Form **990**

Return of Organization Exempt From Income Tax

DLN: 93493112008299 OMB No 1545-0047

Open to Public

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

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

▶ Information about Form 990 and its instructions is at www. IRS gov/form990

•		of the Treasu enue Service	Information abou	ut Form 990 and its instructions is					open to Public Inspection
A F	or th	e 2017 c	alendar year, or tax year begir	nning 07-01-2017 , and endin	g 06-30	-2018			
☐ Ad		ipplicable change	C Name of organization WESTMINSTER COLLEGE				D Employ 25-098		ication number
☐ Ini	itial re	-	Doing business as				•		
☐ An	nende	d return on pending	Number and street (or P O box if m 319 S MARKET STREET	nail is not delivered to street address)	Room/suit	ce	E Telephor (724) 9	ne number 46-7141	
			City or town, state or province, cou NEW WILMINGTON, PA 16172	ntry, and ZIP or foreign postal code			G Gross re	ceipts \$ 10	04,552,812
			F Name and address of principa	al officer		H(a) Is this		•	
			DR KATHY B RICHARDSON 319 S MARKET STREET NEW WILMINGTON, PA 16172			subor	dinates? Il subordinat		□Yes ☑No □Yes □No
I Ta	x-exer	mpt status	✓ 501(c)(3)	(insert no) 4947(a)(1) or	527	includ If "No		list (see	instructions)
J W	ebsit	te:▶ WW	/W WESTMINSTER EDU			H(c) Group	exemption	number	>
K Form	n of o	rganızatıon	☑ Corporation ☐ Trust ☐ Asso	ociation Other		L Year of form	ation 1852	M State	of legal domicile PA
Pa	rt I	Sum	mary						
			scribe the organization's mission o						
e C	!	PROMOTE	EDUCATION, THE DEVELOPMENT	OF SKILLS, KNOWLEDGE, AND PE	ERSONAL	L QUALITIES			
Ě	:								
E	-								
Activities & Governance				scontinued its operations or dispos					l
હ	1		-	ng body (Part VI, line 1a)				3	30
₹	4	Number o	of independent voting members o	f the governing body (Part VI, line	1b) .		•	4	29
¥€	5	Total nun	nber of individuals employed in ca	ilendar year 2017 (Part V, line 2a))		•	5	1,083
⋛	6	Total nun	nber of volunteers (estimate if ne	cessary)				6	589
ĕ	7a	Total unr	elated business revenue from Par	t VIII, column (C), line 12				7a	3,446
	Ь	Net unrel	ated business taxable income froi	m Form 990-T, line 34				7b	-36,474
						Pri	or Year	ĺ	Current Year
_	8	Contribut	ions and grants (Part VIII, line 1h	n)			4,479,	500	7,037,860
Rəvenue	1		- '	3)			51,141,		52,616,865
ēλ	1	_		lines 3, 4, and 7d)			13,410,9	_	5,662,579
œ	1		venue (Part VIII, column (A), lines	·	•		176,		232,386
	1			ıst equal Part VIII, column (A), lın	no 12\		69,207,		65,549,690
	+		nd similar amounts paid (Part IX,		16 12)		24,220,0		
	1		, , ,	, ,,			24,220,0	009	25,950,814 0
	1	•		column (A), line 4)			24 454	210	
Expenses	1			enefits (Part IX, column (A), lines	5-10)		21,151,		22,059,869
£	Ι.		onal fundraising fees (Part IX, colu		•			0	0
ŝ	1		raising expenses (Part IX, column (D), l	·					
ш	17	Other exp	penses (Part IX, column (A), lines	11a-11d, 11f-24e)	•		17,922,0		18,525,623
	18	Total exp	enses Add lines 13–17 (must equ	ual Part IX, column (A), line 25)			63,294,	636	66,536,306
	19	Revenue	less expenses Subtract line 18 fr	om line 12			5,913,	258	-986,616
Net Assets or Fund Balances						Beginning	of Current Y	'ear	End of Year
SS 9	20	Total ass	ets (Part X, line 16)				214,828,	885	217,760,249
₹2	21	Total liab	ilities (Part X, line 26)				45,479,	307	43,943,385
žζ	22	Net asset	s or fund balances Subtract line	21 from line 20			169,349,	578	173,816,864
	rt III		ature Block	nned this return, including accomp	nanving	schedules and	d statement	s and to	the best of my
know	ledge	and belie		Declaration of preparer (other th					
any k	nowle	edge							
		*****	*			201	.9-04-19		
Sign	ı	Signati	ure of officer			Dat			
Here		KENNE	TH J ROMIG VP OF FINANCE/TREASUR	ER					
			r print name and title						
			rınt/Type preparer's name	Preparer's signature	Da	ate		PTIN	-
Paid	d		UGÉNÉ J LOGAN	EUGENE J LOGAN			eck LJ If II -employed	P0022723:	L
	u pare	ar	irm's name SCHNEIDER DOWNS 8	CO INC			n's EIN ► 25-	-1408703	
	-	1 -	irm's address ▶ ONE PPG PLACE SUITE	1700		Pho	one no (412)	261-3644	
Use	· UII	''y	PITTSBURGH, PA 152	22			·		
M	he IP	C diagnet				I		[J] v	es □ No
			this return with the preparer snot	wn above? (see instructions) .	• •		112027	<u> </u>	
i Oli P	aper	MOIK KG	auction Act Notice, see the sep	arate monucuons.		Cat No 1	LIZØZY		Form 990 (2017)

Form	990 (2	017)					Page 2
Par	t III	Statement of	of Program Se	rvice Accomplis	hments		
		Check If Sched	lule O contains a	response or note to a	any line in this Part III		🗸
1	Briefly	describe the or	ganızatıon's mıss	ion			
WHIC CON WHO WES	CH HAVE FINUALL SE SKIL FMINST	E DISTINGUISHI LY DESIGNED TO LLS ARE COMPLE	ED HUMAN BEING O SERVE THIS MI EMENTED BY EVE R EXCELLENCE IS	SS AT THEIR BEST T SSION IN A RAPIDLY R DEVELOPING VALL	HE LIBERAL ARTS TRA CHANGING WORLD JES AND IDEALS IDEN	MPETENCIES, COMMITMENTS, A ADITION IS THE FOUNDATION (THE COLLEGE SEES THE WELL- TIFIED IN THE JUDEO-CHRISTI LIFE MANDATES THE MAXIMUN	OF THE CURRICULUM EDUCATED PERSON AS ONE AN TRADITION
2	Dıd th	e organization u	ındertake any sıg	nıfıcant program serv	vices during the year v	which were not listed on	
	•	ior Form 990 or					☑ Yes ☐ No
		•	se new services o				
3	Did th	e organization c	ease conducting,	or make significant of	changes in how it cond	ducts, any program	
		es?					. 🗌 Yes 🗹 No
	If "Yes	s," describe thes	se changes on Scl	nedule O			
4	Sectio	n 501(c)(3) and	l 501(c)(4) organ		to report the amount	e largest program services, as r of grants and allocations to oth	
4a	(Code See Ad	ditional Data) (Expenses \$	40,308,074	including grants of \$	25,950,814) (Revenue \$	31,544,624)
4b	(Code) (Expenses \$	9,232,771	including grants of \$) (Revenue \$	7,225,457)
70		ditional Data) (Expenses #	3,232,771	merading grants or \$) (Nevenue \$	7,223,437)
4c	(Code) (Expenses \$	7,627,874	ıncludıng grants of \$) (Revenue \$	10,299,827)
	See Ad	ditional Data					
	(Code) (Expenses \$	4,532,342	including grants of \$) (Revenue \$	3,546,957)
						ARTMENTS DEAN OF THE COLLEGE, CULTURAL ARTIFACTS AND THE AC	
4d	Other	program service	es (Describe in Sc	chedule O)			
	(Expe	nses \$	4,532,342	including grants of	\$) (Revenue \$	3,546,957)

or X as applicable

Checklist of Required Schedules

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

Page 3

No

Nο

Nο

Nο

No

No

No

Nο

Νo

Nο

Nο

Nο

No

Nο

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Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII.

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

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

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Yes

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10

11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14h

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19

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 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? Did the organization receive or hold a conservation easement, including easements to preserve open space,

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6 7 Yes R 9

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		No

Page 4

Nο

No

Nο

Νo

Nο

Nο

Nο

Nο

Nο

Nο

Nο

No

Νo

24d

25a

25b

26

27

28a

28b

28c

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35a

35b

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Yes

Yes

Yes

Yes

Yes

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23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No

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

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?

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

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

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

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

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

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

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

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

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

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

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

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

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

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

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

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

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

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

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

complete Schedule L, Part I 🥞

instructions for applicable filing thresholds, conditions, and exceptions)

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Par				
	Check if Schedule O contains a response or note to any line in this Part V	•		Ш
	Enterthe growth and are Barrier 1996 Fator Out and are being 1997		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 1,723 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	_54		
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
4a	bla the organization receive any payments for masor tanning services during the tax year.	170 j		

orm	990 (2017)			Page 6
Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions		nse to lı	nes 🗸
Se	Check if Schedule O contains a response or note to any line in this Part VI			
_			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 30			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 29			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? •	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	⊋.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	461		
Ç.	ction C. Disclosure	16b		
<u> </u>	List the States with which a copy of this Form 990 is required to be filed▶			
18	OH , PA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records KENNETH J ROMIG 319 S MARKET STREET NEW WILMINGTON, PA 16172 (724) 946-7141			

compensated employees, and former such persons

Part VII

 $\overline{\mathbf{V}}$

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax

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

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

organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest

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

(A) (C) (F) (B) (D) (E) Name and Title Position (do not check more Reportable Reportable Estimated Average than one how unless nerson amount of other

	hours per week (list any hours for related	ıs b	oth a	ne box, unless person oth an officer and a lirector/trustee)				compensation from the organization (W- 2/1099-MISC)	compensation from related organizations (W- 2/1099-	amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1033-MI3C)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										
										Form 990 (2017)

PO BOX 147 ELDRED, PA 16731

compensation from the organization ▶ 20

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Page 8

	(A) Name and Title	(B) Average hours per week (list any hours	than c	ne b	ox, u n off	t cha Inle: ficer	eck moss pers r and a	son	Reporta compens from t organizati	(D) (E) ortable ensation m the cation (W- 9-MISC) (E) Reportable compensation from related organizations (V- 2/1099-MISC)					
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-1	MISC)	2/1099-MISC)	organizat relat organiza	ed	
See	Additional Data Table						۵								
	Table 140 140 140 140 140 140 140 140 140 140														
	Sub-Total			٠.	•		•		l		1	ľ			
	otal from continuation sheets to P otal (add lines 1b and 1c) . .			•	•		>		985	5,769		0		203,742	
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos			bove	e) who	rece		<u> </u>					
													Yes	No	
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i>			ee, k	ey er •	mple •	oyee,	or hi	ghest comp	ensated	d employee on	3		No	
4	For any individual listed on line 1a, is organization and related organization individual										m the				
5	Did any person listed on line 1a recei									n or inc	lividual for	4			
	services rendered to the organization		ete Stri	eauie	9 7 70	17 54	ich pei	SON		• •		5		No	
1	ction B. Independent Contract Complete this table for your five high from the organization Report compe	est compensate										mper	nsation		
	Name	(A) and business addre	255							Des	(B) cription of services		(C Comper		
BRIDG	RIDGES & COMPANY INC CONSTRUCTION										,404,741				
209 PINE CREEK ROAD WEXFORD, PA 15090															
	SODEXO INC & AFFILIATES FOOD SERVICES									3	,388,078				
1473 CAVITT ROAD MONROEVILLE, PA 15146															
	THOMAS CONSTRUCTION INC CONSTRUCTION 1,180,698									,180,698					
	IAMOND RD E CITY, PA 16127														
	DIO NETWORKED SOLUTIONS								INF	FORMAT	ION TECHNOLOGY			818,355	
	X 822169 DELPHIA, PA 19182														
	HEASTERN ENVIRONMENTAL LLC								AS	BESTOS	REMOVAL			729,427	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Part '	VII											
		Check if Schedul	e O contains	a respo	onse or note to any	(his Part VII (A) revenue	Re e fu	(B) lated or xempt inction	(C) Unrelated business revenue		(D) Revenue excluded from tax under sections
	1a	Federated campaign	ns	1a				re	evenue			512-514
Contributions, Gifts, Grants and Other Similar Amounts		• Membership dues		1b								
Gra not		: Fundraising events		1c								
ts.		d Related organizatio	ns	1d								
	6	Government grants (co	ontributions)	1e	828,364							
ns, Sim	f	All other contributions,	, gıfts, grants,		_							
utio er (and similar amounts no above	ot included	1f	6,209,496							
년 된 동	ç	Noncash contribution	ons included									
Contributions, Gifts, Grants and Other Similar Amounts		in lines 1a-1f \$ T otal. Add lines 1a-1	<u> </u>	214,								
	<u>,,"</u>	Total.Add lines 1a-1		• •	Business		7,037,860	<u> </u>				
Service Revenue	22	INSTRUCTIONAL			Dusilless	611710	31 '	544,624	31,54	1 624		
4.4	_	AUXILLIARY SERVICES				611710		299,827	10,299			
Ce F	С	STUDENT SERVICES				900099	7,2	225,457	7,225	5,457		
er vi	d	ACADEMIC SUPPORT				900099	3,5	546,957	3,546	5,957		
E S	e											
Program	f	All other program se	rvice revenue	<u>.</u>								
Ĕ	g.	Total.Add lines 2a-2f			▶ 52,6	16,865						
		Investment income (ii			nterest, and other		6,116,95	4			3,446	6,113,508
		imilar amounts) . Income from investme			ond proceeds ►		0,110,20				5,	
						<u> </u>						
			(ı) Rea	I	(II) Personal							
	6a	Gross rents		183,378								
	b	Less rental expenses		106,930		-						
				75.440								
	С	Rental income or (loss)		76,448								
	d	Net rental income o	r (loss)			1	76,44	8				76,448
			(ı) Securit	ties	(II) Other							
	7a	Gross amount from sales of	38,0	88,223								
		assets other than inventory										
	b	Less cost or				1						
		other basis and sales expenses	·	303,016	739,582]						
		Gain or (loss)		285,207	-739,582	1	-454,37	_				-454,375
		Net gain or (loss) . Gross income from for			<u> </u>		-434,37	1				-434,373
e Te		(not including \$		of								
Other Revenue		contributions reporte See Part IV, line 18	d on line 1c)	. a								
Rev		Less direct expense		b		1						
ē	С	Net income or (loss)	from fundrais	sing ev	ents							
Oth	9a	Gross income from g See Part IV, line 19	amıng actıvıt	ies								
		,		а								
		Less direct expense		b								
		Net income or (loss)		activit	les >	1						
	TUa	Gross sales of invent returns and allowand	es									
				а	509,532							
		Less cost of goods s		b	353,594]	155,93	g				155,938
	С	Net income or (loss) Miscellaneous		invent	ory ► Business Code		133,33					
	11					-						
	b	1										
	c											
		All other revenue .										
	е	Total. Add lines 11a	-11d		•]	
	12	Total revenue. See	Instructions				65,549,69	0	52,616,865		3,446	5,891,519
							1- 1-155	-	-,, - 30		,	Form 990 (2017)

columns All other orga	nizations must comp	lete column (A)	
y line in this Part IX			🗆
(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
10,000	10,000		
25,914,136	25,914,136		
26,678	26,678		
543,076	297,359	83,626	162,091
16,144,980	14,524,430	806,967	813,583
798,157	676,595	64,108	57,454
3,339,930	2,847,266	259,816	232,848
1,233,726	1,053,552	95,018	85,156
16,670		16,670	
89,556		89,556	
135,377		135,377	
1,056,017	886,636	35,638	133,743
182,558	40,732	135,764	6,062
3,695,029	3,103,432	417,721	173,876
788,540	725,130	25,766	37,644
2,283,418	2,029,637	196,117	57,664
1,771,274	1,558,758	116,423	96,093
82,348	72,468	5,413	4,467
1,355,740	1,355,740		
3,140,102	3,016,996	94,678	28,428
304,729	137,168	167,162	399
3,421,862	3,362,651	24,497	34,714
202,403	61,697	138,856	1,850
66 526 206	61 701 061	2 000 172	1,926,072
00,330,306	61,701,061	2,303,173	1,920,072
	y line in this Part IX (A) Total expenses 10,000 25,914,136 26,678 543,076 543,076 16,144,980 798,157 3,339,930 1,233,726 16,670 89,556 135,377 1,056,017 182,558 3,695,029 788,540 2,283,418 1,771,274 82,348 1,355,740 3,140,102 304,729	y line in this Part IX	(A) Total expenses Program service expenses (B) Management and general expenses 10,000 10,000 10,000 25,914,136 25,914,136 25,914,136 26,678 26,678 8 543,076 297,359 83,626 798,157 676,595 64,108 3,339,930 2,847,266 259,816 1,233,726 1,053,552 95,018 16,670 16,670 89,556 89,556 89,556 89,556 135,377 1,056,017 886,636 35,638 182,558 40,732 135,764 3,695,029 3,103,432 417,721 788,540 725,130 25,766 2,283,418 2,029,637 196,117 1,771,274 1,558,758 116,423 82,348 72,468 5,413 1,355,740 1,355,740 3,140,102 3,016,996 94,678 3,421,862 3,362,651 24,497 202,403 61,697 138,856

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34

Liabilities 22

Fund Balances

Assets or

Net

2,111,507

31,116,626

8.604.664

43,943,385

62.011.319

45,269,263

66.536.282

173,816,864

217.760.249

Form **990** (2017)

(B) End of year

Page **11**

Inventories for sale or use .

Deferred revenue . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

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

check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds

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

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

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

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

1	Cash-non-interest-bearing	3,189,377	1	4,294,874
2	Savings and temporary cash investments	15,382,707	2	5,656,846
3	Pledges and grants receivable, net	172,197	3	1,398,821
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			

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

trustees, key employees, and highest compensated employees. Complete Part 5 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) 6 voluntary employees' beneficiary organizations (see instructions) Complete ssets Notes and loans receivable, net .

2.429.512 2.366.415 506,385 8 563,078

1,922,528

31,125,044

9.696.239

45,479,307

64.329.528

39.679.479

65.340.571

169,349,578

214.828.885

19

20

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22 23

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(A)

Beginning of year

921	-			•	,	_	
4	9	Prepaid expenses and deferred charges			1,655,819	9	767,366
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D					
	ь	Less accumulated depreciation	10b	36,755,330	73,454,192	10 c	79,911,707
	11	Investments—publicly traded securities .	72,244,922	11	77,714,332		
	12	Investments—other securities See Part IV, line	11 .		45,594,791	12	44,951,330
	13	Investments—program-related See Part IV, line	e 11 .			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			198,983	15	135,480
	16	Total assets.Add lines 1 through 15 (must equ	ial line :	34)	214,828,885	16	217,760,249

t	Less accumulated depreciation	10b	36,755,330	73,454,192	10 c	79,911,707
11	Investments—publicly traded securities .			72,244,922	11	77,714,332
12	Investments—other securities See Part IV, line	11 .		45,594,791	12	44,951,330
13	Investments—program-related See Part IV, line	11 .			13	
14	Intangible assets				14	
15	Other assets See Part IV, line 11			198,983	15	135,480
16	Total assets.Add lines 1 through 15 (must equ	al line	34)	214,828,885	16	217,760,249
17	Accounts payable and accrued expenses	•		2,735,496	17	2,110,588
18	Grants payable				18	

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

Page **12**

4.735.682

718,220

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No

Νo

173,816,864

Yes

Yes

Yes

Yes

Yes Form 990 (2017)

2a

2b

2c

3a

3b

7 8

9

10

Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 5 5 6

Other changes in net assets or fund balances (explain in Schedule O)

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

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

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

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

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

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

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

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

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

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

Consolidated basis

Consolidated basis

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

Form 990 (2017)

Part XII

Schedule O

☐ Separate basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Financial Statements and Reporting

Additional Data

Software ID:

MAJOR IN MARKETING) MAJOR IN MUSIC WITH A TRACK IN BUSINESSMINOR IN DATA SCIENCEMINOR IN LITERARY STUDIES (FORMERLY THE ENGLISH MINOR)

Software Version: **EIN:** 25-0981156

Name: WESTMINSTER COLLEGE

Form 990 (2017)

Form 990, Part III, Line 4a: INSTRUCTIONAL EXPENDITURES - FACULTY AND RELATED EXPENDITURES FOR COURSES OF STUDY. WESTMINSTER COLLEGE OFFERS APPROXIMATELY 40 MAIORS AND SERVES 1349 UNDERGRADUATE, GRADUATE AND ADULT STUDENTS ANNUALLY, LEADING TO BACHELOR OF ARTS, BACHELOR OF SCIENCE, BACHELOR OF MUSIC AND MASTERS OF EDUCATION DEGREES THE FOLLOWING MAJORS/MINORS WERE ADDED IN FISCAL YEAR 2018 MAJOR IN MARKETING & PROFESSIONAL SALES (FORMERLY

Form 990, Part III, Line 4b: STUDENT SERVICES EXPENDITURES - NON-ACADEMIC SUPPORT SERVICES PROVIDED TO THE STUDENT BODY BY THE FOLLOWING DEPARTMENTS STUDENT AFFAIRS

OFFICE OFFICE OF FAITH AND SPIRITUALITY, REGISTRAN AMISSIONS, AND FINANCIAL AID, THE PROFESSIONAL DEVELOPMENT CHART. SIGNAL THE PROFESSIONAL DEVELOPMENT CHART.

CENTER, MULTI-CULTURAL AFFAIRS, THEATRE PRODUCTIONS AND RADIO AND TV PRODUCTION

Form 990, Part III, Line 4c: EDUCATIONAL AND AUXILIARY ENTERPRISE EXPENDITURES - PROVIDE ROOM AND BOARD FOR RESIDENT STUDENTS, TELEPHONE SYSTEM, BOOKSTORE, SUMMER CAMPS AND ACTIVITIES AND TEMPORARY FACULTY HOUSING

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation from the

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

	any hours	and a director/trustee)						organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations	
PETER M ANDINO TRUSTEE	1 50	x						0	0	0	
WHITNEY F BOHAN TRUSTEE	1 50	x						0	0	0	
GARY D BROWN TRUSTEE	1 50	x						0	0	0	
ASHLEY E DAVIS	1 50	х						0	0	0	

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TRUSTEE RALPH A DISE JR

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TRUSTEE

TRUSTEE

BETH A ECK

DAVID M FARNER

BARBARA B GUFFEY

ROBERT C JACKSON

PETER Y HERCHENROETHER

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

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

	any hours	and a director/trustee))	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
ROBERT C JAZWINSKI TRUSTEE	1 50	х						0	0	0	
LINDA C JENKINS TRUSTEE	1 50	×						0	0	0	
DOREEN A MCCALL TRUSTEE	1 50	х						0	0	0	
JEFFREY A MCCANDLESS TRUSTEE	1 50	х						0	0	0	
W KEITH MCCAULEY	1 50										

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IRUSTEE
JEFFREY A MCCANDLESS
TRUSTEE
W KEITH MCCAULEY
TRUSTEE

STEPHEN D MCCONNELL

.........

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

TRUSTEE

LISA B PETERS

THOMAS K RITTER

WAYNE A MILLER

BENJAMIN T NELSON

and Independent Contractors

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours from the

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organization

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0

0

0

95,906

organizations

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

and Independent Contractors

TRUSTEE

TRUSTEE

CHAIR

JOSEPH F ZUNIC

ROBIN W GOOCH

VICE CHAIR

PRESIDENT

DEBORAH P MAJORAS

......

KATHY BRITTAIN RICHARDSON

	l dilly libura	""	u un			usice,	′	Organization	monn the		
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
LINDA WRIGHT SIMPSON TRUSTEE	1 50	×						0	0	0	
GLENN H THOMPSON TRUSTEE	1 50	x						0	0	0	
THOMAS A TUPITZA TRUSTEE	1 50	x						0	0	0	
JOHN T WEISEL TRUSTEE	1 50	×						0	0	0	
VALERIE DAY WILDEN TRUSTEE	1 50	×						0	0	0	
JEFFREY T WILEY	1 50										

(C) (A) (B) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation ation

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

and Independent Contractors

VP FOR INSTITUTIONAL ADVANCEMENT

VP FOR ENROLLMENT IN ADMISSIONS

ASSOC DEAN OF THE COLLEGE/ASST TO THE

THOMAS H STEIN

JESSE T MANN

PROFESSOR

JAMIE G MCMINN

PRESIDENT

	week (list any hours	person is both an officer and a director/trustee)						from the organization	from related organizations	compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
KENNETH J ROMIG TREASURER/VP FOR FINANCE	40 00			×				177,616	0	30,486
JOEANN MILLER SECRETARY	40 00			х				19,875	0	0
MATTHEW P STINSON	40 00					х		151,772	0	23,710

159,189

110,606

100,360

Х

Х

22,710

23,284

7,646

40 00

40.00

40 00

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efil	e GR/	APHIC pri	nt - <u>DO N</u> O	T PROCESS	As Filed Data -			DLN: 9:	3493112008299
SCI	HED m 990	ULE A		Public (Charity Staturganization is a sect	ion 501(c)(3) d	organization o	ort	2017
<i>77</i> 01	5 2 .)		► 7¢	-	► Attach to Form	990 or Form 99	0-EZ.		Open to Public
		the Treasury	► Inte	ormation abou	ıt Schedule A (Form <u>www.irs.g</u>	990 or 990-E2 <u>ov/form990</u> .) and its instru	ictions is at	Inspection
Nam	e of th	ne organiza R COLLEGE	tion					Employer identific	ation number
								25-0981156	
	rt I				us (All organization : it is (For lines 1 thro			See instructions.	
1	ga2		•		sociation of churches	5 ,	,	(A)(i)	
2		•		•	1)(A)(ii). (Attach Sch				
3	$\overline{\mathbf{V}}$					•	• •		
_		·	•	·	vice organization desc			•	
4	Ш		esearch orga and state _	nization operati	ed in conjunction with	a hospital descri	bed in section :	1/U(b)(1)(A)(III). E	nter the hospital's
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170
6		A federal, s	tate, or local	government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).	
7				mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust desc	ribed in section	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10		from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (le implete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ation organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se d	ction 509(a)(2). See section 509(a	e purposes of one or)(3). Check the box
а		Type I. A sorganization	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organi	zation(s), typically by	
Ь		Type II. A manageme	supporting on t of the sup	rganızatıon sup portıng organıza	ervised or controlled i				
С		Type III f	unctionally i		and c. supporting organizatio ons) You must com				ted with, its
d		Type III n functionally	on-function integrated	ally integrated The organization	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	ın connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon receiv	ved a written determir	nation from the II		pe I, Type II, Type II	functionally
f	Enter			ion-functionally I organizations	integrated supporting	organization			
g				_	ipported organization(s)		_	_
		lame of supp organization	orted	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern	(vi) Amount of other support (see instructions)		
						Yes	No		
Tota	l	work Reduc						 Schedule A (Form 9	

14

organization

instructions

supported organization

Page 2

48 090 %

44 190 %

▶ ☑

III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Calendar year (or fiscal year beginning in) Calendar year (or f	S	ection A. Public Support						
Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant") S,821,933 6,324,104 5,796,171 4,479,500 7,037,860 29,459,568			(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
membership fees received (10 not include any "unusual grant") 2	_		(,	(-,	(-,	(,	(-,	
Include any "unusual grant" 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5,821,933 6,324,104 5,796,171 4,479,500 7,037,860 29,459,568 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)	1		5 821 933	6 324 104	5 796 171	4 479 500	7 037 860	20 450 568
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf and either paid to or expended on its behalf are paid to or expended on its or paid to or expended on its or expended on its or paid to or pai			3,021,333	0,324,104	3,730,171	4,475,500	7,037,000	25,455,500
organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► 7 Amounts from line 4 S (a)2013 (b)2014 (c)2015 (d)2016 (e)2017 (f)Total (d)4004 (b)4004 (c)4004 (c)4	2							
3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines 1 through 3 5,821,933 6,324,104 5,796,171 4,479,500 7,037,860 29,459,568 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► 5,821,933 6,324,104 7 Amounts from line 4 5,821,933 6,324,104 5,796,171 4,479,500 7,037,860 29,459,568 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 1 Total support. Add lines 7 through 10 2 Gross receipts from related activities, etc (see instructions) 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	_							
furnished by a governmental unit to the organization without charge 7 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 26 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 1 Section B. Total Support (a)2013 (b)2014 (c)2015 (d)2016 (e)2017 (f)Total (c)2015 (d)2016 (e)2017 (f)Total (d)2016 (e)2017 (f)Total (e)2017 (f)Total 5,821,933 6,324,104 5,796,171 4,479,500 7,037,860 29,459,568 (d)2016 (e)2017 (f)Total (e)2017 (f)Total (
the organization without charge 4 Total. Add lines 1 through 3 5,821,933 6,324,104 5,796,171 4,479,500 7,037,860 29,459,568 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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	3	The value of services or facilities						
4 Total. Add lines 1 through 3		furnished by a governmental unit to						
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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) > 7 Amounts from line 4 B Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 S8,440,464 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.								
each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) > 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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			5,821,933	6,324,104	5,796,171	4,479,500	7,037,860	29,459,568
Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from smillar sources 9 Net income from smillar sources 9 Net income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 1 Total support. Add lines 7 through 10 Gross receipts from related activities, etc (see instructions) 1,357,787	5							
supported organization): included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5								
Inia 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract line 5								4 257 707
amount shown on line 11, column (f) 6 Public support. Subtract line 5								1,357,767
Public support. Subtract line 5		=						
Section B. Total Support Calendar year (or fiscal year beginning in) ▶ 7 Amounts from line 4 Social year beginning in) ▶ 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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		amount shown on line 11, column (1)						
Section B. Total Support Calendar year (or fiscal year beginning in) ▶ 7 Amounts from line 4 Social year beginning in) ▶ 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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	6	Public support. Subtract line 5						
Calendar year (or fiscal year beginning in) ► Amounts from line 4 S,821,933 G,324,104 S,796,171 A,479,500 T,037,860 T,037,86								28,101,781
(or fiscal year beginning in) Amounts from line 4 5,821,933 6,324,104 5,796,171 4,479,500 7,037,860 29,459,568 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 Gross receipts from related activities, etc (see instructions) 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 (b) 2017 (r) 10cal (e) 2017 (r) 10cal (e) 2017 (f) 10cal (f) 2018 (e) 2017 (f) 10cal (f) 2018 (e) 2017 (f) 10cal (f) 2018 (g) 495,568 (e) 2017 (f) 10cal (g) 495,568 (e) 2017 (f) 10cal (g) 2018 (g) 495,568 (e) 2017 (f) 10cal (g) 495,568 (e) 2017 (g) 495,568 (e) 2017 (e) 2017 (f) 2018 (e) 2017 (e) 2018 (e) 2017 (f) 2018 (e) 2017 (f) 2018 (e) 2017 (e) 2018 (e) 2017 (e) 2018 (e) 2	S	ection B. Total Support						
7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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			(a)2013	(b) 2014	(c)2015	(d)2016	(a)2017	(f)Total
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 Gross receipts from related activities, etc (see instructions) 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			` '	` '	(6)2013			
dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 Gross receipts from related activities, etc (see instructions) Tirst 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	7	Amounts from line 4	5,821,933	6,324,104	5,796,171	4,479,500	7,037,860	29,459,568
securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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	8							
securities loans, rents, royalities and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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			4.933.944	5.476.246	5.921.442	6.348.932	6.300.332	28.980.896
9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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			.,,,,,,,,	0, 0, = . 0	5,522,	5,5 13,555	2,222,222	
activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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	_							
business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 1 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc (see instructions) 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	9							
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 58,440,464 12 Gross receipts from related activities, etc (see instructions) 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								
or loss from the sale of capital assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 58,440,464 12 Gross receipts from related activities, etc (see instructions) 12 251,459,665 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	10							
assets (Explain in Part VI) 11 Total support. Add lines 7 through 10 58,440,464 12 Gross receipts from related activities, etc (see instructions) 12 251,459,665 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	10							
11 Total support. Add lines 7 through 10 58,440,464 12 Gross receipts from related activities, etc (see instructions) 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								
10 12 Gross receipts from related activities, etc (see instructions) 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	11							FO 440 464
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								58,440,464
check this box and stop here	12	Gross receipts from related activities,	etc (see instruction	ns)			12	251,459,665
check this box and stop here	13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth	tax year as a secti	on 501(c)(3) orga	nızatıon,
		check this box and stop here					▶ □	•
	_							_

Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))

14

Schedule A (Form 990 or 990-EZ) 2017

Public support percentage for 2016 Schedule A, Part II, line 14 16a 33 1/3% support test-2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

17a 10%-facts-and-circumstances test-2017. 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

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

h 10%-facts-and-circumstances test—2016. 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 gualifies as a publicly

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support test-2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
1	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513 Tax revenues levied for the						
-	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
Ь	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

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

5b

5c

7

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	in section 309(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	·					
	determination						
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?						
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use						
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported						

c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use					
		3с				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked 12a or 12b ın Part I, answer (b) and (c) below	4a				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations					
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and					

			, ,	
	as any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c Did the organization support any foreign 501(c)(3) and 509(a)(1) or (2)? If "Yes,"	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the			
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone othe 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? If "Yes," provide detail in Part VI.	6	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a		
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)		

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

10a

answer line 10b below

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"			
	complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as			i

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defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"
provide detail in Part VI.
```

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

```
9a
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

Pa	rt IV Supporting Organizations (continued)			-9
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
5	ection C. Type II Supporting Organizations			
	cetion c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the			
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	ection D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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?		Yes	No
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
s	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	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.</i> the role played by the organization in this regard	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5

Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year Section B - Minimum Asset Amount 1 1a

Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) a Average monthly value of securities **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors 2

(explain in detail in Part VI) 2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6

6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 8

3

7

Schedule A (Form 990 or 990-EZ) 2017

Section C - Distributable Amount

Minimum Asset Amount (add line 7 to line 6) Adjusted net income for prior year (from Section A, line 8, Column A)

Enter 85% of line 1

2

Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3

temporary reduction (see instructions)

instructions)

4 5 Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

7

8

1 2

3

4 5

6

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

Page 6

(B) Current Year

(optional)

Current Year

3	Administrative expenses paid to accomplish exempt purposes of supported organizations	<u> </u>
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI) See instructions	
7	Total annual distributions. Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

8	Distributions to attentive supported organizations to wh details in Part VI) See instructions			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			

details in Part VI) See instructions			
(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017	
	(i)	(i) (ii) Underdistributions	

9 Distributable amount for 2017 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			_
d From 2015			

e From 2016. f Total of lines 3a through e

d Excess from 2016. . . . e Excess from 2017.

instructions)

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years **b** Applied to 2017 distributable amount

c Remainder Subtract lines 4a and 4b from 4		
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		

lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		
8 Breakdown of line 7		
a Excess from 2013		
b Excess from 2014		
c Excess from 2015		

Schedule A (Form 990 or 990-EZ) (2017)

Additional Data

Software ID:

Software Version: EIN: 25-0981156

Name: WESTMINSTER COLLEGE

Page 8

Schedule A (Form 990 or 990-EZ) 2017

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line

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

Facts And Circumstances Test

SCHEDULE C

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493112008299

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

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

Inspection www.irs.gov/form990. If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** WESTMINSTER COLLEGE 25-0981156 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes 4a ☐ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political

				organization If none, enter -0-
1				
2				
3				
4				
5				
6				
For Paperwork Reduction Act Notice, see t	Cat	No 50084S Schedule C (Form 990 or 990-EZ) 2017	

2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures Schedule C (Form 990 or 990-EZ) 2017

Media advertisements?

Other activities?

Total Add lines 1c through 1i

501(c)(6).

answered "Yes."

Dues, assessments and similar amounts from members

Supplemental Information

1

2a

1 2

3

1

2

b

С Total

3

5

Part IV

PART II-B, LINE 1

Part III-A

Part III-B

Current year

Carryover from last year

expenditure next year?

Return Reference

Form 5768 (election under section 501(h)). (a) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

Yes

No

(b) Amount

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

Yes

Yes

Yes

1

2a

2b 2c

3

4

5

Schedule C (Form 990 or 990EZ) 2017

No

Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

If "Yes," enter the amount of any tax incurred under section 4912

Mailings to members, legislators, or the public?

Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?

No

No Nο

No

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)

Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

Explanation

TIME SPENT MEETING, CALLING AND WRITING LEGISLATORS OTHER EXPENSES WERE INCURRED FOR

No

2,253 10.146

Nο

1

2

12,399 Yes No

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

expenses for which the section 527(f) tax was paid).

Did the organization agree to carry over lobbying and political expenditures from the prior year?

If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Were substantially all (90% or more) dues received nondeductible by members?

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

AICUP MEETING AND STUDENT LOBBY DAY

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

Supplemental Financial Statements

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

DLN: 93493112008299 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990)

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

Open to Public Inspection

	me of the organization STMINSTER COLLEGE			Employer identification number
				25-0981156
Pa	rt I Organizations Maintaining Donor Advi Complete if the organization answered "Ye			or Accounts.
		(a) Donor adv		(b)Funds and other accounts
	Total number at end of year			
	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
ļ	Aggregate value at end of year			
i	Did the organization inform all donors and donor advisor organization's property, subject to the organization's experience.		sets held in donor ac	dvised funds are the
•	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the donor private benefit?			
Pa	rt III Conservation Easements. Complete if t	he organization answ	ered "Yes" on Forr	
	Purpose(s) of conservation easements held by the orga			
	Preservation of land for public use (e.g., recreation	n or education)	Preservation of an	historically important land area
	Protection of natural habitat	·	Preservation of a	certified historic structure
	Preservation of open space	_	Treservation of a	estanca mistoria su dotare
	1 1			
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation o	contribution in the foi	Held at the End of the Year
а	Total number of conservation easements			2a
b	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified histor	nc structure included in ((a)	2c
d	Number of conservation easements included in (c) acquistructure listed in the National Register	ured after 8/17/06, and	not on a historic	2d
3	Number of conservation easements modified, transferred tax year ▶	ed, released, extinguishe	ed, or terminated by	the organization during the
	Number of states where property subject to conservation	on easement is located i	-	
i	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold		inspection, handling	of violations,
,	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violati	ons, and enforcing co	onservation easements during the year
,	Amount of expenses incurred in monitoring, inspecting, \$ \\$, handling of violations,	and enforcing conser	vation easements during the year
3	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?) above satisfy the requi	rements of section 1	
)	In Part XIII, describe how the organization reports con-		· ·	•
	balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	nts		
ēΤ	t III Organizations Maintaining Collections Complete of the organization answered "Ye			ier Similar Assets.
a	If the organization elected, as permitted under SFAS 1: art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its final	public exhibition, educa	ation, or research in f	
b	If the organization elected, as permitted under SFAS 1: historical treasures, or other similar assets held for pub following amounts relating to these items			
(i) Revenue included on Form 990, Part VIII, line 1			▶ \$
(i	i)Assets included in Form 990, Part X			<u></u> -
:	If the organization received or held works of art, histor following amounts required to be reported under SFAS			ncial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1	, , ,		▶ \$
	Assets included in Form 990, Part X			▶ \$
	Paperwork Reduction Act Natice, see the Instruction	f F 000	C-t N-	52283D Schedule D (Form 990) 201

Par	3111	Organizations Ma	intaining Col	lections of Art, I	Histori	ical T	reas	ures, or	Other	Similar As	ssets (con	tinued)	
3		the organization's acquite (check all that apply)	isition, accessior	n, and other records	, check	any of	the fo	ollowing th	at are a	sıgnıfıcant ı	use of its co	ollection	
а	✓	Public exhibition			d	✓	Loar	or excha	nge prog	rams			
b	✓	Scholarly research			e		Othe	er					
c	✓	Preservation for future	generations										
4	Provide Part	de a description of the or	rganızatıon's coll	ections and explain	how the	ey furtl	her th	ie organiza	ation's ex	empt purpo	se in		
5	Durin	g the year, did the orgai s to be sold to raise fund								ılar	☐ Yes	 N	lo
Pai	rt IV	Escrow and Custo Complete if the orga X, line 21.			rm 990), Part	IV, I	ine 9, or	reporte	d an amou	ınt on For	m 990,	Part
1a		e organization an agent, ded on Form 990, Part X		an or other intermed	diary for	contri	butior	ns or other	assets	not	Yes	□ N	lo
b	If "Y∈	es," explain the arrangen	nent in Part XIII	and complete the fo	ollowing	table		Γ		Α	mount		_
С	Begin	ning balance						Γ	1c				_
d	Addıt	ions during the year						Γ	1d				_
е	Dıstrı	butions during the year							1e				_
f	Endın	g balance							1f				_
2a	Did th	- ne organization include a	an amount on Fo	rm 990, Part X, line	21, for	escrov	v or cı	ustodial ad	count lia	ıbılıty?	☐ Yes		_ a
b	-c			61 11 611									
	_	s," explain the arrangen			•								
Pa	rt V	Endowment Fund	s. Complete ir							(d)Three yea		\Faur van	ro back
1a	Reginn	ing of year balance .		(a)Current year 117,543,333		rior yea 109,904	-	(c)Two ye	5,365,508		824,985	Four yea) 101.	607,103
	-	outions		828,208			2,808		,452,478		093,114		780,276
		restment earnings, gains	and losses	10,587,963		13,28:			2,571,734		309,464		999,781
		or scholarships		2,493,819			7,030		2,282,948		058,551	•	795,292
		expenditures for facilities		, ,							,		
_		ograms		3,327,360		3,258	3,877		3,058,761	2,	803,504	2,	766,883
		strative expenses		122 120 225		117 [4	222	100	004 542	115	265 500		
g	Ena or	year balance		123,138,325		117,543	3,333	109	9,904,543	115,	365,508	114,	824,985
2		de the estimated percent	_	•	e (line 1	g, colu	mn (a	a)) held as					
а	Board	d designated or quasi-en		11 630 %									
b	Perm	anent endowment 🟲	53 780 %										
С	Temp	orarily restricted endow	ment ▶ 34 5	90 %									
		ercentages on lines 2a,	•	•									
3a		nere endowment funds n nization by	not in the posses	sion of the organiza	tion tha	t are h	eld ar	nd adminis	tered fo	r the		Yes	No
	-	nrelated organizations									3a(i		NO
	. ,	elated organizations .									3a(ii	-	No
b	. ,	is" on $3a(\pi)$, are the rela			on Sche	 edule R	,	· · ·			3b		
4	Descr	ibe in Part XIII the inter	nded uses of the	organization's endo	wment	funds							
Pai	rt VI	Land, Buildings, a	nd Equipmer	nt.									
		Complete if the orga			rm 990), Part	IV, ا	ıne 11a.	See For	m 990, Pa	rt X, lıne	10.	
	Descri	ption of property	(a) Cost or oth (Investme		t or other	basıs (other)	(c) Accu	mulated o	epreciation	(d)	Book valu	e
1a	Land					3	02,700)					302,700
b	Buildin	gs				94,6	25,377	,		23,887,420		70	0,737,957
		old improvements						1					
		nent				12,19	91,868	3		9,122,305		:	3,069,563
	Other	F					47,092	-		3,745,605			5,801,487
		lines 1a through 1e (Col	umn (d) must ed	ual Form 990, Part	X, colui	•				·			9,911,707

	Investments—Other Securities. Complete if	the organization a	nswered "Yes" on	Form 990, Part IV, line 11b.
	See Form 990, Part X, line 12. (a) Description of security or category	(b) Book value		(c) Method of valuation
/1) [:manasa	(including name of security)		Cost	or end-of-year market value
(2) Closely-	held equity interests			
(3) Other _ (A) COMMIN	IGLED FUNDS	29,220,8	73	F
(B) FIXED IN	NCOME	15,730,4	57	F
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				_
	nn (b) must equal Form 990, Part X, col (B) line 12)	14.051.3	30	
Part VIII	Investments—Program Related.	▶ 44,951,3		
	Complete if the organization answered 'Yes' or (a) Description of investment	n Form 990, Part I\ (b) Book va		rm 990, Part X, line 13. (c) Method of valuation
	(a) bescription of investment	(b) Book va		or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Part IX	on (b) must equal Form 990, Part X, col (B) line 13) Other Assets. Complete if the organization answer	red 'Yes' on Form 990	, Part IV, line 11d S	ee Form 990, Part X, line 15
	(a) Descripti			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	imn (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities. Complete if the organization	n answered 'Yes' or	Form 990, Part I\	/, line 11e or 11f.
1.	See Form 990, Part X, line 25. (a) Description of liability	(b) Book value	
	income taxes		-	
	HELD IN CUSTODY FOR OTHERS		388,388	
ANNUITIES POSTRETIRE	PAYABLE EMENT BENEFIT OBLIGATIONS		226,869 5,859,523	
	NT STUDENT LOAN FUNDS		2,103,763	
CAPITAL LEA	ASES		26,121	
(7)				
(8)				
(9)				
Total. (Colum	in (b) must equal Form 990, Part X, col (B) line 25)	 	8,604,664	
	or uncertain tax positions. In Part XIII, provide the text			

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Page 4

5,914,426

39,458,545

26,091,145

65,549,690

40,905,685

460,524

40,445,161

26,091,145

66,536,306

Schedule D (Form 990) 2017

25,955,768

460.524

135,377

25,955,768

2a

2b 2c

2d

4a

4b

Explanation

4c

2e

3

4c

Donated services and use of facilities 2h h 2c c d 2d 1.178.744

2e 3

Amounts included on Form 990, Part VIII, line 12, but not on line 1 4a 135.377

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

Investment expenses not included on Form 990, Part VIII, line 7b. 4b

b

4

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

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional 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

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

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Other (Describe in Part XIII)

Supplemental Information

Add lines 4a and 4b . .

Return Reference

Investment expenses not included on Form 990, Part VIII, line 7b . . .

5

Schedule D (Form 990) 2017

Part XI

1

2

3

4

c 5

Part XIII

See Additional Data Table

а

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Page 5		Schedule D (Form 990) 2017
	ormation <i>(continued)</i>	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2017

Additional Data

Software Version: EIN: 25-0981156

Name: WESTMINSTER COLLEGE

OF YEARS, ARE GENERALLY DISPLAYED IN VARIOUS LOCATIONS AROUND CAMPUS AND ARE INSURED

Supplemental Information

ion

Return Reference Explanation

PART III, LINE 1A THE COLLEGE OWNS A NUMBER OF PIECES OF ART AND HISTORIC TREASURES, NONE OF WHICH ARE RECORDED IN THE FINANCIAL STATEMENTS. THESE ITEMS HAVE BEEN GIVEN TO THE COLLEGE OVER A NUMBER.

Software ID:

Supplemental Information	
Return Reference	Explanation
PART III, LINE 4	THE COLLEGE'S COLLECTION OF ARTIFACTS OF CULTURAL AND EDUCATIONAL SIGNIFICANCE RANGE FROM STONE TOOLS (6,000 B C) THROUGH CUNEIFORM TABLETS (2,000 B C), AN EGYPTIAN MUMMY (300 B C), COPTIC ITEMS (5TH CENTURY A D), JAPANESE SAMURAI ARMOR (18TH CENTURY A D) TO CURREN CY BEARING THE PORTRAIT OF SADDAM HUSSEIN (2003 A D) THE COLLECTION PROVIDES A CONNECTIO N TO THE PAST FOR STUDENTS OF HISTORY AND CULTURE, BOTH ON CAMPUS AND IN THE SURROUNDING C OMMUNITY IN ADDITION, SOME ITEMS IN THE COLLECTION HAVE BEEN LOANED TO MUSEUMS AND HISTOR ICAL SOCIETIES EXPANDING THEIR EDUCATIONAL REACH SOME OF THE COLLECTION IS HIGHLIGHTED ON LINE ALONG WITH RESEARCH MATERIALS (CT SCANS, DESCRIPTIONS, EDUCATIONAL MATERIALS) A FORE NSIC SCULPTOR RECONSTRUCTED A BUST OF THE 2,000+ YEAR-OLD MUMMY ALLOWING STUDENTS OF HISTO RY TO SEE THE VISAGE OF A WOMAN WHO LIVED IN ANCIENT EGYPT ALL OF THE ARTIFACTS ENCOURAGE RESEARCH AND STUDY BY BRINGING HISTORY TO LIFE AS STUDENTS SEE FIRSTHAND THE ITEMS ABOUT WHICH THEY READ IN CLASS

Supplemental Informatio	n
Return Reference	Explanation
PART V, LINE 4	THE COLLEGE'S ENDOWMENT CONSISTS OF VARIOUS INVESTMENT FUNDS ESTABLISHED FOR SUPPORT OF THE COLLEGE'S MISSION ITS ENDOWMENT INCLUDES DONOR-RESTRICTED ENDOWMENT FUNDS, AND FUNDS DE
	SIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS AS REQUIRED BY GENERALLY ACCE PTED ACCOUNTING PRINCIPLES, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DE SIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED B ASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS THE BOARD OF TRUSTEES HAS
	ELECTED TO BE GOVERNED BY THE COMMONWEALTH OF PENNSYLVANIA'S ACT 141 (ACT 141) ACT 141 IS A TOTAL RETURN POLICY THAT ALLOWS A NONPROFIT ENTITY TO CHOOSE TO TREAT A PERCENTAGE OF T HE AVERAGE MARKET VALUE OF THE ENDOWMENT'S PERMANENTLY RESTRICTED INVESTMENTS AS INCOME EA
	CH YEAR HOWEVER, THE LONG-TERM PRESERVATION OF THE REAL VALUE OF THE ASSETS MUST BE TAKEN INTO CONSIDERATION WHEN THE BOARD ELECTS A SPENDING RATE ON AN ANNUAL BASIS, THE BOARD OF TRUSTEES MUST ELECT, IN WRITING, A SPENDING RATE OF BETWEEN 2% AND 7% FOR THE YEARS END ED JUNE 30, 2018 AND 2017, THE COLLEGE UTILIZED A 5% SPENDING RATE ON RESTRICTED ENDOWMENT ASSETS AND A 7% SPENDING RATE ON UNRESTRICTED ENDOWMENT ASSETS, BASED ON A THREE-YEAR MOVING AVERAGE OF HISTORICAL END-OF-QUARTER ENDOWMENT MARKET VALUES THE LAST QUARTER USED TO
	DETERMINE THE TRANSFER FOR THE FISCAL YEAR ENDED JUNE 30, 2018 WAS THE QUARTER ENDED DECE MBER 31, 2016 THE COLLEGE CLASSIFIES AS PERMANENTLY RESTRICTED NET ASSETS THE ORIGINAL VA LUE OF GIFTS DONATED TO THE ENDOWMENT AND THE ORIGINAL VALUE OF SUBSEQUENT GIFTS TO THE EN DOWMENT THE UNDISTRIBUTED AMOUNTS EARNED ARE INCLUDED IN UNRESTRICTED NET ASSETS IN ACCO
	RDANCE WITH ACT 141, THE COLLEGE HAS ADOPTED A WRITTEN INVESTMENT POLICY, OF WHICH A SECTI ON SPECIFICALLY RELATES TO THE ENDOWMENT THE COLLEGE CONSIDERS THE FOLLOWING FACTORS IN M AKING A DETERMINATION TO SET A SPENDING RATE 1 PROTECTING THE CORPUS OF THE ENDOWMENT FU ND 2 PRESERVING THE SPENDING POWER OF THE ASSETS 3 OBTAINING MAXIMUM INVESTMENT RETURN W ITH REASONABLE RISK AND OPERATIONAL CONSIDERATION 4 COMPLYING WITH APPLICABLE LAWS

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	THE COLLEGE IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL RE VENUE CODE (IRC) OF 1986 ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN MADE IN THE ACCOMPANYING FINANCIAL STATEMENTS THE COLLEGE ACCOUNTS FOR INCOME TAXES UNDER THE INCOME TAXES TOPIC OF THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) THIS TOPIC PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT PRINCIPLES FOR FINANCIAL STATEMENTS DISCLOSURE OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THE COLLEGE HAS ASSESSED THE TAX POSITIONS IT HAS TAKEN OR EXPECTS TO TAKE IN ITS TAX RETURNS AND NO LIABILITY HAS BEEN RECORDED FOR UNCERTAIN TAX POSITIONS, FURTHER, THE COLLEGE HAS ASSESSED THE TAX POSITIONS OF TAX POSITIONS OF TAX POSITIONS OF TAX POSITIONS.

Supplemental Information

ILLEGE HAS NO UNRECOGNIZED TAX BENEFITS THE COLLEGE IS NO LONGER SUBJECT TO EXAMINATION OF

ITS TAX RETURNS FOR YEARS BEFORE 2015

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 353,594 RENTAL EXPENSES 106,930 CHANGES IN UNRECOGNIZED PENSION BENEFIT PLAN COSTS 718,220

-

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS AND GRANTS 25,940,814 BANK SERVICE FEES 14,954

Supplemental Information		
Return Reference	Explanation	
PART XII, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 353,594 RENTAL EXPENSES 106,930	

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Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS AND GRANTS 25,940,814 BANK SERVICE FEES 14,954

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493112008299 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶ Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Department of the Treasury Namel & the corporation **Employer identification number** WESTMINSTER COLLEGE 25-0981156 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 1 Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 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? 4d Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο c Employment of faculty or administrative staff? 5c Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? 6b No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2017)

, , , , , , , , , , , , , , , , , , , ,	1
Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	THE WESTMINSTER COLLEGE NONDISCRIMINATION POLICY IS INCLUDED ON THE COLLEGE WEBSITE, IN OFFICIAL PUBLICATIONS, IN EMPLOYEE ADVERTISING, AND IN STUDENT RECRUITMENT MATERIALS
SCHEDULE E, PART I, LINE 6	THE INSTITUTION RECEIVES FEDERAL GRANTS AND PARTICIPATES IN THE FOLLOWING GOVERNMENTAL AGENCY FINANCIAL AID OR ASSISTANCE PROGRAMS FEDERAL PELL GRANT PROGRAM, FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT, FEDERAL WORK STUDY GRANT, FEDERAL DIRECT LOAN PROGRAM, PENNSYLVANIA INSTITUTIONAL ASSISTANCE GRANT, PENNSYLVANIA PARTNERSHIP FOR ACCESS TO HIGHER EDUCATION (PATH), PENNSYLVANIA FEDERAL TEACH GRANT PROGRAM, PA STATE GRANT PROGRAM, OHIO COLLEGE OPPORTUNITY GRANT PROGRAM, WEST VIRGINIA HIGHER EDUCATION GRANT PROGRAM, MASSACHUSETTS MASS GRANT PROGRAM, PA MATCHING FUNDS PROGRAM, THE CHAFEE PROGRAM (ADMINISTERED THROUGH PHEAA), PENNSYLVANIA NATIONAL GUARD EDUCATIONAL ASSISTANCE PROGRAM (ADMINISTERED THROUGH PHEAA), FEDERAL VA BENEFIT PROGRAMS, AMERICORPS AND OVR (OFFICE OF VOCATIONAL REHABILITATION), READY TO SUCCEED SCHOLARSHIP (ADMINISTERED THROUGH PHEAA), BLIND OR DEAF BENEFICIARY BEADY.

THROUGH PHEAA), BLIND OR DEAF BENEFICIARY GRANT (ADMINISTERED THROUGH PHEAA), VERMONT STUDENT ASSISTANCE GRANT

Schedule F (Form 990 or 990-F7) (2017)

efile GRAPHIC prin	t - DO NOT P	ROCESS	As Filed Data -			DLN:	93493112008299
SCHEDULE F (Form 990)	State	ment of A	Activities (Outside the Uni	OMB No 1545-0047		
(1 01111 330)	► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.						
Department of the Treasury Internal Revenue Service	► Informat	ion about Sched	lule F (Form 990) a	and its instructions is at wi	/w.irs.gov/form!	990.	Open to Public Inspection
Name of the organization					Emp	loyer iden	tification number
WESTMINSTER COLLEGE					25-09	981156	
	Information of Part IV, line		Outside the U	Inited States. Comple	te if the orgai	nization ar	nswered "Yes" to
-	-			substantiate the amount stance, and the selection	-	and	
to award the grar	nts or assistanc	e?					✓ Yes ☐ No
2 For grantmaker outside the United		Part V the orga	anızatıon's proce	dures for monitoring the	use of its gran	nts and oth	er assistance
3 Activites per Regio	n (The following	g Part I, line 3 i	table can be dupli	cated 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 liste program service specific ty service(s) in	e, describe pe of	(f) Total expenditures for and investments in region
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continua Part I	tion sheets to	(0				12,315,558 167,400
c Totals (add lines 3.		the Instruction	-		No 50082W	Eahad	12,482,958 e F (Form 990) 2017

(1)				
(2)				
(3)				

(4)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as taxexempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2017

(14)

(15) (16) (17) (18)

Schedule F (Form 990) 2017

Part III can be	duplicated if addition	onal space is r					
(a) Type of grant or assistance		(c) Number of recipients	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)
	ICELAND AND GREENLAND)	6		CREDIT TO STUDENTS' ACCOUNT FOR FINANCIAL AID			N/A
	EAST ASIA AND THE PACIFIC	1		CREDIT TO STUDENTS' ACCOUNT FOR FINANCIAL AID	0	N/A	N/A
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)			1				

(7)				
(8)				
(9)				
(10)				ĺ

Sche	dule F (Form 990) 2017		Page 4
Par	t 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, do not file with Form 990)	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, do not file with Form 990)	☐Yes	☑ No

Schedule F (Form 990) 2017 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

PART I, LINE 2 FINANCIAL AID IS AWARDED TO INCOMING FIRST YEAR STUDENTS ON THE BASIS OF THE RESULTS OF THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) AND BY THE USE OF A FINANCIAL AID MATRIX X THE FINANCIAL AID MATRIX IS BASED ON ACADEMIC ABILITY AND FINANCIAL NEED WITHIN EACH C ELL OF THE MATRIX THERE IS A FLOOR AND A CEILING RANGE USED FOR THE AWARDING OF INSTITUTIO NAL FUNDS A STUDENT IS PLACED INTO A FINANCIAL AID MATRIX CELL BASED ON BOTH HIGH SCHOOL GRADE POINT A VERAGE AND SAT AND/OR ACT SCORES THE AMOUNT A STUDENT IS AWARDED BETWEEN THE FLOOR AND CEILING VALUE IN THE CELL IS BASED ON FINANCIAL NEED AS DETERMINED BY THE FAFSA INSTITUTIONAL MERIT AWARDS (AWARDED BY ADMISSIONS) THESE ARE AWARDED TO STUDENTS REGARDLESS OF FINANCIAL NEED MERIT SCHOLARSHIPS (INFUNDED) AND ACCEPTED FIRST YEAR STUDENTS ARE AWARDED A MERIT SCHOLARSHIPS (INFUNDED) BY WHERE THEY FALL IN THE MATRIX BASED ON HIGH SCHOOL OL GRADE POINT AVERAGE AND SAT AND/OR ACT SCORES THE MERIT SCHOLARSHIP AWARD IS THE FLOOR VALUE FROM THE RESPECTIVE MATRIX CELL STUDENTS WHO FALL IN THE TOP 20% OF THE APPLICANT POOL MAY BE SELECTED BY THE ADMISSIONS STAFF AS A WESTMINSTER SCHOLAR SELECTED STUDENTS A RE GUARANTEED A MERIT AWARD WHICH IS THE FLOOR VALUE FROM THE MATRIX CELL THE WESTMINSTER SCHOLAR IS ALSO GIVEN AN OPPORTUNITY TO COMPETE FOR A LARGER FOUR YEAR AWARD THROUGH THE SCHOLARSHIPS, LET AND AND A SHAPLY INVOLVE MENT AND STUDENT SEASYS THE LARGER AWARDS INCLUDE FULL TUITION PRESIDENTIAL SCHOLARSHIPS, VANCE SCHOLARSHIPS, LEMMON SCHOLARSHIPS (INDIDED AID) THE NOMINATED BY ANALABLE TO INCOMING FIRST YEAR STUDENTS ARE 1) THE YOUNG PRESBYTERIAN SCHOLARSHIP FOR DELIGNED A MERIT BASED SCHOLARSHIPS (INDIDED AID) THE NOMINATED BY MISSION SCHOLARSHIPS (INDIDED AID) THE NOMINATED BY ANALABLE TO INCOMING FIRST YEAR STUDENTS ARE 1) THE YOUNG PRESBYTERIAN SCHOLARSHIP FOR BELIGIBLE A STUDENT MUST BE A MEMBER OF THE PRESBYTERIAN CHURCH USA, BE NOMINATED BY AN EDUCATOR WHO IS A WESTMINSTER COLLEGE GRADUATE AND PRESENT A MINIMUM GPA OF 3 5 3) LEGACY SCHOL	Return Reference	Explanation
CTED FAMILY CONTRIBUTION (EFC) THE CALCULATION USED TO DETERMINE THE STUDENT'S FINANCIAL NEED IS DIRECT COST OF ATTENDANCE* - EFC = STUDENT'S NEED (*DIRECT COST OF ATTENDANCE TU ITION & FEES, ROOM & BOARD FOR RESIDENT AND OFF-CAMPUS STUDENTS, TUITION & FEES ONLY FOR C OMMUTERS) THE CALCULATED STUDENT NEED IS REDUCED BY FEDERAL NEED BASED FINANCIAL AID STAT E NEED BASED FINANCIAL AID FUNDED GIFT AID INSTITUTIONAL MERIT AID THE REMAINING UNMET NEE D, AFTER THE REDUCTIONS, IS MET BY USING INSTITUTIONAL NEED BASED GIFT AID WITH THE TOTAL OF INSTITUTIONAL AID BEING CAPPED BY THE CEILING VALUE FROM THE MATRIX CELL FOR THE STUDEN T INSTITUTIONAL NEED BASED AWARDS ARE USUALLY RENEWED PROVIDED THAT THE STUDENT CONTINUES TO DEMONSTRATE FINANCIAL NEED FINANCIAL AID PACKAGING STUDENTS RECEIVE A FINANCIAL AID P ACKAGE ANNUALLY WHICH INCLUDES ALL SOURCES OF FINANCIAL AID THAT THEY ARE ELIGIBLE AND QUA LIFY FOR AWARDS THAT MAY BE INCLUDED IN A FINANCIAL AID PACKAGE ARE FEDERAL GRANTS (PELL AND SEOG) STATE GRANTS INSTITUTIONAL MERIT AWARDS INSTITUTIONAL NEED BASED AWARDS INSTITUTIONAL ENDOWED AWARDS FEDERAL LOANS (STAFFORD AND PERKINS) FEDERAL WORK STUDY THE COLLEGE CONTROLLER DETERMINES THE AMOUNT AVAILABLE IN ALL INSTITUTIONAL FUNDS ON AN ANNUAL BASIS WESTMINSTER COLLEGE UNFUNDED AND FUNDED AID IS PORTABLE FOR OFF-CAMPUS STUDIES IF THE PROG RAM IS REQUIRED BY THE STUDENT'S MAJOR THESE FUNDS ARE PORTABLE UP TO THE LESSER OF 1) THE TUITION OF THE OFF CAMPUS STUDIES PROGRAM, OR 2) THE LIMIT OF A STUDENT'S WESTMINSTER COLLEGE AWARDED AID WHERE A PARTICULAR STUDY-ABROAD PROGRAM'S TUITION IS GREATER THAN THE WE	-	E FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) AND BY THE USE OF A FINANCIAL AID MATRI X THE FINANCIAL AID MATRIX IS BASED ON ACADEMIC ABILITY AND FINANCIAL NEED WITHIN EACH C ELL OF THE MATRIX THERE IS A FLOOR AND A CEILING RANGE USED FOR THE AWARDING OF INSTITUTIO NAIL FUNDS A STUDENT IS PLACED INTO A FINANCIAL AID MATRIX CELL BASED ON BOTH HIGH SCHOOL RADE POINT AVERAGE AND SAT AND/OR ACT SCORES THE AMOUNT A STUDENT IS AWARDED BETWEEN THE FLOOR AND CEILING VALUE IN THE CELL IS BASED ON FINANCIAL NEED AS DETERMINED BY FEAFSA INSTITUTIONAL MERIT AWARDS (AWARDED BY ADMISSIONS) THESE ARE AWARDED TO STUDENTS REGARDL ESS OF FINANCIAL NEED MERIT SCHOLARSHIP DETERMINED BY FEAFSA INSTITUTIONAL MERIT AWARDS (AWARDED BY ADMISSIONS) THESE ARE AWARDED TO STUDENTS REGARDL ESS OF FINANCIAL NEED MERIT SCHOLARSHIP SCHOLARSHIPS (UNFUNDED AID) ACCEPTED FIRST YEAR STUDENTS ARE AWARDED A MERIT SCHOLARSHIPS CHETEMINED BY WHERE THEY FALL IN THE MATRIX BASED ON HIGH SCHOOL AGAINED AND ATTEM AND AND ACT SCORES THE MERIT SCHOLARSHIP AWARD IS THE FLOOR VALUE FROM THE RESPECTIVE MATRIX CELL STUDENTS WHO FALL IN THE 107 29% OF THE APPLICANT POOL MAY BE SELECTED BY THE ADMISSIONS STAFF AS A WESTMINSTER SCHOLAR SELECTED STUDENTS ARE SCHOLARS ELECTED STUDENTS ARE SCHOLAR SELECTED STUDENTS ARE SCHOLAR SELECTED STUDENTS ARE SCHOLAR IS ALSO GIVEN AN OPPORTUNITY TO COMPETE FOR A LARGER FOUR YEAR AWARD THROUGH THE SCHOLARSHIP SCHOLARSHIPS AND A
		STMINSTER COLLEGE AID THE STUDENT IS ELIGIBLE TO RECEIVE FOR THE SAME PERIOD OF ENROLLMENT BEFORE THESE FUNDS WILL BE PAID TO THE STUDY ABROAD PROGRAM ON THE STUDENT'S BEHALF, THE STUDENT IS REQUIRED TO PROVIDE A COPY OF THE INVOICE FOR THE STUDY ABROAD PROGRAM, WITH A SEPARATE LINE ITEM FOR TUITION STUDENTS ARE REQUIRED TO HAVE THE INSTITUTION PROVIDE A COPY OF THE ACADEMIC TRANSCRIPTS FOR THE TERM(S) ABROAD TO WESTMINSTER COLLEGE WESTMINSTER COLLEGE'S FINANCIAL AID OFFICE USES THE FINANCIAL AID MANAGEMENT SYSTEM POWERFAIDS TO MAI

Additional Data

EAST ASIA AND THE PACIFIC -

AUSTRALIA, BRUNEI, BURMA,

CAMBODIA,

Software ID: Software Version:

EIN: 25-0981156

Name: WESTMINSTER COLLEGE

FACULTY/STAFF

THE US

TRAVELING OUTSIDE OF

111

Form	990	Schedule	F Part I	- /	Activities	Outside	The	United State	25

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	PROGRAM SERVICES	FACULTY/STAFF TRAVELING OUTSIDE OF THE US	6,034

0 PROGRAM SERVICES

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) EUROPE (INCLUDING ICELAND I 0 PROGRAM SERVICES 11.401 IFACULTY/STAFF & GREENLAND) - ALBANIA, TRAVELING OUTSIDE OF ANDORRA, AUSTRIA, BELGIUM THE US CENTRAL AMERICA AND THE 0 PROGRAM SERVICES ISTUDENT TRAVEL 1,600 CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 0 PROGRAM SERVICES FACULTY/STAFF 5.316 CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & TRAVELING OUTSIDE OF BARBUDA, ARUBA, BAHAMAS, THE US EUROPE (INCLUDING ICELAND 0 PROGRAM SERVICES FACULTY AND STUDENTS 319,165 & GREENLAND) TRAVELING OUTSIDE OF lus

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) EUROPE (INCLUDING ICELAND I 0 PROGRAM SERVICES ISTUDENT TRAVEL 3.081 & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM CENTRAL AMERICA AND THE 0 INVESTMENTS N/A 11,968,850 CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) SOUTH AMERICA 0 PROGRAM SERVICES IECUADOR STUDENT 129.323 TRAVEL COURSE CENTRAL AMERICA AND THE 0 PROGRAM SERVICES ATHLETIC TRAVEL ABROAD 33.399 CARIBBEAN I(VOLLEYBALL)

Form 990 Schedule F Par	Form 990 Schedule F Part I - Activities Outside The United States												
(a) Region	(b) Number of offices in the region 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	0	0	PROGRAM SERVICES	STUDENT TRAVEL	1,663								
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	FACULTY/STAFF TRAVELING OUTSIDE OF THE US	3,015								

efile GRAPHIC print	- DO NOT PROCESS	As Filed Data -					DL	N: 93493112008299	
Schedule I (Form 990) Department of the Treasury Internal Revenue Service	Co	Governments a	and Individuals tion answered "Yes," o Attach to Form	er Assistance to Organizations, Individuals in the United States answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Form 990) and its instructions is at www.irs.gov/form990 .					
Name of the organization WESTMINSTER COLLEGE							Employer identifi	cation number	
Part I General I	nformation on Grants	and Assistance					25-0981156		
the selection criteria Describe in Part IV	a used to award the grants the organization's procedur	or assistance?	e of grant funds in the Un	ited States		,		☑ Yes ☐ No	
				nts. Complete if the oi	rganization answered "Yes"	on Form	990, Part IV, line	e 21, for any recipient	
(a) Name and addres organization or government	anization (if applicable)		(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		Description of ash assistance	(h) Purpose of grant or assistance	
(1) NEW WILMINGTON VOLUNTEER FIREMENS ASSOCIATION 134 HIGH ST NEW WILMINGTON, PA	25-1760294 16142	501(C)(3)	10,000					UPGRADES TO PRESENT EQUIPMENT	
2 Enter total number	of section 501(c)(3) and go	overnment organizations	listed in the line 1 table .				•	1	
								0	
For Paperwork Reduction A	ct Notice, see the Instruction	ns for Form 990.		Cat No 50055	iP .		Sci	hedule I (Form 990) 2017	

Delloadie I ((101111350) 2017
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

Part III can be duplicated if additio	nai space is needed				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) ACADEMIC AND FINANCIAL ASSISTANCE/SCHOLARSHIPS	1161	25,914,136		N/A	N/A
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
Down IV Complemental Information	na Dravida tha in	formation required in I	Dawl I June 2: Dawl III	saluma (b), and any other	additional information

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

PART I, LINE 2

FINANCIAL AID IS AWARDED TO INCOMING FIRST YEAR STUDENTS ON THE BASIS OF THE RESULTS OF THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) AND BY THE USE OF A FINANCIAL AID MATRIX THE FINANCIAL AID MATRIX IS BASED ON ACADEMIC ABILITY AND FINANCIAL NEED WITHIN EACH CELL OF THE MATRIX THERE IS A FLOOR AND A CEILING RANGE USED FOR THE AWARDING OF INSTITUTIONAL FUNDS A STUDENT IS PLACED INTO A FINANCIAL AID MATRIX CELL BASED ON BOTH HIGH SCHOOL GRADE POINT AVERAGE AND SAT AND/OR ACT SCORES THE AMOUNT A STUDENT IS AWARDED BETWEEN THE FLOOR AND CEILING VALUE IN THE CELL IS BASED ON FINANCIAL NEED AS DETERMINED BY THE FAFSA INSTITUTIONAL MERIT AWARDS (AWARDED BY ADMISSIONS) THESE ARE AWARDED TO STUDENTS REGARDLESS OF FINANCIAL NEED MERIT SCHOLARSHIPS (UNFUNDED AID) ACCEPTED FIRST YEAR STUDENTS ARE AWARDED A MERIT SCHOLARSHIP DETERMINED BY WHERE THEY FALL IN THE MATRIX BASED ON HIGH SCHOOL GRADE POINT AVERAGE AND SAT AND/OR ACT SCORES THE MERIT SCHOLARSHIP AWARD IS THE FLOOR VALUE FROM THE RESPECTIVE MATRIX CELL STUDENTS WHO MEET THE REQUIREMENTS FOR THE TOP MERIT SCHOLARSHIP ARE FURTHER CONSIDERED BY THE SCHOLARSHIP REVIEW COMMITTEE FOR WESTMINSTER COLLEGE'S FULL TUITION SCHOLARSHIPS, THE PRESIDENTIAL AND THE LEMMON SCHOLARSHIPS THERE ARE A LIMITED NUMBER OF EACH OF THESE SCHOLARSHIPS AWARDED ON AN ANNUAL BASIS STUDENTS WHO FALL IN THE TOP 20% OF THE APPLICANT POOL MAY BE SELECTED BY THE ADMISSIONS STAFF AS A WESTMINSTER SCHOLAR SELECTED STUDENTS ARE GUARANTEED A MERIT AWARD WHICH IS THE FLOOR VALUE FROM THE MATRIX CELL THE WESTMINSTER SCHOLAR IS ALSO GIVEN AN OPPORTUNITY TO COMPETE FOR A LARGER FOUR YEAR AWARD THROUGH THE SCHOLARS COMPETITIONS HELD ON THE WESTMINSTER CAMPUS THIS COMPETITION HAS FACULTY INVOLVEMENT AND STUDENT ESSAYS THE LARGER AWARDS INCLUDE FULL TUITION PRESIDENTIAL SCHOLARSHIPS, VANCE SCHOLARSHIPS, LEMMON SCHOLARSHIPS AND TITAN SCHOLARSHIPS (WITH A RANGE OF VALUES) NOMINATED MERIT BASED SCHOLARSHIPS (UNFUNDED AID) THE NOMINATED SCHOLARSHIPS AVAILABLE TO INCOMING FIRST YEAR STUDENTS ARE 1) THE YOUNG PRESBYTERIAN SCHOLARSHIP -TO BE ELIGIBLE A STUDENT MUST BE A MEMBER OF THE PRESBYTERIAN CHURCH USA, BE NOMINATED BY HIS/HER CHURCH AND PRESENT A MINIMUM GPA OF 3 5 2) JERB MILLER SCHOLARSHIP -TO BE ELIGIBLE A STUDENT MUST BE NOMINATED BY AN EDUCATOR WHO IS A WESTMINSTER COLLEGE GRADUATE AND PRESENT A MINIMUM GPA OF 3 5 3) LEGACY SCHOLARSHIP (FUNDED AID) -TO BE ELIGIBLE A STUDENT MUST PRESENT A CUMULATIVE GPA OF 3 0 AND HAVE A PARENT OR GRANDPARENT WHO EARNED A DEGREE FROM WESTMINSTER COLLEGE 4) PRESBYTERIAN HERITAGE SCHOLARSHIP -TO BE ELIGIBLE A STUDENT MUST PRESENT A CUMULATIVE GPA OF 3 5, BE A MEMBER OF A PRESBYTERIAN CHURCH (NON PCUSA) AND BE NOMINATED BY HIS/HER CHURCH MERIT SCHOLARSHIPS ARE RENEWABLE FOR UP TO THREE YEARS. THE STUDENT NEEDS TO MAINTAIN THE REQUIRED SCHOLARSHIP GPA (IF ONE EXISTS), OTHERWISE REMAIN IN GOOD ACADEMIC STANDING INSTITUTIONAL NEED BASED AWARDS (UNFUNDED AID) NEED BASED INSTITUTIONAL FINANCIAL AID IS AWARDED TO STUDENTS BASED ON THE RESULTS OF THE FAFSA AND THE DETERMINATION OF THE STUDENTS DEMONSTRATED NEED A STUDENT IS REQUIRED TO FILE A FAFSA FORM IN ORDER TO BE CONSIDERED FOR NEED BASED FINANCIAL AID THE RESULTS OF THE FAFSA DETERMINE THE STUDENT'S EXPECTED FAMILY CONTRIBUTION (EFC) THE CALCULATION USED TO DETERMINE THE STUDENT'S FINANCIAL NEED IS DIRECT COST OF ATTENDANCE* - EFC = STUDENT'S NEED (*DIRECT COST OF ATTENDANCE TUITION & FEES, ROOM & BOARD FOR RESIDENT AND OFF CAMPUS STUDENTS, TUITION & FEES ONLY FOR COMMUTERS) THE CALCULATED STUDENT NEED IS REDUCED BY FEDERAL NEED BASED FINANCIAL AID STATE NEED BASED FINANCIAL AID FUNDED GIFT AID INSTITUTIONAL MERIT THE REMAINING UNMET NEED, AFTER THE REDUCTIONS, IS MET BY USING INSTITUTIONAL NEED BASED GIFT AID WITH THE TOTAL OF INSTITUTIONAL AID BEING CAPPED BY THE CEILING VALUE FROM THE MATRIX CELL FOR THE STUDENT INSTITUTIONAL NEED BASED AWARDS ARE USUALLY RENEWED PROVIDED THAT THE STUDENT CONTINUES TO DEMONSTRATE FINANCIAL NEED FINANCIAL AID PACKAGING STUDENTS RECEIVE A FINANCIAL AID PACKAGE ANNUALLY WHICH INCLUDES ALL SOURCES OF FINANCIAL AID THAT THEY ARE ELIGIBLE AND QUALIFY FOR AWARDS THAT MAY BE INCLUDED IN A FINANCIAL AID PACKAGE ARE FEDERAL GRANTS (PELL AND SEOG) STATE GRANTS INSTITUTIONAL MERIT AWARDS INSTITUTIONAL NEED BASED AWARDS INSTITUTIONAL ENDOWED AWARDS FEDERAL LOANS (STAFFORD AND PERKINS) FEDERAL WORK STUDY THE COLLEGE CONTROLLER DETERMINES THE AMOUNT AVAILABLE IN ALL INSTITUTIONAL FUNDS ON AN ANNUAL BASIS WESTMINSTER COLLEGE UNFUNDED AND FUNDED AID IS PORTABLE FOR OFF-CAMPUS STUDIES IF THE PROGRAM IS REQUIRED BY THE STUDENT'S MAJOR THESE FUNDS ARE PORTABLE UP TO THE LESSER OF 1) THE TUITION OF THE OFF CAMPUS STUDIES PROGRAM, OR 2) THE LIMIT OF A STUDENT'S WESTMINSTER COLLEGE AWARDED AID WHERE A PARTICULAR STUDY-ABROAD PROGRAM'S TUITION IS GREATER THAN THE WESTMINSTER COLLEGE AID THE STUDENT IS ELIGIBLE TO RECEIVE FOR THE SAME PERIOD OF ENROLLMENT BEFORE THESE FUNDS WILL BE PAID TO THE STUDY ABROAD PROGRAM ON THE STUDENT'S BEHALF, THE STUDENT IS REQUIRED TO PROVIDE A COPY OF THE INVOICE FOR THE STUDY ABROAD PROGRAM, WITH A SEPARATE LINE ITEM FOR TUITION STUDENTS ARE REQUIRED TO HAVE THE INSTITUTION PROVIDE A COPY OF THE ACADEMIC TRANSCRIPTS FOR THE TERM(S) ABROAD TO WESTMINSTER COLLEGE WESTMINSTER COLLEGES FINANCIAL AID OFFICE USES THE FINANCIAL AID MANAGEMENT SYSTEM POWERFAIDS TO MAINTAIN FINANCIAL AID AWARD RECORDS AND AMOUNTS

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Dat	a -	DLN: 934	9311	2008	299		
Sch	edule J	Co	mpensat	ion Information	МО	IB No	1545-0	0047		
(Fori	n 990)		Compensa	Trustees, Key Employees, and Hig ated Employees	hest	7 0	117	7		
		► Complete if the orga		vered "Yes" on Form 990, Part IV, n to Form 990.	, line 23.	2017				
•	tment of the Treasury	➤ Information ab	out Schedule J	l (Form 990) and its instructions	is at C		to Pul			
	al Revenue Service ne of the organiza	ation	<u>www.irs.</u>	<u>.gov/form990</u> .	Employer identificat		ectio			
	STMINSTER COLLEGI									
Da	rt I Questi	ons Regarding Compensat	ion		25-0981156					
-	Questi	ons Regarding Compensat	1011				Yes	No		
1a				f the following to or for a person liste by relevant information regarding the						
		or charter travel	\checkmark	Housing allowance or residence for	personal use					
	✓ Travel for	companions		Payments for business use of perso	nal residence					
		nification and gross-up payments		Health or social club dues or initiation						
	Discretionary spending account Personal services (e g , maid, chauffeur, che									
b		kes in line 1a are checked, did th Il of the expenses described abo		ollow a written policy regarding paym	nent or reimbursement	1b	Yes			
2				or allowing expenses incurred by all		2	Yes			
	directors, truste	es, officers, including the CEO/Ex	kecutive Directo	r, regarding the items checked in line	e la?					
3				ed to establish the compensation of th	ne					
	_	•	117	not check any boxes for methods CEO/Executive Director, but explain i	n Part III					
		-		•						
		ation committee	⊻	Written employment contract						
		ent compensation consultant of other organizations	✓	Compensation survey or study Approval by the board or compensa	tion committee					
	10///ii 550	or other organizations		Approval by the board of compensa	don committee					
4	During the year related organiza		90, Part VII, Se	ection A, line 1a, with respect to the f	lling organization or a					
а	Receive a sever	ance payment or change-of-cont	rol payment?			4a		No		
b	•	receive payment from, a supple	•	· ·		4b	Yes			
С		receive payment from, an equit		<u>-</u>	- 111	4c		No		
	ir res to any o	ir lines 4a-c, list the persons and	provide the app	plicable amounts for each item in Part	I 111					
	Only 501(c)(3), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.						
5		ed on Form 990, Part VII, Section ontingent on the revenues of		the organization pay or accrue any						
а	The organization	٦?				5a		No		
b	Any related orga					5b		No		
	-	5a or 5b, describe in Part III								
6		ed on Form 990, Part VII, Section ontingent on the net earnings of	A, line 1a, did	the organization pay or accrue any						
а	The organization	٦٦				6 a		No		
b	Any related orga					6b		No		
	•	6a or 6b, describe in Part III								
7	payments not d	escribed in lines 5 and 6? If "Yes,	," describe in Pa		d	7	Yes			
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," do	escribe	8		No		
9	If "Yes" on line 3 53 4958-6(c)?	3, did the organization also follow	v the rebuttable	presumption procedure described in	Regulations section	9		140		
For I	Danerwork Bedi	ction Act Notice, see the Inst	ructions for Fo	orm 990 Cat No. 5	0053T Schedule 1	(Form	990)	2017		

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 colum	ns (B	t list any individuals that are not listed on Form 990, Part VII (ı)-(ııı) 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 indi-										
(A) Name and Title	-		of W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in				
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990				
1 KATHY BRITTAIN	(i)	240,915	0	25,436	58,750	37,156	362,257	0				
RICHARDSON PRESIDENT	(ii)	0	0	0	0	0	0	0				
2 KENNETH J ROMIG TREASURER/VP FOR	(i)	159,478	0	18,138	12,446	18,040	208,102	0				
FINANCE	(ii)	0	0	0	0	0	0	0				
3 MATTHEW P STINSON VP FOR INSTITUTIONAL	(i)	151,682	0	90	11,625	12,085	175,482	0				
ADVANCEMENT	(ii)	0	0	0	0	0	0	0				
4 THOMAS H STEIN VP FOR ENROLLMENT IN	(i)	138,793	20,000	396	10,658	12,052	181,899	0				
ADMISSIONS	(ii)	0	0	0	0	0	0	0				
	+											
								_				
							Schedule	J (Form 990) 2017				

Schedule J (Form 990) 2017											
Part III Supplemental Inform	nation										
Provide the information, explanation, or	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										
	HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE FOR THE CONVENIENCE OF THE COLLEGE, THE PRESIDENT OCCUPIES THE RESIDENCE PROVIDED (MACK MANSE) BY THE COLLEGE IN ACCORDANCE WITH HER EMPLOYMENT AGREEMENT PERSONAL SERVICES (E.G., CLEANING SERVICES) THE COLLEGE MANSE IS THE PROPERTY OF WESTMINSTER, THEREFORE IT IS MAINTAINED BY WESTMINSTER'S PHYSICAL PLANT DEPARTMENT CLUB MEMBERSHIPS IN ORDER THAT THE PRESIDENT MAY ENTERTAIN POTENTIAL DONORS AND OTHER BUSINESS ASSOCIATES OF THE COLLEGE, THE COLLEGE PAYS OR REIMBURSES THE PRESIDENT FOR, THE PERIODIC DUES FOR MEMBERSHIP IN THE DUQUESNE CLUB AND THE AVALON COUNTRY CLUB DIRECT EXPENSES FOR UTILIZATION OF THE CLUBS IS THE PRESIDENT'S RESPONSIBILITY, EXCEPT WHEN ATTRIBUTABLE TO COLLEGE BUSINESS										
PART I, LINE 4B	KATHY BRITTAIN RICHARDSON \$40,000 CONTRIBUTION										
PART I, LINE 7	THE VP FOR ENROLLMENT IN ADMISSIONS WAS AWARDED A \$20,000 BONUS IN THE 2017 CALENDAR YEAR										
· · · · · · · · · · · · · · · · · · ·	WESTMINSTER COLLEGE ACCOUNTED FOR THE PERSONAL USE OF VEHICLE ON BEHALF OF KATHY B RICHARDSON ON HER 2017 FORM W-2 THE AMOUNT OF THE PERSONAL USE OF THE VEHICLE WAS \$3,080 FOR THE 2017 CALENDAR YEAR										

Schedule J (Form 990) 2017

efil	e GRAPHIC print - DO NOT	PROCESS As	Filed Data -									34931				
	nedule K orm 990)				on Tax-Exempt Bonds orm 990, Part IV, line 24a. Provide descriptions,						2017					
•		Complete if the		wered "Yes" to Form , and any additional i				scriptions,				'UI	/			
	tment of the Treasury	A Informatio		► Attach to Form 990 ((Form 990) and its).			m000				en to Pu				
Name	nal Revenue Service of the organization	Pillorillatio	ii about Schedule i	(TOTHI 990) and its	ilisti uction	15 15 at <u>ww</u>	w.ns.gov/101	111990 .	Employ	yer iden		nspecilo n number				
WES ⁻	TMINSTER COLLEGE								25-09	81156						
Pa	rt I Bond Issues															
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue	price	(f) Descript	ion of purpose	(g) De	feased	beha	(h) On behalf of issuer		(i) Pool financing		
									Yes	No	Yes		Yes	No		
	NEW WILMINGTON MUNICIPAL AUTHORITY-SERIES 2017	25-1739535	64920RBJ1	02-01-2017	31,4	415,514 SE	SEE PART V		165	X	163	X	163	X		
Pai	rt III Proceeds					J.										
						A		В	С				D			
1	Amount of bonds retired															
2	Amount of bonds legally defeas															
3	Total proceeds of issue					31,415,51	.4									
4	·					1,775,00	0									
5	Capitalized interest from procee															
6	Proceeds in refunding escrows															
7	Issuance costs from proceeds .					288,36	55									
8	Credit enhancement from proce															
9	Working capital expenditures from															
10	Capital expenditures from proce				10,969,655											
11	Other spent proceeds															
12	Other unspent proceeds					3,743,70	16									
13	Year of substantial completion .															
					Yes	No	Yes	No	Yes	No		Yes	 -'	No		
14	Were the bonds issued as part of				Х								\perp			
15	Were the bonds issued as part of	of an advance refund	ing issue?			Х										
16	Has the final allocation of proce	eds been made? .				х										
17	Does the organization maintain proceeds?	adequate books and	records to support the	he final allocation of	Х											
Par	t IIII Private Business Us															
						A		В	С				D			
1	Was the organization a partner financed by tax-exempt bonds?				Yes	No X	Yes	No	Yes	No		Yes		No		
2	Are there any lease arrangement property?	nts that may result in	private business use	e of bond-financed		х										
For E	Panerwork Reduction Act Notice	ce, see the Instruct	tions for Form 990		Ca	t No 5019	3 E			S	chadula	K (For	m 990	1 2017		

unrelated trade or business activity carried on by your organization, another section 501(c)(3)

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

organization, or a state or local government

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?

Rebate not due yet?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate Is the bond issue a variable rate issue?

Was the hedge superintegrated? Was the hedge terminated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

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

9

а

c

Part IV

Arbitrage

	i mate basiless ase (continued)								
			Α		В	(С		D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		×						
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?								
С	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	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?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %						
5	Enter the percentage of financed property used in a private business use as a result of								

0 %

0 %

C

No

Yes

Schedule K (Form 990) 2017

No

Yes

Х

Х

Yes

No

Х

No

Χ

Χ

Χ

Х

Α

Yes

Χ

Χ

Page 2

Schedule K (Form 990) 2017

period?

Part V

Part VI

INFORMATION

Return Reference

SCHEDULE K SUPPLENTAL

Arbitrage (Continued)

the GIC satisfied?

requirements of section 148? . . .

Was the regulatory safe harbor for establishing the fair market value of

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

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

		Yes	No	Yes	No	Yes
а	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х			
b	Name of provider					

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

COLLEGE REVENUE NOTE, SERIES 2011, CERTAIN CAPITAL PROJECTS OF THE BORROWER, FUNDING A DEBT

SERVICE RESERVE FUND FOR THE BONDS, AND PAYMENT OF COSTS OF ISSUANCE OF THE BONDS

Explanation THE PROCEEDS OF THE SALE OF THE BONDS WERE USED TO FINANCE ALL OF THE COSTS OF REFUNDING THE AUTHORITY'S OUTSTANDING REVENUE BONDS, SERIES 2007, REFUNDING THE AUTHORITY'S OUTSTANDING

Х

Х

Α

No

Yes

Χ

R

No

Yes

No

C

No

Yes

Yes

Page 3

No

D

Nο

Yes

Return Reference	Explanation
PART IV, LINE 2CA	THE REBATE COMPUTATION WAS PERFORMED ON MAY 1, 2018

•	Complete	e if the orga	nization a	ns with Ir				_			1B No	1545	-0047
	▶Info		► Attac	c, or Form 99 h to Form 990	0-EZ, Part V,) or Form 99	, line 38a or 4 0-EZ.	40b.	•		5,	20	1	7
		ormation abo		le L (Form 99 <u>www.irs.gov</u> ,) and its insti	ruction	s is	at	(pen		ublic
LOTHINGTER COL								•	er ide	entifica	ition r	umb	er
	ss Benefit Trar						rganızat	ions	only)	ne 40h			
	Name of disqualr			Relationship be				:) D	escript insacti	on of) Cor es	rected?
4958 3 Enter the an Part II Loa	nount of tax incurion of tax, if an ins to and/or inserted an amount of (b) Relationship with organization	ry, on line 2, a From Interestation answern Form 990, F (c) Purpose	bove, reimbested Per red "Yes" on Part X, line 5	sons. Form 990-EZ,	rganization .			IV,	line 26 (I Appro	\$s, or if h) ved by rd or nittee?	(ganıza i)Writ	ten
			То	From			Yes	No	Yes	No	Yes		No
								-					
Total Part IIII Grai	nts or Assistar	an Danafiki	T-+		\$								
	plete of the organistic person (b	nization ans	between n and the		90, Part IV,	(d) Type (of assist	ance	e	(e) Pu	rpose (of ass	ıstance

(a) Name of interested person (b) Relationship between interested person and the (c) Amount of transaction of transaction of organization	Complete if the organization	answered "Yes" on Forn	n 990, Part IV, line 28a	a, 28b, or 28c.		
organization revenues?	(a) Name of Interested person	between interested	` '	(d) Description of transaction	organiz	of zation's
Yes No					Yes	No
(1) R RICHARDSON HUSBAND OF PRESIDENT HUSBAND OF WITH EMPLOYMENT AS A COMMUNICATION STUDIES FACULTY ONO NO NO NO NO NO NO NO NO	(1) R RICHARDSON		·	WITH EMPLOYMENT AS A COMMUNICATION STUDIES		No
	1					

Explanation

Schedule L (Form 990 or 990-EZ) 2017

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

Return Reference

Part V

Supplemental Information

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493112008299 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2017 ▶ 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 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** WESTMINSTER COLLEGE 25-0981156 Part I **Types of Property** (a) (b) (c) (d) Check If Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art—Historical treasures Art—Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes . . Intellectual property . . 211,810 FAIR MARKET VALUE Χ Securities—Publicly traded . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution—Historic structures 14 Oualified conservation contribution—Other . Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . Collectibles . . . 18 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . . 23 Scientific specimens . . 24 Archeological artifacts . 25 Other ▶ (Χ 2,000 FAIR MARKET VALUE VIOLIN) Χ 26 Other ▶ (475 FAIR MARKET VALUE MISCELLANEOUS) 27 Other ▶ (Χ 70 FAIR MARKET VALUE EVENT TICKETS) 28 Other ▶ (__ Number of Forms 8283 received by the organization during the tax year for contributions 0 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 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 Nο b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) (2017) Cat No 51227J

Page 2

Schedule M (Form 990) (2017)

efile GRAPH	IC print - DO NOT PROCESS As Filed Data -	DLN: 93493112008299
SCHEDUL (Form 990 or EZ)	99()- Complete to provide information for response Form 990 or 990-EZ or to provide any ac ► Attach to Form 990 or 99 ► Information about Schedule O (Form 990 or 99	es to specific questions on Iditional information. 90-EZ. 0-EZ) and its instructions is at
Internal Revenue & Name of the org WESTMINSTER CO	nization LEGE	Employer identification number 25-0981156
Return Reference	O, Supplemental Information Explanat	ion
FORM 990, PART III, LINE 2	MAJOR IN MARKETING & PROFESSIONAL SALES (FORMERLY MA TRACK IN BUSINESS MINOR IN DATA SCIENCE MINOR IN LIT MINOR) THE COLLEGE BEGAN PROVIDING CLASSES TO THE CON NURSING PROGRAM THE DUAL ENROLLMENT PROGRAM DENTS CAN EARN UP TO A FULL YEAR OF COLLEGE CREDIT, IGH SCHOOL SOPHOMORE YEAR AND ENROLL AT WESTMINS TION DUAL ENROLLMENT IS NOW EARLY COLLEGE PROGRAM LYEAR OF TUITION FREE IF THEY BEGIN THEIR SOPHOMORE COLLEGE AFTER HIGH SCHOOL GRADUATION THE CLINICAL NEW ACADEMIC RESTRUCTURING - BEGAN 2018-19	ERARY STUDIES (FORMERLY THE ENGLISH ERTIFICATE STUDENTS IN THE UPMC - JAMES IS NOW THE EARLY COLLEGE PROGRAM WHERE STU FUITION FREE, IF THEY BEGIN IN THEIR H FER COLLEGE AFTER THEIR HIGH SCHOOL GRADUA MI WHERE STUDENTS CAN ULTIMATELY GET A FUL YEAR AND END UP COMING TO WESTMINSTER

Return Explanation

Reference

FORM 990,
PART VI,
SECTION A,
LINE 1

THE EXECUTIVE COMMITTEE SHALL BE INVESTED WITH ALL THE POWERS OF AUTHORITY OF THE BOARD OF
TRUSTEES WHEN THE BOARD IS NOT IN SESSION EXCEPT AS MAY OTHERWISE BE PROVIDED IN THESE BY
LAWS, PROVIDED THAT THE EXECUTIVE COMMITTEE SHALL HAVE NO AUTHORITY TO RESCIND OR CANCEL A
NY RESOLUTION THERETOFORE ADOPTED BY THE BOARD OF TRUSTEES RELATING TO THE MEMBERSHIP, POW
FRS OR DUTIES OF THE EXECUTIVE COMMITTEE OR TO AMEND THE ARTICLES OF INCORPORATION. THE FX

ECUTIVE COMMITTEE DID NOT EXERCISE THIS AUTHORITY DURING THE FISCAL YEAR

990 Schedule O, Supplemental Information Return Reference Explanation

FORM 990.

PART VI,	HE SAME FROM THE PRESIDENT THE COLLEGE'S TRUSTEES ARE PROVIDED WITH ACCESS TO A SECURE WE
SECTION B,	BSITE WHERE THEY ARE ABLE TO REVIEW A DRAFT OF THE COLLEGE'S TAX RETURN FOR THE YEAR ENDED
LINE 11B	JUNE 30, 2018 THE COLLEGE'S TRUSTEES ARE INVITED TO PARTICIPATE IN A TELECONFERENCE WITH
	MEMBERS OF THE COLLEGE'S ADMINISTRATION WHO ARE RESPONSIBLE FOR PREPARING THE COLLEGE'S T
	AX RETURN DURING THE TELECONFERENCE, THE COLLEGE'S FINANCIAL ADMINISTRATORS REVIEW THE DR
	AFT OF THE TAX RETURN WEBSITE ACCESS TO A COMPLETE COPY OF THE FORM 990 IS PROVIDED TO TH
	E TRUSTEES PRIOR TO THE FILING OF THE RETURN WITH THE INTERNAL REVENUE SERVICE
J	

THE WESTMINSTER FINANCIAL MANAGEMENT TEAM REVIEWS THE FORM 990 AND SEEKS INPUT REGARDING T

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

Return Explanation
Reference

FORM 990,	THE GOVERNANCE COMMITTEE OF THE BOARD, WHOSE MEMBERS ARE INDEPENDENT, RECOMMENDS TO THE BO
PART VI,	ARD THE COMPENSATION OF THE PRESIDENT, AND, WITH THE PRESIDENT'S PARTICIPATION, THE COMPEN
SECTION B,	SATION OF THE COLLEGE'S OTHER KEY EMPLOYEES, BASED ON PERFORMANCE APPRAISALS AND A REVIEW
LINE 15	OF THE COMPENSATION REPORTED ON FORM 990 FOR THE COLLEGE'S PEER INSTITUTIONS

Return Explanation
Reference

FORM 990, GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILAB LE UPON REQUEST IN ADDITION, THE COLLEGE'S FINANCIAL STATEMENTS MAY BE VIEWED ON THE ELEC SECTION C, TRONIC MUNICIPAL MARKET ACCESS WEBSITE AT HTTP //EMMA MSRB ORG/

Return Explanation
Reference

FORM 990,
PART VII

HAVE NO VOTING RIGHTS MICHAEL ALEPRETE, JOHN BONOMO, HELEN BOYLAN, CARL CARPENTER, DOUGL
AS HILL, MATTHEW MCDONALD, JARRET VRABEL THE FOLLOWING MEMBERS SERVE ON THE WESTMINSTER BO
ARD OF TRUSTEES AS TRUSTEES EMERITI BUT HAVE NO VOTING RIGHTS GEORGE BERLIN, ROBERT BRUCE
, LEONARD CARROLL, JAMES DEWAR, ROBERT GARDNER, GEORGE GREER, CAROLYN JONES, ROBERT PATTON
. WILLIAM RANKIN, RICHARD WHITE, MARTHA WILE, DONALD CARDINAL WUERL

Return Explanation
Reference

LINE 9

FORM 990, CHANGES IN UNRECOGNIZED PENSION BENEFIT PLAN COSTS 718,220
PART XI,

Return Reference	Explanation
FORM 990, PART XII, QUESTION 2, FINANCIAL STATEMENTS AND REPORTING	THE COLLEGE'S FINANCE, AUDIT AND COMPLIANCE COMMITTEE ASSUMES THE RESPONSIBLITY FOR OVERSI GHT OF THE AUDIT AND OF ITS FINANCIAL STATEMENTS AND ITS SELECTION OF THE INDEPENDENT AUDI TORS THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -										DLN: 93493	112008	3299
SCHEDULE R (Form 990) Department of the Treasury		Related O	zation ar	swered "Yes ▶ Attach to	s" on Form Form 990.	990, Parl	IV, line 33	, 34, 35b,	, 36, or			Open t	17 o Public	
Internal Revenue Service Name of the organization WESTMINSTER COLLEGE										oloyer identif	ication		ection	
Part I Identification	of Disregarded E	ntities Complete ıf t	ne organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3		981156				
Name, address, and	(a) EIN (if applicable) of disre	egarded entity		(b) Primary a			c) nicile (state n country)	(d) Total inc	ome	(e) End-of-year as	ssets	(1 Direct co ent	ntrolling	
Part II Identification of related tax-exen	of Related Tax-Ex		S Comple	te if the org	anızatıon	answered	"Yes" on F	orm 990,	Part I\	V, line 34 be	cause	it had one or	more	
Name, address, an	(a) d EIN of related organizati	on	Prima	(b) ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod			(e) harity status on 501(c)(3))	Dii	(f) rect controlling entity	Section (13) cor enti	512(b) ntrolled
For Paperwork Reduction Ac	t Notice see the Inc	structions for Earm 06	100			t No 5013	257				S ch.	edule R (Form	990) 20	117

(a) Name, address, and related organizat		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predomina income(rela unrelatec excluded fr tax unde sections 5: 514)	ted, total incom l, om r		(† Dispropi allocai	rtionate	(1) Code V-L amount in 20 of Schedule (Form 10)	box m F	(j) eneral d anagin artner?	or Perci	(k) entage ership
					31.,			Yes	No		Y	es No	-	
													<u> </u>	
											_	_	+	
											- 1	- 1		
rt IV Identification of Related Or because it had one or more re (a)	elated organizations treated as (b)	a corporation	on or tru	st during th	ne tax year	(e)	(f)	<u> </u>	(g)		(h)		((i) 512(l
because it had one or more re	lated organizations treated as	a corporation	(c) Legal omicile or foreign	st during th	(d) ct controlling			Share		-of- Pe		ge	Section (13) co ent	n 512(l ontrolle tity?
because it had one or more re (a) Name, address, and EIN of	elated organizations treated as (b)	a corporation	on or tru: (c) Legal omicile	st during th	(d) ct controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) ercenta	ge	Section (13) co	n 512(l ontrolle tity?
because It had one or more re (a) Name, address, and EIN of related organization	Primary activity	a corporation	on or true (c) Legal comicile or foreign country)	St during th	(d) ct controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) ercenta	ge	Section (13) co ent	n 512(lontrolle tity?
because It had one or more re (a) Name, address, and EIN of related organization	Primary activity	a corporation	on or true (c) Legal comicile or foreign country)	St during th	(d) ct controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) ercenta	ge	Section (13) co ent	n 512(lontrolle tity?
because It had one or more re (a) Name, address, and EIN of related organization	Primary activity	a corporation	on or true (c) Legal comicile or foreign country)	St during th	(d) ct controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) ercenta	ge	Section (13) co ent	n 512(lontrolle tity?
because It had one or more re (a) Name, address, and EIN of related organization	Primary activity	a corporation	on or true (c) Legal comicile or foreign country)	St during th	(d) ct controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) ercenta	ge	Section (13) co ent	n 512(lontrolle tity?
because It had one or more re (a) Name, address, and EIN of related organization	Primary activity	a corporation	on or true (c) Legal comicile or foreign country)	St during th	(d) ct controlling	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) ercenta	ge	Section (13) co ent	n 512(lontrolle tity?

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							

Page 3

No

No

No

No

No

No

No No

No

No

11

1m

1n

10

1q

1r

1s

Schedule R (Form 990) 2017

(d)

Method of determining amount involved

D	GIT, grant, or capital contribution to related organization(s)	"	140
С	Gift, grant, or capital contribution from related organization(s)	1c	No
d	Loans or loan guarantees to or for related organization(s)	1d	No
е	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)

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

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

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

(a)

Name of related organization

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

(b)

Transaction

type (a-s)

(c)

Amount involved

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

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

- See manaced organization See manaced on a regarding exclusion															
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	section 501(c)(3) organizations? m		(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No			
Schedule R (Form 990) 2017												0) 2017			

Schedule R (Form 990) 2017 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2017