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DLN: 93493123012207

Department of the Treasury

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

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

Return of Organization Exempt From Income Tax

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

ntema	al Rever	nue Servic	ce						Inspection
A Fo	or the	2015 ca	lendar year, or tax year	beginning 07-01-2015 , and ending	9 06-30-2016				
3 Che	ck if ap	oplicable	C Name of organization Philadelphia University			DE	mployer	identific	cation number
Ad	dress cl	hange	% STEPHEN SPINELLI			2	3-1352	2294	
	me cha	-	Doing business as						
Ini Fir	tıal retu	nm							
	iai temina	ated	Number and street (or P of School House Lane and H	O box if mail is not delivered to street addres	ss) Room/suite		elephone	number	
— Am	ended i	return		,		(2	15)95	1-2700)
App	olication	n pending	City or town, state or pro Philadelphia, PA 19144	vince, country, and ZIP or foreign postal code	.	G G	ross rece	epts \$ 1 43	3,255,147
			F Name and address	of principal officer		H(a) Is this a g	roup re	turn for	
			Stephen Spinelli	.d.I		subordinat			☐ Yes 🗸
			School House Lane an PhiladelphiaPA, PA 1	•		No			
[Tax	k-exem	pt status	√ 501(c)(3)	c) () ◀ (insert no) 4947(a)(1) or	527	H(b) Are all substituted?	ooraina	tes	⊤Yes
ı w	ebsit e	::► wwv	w philau edu			If "No," at H(c) Group exe		•	e instructions)
/ Fam	o of ora		✓ Corporation Trust	Association ☐ Other ▶		L Year of formatio			e of legal domicile PA
X FOIII	1 01 019	janization	♥ Corporation Trust	Association Other		1			g
Pa	rt I	Sum	mary			-			
nce	PH	HILADE		s mission or most significant activitie 6 A STUDENT - CENTERED INSTITU OBAL MARKETPLACE		PREPARES GRA	ADUAT	ES FOR	. SUCCESSFUL
Governance	_								
vel	2 C	heck th	ıs box ▶ ┌ ıf the organı	zation discontinued its operations or	disposed of	more than 25%	of its n	et asset	s
5			·						
Activities &	3 N	lumber	of voting members of the	e governing body (Part VI, line 1a)			3	3	32
чие	4 N	lumber	of independent voting m	embers of the governing body (Part V	'I, line 1b)		4	ı	32
ctiv	5 T	otal nur	nber of individuals empl	oyed in calendar year 2015 (Part V,	line 2a) .		5	i	2,180
Ă	6 T	otal nur	nber of volunteers (esti	mate if necessary)			6	5	32
				e from Part VIII, column (C), line 12			7	a	106,104
	b Ne	et unrela	ited business taxable in	come from Form 990-T, line 34 .		Prior Yea		'b	-49,219
		<u> </u>						-	Current Year
Qı		8 Contributions and grants (Part VIII, line 1h)					086,03	-	4,098,399
ēn uō vē	9	_	•	t VIII, line 2g)		128,418,905		131,634,649	
Rav	10			I, column (A), lines 3, 4, and 7d)			09,15	_	1,438,258
	11			umn (A), lines 5, 6d, 8c, 9c, 10c, and			54,71		-357,745
	12	12)	revenue—aud inies o tin	rough 11 (must equal Part VIII, colu	iiii (A), iiile	134,8	359,37	0	136,813,561
	13	Grants	s and similar amounts p	aid (Part IX, column (A), lines 1-3)		39,6	51,18	3	40,460,498
	14	Benefi	ts paid to or for member	rs (Part IX, column (A), line 4)				0	(
	15			, employee benefits (Part IX, column	(A), lines	46,607,938		8	47,384,225
156		5-10)		(5.17)					
Expenses	16a		-	(Part IX, column (A), line 11e) .				0	
Ĕ	b			column (D), line 25) ▶1,302,377		20.7	75.67		40.010.03
	17		, , , , , ,	ımn (A), lines 11a-11d, 11f-24e) -17 (must equal Part IX, column (A)			75,67		40,019,827
	18 19		'	ract line 18 from line 12			34,79 324,57	-	127,864,550 8,949,011
× 6		IXC V CII	de less expelises subt	race fine 10 from fine 12					
Net Assets or Fund Balances						Beginning of Cur	rent Yea	ar	End of Year
ISS 8 Bak	20	Total	assets (Part X, line 16)			235,7	702,71	8	242,422,456
pur pur	21	Totall	liabilities (Part X, line 2	6)			34,76		83,993,140
	22			Subtract line 21 from line 20		150,9	67,95	0	158,429,316
Jndei ny kr	nowled	Ities of places		have examined this return, including , and complete Declaration of prepar					
		****				2017-05	-03		
Sign		Signa	ature of officer			Date			
Here	2		HEN SPINELLI President						
		7	or print name and title	Dronaror's stanature	- Inc.	<u> </u>	1 62	TTNI	
Da!a	J		rint/Type preparer's name Indrea Kyzyma	Preparer's signature Andrea Kyzyma	Date	e Check self-emplo	If PO	TIN 01273279	
Paid		, F	irm's name ► GRANT THO	RNTON LLP		Firm's EIN			
_	pare	1 -	irm's address ► 2001 MARKE			Phone no		61-4200	
use	Onl	У	PHILADELPH:	IA, PA 19103					

May the IRS discuss this return with the preparer shown above? (see instructions)

. ✓Yes No

•	•
Part III	Statement of Program Service Accomplishments

Part III	Statement of	Program	Service	Accompli	shments

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

Briefly describe the organization's mission

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

the prior Form 990 or 990-EZ? Yes √No If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program Yes √No

Did the organization undertake any significant program services during the year which were not listed on

- If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
- the total expenses, and revenue, if any, for each program service reported
- 73,578,728 (Code) (Expenses \$ including grants of \$ 36,110,404) (Revenue \$ INSTRUCTION THE UNIVERSITY IS COMMITTED TO PROVIDING AN EXPERIENTIAL EDUCATION AND IS RECOGNIZED AS A LEADER IN THE ARCHITECTURE, DESIGN, ENGINEERING & TEXTILES, BUSINESS AND HEALTH SCIENCE FIELDS THE UNIVERSITY IS FULLY ACCREDITED BY THE MIDDLE STATES ASSOCIATION OF COLLEGES AND SCHOOLS PHILADELPHIA UNIVERSITY GRADUATES' CAREER PLACEMENT RATE IN MAJOR-RELATED JOBS OR GRADUATE SCHOOLS HAS CONSISTENTLY BEEN ABOVE 90% WITHIN A FEW MONTHS OF GRADUATION FOR MORE THAN 20 YEARS AS A SMALL PRIVATE UNIVERSITY, PHILADELPHIA UNIVERSITY MAINTAINS AN AVERAGE CLASS SIZE OF 20 AND A 12 1 STUDENT/FACULTY RATIO THAT ENABLES CLOSE RELATIONSHIPS BETWEEN FACULTY AND STUDENTS. THE UNIVERSITY PROVIDES MORE THAN 20 LABORATORIES AND STUDIOS FOR HANDS-ON EXPERIENCE IN ARCHITECTURE AND INTERIOR DESIGN, ENGINEERING, TEXTILE DESIGN, FASHION DESIGN, GRAPHIC DESIGN, INDUSTRIAL DESIGN, PHYSICIAN ASSISTANT STUDIES AND OTHER ALLIED HEALTH FIELDS, AS WELL AS FACULTY ACCESS TO THE MOST SOPHISTICATED TECHNOLOGY AVAILABLE IN JANUARY 2013 PHILADELPHIA UNIVERSITY FORMALLY OPENED THE KANBAR COLLEGE OF DESIGN, ENGINEERING AND COMMERCE BUILDING (THE LAWRENCE N FIELD DEC CENTER) THE 38,500 SQUARE FOOT BUILDING, BUILT TO LEED STANDARDS, BOASTS A LARGE TWO-STORY FORUM SPACE FOR DESIGN EXHIBITS, PRESENTATIONS, LARGE LECTURES AND SOCIAL EVENTS IT WAS DESIGNED TO SUPPORT THE COLLEGE'S INNOVATIVE CURRICULUM, WHICH STRESSES TRANSDISCIPLINARY, PROJECT-BASED LEARNING AND COLLABORATIVE PROBLEM SOLVING WITH A DISTINCTIVE METALLIC SHELL FOR CLIMATE CONTROL, THE BUILDING INCLUDES FLEXIBLE SPACE FOR STUDIOS, SEMINARS, CONFERENCE MEETINGS AND TEAM PROJECTS, ALLOWING TEACHING AND WORK SPACE TO BE RECONFIGURABLE AS PROJECTS AND CURRICULA EVOLVE. THE UNIVERSITY PROVIDED EDUCATION TO 2,249 AND 2,096 FULL TIME UNDERGRADUATE STUDENTS IN THE FALL 2015 AND SPRING 2016 SEMESTERS, RESPECTIVELY SUMMER, GRADUATE AND EVENING STUDENTS ENROLLED IN A TOTAL OF 35,210 CREDIT HOURS IN KEEPING WITH THE UNIVERSITY'S MISSION OF PREPARING STUDENTS FOR AN EVOLVING GLOBAL MARKETPLACE. MORE THAN 110 STUDENTS WERE PROVIDED THE OPPORTUNITY TO EXPERIENCE THE WORLD BEYOND THE BORDERS OF OUR CAMPUS AND COUNTRY STUDENTS OF PHILADELPHIA UNIVERSITY MAY STUDY ABROAD AND RECEIVE CREDIT FOR COURSES THAT APPLY DIRECTLY TO THEIR CHALLENGING, PROFESSIONALLY-ORIENTED CURRICULA OPPORTUNITIES FOR STUDY ABROAD ARE AVAILABLE FOR FALL, SPRING AND SUMMER SEMESTERS AT LOCATIONS ALL
- 4b (Code) (Expenses \$ 12,335,737 including grants of \$) (Revenue \$ STUDENT SERVICES THE UNIVERSITY PROVIDES COUNSELING, INTER-COLLEGIATE ATHLETICS, HEALTH ADVISING, STUDENT GOVERNING AND STUDENT LIFE SERVICES FOR ALL STUDENTS THE DIVISION OF STUDENT LIFE OFFERS COMPREHENSIVE PROGRAMS AND SERVICES THAT FOSTER AN EDUCATIONAL ENVIRONMENT CONDUCIVE TO THE HOLISTIC DEVELOPMENT OF STUDENTS BY BUILDING BRIDGES BETWEEN THE CURRICULAR AND CO-CURRICULAR EXPERIENCES, STUDENT LIFE EDUCATORS PROVIDE OPPORTUNITIES FOR STUDENTS TO BECOME SUCCESSFUL, COMPETENT, LIFELONG LEARNERS THE UNIVERSITY OFFERS MANY INTERCOLLEGIATE SPORTS COMPETING AT THE NCAA DIVISION II LEVEL THE ATHLETICS PROGRAM AFFORDS OUR STUDENT-ATHLETES THE OPPORTUNITY TO PARTICIPATE IN A CHALLENGING ATHLETIC PROGRAM, WHILE ENSURING THAT THEY ARE PROVIDED A QUALITY EDUCATION A PROFESSIONALLY-MANAGED AND WELL-ROUNDED ATHLETICS PROGRAM SERVES TO ENRICH THE STUDENT'S LIFE IN COLLEGE AND ENHANCES HIS OR HER PREPARATION FOR A FULL AND REWARDING LIFE AFTER COLLEGE

AROUND THE WORLD STUDYING ABROAD HELPS OUR STUDENTS TO GROW PROFESSIONALLY BY BEING EXPOSED TO DRAMATICALLY DIFFERENT PERSPECTIVES IN

(Code 18,137,728 including grants of \$ 4c) (Expenses \$ 4,350,094) (Revenue \$ 18.833.108) AUXILIARY PHILADELPHIA UNIVERSITY DINING SERVICES ARE MANAGED BY PARKHURST DINING SERVICES WITH A TEAM OF EMPLOYEES WHO HAVE A SINCERE INTEREST IN THE SATISFACTION OF OUR CAMPUS COMMUNITY THE UNIVERSITY PROVIDED 1,135 AND 1,027 MEAL PLANS FOR STUDENTS IN THE FALL 2015 AND SPRING 2016 SEMESTERS, RESPECTIVELY THE UNIVERSITY PROVIDES SEVERAL HOUSING OPTIONS FOR FULL-TIME DAY UNDERGRADUATE STUDENTS INCLUDING TRADITIONAL RESIDENCE HALL HOUSING, TOWNHOUSES AND APARTMENT LIVING THE UNIVERSITY PROVIDED HOUSING FOR 1,421 AND 1,370 STUDENTS FOR THE FALL 2015 AND SPRING 2016 SEMESTERS, RESPECTIVELY THE UNIVERSITY BOOKSTORE OFFERS A PLEASANT SHOPPING EXPERIENCE OFFERING A WIDE ARRAY OF

4d Other program services (Describe in Schedule O)

THEIR FIELD OF STUDIES

See Additional Data

6,336,702 including grants of \$) (Revenue \$ 2,054,441) (Expenses \$

Total program service expenses ▶ 110,388,895

TEXTBOOKS, SUPPLIES, TECHNOLOGY AND UNIVERSITY-BRANDED CLOTHING

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 🕏	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 💆	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔰	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11 c		No
d	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 😼	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14 b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form	1990 (2015)			Page 4
Pai	rt IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	

Yes

Νo

Nο

Νo

Νo

Νo

Νo

Νo

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35b

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Yes

Form 990 (2015)

Yes

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV,

b If "Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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?

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
10	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 23	1	Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b	0		
		"		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and			
	Tax Statements, filed for the calendar year ending with or within the year covered by this return	3.0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Νo
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)			
5 2	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b		
·	11 res, to fine 3a of 3b, and the organization meriorin 6666-1 ·	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Νo
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or qui	ts ——		
	were not tax deductible?	6 b		
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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required file Form 8282?	to 7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
-	but the organization receive any lands, directly of maneetry, to pay premiums on a personal benefit contract.	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	. 7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
8	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time			
	during the year?	8		
9 a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b	\dashv		
-	facilities		l	l
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
13	year Section 501(c)(29) qualified nonprofit health insurance issuers.	\dashv		
13	Section Sout () (45) quainted nonprofit insulance issues.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions fo additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand	7		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2015) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Se	ction A. Governing Body and Management	•		•
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 1a 32			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 32			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		Νo
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
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?	10 b		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12 c	Yes	
L3	Did the organization have a written whistleblower policy?	13	Yes	
L4	Did the organization have a written document retention and destruction policy?	14	Yes	
L5	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
L6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Se	ction C. Disclosure			
L7	List the States with which a copy of this Form 990 is required to be filed ► PA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.			
L9	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of			

State the name, address, and telephone number of the person who possesses the organization's books and records ▶STEPHEN SPINELLI SCHOOL HOUSE LANE AND HENRY AVE Philadelphia, PA 19144 (215) 951-2700

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

 List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	indradual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2,1033 MISE)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										

nal Data Table	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest a	Former	2/1099-MISC)	2/1099-MISC)	organization and related	
nal Data Table)ee	Former Highest compensated employee				related organizations	
	1		\vdash								
						•					
				٠.	٠.			1,958,768	0	593,429	
a	ol from continuation shee ol (add lines 1b and 1c) .	Il from continuation sheets to Part VII, S Il (add lines 1b and 1c)	I (add lines 1b and 1c)	I from continuation sheets to Part VII, Section A .	ol from continuation sheets to Part VII, Section A	al from continuation sheets to Part VII, Section A	al from continuation sheets to Part VII, Section A	of from continuation sheets to Part VII, Section A	of from continuation sheets to Part VII, Section A	al (add lines 1b and 1c)	

- Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated employee 3 Νo For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the $organization\ and\ related\ organizations\ greater\ than\ \$150,000\ ?\ \textit{If\ "Yes,"\ complete\ Schedule\ J\ for\ such and\ the such and\ such an$ 4 Yes 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 Νo

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that re compensation from the organization. Report compensation for the calendar year ending		
(A) Name and business address	(B) Description of services	(C) Compensation
Parkhurst Dining Services, 285 WATERFRONT DR EAST Suite 200 HOMESTEAD, PA 15120	DINING SERVICES	4,742,979
The Arthur Jackson Company, 7025 WEST CHESTER PIKE UPPER DARBY, PA 19085	BLDG MAINTENANCE	2,427,347
Post University, 800 COUNTRY CLUB ROAD WATERBURY, CT 06708	ONLINE EDUCATION	1,224,264
McGinn Security Inc, 1341 N DELAWARE AVENUE 506 PHILADELPHIA, PA 19125	SECURITY SERVICES	1,102,620
Creative Communications Association, 2 3RD STREET SUITE 250 TROY, NY 12180	PR/MARKETING	535,102
2 Total number of independent contractors (including but not limited to those listed above \$100,000 of compensation from the organization ► 51	e) who received more than	

Form 99			(Davis and					Page 9
Part V	1111	Statement o	o f Revenue ule O contains a respor	aca ar nota ta any ly	o in this Bart VIII			_
		CHECK II SCHEdi	ure o contains a respon	ise of flote to any fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 28	1a	Federated cam	paigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership du	es 1b					
	С	Fundraising eve	ents 1c	336,556				
fts.	d	Related organiz	zations 1d					
i <u>5</u> 'E	e	Government grant		940,716				
Sir				2,821,127				
utic Ter	f	similar amounts no						
d je	g	Noncash contribute	ons included in lines	2,308,583				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	s 1a-1f		4,098,399			
				Business Code				
표	2a	TUITION AND FEES	5	900099	111,217,791	111,149,216		68,575
₹ ₹	ь	ROOM AND BOARD)	611710	16,289,650	15,358,097		931,553
Program Service Revenue	С	UNIVERSITY BOOK	STORE	611710	1,937,747	1,579,158		358,589
	d	SALES AND SERVICE	CES	611710	19,154			19,154
ð =	e	MICELLANEOUS	_	900099	2,170,307		89,083	2,081,224
Jran	f	A II other progra	am service revenue					
ď	_	Total Add lines	s 2a-2f		131,634,649			
	g 3		ome (including dividen		131,034,049			
		and other simil	aramounts)		1,259,422		-3,546	1,262,968
	4		stment of tax-exempt bond p	proceeds >	0			
	5	Royalties .	() Dool	(u) Daragnal	0			
	6 a	Gross rents	(ı) Real	(II) Personal				
	Ь	Less rental expenses						
	С	Rental income or (loss)	0	0				
	d	Net rental inco	me or (loss)		0			
		Constant and the second	(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	6,197,117					
	ь	Less cost or	6.010.301					
		other basis and sales expenses	6,018,281					
	C .	Gain or (loss)	178,836		470.006		20 567	450.260
	d	Net gain or (los	Г	· · · · >	178,836		20,567	158,269
Other Revenue	Od	Ψ	luding ,556 s reported on line 1c)					
her			a	65,560				
Ö			penses b	423,305	-357,745			-357,745
	9a	Gross income f	(loss) from fundraising of from gaming activities ne 19	events ▶	-337,743			-337,743
	L	1 2	a 					
	b c		penses b [(loss) from gaming activ	vities	0			
		Tree meanie or ,	(1033) Hom gaming acti	→				
	10a	Gross sales of returns and allo						
	b c	Net income or (oods sold b (loss) from sales of inve	· · · · · · · · · · · · · · · · · · ·	0			
	4.1	Miscellaneou	s Revenue	Business Code				
	11a							
	b							
	C	A.H. = ()						
	d	All other reven	L					
	е	Total. Add lines		•	0			
	12	Total revenue.	See Instructions	•	136,813,561	128,086,471	106,104	4,522,587

Part IX Statement of Functional Expenses

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

	Γ				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	0			
2	Grants and other assistance to domestic individuals See Part IV, line 22	37,929,718	37,929,718		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	2,530,780	2,530,780		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,555,197		2,555,197	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	33,795,328	27,667,751	5,343,193	784,384
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,787,451	1,474,046	249,358	64,047
9	Other employee benefits	6,796,723	4,701,535	1,997,662	97,526
10	Payroll taxes				
		2,449,526	1,921,945	475,326	52,255
11	Fees for services (non-employees)				
а	Management	0			
Ь	Legal	529,729		529,729	
с	Accounting	277,130		277,130	
d	Lobbying	103,267		103,267	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	99,418		99,418	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	372,768		372,768	
12	Advertising and promotion	760,665	751,405	9,260	
13	Office expenses	4,231,994	3,570,839	495,852	165,303
14	Information technology	1,208,072	353,349	854,723	
15	Royalties	0	12 120 000	562.050	20.265
16 17	Occupancy	12,721,214	12,128,090	563,859	29,265 71,351
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	930,568	557,504	301,713	71,331
19	Conferences, conventions, and meetings	418,998	356,428	52,984	9,586
20	Interest	0	330,420	32,304	3,300
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	5,304,160	4,581,457	722,703	
23	Insurance	729,359	58,101	671,258	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)		,	,	
а	CONTRACTED DINING SERVICES	4,994,490	4,994,490		
b	STUDY ABROAD TUITION AND HOUSI	1,951,863	1,951,863		
С	BOOKSTORE	1,570,421	1,570,421		
d	CONTRACTED SECURITY	1,285,159	1,285,159		
	A II other expenses	2,530,552	2,004,014	497,878	28,660
25	Total functional expenses. Add lines 1 through 24e	127,864,550	110,388,895	16,173,278	1,302,377
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

(B)

End of year

22.778

34.280.442

19.261.323

1,178,674

1.929.016

1,221,697

1,200,875

135,013,998

41,125,835

2,605,048

4 582 770

7.591.063

6.944.898

0 0

0

2,343,890

83,993,140

120,058,249

23,105,720

15,265,347

158,429,316

242,422,456 Form 990 (2015)

67 113 289

242,422,456

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0

Check If Sched

Form 990 (2015)

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Balances

Fund

ō

Assets

Net

Part X	Balance Sheet
	Check if Schedule

Cash-non-interest-bearing

Savings and temporary cash investments

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9)voluntary employees' beneficiary organizations (see instructions) Complete Part

Pledges and grants receivable, net

Notes and loans receivable, net . .

Prepaid expenses and deferred charges

Investments—publicly traded securities .

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D .

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here ▶

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Retained earnings, endowment, accumulated income, or other funds

Paid-in or capital surplus, or land, building or equipment fund

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities.Add lines 17 through 25

lines 27 through 29, and lines 33 and 34.

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Inventories for sale or use

Complete Part VI of Schedule D

Intangible assets

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Less accumulated depreciation .

Accounts receivable, net . .

Schedule L .

II of Schedule L

Grants payable

Deferred revenue .

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets

nce Sheet						
k if Schedule O contains a response or note to any line in this Part X						

10a

10b

	Pa
et	

209 520 428

74,506,430

(A)

Beginning of year

21,315

27,439,629

21,195,361

787,757

1.339.189

1,438,645

1,413,106

134,436,981

39,582,991

3,543,881

4 503 863

6.988.395

5,732,747

69,305,860

235,702,718

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23 0

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31

32

33

34

0

2,707,766

84,734,768

113,014,772

23.272.167

14,681,011

150,967,950

235,702,718

0 14 column (B))

Schedule O

Schedule O

Separate basis

✓ Separate basis

basis, consolidated basis, or both

158,429,316

No

Νo

Yes

Yes

Yes

Yes

Yes | Form **990** (2015)

2a

2b

2c

3a

3b

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Ι	Reconcilliation of Net Assets		
	Check if Schedule O contains a response or note to any line in this Part XI		

1	Total revenue (must equal Part VIII, column (A), line 12)	1	136,813,561
2	Total expenses (must equal Part IX, column (A), line 25)	2	127,864,550
3	Revenue less expenses Subtract line 2 from line 1	3	8,949,011
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	150,967,950
5	Net unrealized gains (losses) on investments	5	-1,487,645
6	Donated services and use of facilities	6	
7	Investment expenses	7	

Cash Accrual Other

Both consolidated and separate basis

Both consolidated and separate basis

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

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

If the organization changed its method of accounting from a prior year or checked "Other," explain in

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

8	Prior period adjustments				•	•		•			•		•		
9	Other changes in net asso	ets	or f	und	bal	ance	es (exp	laın	ın	Sch	nec	lule	0)	

Part XIII Financial Statements and Reporting

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

1 Accounting method used to prepare the Form 990

Additional Data

See Schedule O

Software ID:

Software Version:

EIN: 23-1352294

Name: Philadelphia University

2,054,441)

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

(Code) (Expenses \$ 6,336,702 including grants of \$) (Revenue \$

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Inde					, i u	3100	3, 1	tey Employed	29, mgnest	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below	unles	direct T	:han erso icer tor/t	not one on is and trus	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related			
	dotted line)	Individual trustee or director	Institutional Trustee	Officer	y employee	Highest compensated employee	Former			organizations
STEPHEN SPINELLI PRESIDENT	40 0	х		×				369,833	0	168,196
EILEEN MARTINSON CHAIR	1 0	х						0	0	C
ANTHONY DIELSI TRUSTEE	1 0	х						0	0	C
CYNTHIA HOOK TRUSTEE	1 0	х						0	0	C
D WALTER COHEN TRUSTEE	1 0	х						0	0	C
A LOUIS DENTON TRUSTEE	1 0	х						0	0	C
ORLANDO ESPOSITO	1 0	,,								

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TRUSTEE

WILLIAM A FINN

ESTEFANO ISAIAS SR

LIONG KENG KWEE

VICE CHAIR

TRUSTEE

TRUSTEE

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation Compensated Employees, and Inde					íru:	stee	s, F	(ey Employee	es, Highest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore ti	than ersoi icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
ROBERT C LOCKYER TRUSTEE	1 0	×						0	0	0
EDWARD P MARRAM TRUSTEE	1 0	x						0	0	C
WILLIAM JASPER TRUSTEE	1 0	×						0	0	C
CHRISTOPHER K MCHUGH TRUSTEE	1 0	×						0	0	C
CARSON KRESSLEY TRUSTEE	1 0	×						0	0	C
HANDSEL B MINYARD TRUSTEE	1 0	x						0	0	C

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ANDREW MORRISROE

VIRGINIA M PALMIERI

ROBERT L NYDICK JR

.....

TRUSTEE

TRUSTEE

TRUSTEE

DAVID R REA TRUSTEE

.....

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

Compensated Employees, and Inde	pendent Co	ntrat	LUT	5					i ·	ı		
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the		
	organizations below dotted line)	below dotted line)	below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
ALLEN E SIRKIN TRUSTEE	1 0	x						0	0	0		
ANDREW VECCHIONE TRUSTEE	1 0	×						0	0	0		
ANTHONY J VITULLO JR TRUSTEE	1 0	×						0	0	C		
LARRY A WITTIG TRUSTEE	1 0	×						0	0	C		
CLARENCE WOOTEN TRUSTEE	1 0	×						0	0	C		
L TADD SCHWAB TRUSTEE	1 0	х						0	0	C		
FRANCIS J SHAMMO	1 0							_	_	_		

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TRUSTEE

TRUSTEE

TRUSTEE

JOHN MANTAS TRUSTEE

ARTHUR RUBENSTEIN

DONNA L FERRIER

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

30,631

41,638

35,600

58,420

110,369

0

0

ol

Compensated Employees, and Inde					ı ru:	stee	5, r	rea Embioses	25, nignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos mo unles	sition nore the ss pe office direct	(C) I (do I	not none on is and trust	stee)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	Misch	organization and related organizations
BRYANT GREENE TRUSTEE	1 0	x						0	0	0
JOHN OUGHTON III TRUSTEE	1 0	x						0	0	0
Christina Wong Trustee	10	×						0	0	C
JAMES P HARTMAN END 42916 VP OF FINANCE & CFO	40 0			×				188,779	0	52,893
G GEOFFREY CROMARTY SECRETARY & COO	40 0			×				238,252	. 0	54,702

40 0

40 0

40 0

40 0

40 0

Х

Х

Х

Х

218,707

201,596

176,974

184,264

202,838

MATT D BAKER

BARBARA KLINKHAMMER

DAVINDER MALHOTRA

EXEC DEAN OF ACADEMICS

EXEC DEAN OF ACADEMICS

PROVOST

PROFESSOR

DR WIDDER

VP OF INNOVATION

RONALD KANDER

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

Compensated Employees, and Inde	pendent Co	ntrac	ctor	S				•	
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unle:	ore t ss pe	than erso icer tor/t	not one n is and trust	tee)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JESSE R SHAFER VP OF DEVELOPMENT	40 0					×	177,525	0	40,980

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE A**

(Form 990 or

990EZ)

Part I

✓

(i)

Name of supported organization

1

2

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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 (Form 990 or 990-EZ))

23-1352294

Open to Public Inspection

DLN: 93493123012207 OMB No 1545-004

Employer identification number

Attach to Form 990 or Form 990-EZ. Department of the www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Philadelphia University

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) 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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% 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 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 11g Type I. 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 Enter the number of supported organizations

	(described on lines 1-9 above (see instructions))	docume		(see instructions)	instructions)
		Yes	No		
Total					
	 		Cat No. 1179	DEE	

(iv)

Is the organization

Provide the following information about the supported organization(s)

(iii)

Type of

(ii)EIN

(v)

A mount of

(vi)

A mount of other

Schedule A (Form 990 or 990-EZ) 2015 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.) Section A. Public Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) ▶ 1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants) 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 from line 4 Section B. Total Support Calendar vear (d)2014 (a)2011 (b)2012 (c)2013 (e)2015 (f)Total (or fiscal year beginning in) Amounts from line 4 Gross income from interest. dividends, payments received on securities loans, rents, royalties and income from similar sources 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 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage for 2014 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test-2014. 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 ▶□ 17a 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶□ b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

supported organization

instructions

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	ı faıls to qualıfı	<u>, under the tes</u>	ts listed below,	, please comple	ete Part II.)	
Se	ction A. Public Support			ı			
	Calendar year	(a) 2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f)Total
(or t	iscal year beginning in) ► Gifts, grants, contributions, and						1
-	membership fees received (Do	ı					
	not include any "unusual grants")	ı					
2	Gross receipts from admissions,						
	merchandise sold or services	İ					
	performed, or facilities furnished	İ					
	in any activity that is related to	İ					
	the organization's tax-exempt purpose	İ					
3	Gross receipts from activities						
•	that are not an unrelated trade or	İ					
	business under section 513	_					
4	Tax revenues levied for the	1					
	organization's benefit and either	İ					
_	paid to or expended on its behalf						
5	The value of services or facilities	İ					
	furnished by a governmental unit to the organization without charge	İ					
6	Total. Add lines 1 through 5						
	A mounts included on lines 1, 2,	·					
, u	and 3 received from disqualified	İ					
	persons						
b	A mounts included on lines 2 and	İ					
	3 received from other than	İ					
	disqualified persons that exceed	İ					
	the greater of \$5,000 or 1% of the amount on line 13 for the year	İ					
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
•	from line 6)	ı					
Se	ction B. Total Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f)Total
(or f	iscal year beginning in) 🕨	(a)2011	(0)2012	(6)2013	(d)2014	(e)2013	(I)I otal
9	A mounts from line 6						
.0a	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 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,						
14	11, and 12) First five years.If the Form 990 is form	or the organization	n'e firet eacond	third fourth or f	l fifth tay vear as a	section 501(c)	(3) organization
	check this box and stop here	or the organization	on a mac, accond,	, cilira, loarcii, or i	michicax year as a	3000001 301(0)	
Se	ection C. Computation of Pub	lic Sunnort P	ercentage				
15	Public support percentage for 2015			12 column (f))		4=	
	· · · · · -	·		13, column (1))		15	
16	Public support percentage from 201					16	
	ection D. Computation of Inv			<u> - </u>	(5)		
17	Investment income percentage for 2				nn (f))	17	
18	Investment income percentage from					18	
19a	33 1/3% support tests—2015. If the	_					
	more than 33 1/3%, check this box						▶ [
D	33 1/3% support tests—2014. If the 18 is not more than 33 1/3%, check	-					_
	TO IS HOLIHOTE CHAIL 33 1/370, CHECK	. LIIIS DUX dilu SEC	princie. I lie oldd	mzation qualines	us a publicly SUL	porteu urgalliza	CIOII 📂

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

Part IV Supporting Organizations

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

	I, complete Sections A and D, and complete Part V)			
Se	ction 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	1	Yes	No
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
С	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	3 c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised	4b		
С	by or in connection with its supported organizations 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	4 c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5 b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5 c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9 a	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 .	9 a		
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 .	9 b		
С	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 .	9 c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10 b		
1	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		
	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		

Part IV Supporting Organizations (continued)

Sectio	n B.	Type	I Su	pporting	ı Organiz	ations

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

If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each

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

engaged in these activities but for the organization's involvement

3 Parent of Supported Organizations Answer (a) and (b) below.

each of the supported organizations? Provide details in Part VI

2b

3a

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S		•	ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
L	Net short-term capital gain	1		(optional)
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
	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		
	Other expenses (see instructions)	7		
	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	A verage monthly value of securities	1a		
b	A verage monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting (organization (see

Pality Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accomp	plish exempt purposes		
2 A mounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 A mounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	quired)		
6 Other distributions (describe in Part VI) See instru			
7 Total annual distributions. Add lines 1 through 6			
7 Total allitual distributions. Add lines 1 tillough 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		····	····
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
С			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7		ı	
a			
b			
c Excess from 2013			
d From 2014			
e From 2015			
			(F 000 000 F7) (201 F

DLN: 93493123012207

Employer identification number

23-1352294

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Philadelphia University

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.

OMB No 1545-0047 Open to Public Inspection

Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, 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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

Section 527 organizations Complete Part I-A only

• Section 501(c)(4), (5), or (6) organizations Complete Part III

If the organization answered "Yes" on 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" on 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

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

2	Political expenditures			>	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization un	der section 4955	5 >	\$
2	Enter the amount of any excise	e tax incurred by organization manag	ers under sectio	n 4955 •	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	0 for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section 5	501(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to ot	her organizations	s for section 527 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file F	orm 1120-POL for this year?			Yes No
5	organization made payments f amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and d political action committee (PAC) If	e amount paid fro irectly delivered additional space	om the filing organization's to a separate political org is needed, provide inform	's funds Also enter the ganization, such as a nation in Part IV
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	contributions received
2					
3					
4					
5					
6					
For F	Paperwork Reduction Act Notice, se	ee the instructions for Form 990 or 990)-EZ. (Cat No 50084S Schedule C	C (Form 990 or 990-EZ) 2015

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-

250,000

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

N,

Α	Check If the filing organization belongs t expenses, and share of excess lob		filiated group member's nam	e, address, EIN,		
В	Check ▶ ☐ If the filing organization checked	box A and "limited control" provisions apply				
		oying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals		
1 a	Total lobbying expenditures to influence public lobbying)					
ь	Total lobbying expenditures to influence a legis	103,267				
(Total lobbying expenditures (add lines 1a and	1b)	103,267			
d	Other exempt purpose expenditures	127,761,284				
e	Total exempt purpose expenditures (add lines	1c and 1d)	127,864,551			
f		Lobbying nontaxable amount Enter the amount from the following table in both columns				
	If the amount on line 1e, column (a) or (b) is:					
	Not over \$500,000	20% of the amount on line 1e				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000					
	Over \$17,000,000					

Subtract line 1f from line 1c $\,$ If zero or less, enter -0-If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? **▼** No Yes

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five

	columns below. See the separate instructions for lines 2a through 2f.)										
	Lobbying Expenditures During 4-Year Averaging Period										
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total					
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000					
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000					
_ c	Total lobbying expenditures	115,875	61,990	94,999	103,267	376,131					

Return Reference

Pa	Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT				
or o	1		(a)		(b)	
	each "Yes" response on lines 1a through 11 below, provide in Part IV a detailed description of the lobbying vity	Yes	No		moun	ıt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	103				
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1		
c	Media advertisements?					
d	, , , , ,					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
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?					
Pai	rt III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	501(c	(5), (or se		n
_			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		_	1		—
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_	2		<u> </u>
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Pai	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."					
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).					
а	Current year	2a				
b	Carryover from last year	2b				
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?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	Part IV Supplemental Information		L			
	• • • • • • • • • • • • • • • • • • • •					
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gr (see instructions), and Part II-B, line 1 Also, complete this part for any additional information	oup list)	, Part II	-A,I	ines 1	and

Explanation

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

SCHEDULE D (Form 990)

Department of the

Internal Revenue Service

Treasury

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on 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 <u>www.irs.gov/form990</u>.

OMB No 1545-0047

DLN: 93493123012207

Inspection

	i me of the organization ladelphia University			Emple	oyer identification number
	addipina officially			23-1	352294
Pā	Organizations Maintaining Donor Complete if the organization answere			unds o	r Accounts.
		(a) Donor advised fu	nds	(b)	unds and other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor a funds are the organization's property, subject to t			nor advis	ed Yes No
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?	benefit of the donor or	donor advisor, or for a	n y other	☐ Yes ☐ No
Pa	rt II Conservation Easements. Comple	ete if the organization	on answered "Yes" o	on Form	990, Part IV, line 7.
1	Purpose(s) of conservation easements held by th	e organization (check	all that apply)		
	Preservation of land for public use (e.g., recre	eation or			
	education) Protection of natural habitat		<u></u>		cally important land area
	•		Preservation of a	certifie	d historic structure
_	Preservation of open space				
2	Complete lines 2a through 2d if the organization leasement on the last day of the tax year	held a qualified conser	vation contribution in	the form	
	Total number of conservation easements				Held at the End of the Year
a		ante		2a	
b	Total acreage restricted by conservation easeme Number of conservation easements on a certified		udod in (a)	2b	
C			` '	2c	
d	Number of conservation easements included in (c historic structure listed in the National Register			2d	
3	Number of conservation easements modified, trar	nsferred, released, ext	inguished, or terminat	ed by the	e organization during the
	tax year ▶				
4	Number of states where property subject to conse	ervation easement is l	ocated >		
5	Does the organization have a written policy regard violations, and enforcement of the conservation e		toring, inspection, han	dling of	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, i year	inspecting, handling of	violations, and enforc	ıng cons	ervation easements during the
	>				
7	A mount of expenses incurred in monitoring, inspe	ecting, handling of viola	ations, and enforcing c	onserva	tion easements during the year
8	Does each conservation easement reported on lir (B)(i) and section 170(h)(4)(B)(ii)?	ne 2(d) above satisfy t	he requirements of se	ction 17	0(h)(4) Yes No
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the			se statement, and
Pai	Organizations Maintaining Collect Complete if the organization answere			or Oth	er Similar Assets.
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footr	AS 116 (ASC 958), n assets held for public	ot to report in its reve exhibition, education,	or resea	rch in furtherance of public
b	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public			

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

(i) Revenue included on Form 990, Part VIII, line 1

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

3,811,628

Par	t III	Organizations Maintaining (continued)	Collections of Ar	t, Historical	Treasures, o	r Oth	er Similar A	ssets		
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)									
а	✓	Public exhibition		d L	oan or exchange p	rogra	ms			
b	✓	Scholarly research		e	ther					
c		Preservation for future generations								
4	Provi Part	ide a description of the organization XIII	s collections and expl	aın how they fur	ther the organizat	ıon's	exempt purpose	ın		
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?									
Pa	rt IV	Escrow and Custodial Arra Complete if the organization Part X, line 21.	_	Form 990, Pa	rt IV, line 9, or	repoi	ted an amoun	it on Form 990,		
1a	Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?									
b	If "Yes," explain the arrangement in Part XIII and complete the following table					Γ	Amount			
c	Ве					1c				
d	A d	lditions during the year				1 d				
e	Di	stributions during the year				1e				
f	En	dıng balance				1f				
2a	Dıd t	he organization include an amount i	on Form 990, Part X, lir	ne 21, for escro	w or custodial acc	ount	liability? Yes	s No		
ь	If "Y	es," explain the arrangement in Par		<u> </u>						
Pa	irt V	Endowment Funds. Comple								
			(a)Current year	(b)Prior year	b (c)Two years bac	+ -	Three years back	(e)Four years back		
1a	_	nning of year balance	28,166,417 1,443,736	27,630,437 1,823,304		-	22,564, 11 5 236,257	23,091,265		
ь	Cont.	ributions	1,443,736	1,623,304	409,46	1	230,237	328,770		
c	Net i losse	nvestment earnings, gains, and	-468,566	31,696	3,883,47	3	2,952,551	264,897		
d		ts or scholarships	1,303,305	1,220,482	1,148,93	8	1,093,226	1,031,925		
	•	· · · · ·								
е		r expenditures for facilities programs								
f	A d m	inistrative expenses	99,418	98,538	94,36	9	78,907	88,892		
g	End o	of year balance	27,738,864	28,166,417	27,630,43	7	24,580,790	22,564,115		
2	Provi	ide the estimated percentage of the	current year end balar	ice (line 1g, col	umn (a)) held as	-				
а	Board	d designated or quasi-endowment 🕨	27 000 %							
b	Perm	anent endowment ► 55 000 %								
c	Temp	porarily restricted endowment > percentages on lines 2a, 2b, and 2c	18 000 %							
За		here endowment funds not in the po		zation that are l	neld and administe	ered fo	or the			
	_	organization by (i) unrelated organizations								
	(i) unrelated organizations									
b	If"Y	(ii) related organizations								
4		ribe in Part XIII the intended uses		ndowment funds	5			_		
Pa	rt VI	Land, Buildings, and Equip		orm 990 Part	· IV line 11a Se	o Eo	m aan Bart V	lino 10		
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property (a) (b) Accumulated (d)Book val							(d)Book value			
_				Cost or other (investment	basis Cost or other	oasis	(c)depreciation			
1a	Land				3,87	0,562		3,870,562		
b	Buildir				464.00	, , , [42.045.400	110.045.301		
_	 Leasel	hold improvements			161,03	2,720	43,015,422 275,501	 		
		ment		<u> </u>	41,42		31,215,507	 		
	Other				71,42	,5,0	31,213,307	10,212,009		

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

2,898,854

135,013,998

2,898,854

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.	omplete if the orga	nızatıon answered 'Ye	es' on Form 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	у	(b) Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives			, , , , , , , , , , , , , , , , , , , ,
(2)Closely-held equity interests			
(3)O ther			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related.	•		
Complete if the organization answere	d 'Yes' on Form 99	0, Part IV, line 11c. _S ,	ee Form 990, Part X, line 13.
(a) Description of investment		(b) Book value	(c) Method of valuation Cost or end-of-year market value
			, , , , , , , , , , , , , , , , , , , ,
	-		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organizati	Ion answered 'Ves' on	Form 990 Part IV line	11d See Form 990 Part V line 15
(a) Desc		Torin 990, Farciv, fine	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line	:15)		•
Part X Other Liabilities. Complete if the org	ganızatıon answere	d 'Yes' on Form 990,	Part IV, line 11e or 11f.
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Book valu	е	
5 11			
Federal income taxes		0	
US GOVERNMENT ADVANCE FOR STUDENTS	1,047	,137	
CONTRACT LIABILITY	622	,236	
ASSET RETIREMENT OBLIGFATION	529	,298	
ANNUATIES DAVABLE			
ANNUITIES PAYABLE	118	,490	
ESCHEATABLE PROPERTY	26	,729	
Table (Column (b) must assist 5: 200 D. (V. 1/2) 1	▶ 2.343	800	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provi	2,5.5		's financial statements that reports the
organization's liability for uncertain tax positions under F			

Par		evenue per Audited Financial Stanication answered 'Yes' on Form 990,			per R	eturn	
1	· · · · · · · · · · · · · · · · · · ·	er support per audited financial statements		•	1	96,202,908	
2	A mounts included on line 1 bu	it not on Form 990, Part VIII, line 12					
a	Net unrealized gains (losses)	on investments	2a	-1,487,645			
ь	Donated services and use of f	acılıtıes	2b				
c	Recoveries of prior year grant	s	2c				
d	Other (Describe in Part XIII)						
			2d	-39,546,313			
е	Add lines 2a through 2d				2e	-41,033,958	
3			•		3	137,236,866	
4		0, Part VIII, line 12, but not on line 1	1	I			
а	•	uded on Form 990, Part VIII, line 7b .	4a				
Ь	,		4b	-423,305			
С					4c	-423,305	
5		4c.(This must equal Form 990, Part I, line			5	136,813,561	
Par		xpenses per Audited Financial St nization answered 'Yes' on Form 990,			s per	Return.	
1		r audited financial statements			1	88,741,542	
2	A mounts included on line 1 bu	it not on Form 990, Part IX, line 25				<u> </u>	
а	Donated services and use of f	acılıtıes	2a				
b	Prior year adjustments		2b				
c	Other losses		2c				
d	Other (Describe in Part XIII)		. 2d	423,305			
e	Add lines 2a through 2d				2e	423,305	
3	Subtract line 2e from line 1 .				3	88,318,237	
4	A mounts included on Form 99	0, Part IX, line 25, but not on line 1:					
a	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	. 4a				
b	Other (Describe in Part XIII)		. 4b	39,546,313			
c	Add lines 4a and 4b				4c	39,546,313	
5	Total expenses Add lines 3 a	nd 4c. (This must equal Form 990, Part I, I	ine 18)	5	127,864,550	
Par	t XIII Supplemental Inf	formation					
P rov P art	vide the descriptions required for	Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d an				de any additional	
	Return Reference	Explanation					
	ription of Organization's ctions	Schedule D, Part III, Line 4 The Universimemorabilia to be exhibited and used for SPECTER'S DONATION, THE UNIVERS SERVICE THE MISSION OF THE ARLE PHILADELPHIA UNIVERSITY IS TO FA EDUCATION IN A CROSS-DISCIPLINA WITH THE UNIVERSITY OF PITTSBURG PROVIDE ACCESS TO SENATOR SPECAND POLITICAL DOCUMENTS FOR TH PUBLIC THE HOME OF THE ARLEN SPHISTORIC ROXBORO HOUSE AT PHILA HOUSE WAS CONSIDERED A HISTORIC HILADELPHIA AND AMERICA'S ORIGINAL CONTROL OF THE CENTER	, SCHOIA ITY O N SPE CILIT RY, N GH, TH TER'S E BEN ECTER A DELP C A N C	rly research IN HONOF PENED THE ARLEN SPE CTER CENTER FOR PUE ATE AND PROMOTE PL ONPARTISAN SETTING IE CENTER WILL PRESE HISTORIC ARCHIVE C EFIT OF RESEARCHERS CENTER FOR PUBLIC PHIA UNIVERSITY BUI O IMPORTANT TOUCHS	OF SEECTER BLIC S JBLIC: G IN C ERVE, C F PAP S AND SERVI LT CIR	ENATOR ARLEN CENTER FOR PUBLIC ERVICE AT SERVICE AND CIVIC OLLABORATION ORGANIZE, AND ERS, PHOTO GRAPHS, SCHOLARS AND THE CE IS IN THE ECA 1800, THE	

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SCHEDULE E (Form 990 or 990-EZ)

Schools

OMB No 1545-0047

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

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

Name of the organization **Employer identification number** Philadelphia University 23-1352294 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? Yes 4c d Copies of all material used by the organization or on its behalf to solicit contributions? Yes 4d If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Nο **5**c c Employment of faculty or administrative staff? Νo d Scholarships or other financial assistance? 54 Νo e Educational policies? Νo 5e f Use of facilities? Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? Yes 6a b Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Yes

Page 2

Schedule E (Form 990 or 990-EZ) (2015)

Schedule E (Form 990 or 990EZ) (2015)

Return Reference	Explanation
Publication of Racially Nondiscriminatory Policy	Schedule E, Part I, Line 3 AN EQUAL OPPORTUNITY EMPLOY MENT POLICY WAS PUBLICIZED IN FY 2015-2016 IN THE LOCAL NEWSPAPER, THE
	PHILADELPHIA INQUIRER

Government Assistance Schedule E. Part I. Line 6a THE UNIVERSITY RECEIVED \$940,716 IN

efile GRAPHIC print - DO NOT PROCESS			As Filed Da	ta -	DLN	N: 93493123012207
SCHEDULE F (Form 990)	Stat	ement of	Activities (Outside the Unit	ed States	OMB No 1545-0047
Department of the Ti Internal Revenue Sei	' I ▶ Informati	·	Part IV, line ► Attach t	n answered "Yes" to Form 14b, 15, or 16. o Form 990. ınd its instructions is at w		2015 Open to Public Inspection
Name of the orga Philadelphia Univ					23-135229	entification number
				he United States. orm 990, Part IV, line	I	4
and other		antees' eligibi		s to substantiate the ants or assistance, and	-	
	makers. Describe in outside the United		rganızatıon's p	rocedures for monitori	ng the use of its gr	ants and other
3 Activites p	er Region (The follow	ving Part I, line	3 table can be d	uplicated if additional sp	ace is needed)	
(a)) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) program service, describ specific type of service(s) in region	
See Add'l	Data			region,		
3a Sub-total						2,530,78
to Part I	continuation sheets I lines 3a and 3b)					2,530,780
For Paperwork Red	luction Act Notice, see	the Instructions	for Form 990.	Cat	No 50082W Sch	nedule F (Form 990) 2015

Part II	Grants and Other Assistance to Organizations or Entities Outside the United States.
	Grants and Other Assistance to Organizations of Entitles Outside the Onited States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	See Add'l Data								

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recog	ınızed	l as
	tax-exempt by the IRS, or for which the grantee or counsel has provided a section $501(c)(3)$ equivalency letter	1	>

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

		recipients	cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
International Scholarships	Central America and the Caribbean	3	26,500	Direct Pay		N/A	N/A
International Scholarships	East Asia and the Pacific	13	83,000	Direct Pay		N/A	N/A
International Scholarships	Europe (Including Iceland and Greenland)	7	171,220	Direct Pay		N/A	N/A
International Scholarships	Middle East and North Africa	11	72,750	Direct Pay		N/A	N/A
International Scholarships	North America	4	79,000	Direct Pay		N/A	N/A
International Scholarships	Russia	1	32,500	Direct Pay		N/A	N/A
International Scholarships	South America	5	134,000	Direct Pay		N/A	N/A
International Scholarships	South Asia	5	38,500	Direct Pay		N/A	N/A
International Scholarships	Sub-Saharan Africa	8	52,500	Direct Pay		N/A	N/A
Faculty Travel for Prog Exp	East Asia and the Pacific	80	55,920			N/A	N/A
Faculty Travel for Prog Exp	Europe (Including Iceland and Greenland)	126	74,885	CK/DD		N/A	N/A
Faculty Travel for Prog Exp	Middle East and North Africa	2	1,959	CK/DD		N/A	N/A
Faculty Travel for Prog Exp	North America	6	3,836	CK/DD		N/A	N/A
Faculty Travel for Prog Exp	South America	3		CK/DD		N/A	N/A
Faculty Travel for Prog Exp	Sub-Saharan Africa	1		CK/DD		N/A	N/A
Faculty Travel for Prog Exp	East Asia and the Pacific	2	1,415	CK/DD		N/A	N/A

5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865) Yes ✓ No Old the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form

5713, do not file with Form 990)

Nο

Yes

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

990 Schedule F, Supplemental Information

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

Additional Data

East Asia and the Pacific

Europe

Software ID: Software Version:

EIN: 23-1352294

Name: Philadelphia University

FA/Intl Study/Courses

FA/Intl Study/Courses

312,671

1,749,875

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	
Central America and the Caribbean			Program Services	FA/Intl Study/Courses	43,500

Program Services

Program Services

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program service, for region type) (i.e., fundraising, describe specific type of agents in region service(s) in region region program services, grants to recipients located in the region) Middle Fast & North Africa Program Services FA/Intl Study/Courses 74,709 North America Program Services FA/Intl Study/Courses 86,194

Program Services

FA/Intl Study/Courses

32,500

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

Russia and the Newly

Independent States

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities (e) If activity listed in (f) Total expenditures offices in the employees or conducted in region (by (d) is a program service, for region type) (i e , fundraising, describe specific type of agents in region service(s) in region region program services, grants to recipients located in the region) South America Program Services FA/Intl Study/Courses 138,570 South Asia Program Services FA/Intl Study/Courses 38,500

Program Services

FA/Intl Study/Courses

54,261

Sub-Saharan Africa

(g) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (c) Region (d) Purpose of grant non-cash cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) Central America and Study Abroad 17,000 Wire/Check N/A N/A lthe Caribbean INI /A INI / A Eact A cua and the Study A broad 65 035 Miro/CHECK

545,853 Wire/CHECK

(I) Method of

N/A

N/A

	Pacific	Study Abroad	63,925	WITE/CHECK	N/A	N/A
	Europe (Including Iceland and	Study Abroad	843,700	Wire/CHECK	N/A	N/A
	Greenland)					

SA Housing/Meals

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Europe (Including

Iceland and Greenland)

(b) IRS code

(b) IRS code (I) Method of (q) A mount of non-(h) Description of (a) Name of (e) A mount of (f) Manner of valuation section (d) Purpose of grant (c) Region cash non-cash and EIN(if cash grant cash disbursement (book, FMV, organization assistance assistance applicable) appraisal, other) East Asia and the SA Housing/Meals 46,119 Wire/CHECK N/A N/A

	Растис					
	East Asia and the Pacific	Supplies	60,292	CHECK	N/A	N/A
	Europe (Including	Supplies	114,217	CHECK	N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Iceland and Greenland)

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DLN: 93493123012207

Employer identification number

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Philadelphia University

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ

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

2015

OMB No 1545-0047

Open to Public
Inspection

			23-1352294	1				
Part I Fundraising Activities.C Form 990-EZ filers are not	-		on Form 990, Part IV	/, line 17.				
Indicate whether the organization rai	sed funds through an y of	the following activities C	heck all that apply					
a Mail solicitations		e Solicitation of r	on-government grants					
Internet and email solicitations f Solicitation of government grants								
c Phone solicitations		g Special fundrais	sing events					
d In-person solicitations								
Did the organization have a written of or key employees listed in Form 990 services?	, Part VII) or entity in coi	nnection with professiona	al fundraising Y	es No				
b If "Yes," list the ten highest paid ind to be compensated at least \$5,000		aisers) pursuant to agre	ements under which the f	undraiser is				
(i) Name and address of individual or entity (fundraiser)	fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization				
	Yes No	_						
otal	•							
List all states in which the organization registration or licensing	ı ıs registered or licensed	to solicit contributions	or has been notified it is e	exempt from				
Α								

Part II	Fundraising	Events

Fundraising Events.

Complete if the organization answered "Yes" on 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

	receipts greater than \$5,000		(b)Event #2	(c)Other events	<u>-</u>
		Evening of Innv (event type)	Golf Outing (event type)	(total number)	(d) Total events (add col (a) through col (c))
Expenses Reversie	1 Gross receipts	365,250 320,200 45,050 103,015	16,356 20,510		402,116 336,556 65,560 124,653
	8 Entertainment	550			550
Direct	9 Other direct expenses	286,373	11,232		297,605
ā	10 Direct expense summary Add lines 4				423,305
Dai	rt III Gaming.	0 from line 3, column (d	1)	<u> ▶</u>	-357,745
	Complete if the organization Form 990-EZ, line 6a.	answered "Yes" on F	Form 990, Part IV, line	19, or reported mo	re than \$15,000 on
Revenue	1. Grace revenue	(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c)Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Expenses	2 Cash prizes				
Direct	4 Rent/facility costs				
<u>ā</u>	5 Other direct expenses				
	6 Volunteer labor	Yes % No No	├ Yes <u>%</u> ├ No	☐ Yes%	
	7 Direct expense summary Add lines 2	through 5 in column (d	1)		
	8 Net gaming income summary Subtrac	ct line 7 from line 1, col	lumn (d)		
9 a	Enter the state(s) in which the organizat				─────────────────────────────────────
b	If "No," explain				
10a	, , ,			the tax year?	Yes No
b	If "Yes," explain				

efile GRAPHIC print - DO NOT PROCESS | As Filed Data Schedule I
(Form 990) | Grants and O
Governments of Complete if the organization

Treasury

Internal Revenue Service

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

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

lacktriangle Information about Schedule I (Form 990) and its instructions is at $\underline{www.irs.qov/form990}$.

OMB No 1545-0047

2015

DLN: 93493123012207

Open to Public Inspection

Name of the organization	Employer identificati	Employer identification number					
Philadelphia University						23-1352294	
Part I General Informatio	n on Grants an	d Assistance				•	
 Does the organization maintain the selection criteria used to aw Describe in Part IV the organization 	ard the grants or a	ssistance?			or the grants or assis	stance, and	√ Yes N
Part II Grants and Other Assistation that received more than 9				plete if the organization	answered "Yes" on F	orm 990, Part IV, line 2	1, for an y recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance

Page **2**

Schedule I (Form 990) 2015

Schedule I (Form 990) 2015

Return Reference

Grant Funds Inside U.S.

Procedure for Monitoring Use of

Explanation

(1) Student Grants and Scholarships	2262	37,578,047	N/A	N/a
(2) Federal Work Study	491	351,671	N/a	N/a

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Schedule I, Part I, Line 2 FEDERAL GRANT FUNDS ARE AWARDED IN COMPLIANCE WITH FEDERAL REGULATIONS APPLICABLE TO THE

AUDITS ARE CONDUCTED BY AN EXTERNAL AUDIT FIRM TO ENSURE COMPLIANCE WITH ALL PROGRAM GUIDELINES

SPECIFIC PROGRAM INSTITUTIONAL PROCEDURES ALLOW FOR SEPARATION OF AWARDING AND DISBURSING OF FUNDS STUDENTS WHO RECEIVE SCHOLARSHIPS AND FEDERAL WORK STUDY FUNDS ARE MONITORED EACH SEMESTER FOR ACADEMIC PROGRESS. ANNUAL efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

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.

DLN: 93493123012207

OMB No 1545-0047

2015

Treasury

Schedule J (Form 990)

Open to Public Department of the ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service **Employer identification number** Name of the organization Philadelphia University 23-1352294 Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel ▼ Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g, maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1**b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on 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** Nο Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Νo 4с Participate in, or receive payment from, an equity-based compensation arrangement? Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Νo Any related organization? 5b Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on 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 Νo Any related organization? 6h Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

0

(ii)

0

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 on Schedule 1, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (D) Nontaxable (E) Total of columns (F) Compensation in (C) Retirement and other deferred benefits (B)(i)-(D)column(B) reported (iii) Base as deferred on prior Other reportable compensation Bonus & incentive (i) compensation compensation Form 990 compensation 1 STEPHEN SPINELLI 322,422 (i) 43,188 4,223 23,850 144,346 538,029 Ω PRESIDENT 0 0 0 0 0 0 (ii) 2 MATT D BAKERPROVOST 205,479 (i) 8,249 4,979 28,494 2,137 249,338 0 Ω 0 0 0 0 (ii) JAMES P HARTMAN END 172,074 (i) 7,311 9,394 31,225 21,668 241,672 Ω **3** 42916 VP OF FINANCE & CFO 0 0 0 0 0 0 0 (ii) 4 BARBARA KLINKHAMMER 193,123 (i) 8,056 417 17,901 23,737 243,234 0 EXEC DEAN OF ACADEMICS 0 0 Ω 0 0 0 Ω (ii) 5 DAVINDER MALHOTRA 171,992 (i) 4,784 198 10,764 24,836 212,574 0 **PROFESSOR** 0 0 0 0 0 0 0 (ii) 6 DR WIDDER 162,194 (i) 6,692 15,378 35,057 23,363 242,684 0 VP OF INNOVATION 0 0 0 0 0 0 0 (ii) 7 RONALD KANDER 190,380 17,616 (i) 7,930 4,528 92,753 313,207 0 EXEC DEAN OF ACADEMICS 0 0 0 0 0 0 0 (ii) 8 JESSE R SHAFER 170,181 7,110 234 15,999 24,981 218,505 0 (i) VP OF DEVELOPMENT 0 0 0 0 0 0 0 (ii) 9 G GEOFFREY CROMARTY 176,065 (i) 6,693 55,494 29,835 292,954 0 24,867 SECRETARY & COO

0

0

0

0

0

Schedule 3 (Form 990) 2013	rage 3									
Part III Supplemental Information										
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information										
Return Reference	Explanation									
Health or social club dues or initiation fees	Schedule J, Part I, Line 1a ANNUAL MEMBERSHIP TO A SOCIAL CLUB IN THE AMOUNT OF \$4,700 IS PROVIDED TO THE UNIVERSITY PRESIDENT									
HOUSING	SCHEDULE J, PART I, LINE 1A HOUSING IS PROVIDED TO THE UNIVERSITY PRESIDENT, THE DIRECTOR OF SAFETY & SECURITY, THE DEAN OF STUDENTS AND AN EXECUTIVE DEAN OF ACADEMICS AS PART OF THEIR EMPLOYMENT AGREEMENTS. THE UNIVERSITY DEEMS IT NECESSARY THAT THESE INDIVIDUALS LIVE ON CAMPUS IN ORDER TO BE ABLE TO IMMEDIATELY PROVIDE LEADERSHIP TO THE CAMPUS COMMUNITY AT ANY TIME 24 HOURS A DAY 7 DAYS A WEEK.									

Dana 3

Schedule J (Form 990) 2015

Schedule 1 (Form 990) 2015

chauffeur, chef, etc)

PRESIDENT'S HOUSE ON CAMPUS

Software ID: Software Version:

EIN: 23-1352294

Name: Philadelphia University

Form 990, Schedule J,	Part I	I - Officers, Direc	tors, Trustees, Ke	ey Employees, and	l Highest Compen	sated Employees		
(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1STEPHEN SPINELLI PRESIDENT	(1)	322,422	43,188	4,223	23,850	144,346	538,029	0
		0	0	0	0	- 0	0	0
1MATT D BAKERPROVOST	(1)	205,479	8,249	4,979	28,494	2,137	249,338	0
	(11)	0	0	0	0	-	0	0
JAMES P HARTMAN END 242916	(1)	172,074	7,311	9,394	31,225	21,668	241,672	0
VP OF FINANCE & CFO	(11)	0	0	0	0	- 0	0	0
3BARBARA KLINKHAMMER EXEC DEAN OF ACADEMICS	(1)	193,123	8,056	417	17,901	23,737	243,234	0
	(11)	0	0	0	0	-	0	0
4DAVINDER MALHOTRA PROFESSOR	(1)	171,992	4,784	198	10,764	24,836	212,574	0
	(11)	0	0	0	0			0
5DR WIDDER VP OF INNOVATION	(1)	162,194	6,692	15,378	35,057	23,363	242,684	0
	(11)	0	0	0	0	-		0
6RONALD KANDER EXEC DEAN OF ACADEMICS	(1)	190,380	7,930	4,528	17,616	92,753	313,207	0
	(11)	0	0	0	0			0
7JESSE R SHAFER VP OF DEVELOPMENT	(1)	170,181	7,110	234	15,999	24,981	218,505	0
	(11)	0	0	0	0			0
8G GEOFFREY CROMARTY SECRETARY & COO	(1)	176,065	6,693	55,494	29,835	24,867	292,954	0
	(11)	0	0	0	0	- -	-	0
		l	l			0	<u> </u>	

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Supplemental Information on Tax Exempt Bonds

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

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

DLN: 93493123012207 OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Department of the Treasury

Schedule K

(Form 990)

	e of the organization										Employer identification number						
PNI	ladelphia University									23	-13522	94					
P	art I Bond Issues																
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP#	(d) Date issued	(e) Issue prid	ce	(f) Description of purpose) Description of purpose		(f) Description of purpose		feased	beha	On alf of uer		Pool ncing
												Yes	No	Yes	No	Yes	No
A	PHEFA REVENUE BOND SERIES OF 2013	23-2243852	70917SDD2	04-11-2013	24,090,0	000	Refun	id Series 20	04A Bonds		X		×		X		
В	Phefa Revenue Bond Series of 2007	23-2243852	70917RFK1	05-18-2007	15,055,0	000		ND 2000 P NUE BOND			Х		Х		Х		
c	Phefa Revenue Bond Series 2011	23-2243852	70917RV51	04-28-2011	17,780,0	000	CONS	STRUCT & F DING	URNISH		Х		Х		Х		
D	2016 PHEFA Revenue Bond	23-2243852		04-29-2016	18,710,0	000	Refun Bonds		06 and 2011B	5	Х		Х		Х		
Pā	rt III Proceeds			1						·	1	·					
	^				Α_			I	3	С			D				
1	A mount of bonds retired						0		0	0					0		
	Total proceeds of issue	isea					0		0						0		
3	· · · · · · · · · · · · · · · · · · ·				29	,113	3,325		15,359,773	17,221,485			18,710,00				
4	Gross proceeds in reserve fur						0		1,501,977		1,29	2,256	0				
5	Capitalized interest from proc	eeds					0 0		0	0			0				
6	Proceeds in refunding escrows	s					0 0		0			0					
7	Issuance costs from proceeds	s				368	8,744 101,348		101,348	275,000			0				
8	Credit enhancement from proc						0 0		0	0			0				
9	Working capital expenditures						0		0	0					0		
10	Capital expenditures from pro						0		0		15,00	4,229			0		
11	Other spent proceeds				28	3,744	4,581		13,756,448		65	0,000		18	,710,000		
12	Other unspent proceeds						0		0	0		0			0		
13	Year of substantial completion	n			2013				07		2012			2016			
					Yes	N	lo	Yes	No	Yes	_	No	Ye		No		
14	Were the bonds issued as par				X				X			Х	Х				
15	Were the bonds issued as par					Х	(X				Х			Х		
16	Has the final allocation of proceeds been made?		×			X		Χ			X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?			x			X		X			Х					
Pa	rt IIII Private Business U										<u> </u>			<u>'</u>			
					A		_		3		<u>c</u>			D			
					Yes	No	0	Yes	No	Yes		No	Ye	5	No		

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

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

Χ

Х

Χ

Х

				١	E	3		C		D	
			Yes	No	Yes	No	Yes	No	Yes	No	
3a	Are there any management or service contracts that may result in private of bond-financed property?	business use		х		Х		×		×	
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or counsel to review any management or service contracts relating to the fina										
prope	rty?										
С	Are there any research agreements that may result in private business use of bond-financed property?			x		Х		×		×	
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or counsel to review any research agreements relating to the financed propert										
4	Enter the percentage of financed property used in a private business use by other than a section $501(c)(3)$ organization or a state or local government			0 %		0 %		0 %	6 0 %		
5	Enter the percentage of financed property used in a private business use as unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government	ersection		2 000 %		0 %		0 %	6	0 %	
6	Total of lines 4 and 5			2 000 %		0 %		0 %	, o	0 %	
7	Does the bond issue meet the private security or payment test?			Х		X		Х		X	
8a	Has there been a sale or disposition of any of the bond-financed property to nongovernmental person other than a $501(c)(3)$ organization since the bon issued?			x		x		×		×	
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of				0 %		0 %	ó	•	
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections		x		×		×		×	
9	Has the organization established written procedures to ensure that all nonc bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		x		Х		х		x		
Par	IV Arbitrage							•	•		
	_	A			В		С		D		
		Yes	No	Yes	No	Ye	s	No	Yes	No	
1	Has the Issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	×		×		×	X		х		
2	If "No" to line 1, did the following apply?										
а	Rebate not due yet?										
b	Exception to rebate?										
c	No rebate due?										
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed										
3	Is the bond issue a variable rate issue?		Х		Х			Х		Х	
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		×		Х			х		Х	
b	Name of provider	0		0		0		0			
С	Term of hedge										
d	Was the hedge superintegrated?										
e	Was the hedge terminated?										

D

Yes

С

No

Χ

Yes

Page **3**

No

contract (GIC)?

6	
_	
7	

7	
	;
_	

b	Name of provider	0	0 0		0)			
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		×		X		×		×
7	Has the organization established written procedures to monitor the requirements of section 148?	Х		х		×		х	
Pa	art V Procedures To Undertake Corrective Action	•	•	•	•	•			
		Α		В		С			
		А		В		С		D	
		Yes	No	Yes	No	C Yes	No	Yes D	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	Yes X	No	Yes X	No	Yes X	No		No
P	that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if	X		X		Х		Yes	No

No

Χ

Yes

No

Χ

Yes

SCHEDULE M

Noncash Contributions

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

► Attach to Form 990.

(Form 990)

Department of the

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

DLN: 93493123012207 OMB No 1545-0047

2015

Open to Public

	sury nal Revenue Service					Inspe	ectio	n
	ne of the organization				Employer identificat	ion nu	mber	
hıla	delphia University							
	Turner of Dunarouts				23-1352294			
12	art I Types of Property	I		Ι	T			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermi	_	ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	12	2,308,333	FMV			
10	Securities—Closely held stock \cdot							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
23	Scientific specimens							
	Archeological artifacts							
	Other ► (X	1	250	FM V			
	finvitations)							
	O ther ▶ ()							
	O ther ▶ ()				+			
	Other ▶ ()	h bb a a a a a			 			
29	Number of Forms 8283 received for which the organization comple				29		Yes	No
30:	During the year, did the organiza	tion receiv	e by contribution any prope	erty reported in Part I. lines	s 1 through 28 that		163	NO
J 0.	it must hold for at least three ye		, , ,	, ,				
	for exempt purposes for the enti	re holding p	period?			30a		Νo
	If "Yes," describe the arrangeme							
	Does the organization have a gif Does the organization hire or use	·		,		31	Yes	
	contributions?	•	· · · · · · · ·			32a	Yes	
	 If "Yes," describe in Part II If the organization did not report describe in Part II 	an amount	: in column (c) for a type of	property for which column	(a) is checked,			

Contributions UNIVERSITY BY WELLS FARGO ADVISORS

Schedule M (Form 990) (2015)

SCHEDULI (Form 990 of 990-EZ) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.		2015 Open to Public Inspection
Name of the orga Philadelphia Univers		23-1352294	tification number
Return Reference	Explanation		
Form 990 Review Process	Form 990, Part VI, Line 11b THE FINAL VERSION OF THE FORM 990 AND REQUIR MEMBER OF THE UNIVERSITY'S BOARD-APPOINTED AUDIT COMMITTEE A WEED COMMITTEE PERFORMED A HIGH LEVEL REVIEW OF THE FORM 990 AND DETAIL AS REQUESTED BY THE COMMITTEE AFTER THE AUDIT COMMITTEE'S REVIEW THE RETURN, THE FORM 990 AND REQUIRED SCHEDULES ARE MADE AVAILABE HIGH LEVEL REVIEW	K PRIOR TO FILING THE LS WERE PROVIDED B' IS COMPLETE AND PRI	RETURN THE AUDIT Y THE CONTROLLER OR TO SUBMISSION OF

DLN: 93493123012207

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

Return Reference	Explanation
Process for Determining Compensation	Form 990, Part VI, Line 15a and 15b THE COMPENSATION OF THE UNIVERSITY PRESIDENT, OFFICERS, ALL MEMBERS OF THE PRESIDENTS COUNCIL AND ANY OTHER BMPLOYEE OF THE UNIVERSITY DETERMINED TO BE IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF THE UNIVERSITY IS DETERMINED THROUGH A MULTI-STEP PROCESS THE UNIVERSITY PARTICIPATES IN THE AFFAIRS OF THE UNIVERSITY IS DETERMINED THROUGH A MULTI-STEP PROCESS THE UNIVERSITY PARTICIPATES IN THE AFFAIRS OF THE UNIVERSITY IS DETERMINED THROUGH A MULTI-STEP PROCESS THE UNIVERSITY PARTICIPATES IN THE AFFAIRS OF THE UNIVERSITY PERSONNEL ADMINISTRATION FOR HUMAN RESOURCES (CUPA) THIS SURVEY DATA PROVIDES COMPARABLE COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT OTHER UNIVERSITIES OR PROFESSIONS IN COMPARABLE INDUSTRIES THE CUPA SURVEY USES SUBJECTIVE CRITERIA TO COMPILE MARKET COMPOSITES UNDER A VARIETY OF MULTI DIMENSIONAL DATA GROUPS THE INFORMATION SUBMITTED TO LEGAL COUNSEL AND PRESENTED ANNUALLY BY THE HUMAN RESOURCE OFFICE FOR REVIEW BY THE UNIVERSITY'S EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTESS THE COMPENSATION COMMITTEE MEMBERS MUST BE INDEPENDENT FROM THE BUSINESS OPERATIONS OF THE UNIVERSITY THE COMMITTEE MEMBERS ARE CHOSEN BY THE CHAIR OF THE BUSINESS OPERATIONS OF THE UNIVERSITY THE COMMITTEE MEMBERS ARE CHOSEN BY THE CHAIR OF THE BOARD ON THE ACTIVITIES OF THE COMMITTEE FROM TIME TO TIME THE COMMITTEE RECOMMENDS TO THE FULL BOARD ON THE ACTIVITIES OF THE COMMITTEE FROM TIME TO TIME THE COMMITTEE RECOMMENDS TO THE FULL BOARD FOR A PPROVAL THE TOTAL COMPENSATION PACKAGE INCLUDING INCENTIVES, PREFECUISITES AND FRINGE BENEFITS FOR THE PRESIDENT THE COMMITTEE ALSO REVIEWS AND APPROVES RECOMMENDS TONS BY THE PRESIDENT FOR THE TERMS OF EMPLOY MENT AND TOTAL COMPENSATION OF MAKING ITS DETERMINING THE PRESIDENT FOR THE TERMS OF THE COMMITTEE ALSO REVIEWS AND THE PRESIDENT FOR THE TERMS OF THE TRANSACTION THAT WERE APPROVED AND THE TRANSACTION THAT WAS APPROVED AND THE DATE IN WAS APPROVED AND THE COMMITTEE WITHIN A

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

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