nn (a) is c	hecked,			
	describe in Part II								
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.		Sche	dule M (F	orm 990)	(2014)

MIDWAY UNIVERSITY, INC Schedule M (Form 990) (2014) FKA MIDWAY COLLEGE 61-0444708 Page 2 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

432211 08-27-14

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Information about Schedule 0 (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

MIDWAY UNIVERSITY, INC FKA MIDWAY COLLEGE

Employer identification number 61-0444708

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
WOMEN AND IN COEDUCATIONAL UNDERGRADUATE AND GRADUATE PROGRAMS THROUGH
A STUDENT-CENTERED, GLOBAL EDUCATION THAT LEADS TO REWARDING CAREERS
AND RESPONSIBLE CITIZENSHIP.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IN THE EVENING AND ONLINE. DEGREES OFFERED INCLUDE ASSOCIATE,
BACCALAUREATE AND MASTER'S DEGREES.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
THE UNIVERSITY PROVIDES AUXILIARY SERVICES FOR STUDENTS AND FACULTY.
THESE SERVICES INCLUDE FOOD SERVICES AND RESIDENCE HALL ACTIVITIES.
EXPENSES \$ 2,127,907. INCLUDING GRANTS OF \$ 0. REVENUE \$ 27,413.
FORM 990, PART VI, SECTION B, LINE 11:
POLICY FOR REVIEWING 990: THE BOARD REVIEWED THE 990 AT A MEETING PRIOR TO
FILING THE 990.
FORM 990, PART VI, SECTION B, LINE 12C:
A CONFLICT OF INTEREST FORM IS COMPLETED ANNUALLY AND MONITORED BY THE
PRESIDENT'S OFFICE IN CONJUNCTION WITH THE CHAIRMAN OF THE BOARD OF
TRUSTEES.
FORM 990, PART VI, SECTION B, LINE 15A:
THE PRESIDENT'S COMPENSATION IS DETERMINED BY THE EXECUTIVE COMMITTEE OF
THE BOARD OF TRUSTEES. ANNUALLY AT THE MAY MEETING OF THE BOARD OF

Schedule O (Form 990 or 990-EZ) (2014) Name of the organization MIDWAY UNIVERSITY, INC	Page 2 Employer identification number
FKA MIDWAY COLLEGE	61-0444708
TRUSTEES THE EXECUTIVE COMMITTEE DELIBERATES UPON THEIR E	VALUATION OF THE
PRESIDENT'S PERFORMANCE AND PRESIDENTIAL COMPENSATION DAT	'A
ALL OTHER EXECUTIVES AND KEY EMPLOYEE'S COMPENSATION IS D	ETERMINED BY THE
PRESIDENT. PERFORMANCE EVALUATIONS ARE CONDUCTED ANNUALLY	BY DEPARTMENT
DIRECTORS AND VICE-PRESIDENT IN-CHARGE. THE EVALUATIONS I	NCLUDING
COMPENSATION INCREASES ARE THEN FORWARDED TO THE PRESIDEN	T. THE PRESIDENT_
REVIEWS THE EVALUATIONS AND SUGGESTED COMPENSATION INCREA	SES THEN
DETERMINES EACH EMPLOYEE'S COMPENSATION INCREASE.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION'S 990,990T, AND GOVERNING DOCUMENTS MAY	BE AVAILABLE UPON
REQUEST. THE FINANCIAL STATEMENTS ARE NOT AVAILABLE TO T	HE PUBLIC.
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING & OUTSOURCED SERVICES:	
PROGRAM SERVICE EXPENSES	2,066,537.
MANAGEMENT AND GENERAL EXPENSES	40,559.
FUNDRAISING EXPENSES	427.
TOTAL EXPENSES	2,107,523.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	2,107,523.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
ANNUITY LIABILITY ADJUSTMENT	-10,151.
INCREASE IN INTEREST IN ASSETS HELD IN TRUST	-285,059.
CHANGE IN FAIR MARKET VALUE OF INTEREST RATE SWAP	

<u>TOTAL TO FORM 990, PART XI, LINE 9</u>
432212
08-27-14

AGREEMENTS

-248,881. Schedule O (Form 990 or 990-EZ) (2014)

46,329.

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
#ame of the organization MIDWAY UNIVERSITY, INC FKA MIDWAY COLLEGE	Employer identification number 61-0444708
	01-0444708
FORM 990, PART XII, LINE 2C	
THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR FOR OVERS	IGHT OF THE
AUDIT OR SELECTION OF THE AUDITORS.	
FORM 990, PART VII	
THE AMOUNTS OF OTHER COMPENSATION FROM THE UNIVERSITY IN	COLUMN (F)
INCLUDE A NON-TAXABLE HOUSING BENEFIT FOR PRESIDENT DR. J	OHN P. MARSDEN
OF \$47,077. THIS VALUE REPRESENTS THE ANNUAL FAIR RENTAL	VALUE OF THE
PROPERTY PER IRC SECTION 119(D) PLUS DIRECT UTILITIES AND	EXPENSES OF
THE PROPERTY.	
	