



**Part III Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission:

WESLEYAN UNIVERSITY IS DEDICATED TO PROVIDING AN EDUCATION IN LIBERAL ARTS BY BUILDING A DIVERSE, ENERGETIC COMMUNITY OF STUDENTS, FACULTY, AND STAFF WHO VALUE INDEPENDENCE OF MIND AND GENEROSITY OF SPIRIT. SEE ADDITIONAL DESCRIPTION IN SCHEDULE O

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, 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.

<b>4a</b>	(Code )	(Expenses \$	169,410,000	including grants of \$	56,278,000 )	(Revenue \$	159,842,000 )
See Additional Data							




















<b>4b</b>	(Code )	(Expenses \$	47,381,000	including grants of \$		(Revenue \$	46,079,000 )
See Additional Data							

<b>4c</b>	(Code )	(Expenses \$	11,175,000	including grants of \$		(Revenue \$	)
See Additional Data							

<b>4d</b>	Other program services (Describe in Schedule O )						
	(Expenses \$	502,772	including grants of \$	32,813 )	(Revenue \$	8,428,210 )	

<b>4e</b>	<b>Total program service expenses</b>	228,468,772					
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**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	<b>1</b> Yes	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	<b>2</b> Yes	
<b>3</b> 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	<b>3</b>	No
<b>4 Section 501(c)(3) organizations.</b> 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	<b>4</b>	No
<b>5</b> 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	<b>5</b>	No
<b>6</b> 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 	<b>6</b>	No
<b>7</b> 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 	<b>7</b> Yes	
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	<b>8</b> Yes	
<b>9</b> 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 	<b>9</b>	No
<b>10</b> 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 	<b>10</b> Yes	
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	<b>11a</b> Yes	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	<b>11b</b> Yes	
<b>c</b> 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 	<b>11c</b>	No
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 	<b>11d</b>	No
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	<b>11e</b> Yes	
<b>f</b> 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 	<b>11f</b> Yes	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	<b>12a</b> Yes	
<b>b</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 	<b>12b</b>	No
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 	<b>13</b> Yes	
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b> Yes	
<b>b</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 	<b>14b</b> Yes	
<b>15</b> 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 	<b>15</b>	No
<b>16</b> 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 	<b>16</b> Yes	
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	<b>17</b>	No
<b>18</b> 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	<b>18</b>	No
<b>19</b> 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	<b>19</b>	No

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> . . . . .	<b>20a</b>	No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	<b>21</b>	Yes
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	<b>22</b>	Yes
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	<b>23</b>	Yes
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	<b>24a</b>	Yes
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	<b>24b</b>	No
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>	No
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	<b>24d</b>	No
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25a</b>	No
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	<b>25b</b>	No
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	<b>26</b>	No
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	<b>27</b>	No
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) <b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28a</b>	No
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28b</b>	Yes
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	<b>28c</b>	No
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>29</b>	Yes
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	<b>30</b>	Yes
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	<b>31</b>	No
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	<b>32</b>	No
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	<b>33</b>	No
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	<b>34</b>	Yes
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<b>35a</b>	Yes
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>35b</b>	Yes
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	<b>36</b>	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	<b>37</b>	No
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	<b>38</b>	Yes

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	762	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
<b>2a</b>	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.	3,911	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	Yes	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	Yes	
<b>4a</b>	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)?	Yes	
<b>b</b>	If "Yes," enter the name of the foreign country: <b>FR</b> , GM, IT, SP See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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?		No
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?	Yes	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	Yes	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year.		
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12.		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders.		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.		
<b>b</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.		
<b>c</b>	Enter the amount of reserves on hand.		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		No
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

**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 ☒

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year	33	
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>b</b>	Enter the number of voting members included in line 1a, above, who are independent	31	
<b>2</b>	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?	<b>2</b>	No
<b>3</b>	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?	<b>3</b>	No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>	No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>	No
<b>6</b>	Did the organization have members or stockholders?	<b>6</b>	No
<b>7a</b>	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?	<b>7a</b>	No
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>	No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	<b>8a</b>	Yes
<b>b</b>	Each committee with authority to act on behalf of the governing body?	<b>8b</b>	Yes
<b>9</b>	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	<b>9</b>	No

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?	<b>10a</b>	No
<b>b</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?	<b>10b</b>	
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	Yes
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	Yes
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	Yes
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b>	Yes
<b>13</b>	Did the organization have a written whistleblower policy?	<b>13</b>	Yes
<b>14</b>	Did the organization have a written document retention and destruction policy?	<b>14</b>	Yes
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	<b>15a</b>	Yes
<b>b</b>	Other officers or key employees of the organization	<b>15b</b>	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>	No
<b>b</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?	<b>16b</b>	

**Section C. Disclosure**

**17** List the States with which a copy of this Form 990 is required to be filed: CT

**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. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records.  
 ► WESLEYAN UNIVERSITY 237 HIGH STREET MIDDLETOWN, CT 06459 (860) 685-2000

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

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

Form **990** (2016)

[illegible]

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 222

## Section B. Independent Contractors

(A) Name and business address	(B) Description of services	(C) Compensation
SUN SERVICES LLC, 25 CONTROLS DRIVE SHELTON, CT 06484	CLEANING	3,106,791
KPMG LLP, PO BOX 120001 DALLAS, TX 75312	ACCOUNTING	253,500
NUTMEG PAINTING SERVICES, 185 HILLCREST AVENUE NEW BRITAIN, CT 05053	PAINTING SERVICES	252,215
CONIFER ASSET SOLUTIONS LLC, 767 THIRD AVENUE NEW YORK, NY 10017	INVESTMENT MGMT	242,584
NEWMAN ARCHITECTS PC, 300 YORK STREET NEW HAVEN, CT 06511	ARCHITECT	214,153

Form 990 (2016)



**Part VIII** Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☒

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1a</b> Federated campaigns . . .	<b>1a</b>					
	<b>b</b> Membership dues . . .	<b>1b</b>					
	<b>c</b> Fundraising events . . .	<b>1c</b>	6,080				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	6,818,000				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	56,902,000				
	<b>g</b> Noncash contributions included in lines 1a-1f \$	13,487,798					
	<b>h Total.</b> Add lines 1a-1f . . . . .	63,726,080					
	Program Service Revenue			Business Code			
<b>2a</b> TUITION AND FEES			611710	159,842,000	159,842,000		
<b>b</b> AUXILIARY SERVICES			611710	46,079,000	46,079,000		
<b>c</b> _____							
<b>d</b> _____							
<b>e</b> _____							
<b>f</b> All other program service revenue							
<b>g Total.</b> Add lines 2a-2f . . . . .		205,921,000					
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		1,840,000	0	-544,770	2,384,770	
	<b>4</b> Income from investment of tax-exempt bond proceeds		0	0	0	0	
	<b>5</b> Royalties . . . . .		7,000	0	0	7,000	
			(i) Real	(ii) Personal			
	<b>6a</b> Gross rents						
	<b>b</b> Less rental expenses						
	<b>c</b> Rental income or (loss)	0	0				
	<b>d</b> Net rental income or (loss) . . . . .			0	0	0	0
			(i) Securities	(ii) Other			
	<b>7a</b> Gross amount from sales of assets other than inventory		351,844,000	325,330			
	<b>b</b> Less cost or other basis and sales expenses		315,222,000	57,511			
	<b>c</b> Gain or (loss)		36,622,000	267,819			
	<b>d</b> Net gain or (loss) . . . . .			36,889,819	0	0	36,889,819
	<b>8a</b> Gross income from fundraising events (not including \$ 6,080 of contributions reported on line 1c) See Part IV, line 18 . . . . .		<b>a</b>	4,970			
	<b>b</b> Less direct expenses . . . . .		<b>b</b>	9,079			
	<b>c</b> Net income or (loss) from fundraising events . . . . .				-4,109	0	-4,109
	<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .		<b>a</b>	0			
	<b>b</b> Less direct expenses . . . . .		<b>b</b>	0			
	<b>c</b> Net income or (loss) from gaming activities . . . . .				0	0	0
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .		<b>a</b>	1,031,854				
<b>b</b> Less cost of goods sold . . . . .		<b>b</b>	746,854				
<b>c</b> Net income or (loss) from sales of inventory . . . . .				285,000	0	0	285,000
Miscellaneous Revenue		Business Code					
<b>11a</b> OTHER REVENUE		531390	8,428,210	8,428,210			
<b>b</b> _____							
<b>c</b> _____							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .				8,428,210			
<b>12 Total revenue.</b> See Instructions . . . . .				317,093,000	214,349,210	-544,770	39,562,480

**Part IX Statement of Functional Expenses**

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	32,813	32,813		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.	53,226,276	53,226,276		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	3,051,724	3,051,724		
<b>4</b> Benefits paid to or for members.	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	4,386,640	1,108,515	2,619,486	658,639
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	673,348	673,348		
<b>7</b> Other salaries and wages.	89,479,845	73,642,474	11,499,618	4,337,753
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	7,949,000	6,380,573	1,152,992	415,435
<b>9</b> Other employee benefits.	13,400,670	11,218,287	1,537,530	644,853
<b>10</b> Payroll taxes.	6,466,231	5,177,717	925,815	362,699
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management.	7,229,034	4,926,147	1,935,391	367,496
<b>b</b> Legal.	764,837	58,592	701,584	4,661
<b>c</b> Accounting.	238,500		238,500	
<b>d</b> Lobbying.	0			
<b>e</b> Professional fundraising services. See Part IV, line 17.	0			
<b>f</b> Investment management fees.	2,686,000		2,686,000	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	81,870	73,014	1,741	7,115
<b>12</b> Advertising and promotion.	5,722,939	5,398,221	205,672	119,046
<b>13</b> Office expenses.	7,011,013	5,786,561	793,377	431,075
<b>14</b> Information technology.	2,277,009	1,009,875	1,206,799	60,335
<b>15</b> Royalties.	0			
<b>16</b> Occupancy.	11,080,595	8,344,587	1,838,068	897,940
<b>17</b> Travel.	3,466,552	2,899,982	296,433	270,137
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
<b>19</b> Conferences, conventions, and meetings.	273,115	202,414	61,087	9,614
<b>20</b> Interest.	12,561,000	11,430,510	816,465	314,025
<b>21</b> Payments to affiliates.	0			
<b>22</b> Depreciation, depletion, and amortization.	10,261,000	9,337,510	666,965	256,525
<b>23</b> Insurance.	809,092		809,092	
<b>24</b> 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):				
<b>a</b> DINING	14,582,487	14,582,487		
<b>b</b> FOREIGN PROGRAM	5,213,923	5,213,923		
<b>c</b> FELLOWSHIPS	2,734,401	2,734,401		
<b>d</b> MISCELLANEOUS	4,816,086	1,958,821	2,042,522	814,743
<b>e</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24e.	270,476,000	228,468,772	32,035,137	9,972,091
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .		13,137,000	<b>1</b>	14,308,000
	<b>2</b>	Savings and temporary cash investments . . . . .		98,097,000	<b>2</b>	52,527,000
	<b>3</b>	Pledges and grants receivable, net . . . . .		31,545,000	<b>3</b>	23,052,000
	<b>4</b>	Accounts receivable, net . . . . .		897,000	<b>4</b>	1,036,000
	<b>5</b>	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		0	<b>5</b>	0
	<b>6</b>	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L.		0	<b>6</b>	0
	<b>7</b>	Notes and loans receivable, net . . . . .		6,695,000	<b>7</b>	5,763,000
	<b>8</b>	Inventories for sale or use . . . . .		563,000	<b>8</b>	986,000
	<b>9</b>	Prepaid expenses and deferred charges . . . . .		844,000	<b>9</b>	1,193,000
	<b>10a</b>	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	<b>10a</b> 570,006,000			
	<b>b</b>	Less: accumulated depreciation	<b>10b</b> 243,315,000	313,625,000	<b>10c</b>	326,691,000
	<b>11</b>	Investments—publicly traded securities . . . . .		524,387,000	<b>11</b>	635,430,000
	<b>12</b>	Investments—other securities. See Part IV, line 11 . . . . .		274,031,000	<b>12</b>	338,147,000
	<b>13</b>	Investments—program-related. See Part IV, line 11 . . . . .		0	<b>13</b>	0
	<b>14</b>	Intangible assets . . . . .		0	<b>14</b>	0
	<b>15</b>	Other assets. See Part IV, line 11 . . . . .		4,115,000	<b>15</b>	3,716,000
<b>16</b>	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .		1,267,936,000	<b>16</b>	1,402,849,000	
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .		15,374,000	<b>17</b>	18,032,000
	<b>18</b>	Grants payable . . . . .		0	<b>18</b>	0
	<b>19</b>	Deferred revenue . . . . .		2,939,000	<b>19</b>	2,824,000
	<b>20</b>	Tax-exempt bond liabilities . . . . .		20,105,000	<b>20</b>	20,105,000
	<b>21</b>	Escrow or custodial account liability. Complete Part IV of Schedule D.		0	<b>21</b>	0
	<b>22</b>	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		0	<b>22</b>	0
	<b>23</b>	Secured mortgages and notes payable to unrelated third parties . . . . .		0	<b>23</b>	0
	<b>24</b>	Unsecured notes and loans payable to unrelated third parties . . . . .		264,397,000	<b>24</b>	250,000,000
	<b>25</b>	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		48,123,000	<b>25</b>	64,147,000
	<b>26</b>	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .		350,938,000	<b>26</b>	355,108,000
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>					
	<b>27</b>	Unrestricted net assets		301,496,000	<b>27</b>	348,858,000
	<b>28</b>	Temporarily restricted net assets . . . . .		311,203,000	<b>28</b>	359,117,000
	<b>29</b>	Permanently restricted net assets		304,299,000	<b>29</b>	339,766,000
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>					
	<b>30</b>	Capital stock or trust principal, or current funds . . . . .			<b>30</b>	
	<b>31</b>	Paid-in or capital surplus, or land, building or equipment fund . . . . .			<b>31</b>	
	<b>32</b>	Retained earnings, endowment, accumulated income, or other funds			<b>32</b>	
	<b>33</b>	<b>Total net assets or fund balances</b> . . . . .		916,998,000	<b>33</b>	1,047,741,000
	<b>34</b>	<b>Total liabilities and net assets/fund balances</b> . . . . .		1,267,936,000	<b>34</b>	1,402,849,000

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	317,093,000
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	270,476,000
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	46,617,000
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	916,998,000
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	83,916,000
<b>6</b>	Donated services and use of facilities	<b>6</b>	0
<b>7</b>	Investment expenses	<b>7</b>	0
<b>8</b>	Prior period adjustments	<b>8</b>	0
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	210,000
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	1,047,741,000

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b> 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	Yes	
<b>b</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	Yes	

# Additional Data

**Software ID:**  
**Software Version:**  
**EIN:** 06-0646959  
**Name:** WESLEYAN UNIVERSITY

Form 990 (2016)

**Form 990, Part III, Line 4a:**

\*INSTRUCTION AND RESEARCH\* WESLEYAN UNIVERSITY OFFERS INSTRUCTION IN 45 DEPARTMENTS, 45 MAJOR FIELDS OF STUDY, 17 MINOR FIELDS OF STUDY, AND 12 CERTIFICATES OF STUDY, AND AWARDS THE BACHELOR OF ARTS AND GRADUATE DEGREES THE MASTER OF ARTS DEGREE AND THE DOCTOR OF PHILOSOPHY ARE REGULARLY AWARDED IN SIX FIELDS OF STUDY STUDENTS MAY CHOOSE FROM MORE THAN 1000 COURSES EACH YEAR AND MAY BE COUNTED UPON TO DEVISE, WITH THE FACULTY, SOME 800 INDIVIDUAL TUTORIALS AND LESSONS PLEASE SEE SCHEDULE O FOR DETAIL

**Form 990, Part III, Line 4b:**

\*AUXILIARY SERVICES AND OTHER\* AUXILIARY SERVICES INCLUDE THE COSTS OF ROOM AND BOARD FOR APPROXIMATELY 3,000 STUDENTS RESIDING ON A 311 ACRE CAMPUS. THERE ARE 8 RESIDENCE HALLS, 7 APARTMENT COMPLEXES AND OVER 25 PROGRAM HOUSES IN ADDITION TO OVER 140 HOUSE UNITS ON CAMPUS FOR UPPER-CLASS STUDENTS. WORKING IN PARTNERSHIP WITH STUDENTS AND COLLABORATIVELY WITH OTHER MEMBERS OF THE WESLEYAN COMMUNITY, THE OFFICE OF RESIDENTIAL LIFE STRIVES TO PROVIDE A SAFE AND SUPPORTIVE RESIDENTIAL ENVIRONMENT WHICH COMPLEMENTS AND EXTENDS STUDENTS' EDUCATIONAL EXPERIENCE. PLEASE SEE SCHEDULE O FOR DETAIL.

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## Form 990, Part III, Line 4c:

\* LIBRARIES \* LIBRARY EXPENSES INCLUDE ACQUISITION OF BOOKS, PERIODICALS AND OTHER MATERIALS, COMPENSATION OF STAFF, AND OTHER EXPENDITURES IN SUPPORT OF THE LIBRARY PLEASE SEE SCHEDULE O FOR DETAIL

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL S ROTH ..... PRESIDENT AND TRUSTEE	38 0 ..... 0 0	X		X				663,334	0	453,363
LEO Y AU ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
CARLTON B BARNSWELL ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
PHOEBE C BOYER ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
ANDREW M BRANDON-GRODON ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
MARC N CASPER ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
MARCUS B CHUNG ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
DAVID G DAVENPORT ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
DIANA FARRELL ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
JOHN B FRANK ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										(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
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)										
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former					
KAREN J FREEDMAN ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	
MICHAEL T FRIES ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	
ANNE S GOLDRACH ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	
IRMA V GONZALEZ ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	
JOHN H HALL ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	
DARRYL B HAZEL ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	
EDWARD J HEFFERMAN ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	
SAEYUN D LEE ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	
DOUGLAS T LINDE ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	
DONNA S MOREA ..... TRUSTEE	1 0 ..... 0 0	X							0	0	0	

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARC O NACHMANN ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
KENNEDY OWITI ODEDE ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
ROBERT A PRUZAN ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
HONG QU ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
PHILIP J RAUCH ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
DAVID L RESNICK ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
MUZZY ROSENBLATT ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
ELIZABETH H SCHMIDT ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
JEFFREY L SHAMES ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
HAROLD R SOGARD ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ADAM USDAN ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
ALFORD A YOUNG JR ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
DONNA S ZILKHA ..... TRUSTEE	1 0 ..... 0 0	X						0	0	0
NATHAN DAVID PETERS ..... VP FOR FINANCE & ADMIN	38 0 ..... 0 0			X				283,637	0	73,403
DAVID STUART WINAKOR ..... GENERAL COUNSEL/SECRETARY	38 0 ..... 0 0			X				226,253	0	105,507
JOYCE JACOBSEN ..... PROVOST AND VICE PRESIDENT	38 0 ..... 0 0				X			246,003	0	65,772
DAVE BAIRD ..... VICE PRESIDENT OF IT/CIO	38 0 ..... 0 0				X			191,455	0	58,355
ANTONIO FARIAS ..... VP FOR EQUITY AND INCLUSION	38 0 ..... 0 0				X			157,587	0	47,983
ANNE MARTIN ..... CHIEF INVESTMENT OFFICER	38 0 ..... 0 0				X			717,137	0	132,921
NANCY HARGRAVE MEISLAHN ..... DAED ADMISSION/FINANCIAL AID	38 0 ..... 0 0				X			213,586	0	64,669

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former				
KEY L NUTTALL ..... CHIEF COMMUNICATIONS OFFICER	38 0 ..... 0 0				X			209,148	0	75,046	
MICHAEL J WHALEY ..... VP FOR STUDENT AFFAIRS	38 0 ..... 0 0				X			177,191	0	51,613	
BARBARA-JAN WILSON ..... VP FOR UNIVERSITY RELATIONS	38 0 ..... 0 0				X			304,505	0	68,710	
JEANINE D BASINGER ..... PROFESSOR	38 0 ..... 0 0					X		272,878	0	62,960	
LAUREN CALDWELL ..... PROFESSOR	38 0 ..... 0 0					X		244,386	0	35,855	
LISA C DIERKER ..... PROFESSOR	38 0 ..... 0 0					X		261,183	0	79,347	
NATHANAEL GREENE ..... PROFESSOR	38 0 ..... 0 0					X		222,073	0	46,462	
JOHN C MEERTS ..... FORMER VP FIN & ADMIN	38 0 ..... 0 0					X		319,513	0	48,061	
LAURA B GRABEL ..... PROFESSOR	38 0 ..... 0 0						X	197,988	0	86,880	
J DONALD MOON ..... PROFESSOR	38 0 ..... 0 0						X	193,591	0	67,751	

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(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 (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ROB ROSENTHAL ..... FORMER PROVOST & VP ACAD AFF	38 0 ..... 0 0						X	177,573	0	32,690
ANDREW SZEGEDY-MASZAK ..... FORMER PROF/CHAIR FACULTY	38 0 ..... 0 0						X	178,585	0	55,955
RUTH STRIEGEL WEISSMAN ..... FORMER PROVOST & VP ACAD AFF	38 0 ..... 0 0						X	184,176	0	65,791

<b>SCHEDULE A</b> (Form 990 or 990-EZ)	<b>Public Charity Status and Public Support</b> Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No 1545-0047
		<b>2016</b> <b>Open to Public Inspection</b>
Department of the Treasury Internal Revenue Service <b>Name of the organization</b> WESLEYAN UNIVERSITY	<b>Employer identification number</b> 06-0646959	

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.  
The organization is not a private foundation because it is (For lines 1 through 12, check only one box )

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☒ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ 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 \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II )
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II )
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university \_\_\_\_\_
- 10 ☐ An organization that normally receives (1) more than 33 1/3% 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 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III )
- 11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 12 ☐ 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g
- a ☐ **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.**
- 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.**
- 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.**
- d ☐ **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.**
- e ☐ 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
- f Enter the number of supported organizations \_\_\_\_\_
- g Provide the following information about the supported organization(s) \_\_\_\_\_

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

**Part II 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, 8, or 9 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**

<b>Calendar year (or fiscal year beginning in) ►</b>		<b>(a)2012</b>	<b>(b)2013</b>	<b>(c)2014</b>	<b>(d)2015</b>	<b>(e)2016</b>	<b>(f)Total</b>
<b>1</b>	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	45,494,783	48,735,692	41,805,610	55,323,000	63,726,080	255,085,165
<b>2</b>	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
<b>3</b>	The value of services or facilities furnished by a governmental unit to the organization without charge						0
<b>4</b>	<b>Total.</b> Add lines 1 through 3	45,494,783	48,735,692	41,805,610	55,323,000	63,726,080	255,085,165
<b>5</b>	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						18,071,300
<b>6</b>	<b>Public support.</b> Subtract line 5 from line 4						237,013,865

**Section B. Total Support**

<b>Calendar year (or fiscal year beginning in) ►</b>		<b>(a)2012</b>	<b>(b)2013</b>	<b>(c)2014</b>	<b>(d)2015</b>	<b>(e)2016</b>	<b>(f)Total</b>
<b>7</b>	Amounts from line 4	45,494,783	48,735,692	41,805,610	55,323,000	63,726,080	255,085,165
<b>8</b>	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,213,885	1,632,693	1,897,534	1,972,643	2,391,770	9,108,525
<b>9</b>	Net income from unrelated business activities, whether or not the business is regularly carried on	1,383,000	205,020				1,588,020
<b>10</b>	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1,376,423	981,566	1,076,854	850,654	1,031,854	5,317,351
<b>11</b>	<b>Total support.</b> Add lines 7 through 10						271,099,061

**12** Gross receipts from related activities, etc. (see instructions) **12** 1,008,243,858**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ☐**Section C. Computation of Public Support Percentage**

<b>14</b>	Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	87.427 %
<b>15</b>	Public support percentage for 2015 Schedule A, Part II, line 14	<b>15</b>	90.710 %

**16a 33 1/3% support test—2016.** 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—2015.** 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—2016.** 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 organization ☐**b 10%-facts-and-circumstances test—2015.** 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 supported organization ☐**18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a)2012	(b)2013	(c)2014	(d)2015	(e)2016	(f)Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	
<b>16</b> Public support percentage from 2015 Schedule A, Part III, line 15	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2016</b> (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	
<b>18</b> Investment income percentage from <b>2015</b> Schedule A, Part III, line 17	<b>18</b>	

**19a 33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

**b 33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

**20 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 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>	<b>1</b>	
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	<b>2</b>	
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	<b>3a</b>	
<b>b</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)? <i>If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.</i>	<b>3b</b>	
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.</i>	<b>3c</b>	
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	<b>4a</b>	
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>	<b>4b</b>	
<b>c</b> 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)? <i>If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>	<b>4c</b>	
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b>, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>	<b>5a</b>	
<b>b</b> <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	<b>5b</b>	
<b>c</b> <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	<b>5c</b>	
<b>6</b> Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>6</b>	
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	<b>7</b>	
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	<b>8</b>	
<b>9a</b> 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))? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9a</b>	
<b>b</b> Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9b</b>	
<b>c</b> Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in <b>Part VI</b>.</i>	<b>9c</b>	
<b>10a</b> Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	<b>10a</b>	
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	<b>10b</b>	

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described in (a) above?		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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? <i>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.</i>		
<b>1</b>		
<b>2</b> 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? <i>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.</i>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? <i>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).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>1</b>		
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>		
<b>3</b> 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>		

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test <b>Answer (a) and (b) below.</b>		
<b>a</b> 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? <i>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.</i>		
<b>2a</b>		
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>2b</b>		
<b>3</b> Parent of Supported Organizations <b>Answer (a) and (b) below.</b>		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
<b>3a</b>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>3b</b>		

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

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

**Section A - Adjusted Net Income**

	(A) Prior Year	(B) Current Year (optional)
<b>1</b> Net short-term capital gain	<b>1</b>	
<b>2</b> Recoveries of prior-year distributions	<b>2</b>	
<b>3</b> Other gross income (see instructions)	<b>3</b>	
<b>4</b> Add lines 1 through 3	<b>4</b>	
<b>5</b> Depreciation and depletion	<b>5</b>	
<b>6</b> 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)	<b>6</b>	
<b>7</b> Other expenses (see instructions)	<b>7</b>	
<b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)	<b>8</b>	

**Section B - Minimum Asset Amount**

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

**Section C - Distributable Amount**

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

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

<b>Section D - Distributions</b>	<b>Current Year</b>
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	
<b>4</b> Amounts paid to acquire exempt-use assets	
<b>5</b> Qualified set-aside amounts (prior IRS approval required)	
<b>6</b> Other distributions (describe in Part VI) See instructions	
<b>7 Total annual distributions.</b> Add lines 1 through 6	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
<b>9</b> Distributable amount for 2016 from Section C, line 6	
<b>10</b> Line 8 amount divided by Line 9 amount	

<b>Section E - Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2016</b>	<b>(iii) Distributable Amount for 2016</b>
<b>1</b> Distributable amount for 2016 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2016 (reasonable cause required--see instructions)			
<b>3</b> Excess distributions carryover, if any, to 2016			
<b>a</b>			
<b>b</b>			
<b>c</b> From 2013. . . . .			
<b>d</b> From 2014. . . . .			
<b>e</b> From 2015. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2016 distributable amount			
<b>i</b> Carryover from 2011 not applied (see instructions)			
<b>j</b> Remainder Subtract lines 3g, 3h, and 3i from 3f			
<b>4</b> Distributions for 2016 from Section D, line 7 \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2016 distributable amount			
<b>c</b> Remainder Subtract lines 4a and 4b from 4			
<b>5</b> Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
<b>6</b> Remaining underdistributions for 2016 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7 Excess distributions carryover to 2017.</b> Add lines 3j and 4c			
<b>8</b> Breakdown of line 7			
<b>a</b>			
<b>b</b> Excess from 2013. . . . .			
<b>c</b> Excess from 2014. . . . .			
<b>d</b> Excess from 2015. . . . .			
<b>e</b> Excess from 2016. . . . .			

**Part VI**   **Supplemental Information.**

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

<b>Facts And Circumstances Test</b>

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493131028258	
<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>► 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.</div> <div>Information about Schedule D (Form 990) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>			<div>OMB No 1545-0047</div> <div>2016</div> <div>Open to Public Inspection</div>
Name of the organization WESLEYAN UNIVERSITY				Employer identification number 06-0646959	
Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.					
		(a) Donor advised funds		(b) Funds and other accounts	
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?				<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.					
1	Purpose(s) of conservation easements held by the organization (check all that apply) <input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input checked="" type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Protection of natural habitat <input checked="" type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year				
a	Total number of conservation easements			Held at the End of the Year	
b	Total acreage restricted by conservation easements			2a	2
c	Number of conservation easements on a certified historic structure included in (a)			2b	10 00
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register			2c	2
				2d	
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►				
4	Number of states where property subject to conservation easement is located ► 1				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► 7 50				
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$				
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?				<input type="checkbox"/> Yes <input type="checkbox"/> No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements				
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.					
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items				
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items				
(i) Revenue included on Form 990, Part VIII, line 1		► \$ 680,600			
(ii) Assets included in Form 990, Part X		► \$ 11,001,594			
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items				
a	Revenue included on Form 990, Part VIII, line 1				► \$
b	Assets included in Form 990, Part X				► \$
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
			Cat No 52283D	Schedule D (Form 990) 2016	

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

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)

a

☒ Public exhibition

b

☒ Scholarly research

c

☒ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

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?

☐ Yes☒ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

Part V

Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	802,204,000	838,774,000	793,334,000	688,643,000	616,195,000
b Contributions	82,777,000	27,065,000	28,526,000	28,269,000	33,587,000
c Net investment earnings, gains, and losses	118,754,000	-29,466,000	48,532,000	106,454,000	67,246,000
d Grants or scholarships	8,142,067	7,315,000	6,638,252	6,146,143	5,551,705
e Other expenditures for facilities and programs	28,415,933	26,854,000	24,979,748	23,885,857	22,833,295
f Administrative expenses					
g End of year balance	967,177,000	802,204,000	838,774,000	793,334,000	688,643,000

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

30 000 %

b

Permanent endowment

33 000 %

c

Temporarily restricted endowment

37 000 %

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

3a

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

(i) unrelated organizations

3a(i)

☐ Yes☐ No

(ii) related organizations

3a(ii)

☐ Yes☐ No

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

3b

☐ Yes☐ No

4

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

Part VI

Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		34,271,000		34,271,000
b Buildings		421,002,000	150,549,000	270,453,000
c Leasehold improvements				
d Equipment		112,783,000	92,766,000	20,017,000
e Other		1,950,000		1,950,000
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				326,691,000

Part VII

Investments—Other Securities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b.  
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b)Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives . . . . .		
(2)Closely-held equity interests . . . . .		
(3)Other _____		
(A) REAL ASSETS	131,734,000	F
(B) PRIVATE EQUITY	206,413,000	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶	338,147,000	

Part VIII

Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c.  
See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 ) ▶		

Part IX

Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 ) . . . . . ▶	

Part X

Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.  
See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
(1) Federal income taxes	0
TERM LOANS	13,670,000
LIABILITIES RELATED TO INVESTMENTS	4,131,000
CHARITABLE REMAINDER TRUSTS	9,866,000
POST RETIREMENT BENEFITS	21,429,000
PERKINS LOAN PROGRAM	4,783,000
ASSET RETIREMENT OBLIGATION	12,713,000
BOND PREMIUM	-2,445,000
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	64,147,000

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

☒



**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	398,533,000
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	83,916,000
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	210,000
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	84,126,000
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	314,407,000
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	2,686,000
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	2,686,000
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	317,093,000

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	267,790,000
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	267,790,000
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	2,686,000
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	2,686,000
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	270,476,000

**Part XIII Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

**Part XIII**   **Supplemental Information** *(continued)*

Return Reference	Explanation

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 06-0646959

**Name:** WESLEYAN UNIVERSITY

## Supplemental Information

Return Reference	Explanation
CONSERVATION EASEMENTS	<p>PART II, LINE 9 WESLEYAN UNIVERSITY DOES NOT OWN ANY PROPERTY ENCUMBERED BY A CONSERVATION EASEMENT HOWEVER, THE LONG LANE PARCEL IS CURRENTLY UNDER THE TRANSFER ACT AGREEMENT WITH CT DEP PERTAINING TO REMEDIATED SOIL PILES, EXCAVATIONS AND IMPACTED WETLANDS, WHICH ARE PROTECTED UNDER LOCAL AND STATE REGULATIONS AND HAVE A WRITTEN MANAGEMENT PLAN WHICH PROVIDES A POLICY FOR PROTECTING THE AREAS INCLUDING THE PERIODIC MONITORING, INSPECTION, AND ENFORCEMENT OF THE SITE REGARDING HISTORIC BUILDINGS, THE CITY OF MIDDLETOWN DESIGN PRESERVATION AND REVIEW BOARD (DRPB) REVIEWS PROPOSED RENOVATIONS TO ALL HISTORIC STRUCTURES IN CERTAIN DISTRICTS, WHICH INCLUDES WESLEYAN'S CAMPUS THE DRPB THEN MAKES RECOMMENDATIONS TO THE MIDDLETOWN DIRECTOR OF PLANNING FOR SUCH RENOVATIONS WESLEYAN POLICY REQUIRES OUR CONTRACTED ARCHITECTS, ENGINEERS AND CONTRACTORS TO COMPLY WITH ALL LOCAL, STATE AND FEDERAL REGULATIONS ON EVERY PROJECT CONTRACTS FOR DESIGN SERVICES IN HISTORIC BUILDINGS REQUIRE THAT THE ARCHITECT AND WESLEYAN SUBMIT PROPOSED RENOVATION PLANS TO THE CITY OF MIDDLETOWN AND THE DRPB AS REQUIRED BY ZONING LAW</p>

## Supplemental Information

Return Reference	Explanation
ORGANIZATIONS COLLECTIONS OF ARTS	<p>PART III, LINE 4 THE UNIVERSITY MAINTAINS WORKS OF ART IN THE DAVISON ART CENTER (DAC), OL IN LIBRARY, SCIENCE LIBRARY AND ARCHIVES WESLEYAN STUDENTS IN MANY DEPARTMENTS USE THE DA C COLLECTION FOR CLASS ASSIGNMENTS OR VIEWINGS, AS WELL AS FOR INDIVIDUAL RESEARCH PROJECT S WITH UNIVERSITY FACULTY, AND THE MUSEUM ALSO ENCOURAGES TEACHING AND LEARNING FROM OBJEC</p> <p>TS IN A WIDE RANGE OF OTHER WAYS THE LIBRARY MAINTAINS SPECIAL COLLECTIONS AND ARCHIVES, WHICH INCLUDES AROUND 25,000 RARE BOOKS AND COLLECTIONS THAT SERVE TO STIMULATE UNDERGRADU</p> <p>ATE MINDS ABOUT THE PAST, OFFER LABORATORY MATERIALS IN THE HUMANITIES, AND PROVIDE SOME P REPARATION FOR ADVANCED SCHOLARSHIP</p>

**Supplemental Information**

Return Reference	Explanation
ENDOWMENT FUNDS	<p>PART V, LINE 4 THE UNIVERSITY'S ENDOWMENT CONSISTS OF APPROXIMATELY 1,300 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS THE UNIVERSITY HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS THE UNIVERSITY FOLLOWS A SPENDING POLICY KNOWN AS THE TOBIN SPENDING RULE, NAMED FOR JAMES TOBIN, RECIPIENT OF THE 1971 NOBEL PRIZE IN ECONOMICS THIS RULE SETS THE ANNUAL DISTRIBUTION USING A QUANTITATIVE FORMULA THAT COMBINES ELEMENTS OF STABILITY AND MARKET CONDITIONS THE UNIVERSITY'S ENDOWMENT SPENDING IS 70% BASED ON THE PRIOR YEAR'S SPENDING PLUS INFLATION (MEASURED BY THE HIGHER EDUCATION PRICE INDEX (HEPI) AS OF JUNE 30 OF THE PAST FISCAL YEAR) AND 30% FROM 4 5% OF THE MARKET VALUE OF ENDOWMENT AS OF JUNE 30 OF THE PREVIOUS FISCAL YEAR ABOUT 84% OF THE PERMANENTLY RESTRICTED NET ASSETS CONSIST OF THOSE FOR WHICH INCOME IS RESTRICTED TO FINANCIAL AID, INSTRUCTION AND RESEARCH</p>

Supplemental Information	
Return Reference	Explanation
UNCERTAIN TAX POSITIONS UNDER FIN 48 (ASC 740)	PART X, LINE 2 THE UNIVERSITY IS GENERALLY EXEMPT FROM INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(A), AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3) THE UNIVERSITY ASSESSES UNCERTAIN TAX POSITIONS AND DETERMINED THAT THERE WERE NO SUCH POSITIONS THAT HAVE A MATERIAL EFFECT ON THE FINANCIAL STATEMENTS

Supplemental Information	
Return Reference	Explanation
OTHER REVENUE INCLUDED IN AFS NOT IN FORM 990	PART XI, LINE 2D POSTRETIREMENT BENEFIT OBLIGATION CHANGES 1,154,000 CHANGE IN VALUE OF SP LIT INTEREST AGREEMENTS (944,000) ----- TOTAL 210,000

<b>SCHEDULE E</b> (Form 990 or 990-EZ)	<b>Schools</b>  ▶ <b>Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.</b>  ▶ <b>Attach to Form 990 or Form 990-EZ.</b>  ▶ <b>Information about Schedule E (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</b>	OMB No 1545-0047
		<b>2016</b>
	Department of the Treasury Name of the organization WESLEYAN UNIVERSITY	Employer identification number 06-0646959

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



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

Return Reference	Explanation
SCHEDULE E, LINE 3	THE NONDISCRIMINATORY POLICY IS PROMINENTLY DISPLAYED ON ADVERTISEMENTS FOR EMPLOYMENT THAT APPEAR IN NEWSPAPERS AND THE INTERNET. IT ALSO APPEARS IN ADMISSIONS CATALOGUES, EMPLOYMENT APPLICATIONS AND EMPLOYEE AND FACULTY HANDBOOKS.
SCHEDULE E, LINE 6A	THE UNIVERSITY RECEIVES AWARDS FROM THE DEPARTMENT OF EDUCATION TO BE USED FOR STUDENT FINANCIAL ASSISTANCE. IT ALSO RECEIVES VARIOUS RESEARCH AND DEVELOPMENT GRANTS PRIMARILY FROM THE NATIONAL SCIENCE FOUNDATION AND DEPARTMENT OF HEALTH AND HUMAN SERVICES.

**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
WESLEYAN UNIVERSITY

**Statement of Activities Outside the United States**

► Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

► Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2016**

**Open to Public  
Inspection**

**Employer identification number**

06-0646959

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

**3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
<b>3a</b> Sub-total					276,359,986
<b>b</b> Total from continuation sheets to Part I					
<b>c Totals</b> (add lines 3a and 3b)					276,359,986

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

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)

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

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

[illegible]

**Part IV Foreign Forms**

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☒ Yes ☐ No
- 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
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)* ☒ Yes ☐ No

**Part V**   **Supplemental Information**

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

Return Reference	Explanation
MONITORING THE USE OF GRANT FUNDS	PART I, LINE 2 STUDENTS ATTEND APPROVED STUDY ABROAD PROGRAMS AND RECEIVE WESLEYAN CREDIT PROGRAMS ARE APPROVED BASED ON A REVIEW BY A FACULTY COMMITTEE ONCE THE PROGRAM IS APPROVED, THE OFFICE OF INTERNATIONAL STUDIES, IN CONJUNCTION WITH THE FINANCE OFFICE, FACILITATES PAYMENT AND FINANCIAL AID TO THE HOST SCHOOL AFTER A STUDENT COMPLETES THE PROGRAM, THEY FILL OUT AN EVALUATION OF THE PROGRAM AND AN OFFICIAL TRANSCRIPT IS PRESENTED TO THE UNIVERSITY FROM THE PROGRAM

Return Reference	Explanation
STUDY ABROAD GRANTS	PART III, COLUMN E FINANCIAL AID IS DETERMINED BASED ON A NEEDS ANALYSIS AND APPLIED TO STUDENT CHARGES THAT SUPPORT THE COST OF ATTENDANCE STUDENT CHARGES ARE USED IN SUPPORTING THE UNIVERSITY'S MISSION WESLEYAN ALTERNATES RUNNING FOREIGN PROGRAMS WITH VASSAR COLLEGE AND WELLESLEY COLLEGE IN SPAIN, ITALY, AND FRANCE DURING FISCAL YEAR 2017, WESLEYAN RAN THE ITALY AND FRANCE PROGRAMS, SO EXPENSES IN THAT REGION WERE HIGHER THAN THE PRIOR YEARS WHEN OTHER CONSORTIA SCHOOLS WERE RUNNING THE PROGRAMS

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 06-0646959

**Name:** WESLEYAN UNIVERSITY

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Program Services	STDY ABR/RSRCH/RCRT	4,529,220
Central America and the Caribbean			Program Services	STDY ABR/RSRCH/RCRT	46,523
East Asia and the Pacific			Program Services	STDY ABR/RSRCH/RCRT	613,225



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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa			Program Services	STDY ABR/RSRCH/RCRT	134,392
North America			Program Services	STDY ABR/RSRCH/RCRT	15,505
Russia and the Newly Independent States			Program Services	STDY ABR/RSRCH/RCRT	808

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America			Program Services	STDY ABR/RSRCH/RCRT	224,948
South Asia			Program Services	STDY ABR/RSRCH/RCRT	107,383
Sub-Saharan Africa			Program Services	STDY ABR/RSRCH/RCRT	122,291

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Program Services	INVESTMENTS	268,432,161
Europe (Including Iceland and Greenland)			Program Services	INVESTMENTS	2,133,530

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD/FIN AID	Europe (Including Iceland and Greenland)	48	1,956,986				
STUDY ABROAD/FIN AID	East Asia and the Pacific	12	518,716				

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD/FIN AID	South America	7	206,361				
STUDY ABROAD/FIN AID	Sub-Saharan Africa	3	112,862				

**Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S**

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD/FIN AID	Middle East and North Africa	3	117,646				
STUDY ABROAD/FIN AID	South Asia	3	93,726				

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S							
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STUDY ABROAD/FIN AID	Central America and the Caribbean	1	45,427				

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
WESLEYAN UNIVERSITY

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.  
▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number  
06-0646959

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) CITY OF MIDDLETOWN 245 DEKOVEN DRIVE MIDDLETOWN, CT 06457	06-6001872	170(B)(1)(A)(V)	32,813				UNRESTRICTED

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . 1

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



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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) SEOG	263	739,000			
(2) CT STATE GRANTS	8	177,750			
(3) FREEMAN SCHOLARSHIP	43	71,573			
(4) TUITION REMISSION	163	4,379,000			
(5) UNIVERSITY SCHOLARSHIP	1235	47,858,953			
(5)					
(6)					
(7)					

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

Return Reference	Explanation
MONITORING THE USE OF GRANT FUNDS	PART I, LINE 2 GRANTS TO ORGANIZATIONS IN THE U S THE UNIVERSITY MAY MAKE DONATIONS TO SUPPORT ITS TOWN OR NON-PROFIT ORGANIZATIONS IN THESE INSTANCES, THE UNIVERSITY GENERALLY DOES NOT MONITOR THE ULTIMATE USE OF THE FUNDS AS THESE AMOUNTS ARE RESTRICTED GRANTS TO MUNICIPALITIES OR ORGANIZATIONS THAT ARE RECOGNIZED AS BEING DESCRIBED IN INTERNAL REVENUE CODE SECTION 501(C)
GRANTS TO INDIVIDUALS IN THE U S	FINANCIAL AID IS DETERMINED BASED ON A NEEDS ANALYSIS AND APPLIED TO STUDENT CHARGES THAT SUPPORT COST OF ATTENDANCE STUDENT CHARGES ARE USED IN SUPPORT OF THE UNIVERSITY'S MISSION

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

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

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

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization WESLEYAN UNIVERSITY	Employer identification number 06-0646959
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Part I

Questions Regarding Compensation

	Yes	No
<b>1a</b> 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. <div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
<b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	Yes	
<b>2</b> 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?	Yes	
<b>3</b> 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. <div><div><input type="checkbox"/> Compensation committee</div><div><input type="checkbox"/> Independent compensation consultant</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input type="checkbox"/> Written employment contract</div><div><input type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Approval by the board or compensation committee</div></div>		
<b>4</b> 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: <b>a</b> Receive a severance payment or change-of-control payment?		No
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?		No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.  <b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>		
<b>5</b> 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: <b>a</b> The organization?		No
<b>b</b> Any related organization? If "Yes," on line 5a or 5b, describe in Part III		No
<b>6</b> 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: <b>a</b> The organization?		No
<b>b</b> Any related organization? If "Yes," on line 6a or 6b, describe in Part III		No
<b>7</b> 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		No
<b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		No
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

**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
BENEFITS	PART I, LINE 1A THE UNIVERSITY WILL REIMBURSE THE COST OF AIRPLANE TICKETS IN COACH CLASS ONLY, UNLESS SCHEDULING OR A MEDICAL CONDITION NECESSITATES OTHER ARRANGEMENTS. THE PRESIDENT AND VICE PRESIDENT FOR STUDENT AFFAIRS MUST LIVE ON CAMPUS AS A REQUIREMENT OF THEIR EMPLOYMENT AND THE FAIR MARKET VALUE OF THE HOUSING HAS BEEN INCLUDED AS A NON-TAXABLE FRINGE BENEFIT ON SCHEDULE J.
Housing Allowances	PART II, COLUMN D THE FAIR MARKET VALUE OF HOUSING PROVIDED TO THE FOLLOWING INDIVIDUALS, AS A REQUIREMENT OF THEIR EMPLOYMENT, THAT IS REPORTED IN THEIR NONTAXABLE BENEFITS IS AS FOLLOWS: PRESIDENT \$55,046 VICE PRESIDENT FOR STUDENT AFFAIRS \$11,875. THE FAIR MARKET VALUE OF HOUSING PROVIDED TO THE FOLLOWING INDIVIDUAL THAT IS REPORTED IN HIS TAXABLE BENEFITS IS AS FOLLOWS: VP FOR FINANCE AND ADMINISTRATION \$12,096. THE CALCULATION OF THE FAIR MARKET VALUES HAVE BEEN UPDATED FOR SQUARE FOOTAGE AND OPERATING COSTS OF THE RESIDENCES.

Additional Data

Software ID:

Software Version:

EIN: 06-0646959

Name: WESLEYAN UNIVERSITY

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1MICHAEL S ROTH PRESIDENT AND TRUSTEE	(i)	554,984	100,000	8,350	341,793	111,570	1,116,697	0
	(ii)	0	0	0	0	0	0	0
1JOYCE JACOBSEN PROVOST AND VICE PRESIDENT	(i)	246,003	0	0	22,960	42,812	311,775	0
	(ii)	0	0	0	0	0	0	0
2NATHAN DAVID PETERS VP FOR FINANCE & ADMIN	(i)	246,456	25,000	12,181	23,386	50,017	357,040	0
	(ii)	0	0	0	0	0	0	0
3JEANINE D BASINGER PROFESSOR	(i)	221,989	25	50,864	24,085	38,875	335,838	0
	(ii)	0	0	0	0	0	0	0
4LAUREN CALDWELL PROFESSOR	(i)	54,386	0	190,000	4,419	31,436	280,241	0
	(ii)	0	0	0	0	0	0	0
5LISA C DIERKERPROFESSOR	(i)	162,377	0	98,806	39,554	39,793	340,530	0
	(ii)	0	0	0	0	0	0	0
6NATHANAEL GREENE PROFESSOR	(i)	221,973	0	100	19,443	27,019	268,535	0
	(ii)	0	0	0	0	0	0	0
7LAURA B GRABEL PROFESSOR	(i)	175,719	0	22,269	18,257	68,623	284,868	0
	(ii)	0	0	0	0	0	0	0
8JOHN C MEERTS FORMER VP FIN & ADMIN	(i)	144,345	141,000	34,168	29,858	18,203	367,574	0
	(ii)	0	0	0	0	0	0	0
9J DONALD MOON PROFESSOR	(i)	192,591	0	1,000	33,924	33,827	261,342	0
	(ii)	0	0	0	0	0	0	0
10ROB ROSENTHAL FORMER PROVOST & VP ACAD AFF	(i)	167,427	0	10,146	15,416	17,274	210,263	0
	(ii)	0	0	0	0	0	0	0
11ANDREW SZEGEDY-MASZAK FORMER PROF/CHAIR FACULTY	(i)	170,860	0	7,725	16,196	39,759	234,540	0
	(ii)	0	0	0	0	0	0	0
12RUTH STRIEGEL WEISSMAN FORMER PROVOST & VP ACAD AFF	(i)	184,176	0	0	33,222	32,569	249,967	0
	(ii)	0	0	0	0	0	0	0
13DAVID STUART WINAKOR GENERAL COUNSEL/SECRETARY	(i)	220,628	0	5,625	25,483	80,024	331,760	0
	(ii)	0	0	0	0	0	0	0
14DAVE BAIRD VICE PRESIDENT OF IT/CIO	(i)	191,305	0	150	33,495	24,860	249,810	0
	(ii)	0	0	0	0	0	0	0
15ANTONIO FARIAS VP FOR EQUITY AND INCLUSION	(i)	157,587	0	0	14,114	33,869	205,570	0
	(ii)	0	0	0	0	0	0	0
16ANNE MARTIN CHIEF INVESTMENT OFFICER	(i)	429,331	287,706	100	41,390	91,531	850,058	0
	(ii)	0	0	0	0	0	0	0
17NANCY HARGRAVE MEISLAHN DAED ADMISSION/FINANCIAL AID	(i)	198,586	15,000	0	34,544	30,125	278,255	0
	(ii)	0	0	0	0	0	0	0
18KEY L NUTTALL CHIEF COMMUNICATIONS OFFICER	(i)	194,148	0	15,000	17,885	57,161	284,194	0
	(ii)	0	0	0	0	0	0	0
19MICHAEL J WHALEY VP FOR STUDENT AFFAIRS	(i)	177,091	0	100	15,568	36,045	228,804	0
	(ii)	0	0	0	0	0	0	0

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
21 BARBARA-JAN WILSON VP FOR UNIVERSITY RELATIONS	(i) 279,430	25,000	75	24,273	44,437	373,215	0
	(ii) 0	0	0	0	0	0	0

Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service  
Name of the organization  
WESLEYAN UNIVERSITY

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
► Attach to Form 990.  
► Information about Schedule K (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2016

Open to Public Inspection

Employer identification number

06-0646959

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A CHEFA 2010 SERIES H	06-0806186	20774U3A1	05-18-2010	20,105,000	REFUND 2005 BOND ISSUE		X		X		X

Part II		Proceeds									
		A		B		C		D			
1	Amount of bonds retired . . . . .	0									
2	Amount of bonds legally defeased . . . . .	0									
3	Total proceeds of issue . . . . .	20,105,000									
4	Gross proceeds in reserve funds . . . . .	0									
5	Capitalized interest from proceeds . . . . .	0									
6	Proceeds in refunding escrows . . . . .	0									
7	Issuance costs from proceeds . . . . .	105,000									
8	Credit enhancement from proceeds . . . . .	0									
9	Working capital expenditures from proceeds . . . . .	0									
10	Capital expenditures from proceeds . . . . .	0									
11	Other spent proceeds . . . . .	20,000,000									
12	Other unspent proceeds . . . . .	0									
13	Year of substantial completion . . . . .	2008									
		Yes	No	Yes	No	Yes	No	Yes	No		
14	Were the bonds issued as part of a current refunding issue? . . . . .	X									
15	Were the bonds issued as part of an advance refunding issue? . . . . .		X								
16	Has the final allocation of proceeds been made? . . . . .	X									
17	Does the organization maintain adequate books and records to support the final allocation of proceeds? . . . . .	X									

Part III Private Business Use									
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds? . . . . .		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property? . . . . .		X						

**Part III Private Business Use** (Continued)

	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? . . . . .	X							
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? . . . . .		X						
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government . . . . .	0 040 %							
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government . . . . .								
<b>6</b> Total of lines 4 and 5 . . . . .	0 040 %							
<b>7</b> Does the bond issue meet the private security or payment test? . . .		X						
<b>8a</b> Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued? . . . . .		X						
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . .								
<b>c</b> If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2? . . . . .		X						
<b>9</b> Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2? . . . . .	X							

**Part IV Arbitrage**

	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>1</b> Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? . . . . .		X						
<b>2</b> If "No" to line 1, did the following apply? . . . . .								
<b>a</b> Rebate not due yet? . . . . .		X						
<b>b</b> Exception to rebate? . . . . .		X						
<b>c</b> No rebate due? . . . . .	X							
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed . . . . .								
<b>3</b> Is the bond issue a variable rate issue? . . . . .	X							
<b>4a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
<b>b</b> Name of provider . . . . .	0							
<b>c</b> Term of hedge . . . . .								
<b>d</b> Was the hedge superintegrated? . . . . .								
<b>e</b> Was the hedge terminated? . . . . .								



**Part IV Arbitrage** (Continued)

	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>5a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
<b>b</b> Name of provider . . . . .	0							
<b>c</b> Term of GIC . . . . .								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? . . . . .								
<b>6</b> Were any gross proceeds invested beyond an available temporary period?		X						
<b>7</b> Has the organization established written procedures to monitor the requirements of section 148? . . . .	X							

**Part V Procedures To Undertake Corrective Action**

	<b>A</b>		<b>B</b>		<b>C</b>		<b>D</b>	
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
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?	X							

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

Return Reference	Explanation
PART I, CHEFA 2010 SERIES G	DESFEASEMENT OF SERIES G ON MAY 31, 2016, THE UNIVERSITY ISSUED \$250 MILLION OF CENTURY BONDS AT AN INTEREST RATE OF 4.781% THE UNIVERSITY USED \$203 MILLION TO CREATE A "REFUNDING TRUST", WITH BANK OF NEW YORK MELLON AS A TRUSTEE, TO LEGALLY DEFEASE ALL OF WESLEYAN'S OUTSTANDING TAX-EXEMPT SERIES G BONDS REDEEMABLE ON JULY 1, 2020

Return Reference	Explanation
PART III, LINE 4	CERTAIN UNRELATED BUSINESS ACTIVITIES ARE CARRIED ON IN THE TAX-EXEMPT BOND-FINANCED PROPERTIES, GIVING RISE TO PRIVATE BENEFIT USE. HOWEVER, THESE UNRELATED BUSINESS ACTIVITIES HAVE CONSISTENTLY GENERATED LOSSES AND ARE NOT REPORTED ON THE UNIVERSITY'S FORM 990-T.

Return Reference	Explanation
PART IV, LINE 2A	THE LAST ARBITRAGE REBATE CALCULATION FOR THE TAX-EXEMPT BOND WAS COMPLETED IN 2008 SINCE THE REBATE CALCULATION WAS COMPLETED, THERE WERE NO ADDITIONAL TAX-EXEMPT BOND FUNDS TO BE EXPENDED

Schedule L  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered  
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,  
or Form 990-EZ, Part V, line 38a or 40b.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2016

Open to Public  
Inspection

Name of the organization  
WESLEYAN UNIVERSITY

Employer identification number  
06-0646959

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)  
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

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

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

Part II Loans to and/or From Interested Persons.  
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total							▶ \$					

Part III Grants or Assistance Benefiting Interested Persons.  
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

**Part IV Business Transactions Involving Interested Persons.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ANNE GREENE	FAMILY OF J FRANK-TRUSTEE	239,433	EMPLOYEE COMPENSATION		No
(2) KARI WEIL	SPOUSE OF M ROTH-OFFICER	157,446	EMPLOYEE COMPENSATION		No
(3) NATHANAEL GREENE	FAMILY OF J FRANK-TRUSTEE	268,535	EMPLOYEE COMPENSATION		No

**Part V Supplemental Information**

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

Return Reference	Explanation
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SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
► Attach to Form 990.  
►Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization  
WESLEYAN UNIVERSITY

Employer identification number  
06-0646959

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . .	X	5	25,001	FMV
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 .				
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests . . . . .	X	1	8,507,795	FMV
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 . . . .	X	1	4,286,698	fmv
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . .				
24 Archeological artifacts . . .				
25 Other ► ( Various )	X	16	668,304	FMV
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	9		

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

30a

No

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

No

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

**Part II****Supplemental Information.**

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

Return Reference

Explanation

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -	DLN: 93493131028258
SCHEDULE O (Form 990 or 990-EZ)	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ▶ Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .		OMB No 1545-0047
			2016 Open to Public Inspection
Department of the Treasury Internal Revenue Service Name of the organization WESLEYAN UNIVERSITY			Employer identification number 06-0646959

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART I, LINE 1 & PART III, LINE 1	ORGANIZATION'S MISSION I WESLEYAN UNIVERSITY IS DEDICATED TO PROVIDING AN EDUCATION IN TH E LIBERAL ARTS THAT IS CHARACTERIZED BY BOLDNESS, RIGOR, AND PRACTICAL IDEALISM AT WESLEY AN, DISTINGUISHED SCHOLAR-TEACHERS WORK CLOSELY WITH STUDENTS, TAKING ADVANTAGE OF FLUIDIT Y AMONG DISCIPLINES TO EXPLORE THE WORLD WITH A VARIETY OF TOOLS THE UNIVERSITY SEEKS TO BUILD A DIVERSE, ENERGETIC COMMUNITY OF STUDENTS, FACULTY, AND STAFF WHO THINK CRITICALLY AND CREATIVELY AND WHO VALUE INDEPENDENCE OF MIND AND GENEROSITY OF SPIRIT II VALUES AND CULTURE *AS A LEARNING COMMUNITY* WESLEYAN EDUCATES STUDENTS TO BECOME INDEPENDENT THINKE RS CAPABLE OF CONTINUING TO LEARN AND ABLE TO TRANSLATE INTELLECTUAL RIGOR INTO REAL-WORLD ACTION AT WESLEYAN, STUDENTS ARE DRIVEN TO MAKE KNOWLEDGE MORE AVAILABLE AND MORE MEANIN GFUL, TO PUSH INSIGHTS ACROSS BORDERS INTO NEW DOMAINS, AND TO ENGAGE WITH NEW OR NEGLECTE D AUDIENCES THEY DISCOVER WHAT THEY LOVE TO DO AND GET BETTER AT IT WHILE CONSTANTLY BEIN G CHALLENGED TO MAKE WHAT THEY LEARN RELEVANT TO OTHERS WESLEYAN CREATES AN ENVIRONMENT I N WHICH STUDENTS CAN STRIVE FOR EXCELLENCE THROUGH HARD WORK THAT IS JOYFUL AND SATISFYING ALUMNI OF THE INSTITUTION CONTINUE TO DRAW ON THEIR LEARNING EXPERIENCES FOR THE REST OF THEIR LIVES AND REMAIN DEVOTED TO THE INSTITUTION *AS A CENTER FOR CREATIVE PRACTICE* WE SLEYAN ATTRACTS FACULTY AND STUDENTS WHO FIND ENORMOUS VALUE IN INDEPENDENT RESEARCH, SCHOLARSHIP, AND CREATIVE PRACTICE PROFESSORS EMBRACE THEIR ROLE AS SCHOLARS-TEACHERS AND ARE ENERGIZED BY THEIR STUDENTS DEEP INQUISITIVENESS, UNGUARDED CURIOSITY, AND EAGERNESS TO E XPLORE BEYOND THE SYLLABUS THE UNIVERSITY'S SMALL GRADUATE PROGRAMS IN THE SCIENCES AND M USIC FACILITATE COLLABORATIVE RESEARCH UNDERGRADUATES ARE GIVEN OPPORTUNITIES FOR ADVANCE D INDEPENDENT WORK THROUGH WHICH THEY INCREASE THEIR INTELLECTUAL CAPACITIES AND DISCOVER ASPECTS OF THEMSELVES AND THE WORLD THAT WILL REMAIN MEANINGFUL TO THEM LONG AFTER GRADUAT ION MEMBERS OF THE WESLEYAN COMMUNITY ADDRESS SCHOLARLY ISSUES OF IMPORTANCE TO THEIR RES PECTIVE FIELDS AND REGULARLY PRODUCE WORK THAT GOES BEYOND ACADEMIC REALMS TO HAVE A POSIT IVE IMPACT ON PUBLIC LIFE *AS AN INSTITUTIONAL CITIZEN AND LEADER IN EDUCATION* WESLEYAN INSPIRES FACULTY, STAFF AND STUDENTS TO PLAY ACTIVE ROLES AS NEIGHBORS AND CITIZENS THE U NIVERSITY CONTRIBUTES ECONOMICALLY AND CULTURALLY TO MIDDLETOWN, AND IT INSTILLS IN ITS GR ADUATES A SENSE OF CIVIC POSSIBILITY AND PURPOSE WESLEYAN ALUMNI CREATE OPPORTUNITIES TO INTEGRATE SERVICE INTO THEIR PROFESSIONAL AND PERSONAL LIVES AND GENEROUSLY SUPPORT THE ED UCATIONAL ENTERPRISE ON CAMPUS THE UNIVERSITY SUPPORTS THE CONTINUED EVOLUTION OF A LIBER AL ARTS EDUCATION AND MAKES A CASE FOR ITS IMPORTANCE IN THE PUBLIC SPHERE MEMBERS OF THE WESLEYAN COMMUNITY REGULARLY GO ON TO DISTINGUISHED CAREERS IN PUBLIC SERVICE, AND THE UN IVERSITY PROVIDES SUPPORT FOR DISSEMINATING SCHOLARSHIP THAT CAN HAVE POSITIVE PUBLIC IMPA CT



**990 Schedule O, Supplemental Information**

<b>Return Reference</b>	<b>Explanation</b>
FORM 990, PART III, LINE 4A	INSTRUCTION AND RESEARCH INCLUDES ALL EXPENDITURES FOR COMPENSATION AND OTHER EXPENSES IN SUPPORT OF INSTRUCTIONAL ACTIVITY - 763 BACHELOR OF ARTS AND 68 GRADUATE DEGREES WERE AWARDED IN 2017 - TODAY WESLEYAN OFFERS INSTRUCTION IN 45 DEPARTMENTS, 45 MAJOR FIELDS OF STUDY, 17 MINOR FIELDS OF STUDY, AND 12 CERTIFICATES OF STUDY AND AWARDS THE BACHELOR OF ARTS AND GRADUATE DEGREES THE MASTER OF ARTS DEGREE AND THE DOCTOR OF PHILOSOPHY ARE REGULARLY AWARDED IN SIX FIELDS OF STUDY STUDENTS MAY CHOOSE FROM MORE THAN 1000 COURSES EACH YEAR AND MAY BE COUNTED UPON TO DEVISE, WITH THE FACULTY, SOME 800 INDIVIDUAL TUTORIALS AND LESSONS - THE STUDENT BODY IS MADE UP OF APPROXIMATELY 3,000 STUDENTS FULL-TIME UNDERGRADUATES AND 150 GRADUATE STUDENTS, AS WELL AS AROUND 140 PART-TIME STUDENTS PER YEAR IN THE GRADUATE LIBERAL STUDIES PROGRAM AN ONGOING FACULTY OF MORE THAN 440 IS JOINED EACH SEMESTER BY A DISTINGUISHED GROUP OF VISITING ARTISTS AND PROFESSORS TODAY'S STUDENT/INSTRUCTOR RATIO IS 8 TO 1, AND ABOUT TWO THIRDS OF ALL COURSES ENROLL FEWER THAN 20 STUDENTS

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART III, LINE 4B	<p>AUXILIARY SERVICES INCLUDE THE COSTS OF ROOM AND BOARD FOR APPROXIMATELY 3,000 STUDENTS RESIDING ON A 311 ACRE CAMPUS THERE ARE 8 RESIDENCE HALLS, 7 APARTMENT COMPLEXES AND OVER 25 PROGRAM HOUSES IN ADDITION TO OVER 140 HOUSE UNITS ON CAMPUS FOR UPPER-CLASS STUDENTS WORKING IN PARTNERSHIP WITH STUDENTS AND COLLABORATIVELY WITH OTHER MEMBERS OF THE WESLEYAN COMMUNITY, THE OFFICE OF RESIDENTIAL LIFE STRIVES TO PROVIDE A SAFE AND SUPPORTIVE RESIDENTIAL ENVIRONMENT THAT COMPLEMENTS AND EXTENDS STUDENTS EDUCATIONAL EXPERIENCE STUDENT-CENTERED PROGRAMS AND SERVICES ARE DEVELOPED AND IMPLEMENTED WITH AN EMPHASIS ON HOLISTIC INDIVIDUAL AND COMMUNITY DEVELOPMENT, STUDENT LEADERSHIP, INDIVIDUAL RESPONSIBILITY, ADVOCACY OF ACADEMIC INQUIRY, AND FREEDOM OF THOUGHT, OPINION AND EXPRESSION IN THE SPIRIT OF MUTUAL RESPECT THESE ARE THE HALLMARKS OF THE WESLEYAN RESIDENTIAL EXPERIENCE, AND THEY PROVIDE THE ESSENTIAL FOUNDATION FOR A QUALITY LIBERAL ARTS EDUCATION WITHIN A DIVERSE AND DYNAMIC COMMUNITY</p>

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART III, LINE 4C	<p>LIBRARY EXPENSES INCLUDE ACQUISITION OF BOOKS, PERIODICALS AND OTHER MATERIALS, COMPENSATION OF STAFF, AND OTHER EXPENDITURES IN SUPPORT OF THE LIBRARY. THE MISSION OF THE LIBRARY IS TO PROVIDE THE INFORMATION SERVICES AND RESOURCES REQUIRED TO SUPPORT THE LEARNING, TEACHING, AND RESEARCH OF THE WESLEYAN COMMUNITY. TO CARRY OUT THIS MISSION THE LIBRARY WILL - ORGANIZE AND PROVIDE INTELLECTUAL AND PHYSICAL ACCESS TO COLLECTIONS AND INFORMATION RESOURCES LOCALLY AND WORLD-WIDE - DEVELOP AND PRESERVE LOCAL COLLECTIONS - TEACH AND GUIDE USERS IN THE LIBRARY RESEARCH PROCESS - PROVIDE AN ATMOSPHERE CONDUCIVE TO STUDY, RESEARCH, AND LEARNING - CONTRIBUTING TO THE LARGER SCHOLARLY WORLD THE WESLEYAN LIBRARY WILL PROVIDE UNEXCELLED SERVICES. IT IS A DYNAMIC PLACE WHERE LIBRARY STAFF PROVIDE USERS WITH THE INFORMATION THEY NEED, AS WELL AS A KEEN SENSE THAT THERE ARE MANY PATHS, AND A WIDE RANGE OF SKILLS NECESSARY FOR THE EFFECTIVE USE AND EVALUATION OF INFORMATION RESOURCES.</p>

# 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4D	STUDENT SERVICES INCLUDES THE COSTS ASSOCIATED WITH ADMINISTERING THE OFFICE OF ADMISSIONS , REGISTRAR, FINANCIAL AID, CAREER PLANNING, HEALTH SERVICES, INSTITUTIONAL RESEARCH AND D EAN'S OFFICE

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
FORM 990, PART VI, SECTION B, QUESTION 11A	FORM 990 REVIEW PROCESS THE UNIVERSITY'S FISCAL YEAR END IS JUNE 30 THE AUDITED FINANCIAL STATEMENTS ARE FINALIZED IN LATE OCTOBER DUE TO THE TIME IT TAKES TO VALUE ENDOWMENT ASSETS DURING NOVEMBER AND DECEMBER, A TAX COMMITTEE CONSISTING OF UNIVERSITY GENERAL COUNSEL , VP FOR FINANCE AND ADMINISTRATION, AND DIRECTOR OF FINANCIAL SERVICES MEET TO DISCUSS ANY SIGNIFICANT CHANGES IN POLICIES, GOVERNANCE, MANAGEMENT AND OTHER ACTIVITY IN ADDITION, THE FINANCE OFFICE REACHES OUT TO OTHER DEPARTMENTS SUCH AS ACADEMIC AFFAIRS, UNIVERSITY RELATIONS, AND ADMISSIONS TO DETERMINE POTENTIAL FILING ACTIVITY DURING JANUARY AND FEBRUARY THE FINANCE OFFICE WORKS WITH THE EXTERNAL AUDITORS TO COMPLETE A DRAFT DOCUMENT FOR THE FEBRUARY AUDIT COMMITTEE MEETING THE DOCUMENT IS PROVIDED TO EACH MEMBER OF THE AUDIT COMMITTEE AND DISCUSSED DURING THE MEETING THE CHAIR OF THE AUDIT COMMITTEE WILL SUMMARIZE THE REVIEW TO THE FULL BOARD OF TRUSTEES THE FOLLOWING DAY THE FINAL RETURN IS FILED IN MAY WITH A COPY OF THE FINAL RETURN MADE AVAILABLE THROUGH THE TRUSTEE SECURE PORTAL A COUPLE OF WEEKS PRIOR TO THE FINAL FILING TO EACH VOTING MEMBER OF THE GOVERNING BOARD

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, QUESTION 12C	<p>CONFLICT OF INTEREST POLICY THE UNIVERSITY POSTS ITS CONFLICT OF INTEREST POLICY ON ITS WEBSITE AND REQUIRES QUESTIONNAIRE COMPLETION FROM UNIVERSITY FACULTY, STAFF AND TRUSTEES ON AN ANNUAL BASIS FACULTY AND STAFF ARE COLLECTED ELECTRONICALLY THROUGH NETWORK SIGN ON CONFLICT OF INTEREST QUESTIONNAIRES FROM BOARD MEMBERS ARE COLLECTED BY THE SECRETARY OF THE UNIVERSITY AND REVIEWED BY LEGAL COUNSEL RESPONSES ARE MONITORED BY THE UNIVERSITY GENERAL COUNSEL IN CONJUNCTION WITH THE PRESIDENT'S OFFICE ANY SUPERVISOR RECEIVING NOTICE OF A POTENTIAL CONFLICT OF INTEREST SHALL DETERMINE WHETHER THE SITUATION PRESENTS A POTENTIAL CONFLICT OF INTEREST UNDER THIS POLICY AND DOCUMENT THEIR DETERMINATION IN WRITING UNLESS THE SUPERVISOR IS ABLE TO CLEARLY DETERMINE THAT NO SUCH CONFLICT EXISTS OR IN THE CASE THAT THE INDIVIDUAL DISAGREES WITH THE SUPERVISOR'S DECISIONS, THE SUPERVISOR SHALL REQUIRE THE INDIVIDUAL TO DISCLOSE THE SITUATION IN WRITING AND THE SUPERVISOR AND/OR INDIVIDUAL SHALL FORWARD THAT DESCRIPTION TO AN APPROPRIATE VICE PRESIDENT OR SENIOR OFFICER OF THE UNIVERSITY THE SUPERVISOR SHALL NOT PERMIT ANY INDIVIDUAL TO PARTICIPATE IN THE QUESTIONABLE ACTIVITY UNLESS AND UNTIL A VICE PRESIDENT OR SENIOR OFFICER OF THE UNIVERSITY HAS REVIEWED THE ACTIVITY AND CONFIRMED IN WRITING THAT THE ACTIVITY MAY CONTINUE AND/OR THAT THERE ARE RELEVANT SAFEGUARDS IN PLACE TO PROTECT THE UNIVERSITY ANY INDIVIDUAL WHO DISAGREES WITH A CONFLICT-RELATED DECISION OF ANY VICE PRESIDENT OR SENIOR OFFICER MAY SEEK REVIEW BY THE PRESIDENT OF THE UNIVERSITY WHOSE DECISION SHALL BE FINAL ON AN ANNUAL BASIS THE UNIVERSITY DISTRIBUTES AND REQUIRES INDIVIDUALS TO COMPLETE A STATEMENT A) CONFIRMING THAT THEY HAVE READ AND UNDERSTOOD THE CONFLICT OF INTEREST POLICY AND B) THAT THEY HAVE NO KNOWLEDGE OF ANY CONFLICT OF INTEREST EXCEPT FOR THOSE APPROPRIATELY DISCLOSED UNDER THE POLICY</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, QUESTIONS 15A AND 15B	<p>COMPENSATION POLICY WESLEYAN UNIVERSITY'S SALARY ADMINISTRATION IS DESIGNED TO ACCOMPLISH THREE MAJOR OBJECTIVES - ATTRACT AND RETAIN HIGHLY QUALIFIED STAFF MEMBERS, - LINK COMPENSATION TO PERFORMANCE, AND - PROMOTE CONSISTENCY AND AN INTERNALLY EQUITABLE RELATIONSHIP BETWEEN SALARY AND A COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES, COMPOSED OF THREE MEMBERS AND CHAIRED BY THE CHAIR OF THE BOARD OF TRUSTEES, IS RESPONSIBLE FOR EVALUATING THE COMPENSATION REASONABLENESS FOR ALL OFFICERS AND KEY EMPLOYEES AS DETERMINED FROM TIME TO TIME THE COMMITTEE REVIEWS THE PERFORMANCE APPRAISAL OF THE PRESIDENT BY THE BOARD, DETERMINES THE COMPENSATION OF THE PRESIDENT, AND SETS GOALS AND PERFORMANCE MEASURES FOR THE FOLLOWING YEAR THE COMMITTEE BEGINS DISCUSSION IN THE SECOND HALF OF THE ACADEMIC YEAR WESLEYAN PARTICIPATES IN AN ANNUAL SURVEY OF ITS PEERS CONDUCTED BY A PRIVATE CONSULTANT THIS PROCESS ENSURES THAT THE UNIVERSITY REMAINS CONSISTENT WITH THE REGULATORY AND LEGAL REQUIREMENTS OF COMPENSATION IN A 501(C)3 NON-PROFIT ORGANIZATION THE PROCESS FOR DETERMINING THE COMPENSATION OF THE PRESIDENT MEETS THE THREE REQUIREMENTS OF THE REBUTTABLE PRESUMPTION STANDARD THE COMPENSATION ARRANGMENT IS APPROVED IN ADVANCE BY THE ORGANIZATION'S COMPENSATION COMMITTEE THE COMMITTEE IS APPOINTED BY THE BOARD OF TRUSTEES FOR THE PURPOSE OF ASSISTING THE BOARD TO FULFILL ITS RESPONSIBILITY TO THE ORGANIZATION AND THE COMMUNITY TO ENSURE THE COMPENSATION IS IN ACCORDANCE WITH THE ORGANIZATION'S POLICIES PRIOR TO MAKING ANY COMPENSATION DECISIONS, THE EXECUTIVE COMPENSATION COMMITTEE OBTAINS AND RELIES UPON APPROPRIATE DATA AS TO COMPARABILITY THE COMMITTEE UTILIZES LOCAL AND NATIONAL COMPENSATION SURVEYS TO SET COMPENSATION LEVELS FINALLY, THE EXECUTIVE COMPENSATION COMMITTEE ADEQUATELY AND TIMELY DOCUMENTS THE BASIS FOR SETTING COMPENSATION CONCURRENTLY WITH THE MAKING OF THE DETERMINATION</p>

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, QUESTION 19 - PUBLIC DISCLOSURE	THE UNIVERSITY POSTS ITS GOVERNING DOCUMENTS ON ITS WEBSITE AT WWW.WESLEYAN.EDU/GENERALCOUNSEL. IN ADDITION, THE UNIVERSITY'S AUDITED FINANCIAL STATEMENTS ARE ON ITS WEBSITE AT WWW.WESLEYAN.EDU/FINANCE. THE UNIVERSITY'S FORM 990 IS POSTED ON WWW.GUIDESTAR.ORG. THE FORM 990, AUDITED FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.



990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER REVENUE NOT INCLUDED IN AFS NOT IN FORM 990 POSTRETIREMENT BENEFIT OBLIGATIONS CHANGES 1,154,000 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS (944,000) ----- 210,000

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SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships				OMB No 1545-0047
					2016
	▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.				Open to Public Inspection
▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .					
Department of the Treasury Internal Revenue Service					
Name of the organization WESLEYAN UNIVERSITY				Employer identification number	
				06-0646959	

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

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No
<b>(1)</b> CHARITABLE REMAINDER TRUST (2) 237 HIGH STREET MIDDLETOWN, CT 06459	INVESTING	CT	NA	TRUST				Yes	
<b>(2)</b> CHARITABLE REMAINDER UNITRUST (13) 237 HIGH STREET MIDDLETOWN, CT 06459	INVESTING	CT	NA	TRUST				Yes	
<b>(3)</b> POOLED INCOME FUND (2) 237 HIGH STREET MIDDLETOWN, CT 06459	INVESTING	CT	NA	TRUST				Yes	
<b>(4)</b> LIFE INCOME AGREEMENTS (2) 237 HIGH STREET MIDDLETOWN, CT 06459	INVESTING	CT	NA	TRUST				Yes	

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity . . . . .

1a

No

b Gift, grant, or capital contribution to related organization(s) . . . . .

1b

No

c Gift, grant, or capital contribution from related organization(s) . . . . .

1c

No

d Loans or loan guarantees to or for related organization(s) . . . . .

1d

No

e Loans or loan guarantees by related organization(s) . . . . .

1e

No

f Dividends from related organization(s) . . . . .

1f

No

g Sale of assets to related organization(s) . . . . .

1g

No

h Purchase of assets from related organization(s) . . . . .

1h

No

i Exchange of assets with related organization(s) . . . . .

1i

No

j Lease of facilities, equipment, or other assets to related organization(s) . . . . .

1j

No

k Lease of facilities, equipment, or other assets from related organization(s) . . . . .

1k

No

l Performance of services or membership or fundraising solicitations for related organization(s) . . . . .

1l

No

m Performance of services or membership or fundraising solicitations by related organization(s) . . . . .

1m

No

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .

1n

No

o Sharing of paid employees with related organization(s) . . . . .

1o

No

p Reimbursement paid to related organization(s) for expenses . . . . .

1p

No

q Reimbursement paid by related organization(s) for expenses . . . . .

1q

No

r Other transfer of cash or property to related organization(s) . . . . .

1r

No

s Other transfer of cash or property from related organization(s) . . . . .

1s

Yes

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CHARITABLE REMAINDER TRUST	S	1,328,873	FMV

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

[illegible]

**Part VII**      **Supplemental Information**

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