#### \*\* FORM 990 PUBLIC DISCLOSURE COPY \*\*

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**Return of Organization Exempt From Income Tax** 

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

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

and ending JUN 30, 2018 JUL 1, 2017 A For the 2017 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number Address change CHATHAM UNIVERSITY Name change 25-0717890 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ WOODLAND ROAD 412-365-1100 termin-ated 92,597,838. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return PITTSBURGH, PA 15232 H(a) Is this a group return Applica-F Name and address of principal officer: DR. DAVID L. FINEGOLD ∐Yes Ա∐No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes Tax-exempt status: X = 501(c)(3) 501(c) ( ) ◀ (insert no.) L 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.CHATHAM.EDU **H(c)** Group exemption number ▶ L Year of formation: 1869 M State of legal domicile: PA **K** Form of organization: **X** Corporation Association Other -Part I Summary Briefly describe the organization's mission or most significant activities: PROVISION OF UNDERGRADUATE AND Activities & Governance GRADUATE EDUCATION. Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. 29 Number of voting members of the governing body (Part VI, line 1a) 27 Number of independent voting members of the governing body (Part VI, line 1b) 1634 5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 500 Total number of volunteers (estimate if necessary) 6 37,722. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a -21,821. b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 6,796,339. 5,225,831. Contributions and grants (Part VIII, line 1h) Revenue 66,295,757. 58,377,849 Program service revenue (Part VIII, line 2g) 2,926,806. 4,608,678. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 -106,296.-234,656. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 66,424,190. 77,466,118. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ........ 13,875,299. 18,495,179. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 33,547,309. 34,330,819. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 26,829,517. 28,026,135. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 74,252,125. 80,852,133. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -3,386,015. -7,827,935. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 221,154,903. 219,918,347. 20 Total assets (Part X, line 16) 86,880,245. 86,661,132. 21 Total liabilities (Part X, line 26) Net/ 133,038,102. 134,493,771. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign WALTER FOWLER, SENIOR VP FINANCE & ADMIN Here Type or print name and title PTIN Date Print/Type preparer's name Preparer's signature SUSAN M. KIRSCH SUSAN M. KIRSCH P00341397 Paid 25-1408703 Firm's name SCHNEIDER DOWNS & CO., INC. Preparer Firm's EIN Firm's address ONE PPG PLACE SUITE 1700 Use Only Phone no. (412)261-3644 PITTSBURGH, PA 15222 X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  CHATHAM UNIVERSITY PREPARES WOMEN AND MEN TO BE WORLD READY: TO BUILD
	LIVES OF PURPOSE AND VALUE AND FULFILLING WORK. IN ADDITION TO
	APPROPRIATE PROFESSIONAL SKILLS AND LIBERAL ARTS LEARNING, CHATHAM
	BELIEVES THAT WORLD READINESS MEANS BEING AN INFORMED AND ENGAGED
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 52,978,578 including grants of \$ 18,495,179 ) (Revenue \$ 59,032,257 )
	ACADEMIC AND INSTRUCTIONAL EDUCATION: SEE SCHEDULE O
4b	(Code: ) (Expenses \$ 3,005,175 • including grants of \$ ) (Revenue \$ 7,263,500 • )
40	AUXILIARY SERVICES: SEE SCHEDULE O
4c	(Code:) (Expenses \$
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ► 55,983,753.
	Form <b>990</b> (2017

17520508 786250 24120-24000

#### Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," <i>complete Schedule D, Part V</i>	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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 in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		77	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Х	37
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		Х	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Λ	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			х
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40	Х	
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Δ.	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	4-7		х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		_ ^
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		х
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	40		Х
	complete Schedule G, Part III	19		12

Form **990** (2017)

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

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
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	Х	
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	Х	
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	Х	
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	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			l
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			.,
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			37
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			X
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Δ.
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	00-		Х
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		- 22
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28c	х	
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
29	Did the organization receive contributions of art. historical treasures, or other similar assets, or qualified conservation	29	21	
30	, , , , , , , , , , , , , , , , , , , ,	30		х
31	contributions? If "Yes," complete Schedule M	30		
01	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<del>  • • • • • • • • • • • • • • • • • • •</del>		
<u></u>	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
-	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
٠.	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
-	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

#### Part V | Statements Regarding Other IRS Filings and Tax Compliance

	Check it Schedule O contains a response of note to any line in this Fart v					
					Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a				
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r					
	(gambling) winnings to prize winners?	;	 I	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		1.62.4			
	filed for the calendar year ending with or within the year covered by this return		L			
b				2b	Х	
		s)			77	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule		ı	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•		37	
		accou	nt)?	4a	Λ	
b	If "Yes," enter the name of the foreign country: CAYMAN ISLANDS					
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A			_		v
				$\overline{}$		
			ľ			Δ
			i i	5c		
6a						. v
			ı	ба		Λ
D	•		-	Ch		
7				бb		
7	Organizations that may receive deductible contributions under section 170(c).	rvione r	provided to the payor?	70		x
				-		21
		in line 1a. Enter -0- if not applicable in lin				
C				70		x
А	15 10 4 11 11 11 11 11 11 11 11 11 11 11 11 1	1		-		
			-+2	76		х
f			ı	$\overline{}$		
					N/	A
			ı	$\neg$		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained					
				8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?		N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	Gross income from members or shareholders N/A	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)					
	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 $\frac{N}{A}$	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		37/3			
а	Is the organization licensed to issue qualified health plans in more than one state?		N/A	13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1.				
	organization is licensed to issue qualified health plans					
	Enter the amount of reserves on hand			44		v
				-		
b	if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e U			000	(2017)
				LUII	ココリ	(2017)

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

						Δ
Sec	tion A. Governing Body and Management					
		1 1	0 0 E		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	29			
	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	27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with any other				
	officer, director, trustee, or key employee?			2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the	ne direct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?	•		3		X
4	Did the organization make any significant changes to its governing documents since the prior Form			4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as			5		Х
6	Did the organization have members or stockholders?		····	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a		····			
	more members of the governing body?			7a		Х
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,		···· ├			
				7b		х
8	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year.					
		•		8a	Х	
a				8b	X	
b			···· ⊦	on	21	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be recovered in Section A, who cannot be recovered in Section A, who cannot be recovered in Section A.					Х
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		21
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	revenue Coae.)				
			г		Yes	No X
	Did the organization have local chapters, branches, or affiliates?		├	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such or					
	and branches to ensure their operations are consistent with the organization's exempt purposes? $\ _{\cdot }$			10b	77	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	dy before filing the form	?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a			⊢	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		L	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," describe				
	in Schedule O how this was done		L	12c	Х	
13	Did the organization have a written whistleblower policy?		L	13	X	
14	Did the organization have a written document retention and destruction policy?		L	14	X	
15	Did the process for determining compensation of the following persons include a review and approve	al by independent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•				
а	The organization's CEO, Executive Director, or top management official		L	15a	Х	
b	Other officers or key employees of the organization		[	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a				
	taxable entity during the year?		[	16a	Х	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluation					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nization's				
	exempt status with respect to such arrangements?		Г	16b	Х	
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶PA , CA					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Section 501(c)(3)s or	nly) av	/ailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.	. (////	.,			
		in Schedule O)				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co		and	finan	cial	
	statements available to the public during the tax year.	st of intoloot policy,			- /-	
20	State the name, address, and telephone number of the person who possesses the organization's bo	ooks and records.				
	JENNIFER HOERSTER - (412)365-1145					
	WOODLAND ROAD, PITTSBURGH, PA 15232					
	,,					

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

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

X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Content of the compensation from related organizations below line)   TRUSTEE   TRUST	(A)	(B)	(C)				iout	(D)	(E)	(F)	
Note   Provided   Pr	Name and Title	Average	(do	Position			) than	one	Reportable	Reportable	Estimated
Compensation			box	, unle	ss pe	rson	is bot	h an	· ·	•	
TRUSTEE		1	-	Cei ai	lu a u	liecic	Ji/ ii us	100)			
TRUSTEE		1 '	lirecto							•	
TRUSTEE		1	e or c	stee			satec		Ü	(***2/1099*****130)	
TRUSTEE		1	truste	al trus		yee	mper		(** =/ *********************************		_
TRUSTEE		"	id ual	ution	-e	oldma	est co o yee	ler.			organizations
(1) G, NICHOLAS BECKWITH III 3,00 X 0. 15,000. 0. (2) PAMELA BRADLEY 3.00 TRUSTEE (EXITED 6/2018) 0.00 X 0. 0. 0. 0. 0. (3) BROKS BROADHURST 3.00 X 0. 0. 0. 0. 0. (4) LOUISE R, BROWN 3.00 X 0. 0. 0. 0. (4) LOUISE R, BROWN 3.00 TRUSTEE 0.00 X 0. 0. 0. 0. 0. (5) JANE BURGER 3.00 TRUSTEE 0.00 X 0. 0. 0. 0. 0. (6) ANNETE CALGARO 3.00 TRUSTEE 0.00 X 0. 0. 0. 0. 0. 0. (6) ANNETE CALGARO 3.00 TRUSTEE 0.00 X 0. 0. 0. 0. 0. 0. 0. (7) MARTHA H, CARSON 3.00 TRUSTEE 0.00 X 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.		1 '	Indiv	Instit	Office	Key 6	High emp	Form			
TRUSTER (EXITED 6/2018)	(1) G. NICHOLAS BECKWITH III										
TRUSTEE (EXITED 6/2018)	TRUSTEE		Х						0.	15,000.	0.
3.00   X	(2) PAMELA BRADLEY										
TRUSTEE	TRUSTEE (EXITED 6/2018)		X						0.	0.	0.
(4) LOUISE R. BROWN	(3) BROOKS BROADHURST										
TRUSTEE	TRUSTEE		Х						0.	0.	0.
TRUSTEE	(4) LOUISE R. BROWN										
TRUSTEE	TRUSTEE		X						0.	0.	0.
Color	(5) JANE BURGER										
TRUSTEE	TRUSTEE		Х						0.	0.	0.
TRUSTEE	(6) ANNETTE CALGARO										
TRUSTEE	TRUSTEE		X						0.	0.	0.
RESTRICT	(7) MARTHA H. CARSON								_	_	_
TRUSTEE	TRUSTEE		X						0.	0.	0.
Solution	(8) CARLA CASTAGNERO		_							_	_
TRUSTEE			X						0.	0.	0.
TRUSTEE	(9) MICHELE RONE COOPER										
TRUSTEE			Х						0.	0.	0.
TRUSTEE											•
TRUSTEE			Х						0.	0.	0.
TRUSTEE (EXITED 6/2018)   3.00   X   0.00   0.00   X	(11) SIGO FALK										•
TRUSTEE (EXITED 6/2018)  (13) LAURA FISHER  TRUSTEE  TRUSTEE  (14) FREDDIE FU, M.D., D.SC. (HON)  TRUSTEE  (15) STEPHEN H. GREER  TRUSTEE  (16) DAVID M. HALL  TRUSTEE (ENTERED 10/2017)  (17) SARAH JUGOVIC  TRUSTEE  (0.00 X 0.00 X 0.00 X 0.00 0.00 0.00 0.00 X 0.00 0.00 X 0.00 0.00 X 0.00 0.00 X 0.00			Х						0.	0.	0.
TRUSTEE			١								
TRUSTEE 0.00 X 0. 0. 0. 0. (14) FREDDIE FU, M.D., D.SC. (HON) 3.00 X 0. 0. 0. 0. (15) STEPHEN H. GREER 3.00 TRUSTEE 0.00 X 0. 0. 0. (16) DAVID M. HALL 3.00 TRUSTEE (ENTERED 10/2017) 0.00 X 0. 0. 0. (17) SARAH JUGOVIC 3.00 TRUSTEE 0.00 X 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.			X						0.	0.	0.
(14) FREDDIE FU, M.D., D.SC. (HON)     3.00       TRUSTEE     0.00       (15) STEPHEN H. GREER     3.00       TRUSTEE     0.00       (16) DAVID M. HALL     3.00       TRUSTEE (ENTERED 10/2017)     0.00       (17) SARAH JUGOVIC     3.00       TRUSTEE     0.00											•
TRUSTEE 0.00 X 0. 0. 0. (15) STEPHEN H. GREER 3.00 X 0. 0. 0. 0. (16) DAVID M. HALL 3.00 TRUSTEE (ENTERED 10/2017) 0.00 X 0. 0. 0. (17) SARAH JUGOVIC 3.00 X 0. 0. 0. 0. 0. TRUSTEE 0.00 X 0. 0. 0. 0. 0. 0.			X						0.	0.	0.
(15) STEPHEN H. GREER  TRUSTEE  (16) DAVID M. HALL  TRUSTEE (ENTERED 10/2017)  (17) SARAH JUGOVIC  TRUSTEE  (18) DAVID M. HALL  TRUSTEE (ENTERED 10/2017)  (19) DAVID M. HALL  TRUSTEE (ENTERED 10/2017)  TRUSTEE  (19) DAVID M. HALL  TRUSTEE  (10) DAVID M. HALL  TRUSTEE  TRUSTEE  (10) DAVID M. HALL  TRUSTEE  TRUSTEE  (10) DAVID M. HALL  TRUSTEE  TRUSTEE			١								
TRUSTEE 0.00 X 0. 0. 0. (16) DAVID M. HALL 3.00 TRUSTEE (ENTERED 10/2017) 0.00 X 0. 0. 0. (17) SARAH JUGOVIC 3.00 TRUSTEE 0.00 X 0. 0. 0. 0.			X						0.	0.	0.
(16) DAVID M. HALL       3.00         TRUSTEE (ENTERED 10/2017)       0.00         (17) SARAH JUGOVIC       3.00         TRUSTEE       0.00         X       0.00         0.00       0.00			.,							_	_
TRUSTEE (ENTERED 10/2017)	-							_	0.	0.	0.
(17) SARAH JUGOVIC 3.00 X 0. 0. 0.									_	^	_
TRUSTEE 0.00 X 0. 0. 0.				_		_	_	_	0.	0.	0.
			_							_	_
		1 0.00	Å						0.	0.	

732007 11-28-17

Form **990** (2017

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (A) (C) (F) (D) (E) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (list any organizations compensation dividual trustee or director the hours for organization (W-2/1099-MISC) from the related nstitutional trustee (W-2/1099-MISC) organization organizations Key employee and related below organizations Officer line) 3.00 (18) JOANNE LAIPSON TRUSTEE 0.00 X 0 . 0. 0. (19) W. DUFF MCCRADY 3.00 0.00 X 0 0 . 0. TRUSTEE (AS OF 06/2018) 3.00 (20) JANE G. MURPHY, PH.D. 0 0.00 X 0. 0. TRUSTEE (21) STEPHANIE NOVOSEL 3.00 0.00 X 0 0 . TRUSTEE (ENTERED 10/2017) 0. (22) SANDRA RADER, DNP 3.00 0.00 0 X 0 TRUSTEE (ENTERED 10/2017) 0. 3.00 (23) HENRY J. SIMONDS 0.00 X 0 0. TRUSTEE 0. (24) MARY B. TEMPLETON ESQ. 3.00 0.00 X 0 0. 0. TRUSTEE 3.00 (25) NANCY FOLLETT WAICHLER 0.00 X 0 . 0. 0. TRUSTEE 3.50 (26) JENNIFER POTTER WINTON CHATR 0.00 X Х 0 0 0. 0. 15,000. 1b Sub-total 2,645,159. 442,329. 0. c Total from continuation sheets to Part VII, Section A 442,329. 2,645,159. 15,000. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 27 compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on X 3

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

#### Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PARKHURST DINING SERVICES		
P.O. BOX 644091, PITTSBURGH, PA 15264	FOOD SERVICE	3,442,340.
MOSITES CONSTRUCTION COMPANY, 4839		
CAMPBELLS RUN ROAD, PITTSBURGH, PA 15205	GENERAL CONTRACTOR	1,971,862.
INSIGHT INVESTMENTS, LLC, 260 N. CHARLES		
LINDGERG, SALT LAKE CITY, UT 84116	LEASING COMPANY	1,490,873.
ROTHSCHILD DOYNO ARCHITECTS	ARCHITECTURAL	
2847 PENN AVENUE, PITTSBURGH, PA 15222	SERVICES	448,590.
SPLASH MEDIA LLC		
PO BOX 97806, PITTSBURGH, PA 15227	ADVERTISING	425,069.
2 Total number of independent contractors (including but not limited to those liste		
\$100,000 of compensation from the organization > 32		

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2017)

Form 990 CHATHAM	JNIVERS.	T.T. ;	<u>Y</u>						25-071	7890
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	mple	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			((				(D)	(E)	(F)
Name and title	Average							Reportable	Reportable	Estimated
	hours	(c	heck	call t	that	арр	ly)	compensation	compensation	amount of
	per						Ė	from	from related	other
	week					yee		the	organizations	compensation
	(list any	ector				omplc		organization	(W-2/1099-MISC)	from the
	hours for	Individual trustee or director	gg.			Highest compensated employee		(W-2/1099-MISC)		organization
	related	stee	ruste		a)	pens				and related
	organizations	al tru	onal t		ploye	com				organizations
	below	Jivid	Institutional trustee	Officer	Key employee	ghest	Former			
	line)	Ĕ	Ë	JO.	δ.	Ξ̈́	요			
(27) ARADHNA OLIPHANT	3.50	٠,,		37				_	0	0
VICE CHAIR	0.00	Х		Х		_	_	0.	0.	0 .
(28) S. MURRAY RUST III	3.50									
VICE CHAIR	0.00	Х		Х				0.	0.	0.
(29) KENT MCELHATTAN	3.50									
TREASURER	0.00	Х		Х				0.	0.	0.
(30) BONNIE WESTBROOK VANKIRK	3.50									
SECRETARY (AS OF 06/2018)	0.00	Х		Х				0.	0.	0 .
(31) DAVID FINEGOLD	70.00									
PRESIDENT	0.00	Х		Х				379,228.	0.	82,459
(32) SEAN COLEMAN	60.00									
VP OF PLANNING & ASSISTANT SECRETARY	0.00			X				131,530.	0.	19,950
(33) WALTER B. FOWLER	60.00									
SR. VP-FINANCE & ADMIN	0.10	1		Х				259,052.	0.	44,159.
(34) DARLENE G. MOTLEY	60.00									
DEAN, SCHOOL OF ARTS, SCIENCES	0.00	1			Х			196,703.	0.	38,036.
(35) JENNA TEMPLETON	60.00									-
VP OF ACADEMIC AFFAIRS	0.00	1			Х			192,952.	0.	37,409.
(36) AMY BECHER	60.00							,		-
VP FOR ENROLLMENT MANAGEMENT	0.00	1			Х			164,064.	0.	22,653.
(37) PATRICIA DOWNEY	60.00							,		-
DEAN, SCHOOL OF HEALTH SCIENCES	0.00	1			Х			156,220.	0.	24,100.
(38) CAREY MILLER	60.00					$\vdash$	T	,		,
VP FOR UNIVERSITY ADVANCEMENT	0.00	1			Х			160,922.	0.	19,504
(39) DR. ESTHER L. BARAZZONE	70.00						H	, .	-	.,
PRESIDENT EMERITA	0.00	1				х		337,139.	0.	29,668
(40) WILLIAM T. CAMPBELL	60.00						$\vdash$	1		= 7,000
VP MARKETING & COMMUNICATION	0.00	1				х		171,005.	0.	34,753
(41) PAUL D. STEINHAUS	60.00					<del></del>	$\vdash$			0 = 7 / 0 0
CIO, DIRECTOR OF INFO TECH	0.00	1				х		143,036.	0.	31,249
(42) PETER WALKER	60.00						$\vdash$	113/0301	•	31,213
DEAN, FALK SCHOOL FOR SUSTAINABILITY	0.00	1				Х		210,371.	0.	38,679
(43) ZAUYAH WAITE, VP OF STUDENT	60.00						$\vdash$	210,371.	0.	30,013
AFFAIRS & DEAN OF STUDENTS	0.00	1				Х		142,937.	0.	19,710
AFFAIRS & DEAN OF STUDENTS	0.00			$\vdash$	<del> </del>		┢	142,557.	0.	17,710.
		1								
		$\vdash$	$\vdash$	$\vdash$	$\vdash$	$\vdash$	$\vdash$	-		
		1								
		$\vdash$	$\vdash$	$\vdash$	<u> </u>	$\vdash$	$\vdash$			
		-								
	<u> </u>									
T. I. B. I. W. G. III.								2 645 150		442 220
Total to Part VII, Section A, line 1c								2,645,159.		442,329.

# Form 990 (2017) CHATHAM Part VIII Statement of Revenue

		Check if Schedule O conta	ains a resp	onse	or note to any lin	e in this Part VIII			
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns	1	а					0.2 0.1
ran		Membership dues	Г.	b					
Ğ,		Fundraising events		c					
ar /		Related organizations	·····	d	238,666.				
s, G		Government grants (contributi		e	1,040,570.				
ion		All other contributions, gifts, grant	· -	1					
but		similar amounts not included abov		f	5,517,103.				
E O	q	Noncash contributions included in lines		•	439,814.				
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f				6,796,339.			
					Business Code				
Program Service Revenue	2 a	TUITION AND FEES			900099	59,032,257.	59,032,257.		
	b	AUXILIARY ENTERPRISES			900099	7,263,500.	7,263,500.		
	С								
eve	d								
og B	е								
<u> </u>	f	All other program service reve	nue						
	g	Total. Add lines 2a-2f			<b>&gt;</b>	66,295,757.			
	3	Investment income (including	dividends,	intere	est, and				
		other similar amounts)				1,511,209.		54,143.	1,457,066.
	4	Income from investment of tax	k-exempt b	ond p	roceeds				
	5	Royalties			<b></b>				
			(i) Re		(ii) Personal				
	6 a	Gross rents							
	b	Less: rental expenses							
		Rental income or (loss)	-234						
		Net rental income or (loss)				-234,656.		-16,421.	-218,235.
	7 a	Gross amount from sales of	(i) Secur		(ii) Other				
		assets other than inventory	13,228	,934.	2,073,000.				
	b	Less: cost or other basis							
		and sales expenses	11,879	,945.	324,520.				
		Gain or (loss)				2 22 450			2 22 462
		Net gain or (loss)			<b></b>	3,097,469.			3,097,469.
ne	8 a	Gross income from fundraising	•	ot					
Ven		including \$							
Other Rever		contributions reported on line	•	_					
her	h	Part IV, line 18							
ō		Less: direct expenses  Net income or (loss) from fund							
		Gross income from gaming ac							
	<i>3</i> a	Part IV, line 19							
	h	Less: direct expenses							
		Net income or (loss) from gam							
		Gross sales of inventory, less							
		and allowances		а					
	b	Less: cost of goods sold							
		Net income or (loss) from sales			<b>•</b>				
		Miscellaneous Revenue			Business Code				
	11 a				2239				
	b	'							
	С								
	d	All other revenue							
		Total. Add lines 11a-11d							
	12	Total revenue. See instructions.				77,466,118.	66,295,757.	37,722.	4,336,300.

#### Part IX | Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).									
Check if Schedule O contains a response or note to any line in this Part IX										
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to domestic organizations	46 455	46 455							
	and domestic governments. See Part IV, line 21	16,175.	16,175.							
2	Grants and other assistance to domestic	10 000 244	10 000 244							
	individuals. See Part IV, line 22	18,089,344.	18,089,344.							
3	Grants and other assistance to foreign									
	organizations, foreign governments, and foreign	200 660	200 660							
	individuals. See Part IV, lines 15 and 16	389,660.	389,660.							
4	Benefits paid to or for members									
5	Compensation of current officers, directors,	1,923,673.	1,288,404.	571,342.	63,927.					
	trustees, and key employees	1,923,073.	1,200,404.	3/1,342.	05,921.					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	315,716.	211,656.	93,533.	10,527.					
7	Other salaries and wages	26,019,175.	17,356,200.	7,804,691.	858,284.					
8	Pension plan accruals and contributions (include	20/015/1750	17733072000	7,001,0310	030/2010					
Ü	section 401(k) and 403(b) employer contributions)	1,782,475.	1,284,112.	426,959.	71,404.					
9	Other employee benefits	2,324,346.		835,247.	53,354.					
10	Payroll taxes	1,965,434.		546,555.	66,931.					
11	Fees for services (non-employees):	, = = = ,	, ,	, , , , , ,	,					
	Management									
	Legal	189,234.		189,234.						
	Accounting	80,135.		80,135.						
	Lobbying	47,534.	47,534.							
	Professional fundraising services. See Part IV, line 17									
f	Investment management fees	206,592.		206,592.						
	Other. (If line 11g amount exceeds 10% of line 25,									
	column (A) amount, list line 11g expenses on Sch O.)	6,782,290.			37,715.					
12	Advertising and promotion	1,355,568.		199,674.						
13	Office expenses	638,626.	367,234.	213,376.	58,016.					
14	Information technology									
15	Royalties	0.050.505	56 440	0 000 005						
16	Occupancy	2,959,727.	56,442.	2,903,285.	0.7. 520					
17	Travel	1,309,577.	944,573.	277,465.	87,539.					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials	00 046	30,783.	67 761	399.					
19	Conferences, conventions, and meetings	98,946. 2,308,484.	30,783.	67,764. 2,308,484.	399.					
20	Interest	2,300,404.		2,300,404.						
21	Payments to affiliates	6,365,189.	5,954,418.	410,771.						
22	Depreciation, depletion, and amortization	756,588.	56,087.	700,501.						
23 24	Other expenses. Itemize expenses not covered	7507500	30,007.	700,501.						
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)									
а	ACADEMIC DEPT PROGRAMS	2,405,756.	2,274,032.	131,724.						
b	RENTAL EXPENSE	1,066,833.	552,069.	505,168.	9,596.					
С	INTERNAL FOOD SERVICE	509,660.	406,891.	76,504.	26,265.					
d	SUPPLIES EXPENSE	484,286.	293,417.	190,869.						
е	All other expenses	461,110.		444,296.	16,814.					
25	Total functional expenses. Add lines 1 through 24e	80,852,133.	55,983,753.	23,507,609.	1,360,771.					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.									
	Check here if following SOP 98-2 (ASC 958-720)									

Part	<b>X</b>	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	11,384,420.	2	13,832,178.
	3	Pledges and grants receivable, net	1,549,968.	3	3,060,184.
	4	Accounts receivable, net	2,699,903.	4	2,743,133.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ध		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	613,011.	7	578,163.
<b>پ</b>	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	682,664.	9	489,520.
1	l0a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 209,086,862.			
	b	Less: accumulated depreciation 10b 86,339,653.	125,508,956.	10c	122,747,209.
1	11	Investments - publicly traded securities	47,648,509.	11	47,309,483.
	12	Investments - other securities. See Part IV, line 11	25,535,131.	12	25,961,723.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	 I5	Other assets. See Part IV, line 11	4,295,785.	15	4,433,310.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	219,918,347.	16	221,154,903.
	17	Accounts payable and accrued expenses	6,862,023.	17	6,619,064.
	18	Grants payable	1,253,872.	18	1,177,147.
	19	Deferred revenue	5,505,625.	19	6,230,234.
	20	Tax-exempt bond liabilities	59,574,182.	20	57,848,400.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	, ,	21	
	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
apil		Complete Part II of Schedule L		22	
ء ا	23	Secured mortgages and notes payable to unrelated third parties	6,348,095.	23	5,572,297.
	24	Unsecured notes and loans payable to unrelated third parties		24	
2	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	7,336,448.	25	9,213,990.
2	26	Total liabilities. Add lines 17 through 25	86,880,245.	26	86,661,132.
		Organizations that follow SFAS 117 (ASC 958), check here X and			
တ္		complete lines 27 through 29, and lines 33 and 34.			
2 2	27	Unrestricted net assets	38,837,446.	27	33,944,433.
gg 2	28	Temporarily restricted net assets	33,581,343.	28	38,416,698.
B 2	29	Permanently restricted net assets	60,619,313.	29	62,132,640.
ᇤ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
ᆼ		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
t 3	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž   3		Total net assets or fund balances	133,038,102.	33	134,493,771.
- 1	34	Total liabilities and net assets/fund balances	219,918,347.	34	221,154,903.

Form **990** (2017)

=	1000 (2017)				<u> </u>
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				Ш
1	Total revenue (must equal Part VIII, column (A), line 12)	1	77,46		
2	Total expenses (must equal Part IX, column (A), line 25)	2	80,85		
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,38		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	133,03		
5	Net unrealized gains (losses) on investments	5	4,84	1,6	84.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	134,49	3,7	71.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir				
	Act and OMB Circular A-133?	-	3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Х	

Form **990** (2017)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization CHATHAM UNIVERSITY 25-0717890 Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

2017.05060 CHATHAM UNIVERSITY

Total

#### Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	22,562,049.	6,271,722.	6,855,135.	5,079,922.	6,796,339.	47,565,167.
2	Tax revenues levied for the organ-						
	ization'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	22,562,049.	6,271,722.	6,855,135.	5,079,922.	6,796,339.	47,565,167.
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)						13,902,714.
	Public support. Subtract line 5 from line 4.						33,662,453.
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
7	Amounts from line 4	22,562,049.	6,271,722.	6,855,135.	5,079,922.	6,796,339.	47,565,167.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	4,291,087.	4,621,083.	4,465,123.	3,720,966.	4,087,476.	21,185,735.
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	***						68,750,902.
12	Gross receipts from related activities,						,741,958.
13	First five years. If the Form 990 is for		s first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	
800	organization, check this box and storection C. Computation of Publ		rcentage				<u></u>
	<u> </u>			- l (f)		44	48.96 %
	Public support percentage for 2017 (					14	45 00
15	Public support percentage from 2016					15	
Ioa	33 1/3% support test - 2017. If the content have The experience qualifies						x and ▶ X
h	stop here. The organization qualifies						
D	33 1/3% support test - 2016. If the c	•		•			IS DOX
170	and <b>stop here.</b> The organization qual						
17 a	10% -facts-and-circumstances tes	ū					·
	and if the organization meets the "fact		•	•	•	•	
J.	meets the "facts-and-circumstances"						
O	10% -facts-and-circumstances tes	ū				*	
	more, and if the organization meets the						
10	organization meets the "facts-and-circ			·	,		<b>\</b>
10	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions						

Schedule A (Form 990 or 990-EZ) 2017

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

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

Se	ction A. Public Support	, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First five years. If the Form 990 is for	r the organization's	s first, second, thi	rd, fourth, or fifth t	tax year as a secti	on 501(c)(3) organi:	zation,
_							<b>&gt;</b>
	ction C. Computation of Publ					11	
	Public support percentage for 2017 (					15	%
	Public support percentage from 2016 ction D. Computation of Investigation					16	%
	-					17	0/
	Investment income percentage for 20					18	<u>%</u>
	Investment income percentage from a a 33 1/3% support tests - 2017. If the						%
198							
	more than 33 1/3%, check this box a						
K	33 1/3% support tests - 2016. If the line 18 is not more than 33 1/3%, che	-					
20	Private foundation If the organization						

#### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (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.
- 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).
- 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).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

,-		Yes	No
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Pa	t IV Supporting Organizations (continued)			
	(continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	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		
	tion B. Type I Supporting Organizations			
	71 11 0 0		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		1
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	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?	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		<u> </u>
Sec	tion 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 yea(see instructions)	<b>!-</b>		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	tructions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in 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.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations		
1	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 co	mplete :	Sections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other				
	factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
	see instructions)	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by .035	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions)	6			
7	Check here if the current year is the organization's first as a non-functionall	y integr	ated Type III supporting org	ganization (see	
	instructions).				

Schedule A (Form 990 or 990-EZ) 2017

Par	rt V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	ion D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	S	
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 t	he organization is responsive	9	
	(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			
Secti	ion 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			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
С	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. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

Employer identification number

CHATHAM UNIVERSITY 25-0717890

Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	$\overline{X}$ 501(c)( $\overline{3}$ ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	on is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.						
General Rule							
•	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special Rules							
sections 509(a) any one contrib	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
year, total cont	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
year, contributi is checked, ent purpose. Don't	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization Employer identification number CHATHAM UNIVERSITY 25-0717890

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if add	ditional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
1		\$ 766,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
2		\$ 500,000.  Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
3		Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No. 4	Name, address, and ZIP + 4	\$ 300,000. Type of contribution  Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
5		Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
6		\$ 237,498. Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

CHATHAM UNIVERSITY 25-0717890

Parti	Contributors (see instructions). Use duplicate copies of Part I if add	itional space is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
7		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
8		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
9		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b)	(c) (d) Total contributions Type of contribution
10	Name, address, and ZIP + 4	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
	rumo, addi 655, und Eli TT	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
		Person Payroll Noncash (Complete Part II for

Name of organization Employer identification number

#### CHATHAM UNIVERSITY

25-0717890

Part II	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
3	419 SHARES OF BOEING CO STOCK		
		 s124,043.	12/26/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
5	2,878 SHARES OF STOCK		
		 \$\$\$	12/13/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		_	
723453 11-0		Schedule B (Form 9	90, 990-EZ, or 990-PF) (2017)

Name of organ	nization			Employer identification number	
СНДПНД	M UNIVERSITY			25-0717890	
Part III	Exclusively religious, charitable, etc., con	tributions to organizations descr	ibed in section 501(c)(7), (	8), or (10) that total more than \$1,000 for	
	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious	columns (a) through (e) and the is. charitable. etc contributions of \$1.0	tollowing line entry. For orgar 200 or less for the year. (Enter this in	nizations	
	Use duplicate copies of Part III if addition		Chick this ii		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held	
-					
-		(e) Transfer o	£ miff		
	Transferee's name, address, a	nd ZIP + 4	Relationship o	of transferor to transferee	
-					
(a) No.	0.17		(1)		
Part I	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held	
-					
-		(a) Transfer a	£ n.:41		
	(e) Transfer of gift				
-	Transferee's name, address, and ZIP + 4		Relationship o	of transferor to transferee	
-					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held	
Part I	(4)				
-					
-		(e) Transfer o	f aift		
	Transferee's name, address, a		_	of transferor to transferee	
-	mansieree 3 name, address, a		Helationship		
-					
(a) No.	(b) Purpose of gift	(c) Use of gift	(d)	Description of how gift is held	
Part I				·	
-					
-		(e) Transfer o	f gift		
	Transferee's name, address, a			of transferor to transferee	
-	Transfer do diffundi dadi dagi u		. Gladionomp C		
-					
ı					

#### **SCHEDULE C**

(Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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) organiza	tions: Complete Part III.			
	ne of organization			Emp	loyer identification number
	CHATHAM	UNIVERSITY			25-0717890
Pa	art I-A Complete if the org	ganization is exempt unde	er section 501(c)	or is a section 527 of	organization.
	·				
1	Provide a description of the organization	zation's direct and indirect politica	al campaign activities i	n Part IV.	
2	Political campaign activity expendit	tures		<b>&gt;</b>	\$
	Volunteer hours for political campa				
Pa	art I-B Complete if the org	ganization is exempt unde	er section 501(c)(	(3).	
1	Enter the amount of any excise tax				<b>B</b>
	Enter the amount of any excise tax				
	If the organization incurred a section				
	a Was a correction made?				
k	If "Yes." describe in Part IV.				
Pa	art I-C Complete if the org	ganization is exempt unde	er section 501(c),	except section 501	(c)(3).
1	Enter the amount directly expende	d by the filing organization for sec	tion 527 exempt funct	tion activities	\$
2	Enter the amount of the filing organ	nization's funds contributed to oth	er organizations for se	ection 527	
	exempt function activities		-	<b>&gt;</b>	\$
3	Total exempt function expenditures				
	line 17b			<b>&gt;</b>	\$
4	Did the filing organization file Form				
5	Enter the names, addresses and er				
	made payments. For each organiza			•	
	contributions received that were pr	omptly and directly delivered to a	separate political orga	anization, such as a separ	ate segregated fund or a
	political action committee (PAC). If	additional space is needed, provi	de information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	. ,			filing organization's	contributions received and
				funds. If none, enter -0-	promptly and directly delivered to a separate
					political organization.
					If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2017

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Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).								
A Check Fig. 1 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,								
expenses, and sha	re of excess lobbying	expenditures).						
B Check ▶ ☐ if the filing organiza	ation checked box A a	nd "limited control" pro	ovisions apply.					
	its on Lobbying Expe ditures" means amo	enditures unts paid or incurred.	)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals			
1a Total lobbying expenditures to infl								
<b>b</b> Total lobbying expenditures to infl	uence a legislative bo	dy (direct lobbying)		47,534.				
c Total lobbying expenditures (add l	ines 1a and 1b)			47,534. 80,804,599.				
d Other exempt purpose expenditur	es			80,804,599.				
e Total exempt purpose expenditure	es (add lines 1c and 1	d)		80,852,133.				
f Lobbying nontaxable amount. Ent	er the amount from th	e following table in bot	h columns.	1,000,000.				
If the amount on line 1e, column (a)	or (b) is: The lob	obying nontaxable am	ount is:					
Not over \$500,000	20% of	the amount on line 1e.						
Over \$500,000 but not over \$1,00	0,000 \$100,0	00 plus 15% of the exc	ess over \$500,000.					
Over \$1,000,000 but not over \$1,5	500,000 \$175,0	00 plus 10% of the exc	ess over \$1,000,000.					
Over \$1,500,000 but not over \$17	,000,000 \$225,0	00 plus 5% of the exce	ess over \$1,500,000.					
Over \$17,000,000	\$1,000	,000.						
g Grassroots nontaxable amount (er	nter 25% of line 1f)			250,000.				
h Subtract line 1g from line 1a. If zer	ro or less, enter -0-			0.				
i Subtract line 1f from line 1c. If zero	o or less, enter -0			0.				
j If there is an amount other than ze reporting section 4911 tax for this	_	line 1i, did the organiz			Yes No			
	4-Year Av	eraging Period Under	section 501(h)					
(Some organizations t		501(h) election do not rate instructions for li	•	of the five columns b	elow.			
	Lobbying Expe	nditures During 4-Yea	ar Averaging Period					
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	(c) 2016	<b>(d)</b> 2017	(e) Total			
2a Lobbying nontaxable amount	1,000,000	1,000,000.	1,000,000.	1,000,000.	4,000,000.			
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.			
c Total lobbying expenditures	1,078.	46,111.	60,000.	47,534.	154,723.			
d Grassroots nontaxable amount	250,000	250,000.	250,000.	250,000.	1,000,000.			
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.			

Schedule C (Form 990 or 990-EZ) 2017

f Grassroots lobbying expenditures

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

For ea	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(k	) 
of the	lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
<u>d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		(=)	<u></u>	
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 504(c)(c)	on 501(c)(	(5), or se	ection	
	501(c)(6).			Vaa	Na
				Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	ne prior year on 501(c)(	2 ? 3 (5), or se		ne 3, i
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	ne prior year on 501(c)( "No," OF	2 ? 3 (5), or se		ne 3, i
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	ne prior year on 501(c)( "No," OF	2 ? 3 (5), or se		ne 3, i
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	ne prior year on 501(c)( "No," OF	2 ? 3 (5), or se		ne 3, i
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	ne prior year on 501(c)( "No," OF	2 7 3 (5), or se R (b) Par		ne 3, i
2 3 Part 1 2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	ne prior year on 501(c)( "No," OF	2 ? 3 (5), or se R (b) Par		ne 3, i
2 3 Part 1 2 a b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	ne prior year on 501(c)( "No," OF	2 3 (5), or se R (b) Par 1 2a 2b		ne 3, i
2 3 Parl 1 2 a b c	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total	ne prior year on 501(c)( "No," OF	2 3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, i
2 3 Part 1 2 a b c 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ne prior year on 501(c)( "No," OF	2 3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, i
2 3 Parl 1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  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 exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3.	ne prior year on 501(c)( "No," OF	2 3 (5), or se R (b) Par 1 2a 2b 2c		ne 3, i
2 3 Part 1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	ne prior year on 501(c)( "No," OF	2 3 (5), or se R (b) Par 2 2 2 2 3		ne 3, i
2 3 Part 1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  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 exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?	ne prior year on 501(c)( "No," OF	2 3 (5), or se R (b) Par 1 2a 2b 2c 3		ne 3, i
2 3 Part 1 2 a b c 3 4	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues and the amount on line 2c exceeds the amount on line 3, what portion of the except the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)	ne prior year on 501(c)( "No," OF	2 3 (5), or se R (b) Par 2 2 2 2 3		ne 3, i
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Part  1 2 a b c 3 4  5  Parti	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  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 exceeded sthe organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Supplemental Information  de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groups)	ne prior year on 501(c)( "No," OF	2 3 (5), or se R (b) Par 2a 2b 2c 3	t III-A, lir	ne 3, i
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#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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.

►Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

CHATHAM UNIVERSITY

Employer identification number 25-0717890

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, li	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose cor	nferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the or	rganization answered "Yes" on Form 990, Part	t IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or		
	Protection of natural habitat	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form of a	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic st		
d	Number of conservation easements included in (c) acquired		I I
_	listed in the National Register		
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the or	ganization during the tax
	year		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the perviolations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
U	Starr and volunteer riodrs devoted to monitoring, inspecting	, riandling of violations, and emorcing conserv	valion easements during the year
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservation	n easements during the year
•	S	iding of violations, and officially consolivation	reasonnerite daring the year
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170(h)(	4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organiza	•	
	conservation easements.		
Pai	t III Organizations Maintaining Collections	of Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered "Yes" on Forr	m 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statemen	nt and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	chibition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that desc	ribes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement an	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, $\boldsymbol{\varepsilon}$	education, or research in furtherance of public	service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tree	easures, or other similar assets for financial ga	ain, provide
	the following amounts required to be reported under SFAS $^{\circ}$		
а	Revenue included on Form 990, Part VIII, line 1		• \$
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.	Schedule D (Form 990) 2017

Pai	rt III   Organizations Maintaining C	collections of Ai	t, Historical Tr	easures, or Oth	er Simila	ar Asse	<b>ts</b> (continu	ıed)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant	use of its	collection	items
	(check all that apply):							
а	X Public exhibition	d	Loan or excl	nange programs				
b	X Scholarly research	е	Other					
С	X Preservation for future generations							
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's exc	empt purpo	ose in Par	t XIII.	
5	During the year, did the organization solicit o							
	to be sold to raise funds rather than to be ma						Yes	X No
Pai	t IV Escrow and Custodial Arran						line 9, or	
	reported an amount on Form 990, Pai		-					
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	s or other assets no	t included			
	on Form 990, Part X?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII							
	-	•	-				Amount	
С	Beginning balance				1c			
d	Additions during the year							
	Distributions during the year							
f	Ending balance							
2a	Did the organization include an amount on Fo						Yes	No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided on Part XI	II			
Pai	rt V Endowment Funds. Complete i	f the organization an	swered "Yes" on Fo	rm 990, Part IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance	81,976,069.	79,022,026.	88,198,856.	89,0	76,110.	67,	237,881.
b	Contributions	1,375,802.	940,819.	773,289.	3	90,759.	15,	727,198.
С	Net investment earnings, gains, and losses	6,856,311.	7,704,769.	-408,649.	2,6	91,612.	9,:	161,031.
d	Grants or scholarships	1,036,747.	1,028,704.	995,378.	9	28,220.	1,:	151,271.
е	Other expenditures for facilities							
	and programs	3,974,618.	4,407,788.	8,408,212.	2,8	80,720.	1,	668,318.
f	Administrative expenses	281,592.	255,053.	137,880.	1	50,685.		230,411.
g	End of year balance	84,915,225.	81,976,069.	79,022,026.	88,1	98,856.	89,	076,110.
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1g, column (a	i)) held as:				
а	Board designated or quasi-endowment	10.80	%					
b	Permanent endowment ► 63.38	%	_					
С	Temporarily restricted endowment ▶ 2	<del>5.8</del> 2 %						
	The percentages on lines 2a, 2b, and 2c sho							
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered for	the organiz	zation		
	by:						[·	res No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza							
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.					
Pai	t VI Land, Buildings, and Equipm	ent.						
	Complete if the organization answere	d "Yes" on Form 990	), Part IV, line 11a. S	ee Form 990, Part X	(, line 10.			
	Description of property	(a) Cost or o	ther (b) Cost	or other (c) A	Accumulate	ed	(d) Book	value
		basis (investn	,		epreciation			
1a	Land			9,927.				,927.
	Buildings		163,05					,255.
	Leasehold improvements			1,534.				,534.
d	Equipment		31,53	9,146.				,146.
e	Other				339,6			,653.
Tota	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0c.)		<b>▶</b> 12	2,747	,209.

D . \///	Investments -	0.1	O :::
Dart VIII	Invoctments -	()thor	SACHIFITIAGE
rail VIII	mivesiments -	· Ome	occurres.

rait viii investinents - Other Securities.						
Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.						
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value				
(1) Financial derivatives						
(2) Closely-held equity interests						
(3) Other						
(A) LIMITED PARTNERSHIPS	14,180,615.	END-OF-YEAR MARKET VALUE				
(B) HEDGE FUNDS	4,013,042.	END-OF-YEAR MARKET VALUE				
(C) REAL ESTATE INVESTMENT						
(D) FUND	7,768,066.	END-OF-YEAR MARKET VALUE				
(E)						
(F)						
(G)						
(H)						
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	25,961,723.					
Part VIII Investments - Program Related.						
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.				
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value				
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						

#### Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.

(8) (9)

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

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

#### Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	CAPITAL LEASE OBLIGATION	9,213,990.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	9,213,990.

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

Schedule D (Form 990) 2017

Reconciliation of Revenue per Audited Financial State		teturi	n.
Complete if the organization answered "Yes" on Form 990, Part IV, line 1		1	66,756,053.
<ul> <li>Total revenue, gains, and other support per audited financial statements</li> <li>Amounts included on line 1 but not on Form 990, Part VIII, line 12:</li> </ul>			00,730,033.
a Net unrealized gains (losses) on investments	2a 4,841,684		
b Donated services and use of facilities		-	
c Recoveries of prior year grants		1 !	
d Other (Describe in Part XIII.)		.	
e Add lines 2a through 2d		2e	7,768,939.
3 Subtract line 2e from line 1		3	58,987,114.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b 18,479,004		
c Add lines 4a and 4b		4c	18,479,004.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	77,466,118.
Part XII Reconciliation of Expenses per Audited Financial State		· Retu	ırn.
Complete if the organization answered "Yes" on Form 990, Part IV, line 1		<del></del>	65 200 201
1 Total expenses and losses per audited financial statements		1	65,300,384.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities		-	
b Prior year adjustments		-	
c Other losses d Other (Describe in Part XIII.)	0 007 055	-	
e Add lines 2a through 2d		2e	2,927,255.
3 Subtract line 2e from line 1		3	62,373,129.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			· · · · · ·
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
<b>b</b> Other (Describe in Part XIII.)	10 1 0 1	.	
c Add lines 4a and 4b	•	4c	18,479,004.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	80,852,133.
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a		4; Part	: X, line 2; Part XI,
PART III, LINE 1A:			
THE UNIVERSITY'S COLLECTIONS INCLUDE PAINT	INGS, PRINTS, PHOT	rogr	APHS,
SCULPTURES, DRAWINGS AND WATERCOLORS, AND I	DECORATIVE ARTS.	THE	SE ITEMS
ARE HELD FOR EDUCATIONAL, RESEARCH AND SCIE	ENTIFIC PURPOSES.	EA	CH OF THE
ITEMS IS CATALOGED, PRESERVED AND CARED FOR	R, AND ACTIVITIES	VER	IFYING
THEIR EXISTENCE AND ASSESSING THEIR CONDITI			
THE THE PROPERTY OF THE PROPER		0011	111(000)11
PART III, LINE 4:			
THE UNIVERSITY'S COLLECTIONS INCLUDE PAINT	INGS, PRINTS, PHOT	rogr	APHS,
SCULPTURES, DRAWINGS AND WATERCOLORS, AND I	DECORATIVE ARTS.	THE	SE ITEMS
ARE HELD FOR EDUCATIONAL, RESEARCH AND SCIE	ENTIFIC PURPOSES.	EA	CH OF THE
ITEMS IS CATALOGED, PRESERVED AND CARED FOR			
732054 10-09-17	, : ===================================		dule D (Form 990) 2017

Part XIII | Supplemental Information (continued)

THEIR EXISTENCE AND ASSESSING THEIR CONDITION ARE PERFORMED CONTINUOUSLY.

PURCHASES OF COLLECTION ITEMS ARE RECORDED AS OPERATING EXPENDITURES IN

THE YEAR IN WHICH THE ITEMS ARE ACQUIRED. CONTRIBUTED COLLECTION ITEMS

MAINTAINED AND HELD BY THE UNIVERSITY ARE NOT REFLECTED IN THE

CONSOLIDATED FINANCIAL STATEMENTS.

#### PART V, LINE 4:

THE UNIVERSITY'S ENDOWMENT CONSISTS OF VARIOUS INVESTMENT FUNDS

ESTABLISHED PRIMARILY FOR THE SUPPORT OF ITS MISSION. AS REQUIRED BY

GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, NET ASSETS ASSOCIATED WITH

ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED 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 PERMITS ELECTION OF A TOTAL
RETURN POLICY THAT ALLOWS A NONPROFIT TO CHOOSE TO TREAT A PERCENTAGE OF
THE AVERAGE MARKET VALUE OF THE ENDOWMENT'S PERMANENTLY RESTRICTED
INVESTMENTS AS INCOME EACH YEAR. HOWEVER, THE LONG-TERM PRESERVATION OF
THE REAL VALUE OF THE ASSETS MUST BE TAKEN INTO CONSIDERATION WHEN THE
BOARD ELECTS THE AMOUNT. ON AN ANNUAL BASIS, THE BOARD OF TRUSTEES MUST
ELECT, IN WRITING, A SPENDING RATE OF BETWEEN 2% AND 7%. FOR THE YEAR
ENDED JUNE 30, 2018, THE UNIVERSITY UTILIZED A 7.0% SPENDING RATE, BASED
ON A THREE-YEAR AVERAGE OF HISTORICAL ENDOWMENT MARKET VALUES. THE LAST
FISCAL YEAR USED TO DETERMINE THE TRANSFER FOR THE FISCAL YEAR ENDED JUNE
30, 2018 WAS THE FISCAL YEAR ENDED JUNE 30, 2017.

THE UNIVERSITY CLASSIFIES AS PERMANENTLY RESTRICTED NET ASSETS THE

ORIGINAL VALUE OF GIFTS DONATED TO THE ENDOWMENT AND THE ORIGINAL VALUE OF

Schedule D (Form 990) 2017

Part XIII | Supplemental Information (continued)

SUBSEQUENT GIFTS TO THE ENDOWMENT. THE UNDISTRIBUTED AMOUNTS EARNED ARE

INCLUDED IN TEMPORARILY RESTRICTED NET ASSETS. IN ACCORDANCE WITH ACT

141, THE UNIVERSITY HAS ADOPTED A WRITTEN INVESTMENT POLICY, OF WHICH A

SECTION SPECIFICALLY RELATES TO THE ENDOWMENT. THE UNIVERSITY CONSIDERS

THE FOLLOWING FACTORS IN MAKING A DETERMINATION TO SET A SPENDING RATE:

- 1. PROTECTING THE CORPUS OF THE ENDOWMENT FUND
- 2. PRESERVING THE SPENDING POWER OF THE ASSETS
- 3. OBTAINING MAXIMUM INVESTMENT RETURN WITH REASONABLE RISK AND OPERATIONAL CONSIDERATION
- 4. COMPLYING WITH APPLICABLE LAWS

#### PART X, LINE 2:

THE UNIVERSITY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3)

OF THE IRC AND HAS FURTHER BEEN DETERMINED TO BE A NONPRIVATE FOUNDATION

UNDER SECTIONS 509(A)(1) AND 170(B)(1)(A)(II) OF THE IRC. ACCORDINGLY, NO

PROVISION FOR TAXES HAS BEEN MADE IN THE ACCOMPANYING CONSOLIDATED

FINANCIAL STATEMENTS. THE UNIVERSITY IS ALSO EXEMPT FROM STATE INCOME TAX

UNDER APPLICABLE STATE STATUTES.

CHATHAM INVESTMENTS LLC HAS BEEN ORGANIZED AS AN LLC, WHICH IS NOT SUBJECT TO FEDERAL OR STATE INCOME TAXES. HOWEVER, THE TAXABLE INCOME OR LOSS FROM THE RENEWABLE ENERGY MANAGEMENT ACTIVITIES OF CHATHAM INVESTMENTS LLC IS INCLUDED IN THE INCOME TAX RETURN OF THE UNIVERSITY. ACCORDINGLY, ANY INCOME FROM CHATHAM INVESTMENTS LLC THAT IS UNRELATED TO THE EXEMPT PURPOSES OF THE UNIVERSITY IS TREATED AS UNRELATED BUSINESS INCOME ON THE UNIVERSITY'S TAX RETURN.

Part XIII | Supplemental Information (continued) THE UNIVERSITY FOLLOWS THE CODIFICATION TOPIC ON INCOME TAXES. THE TOPIC PRESCRIBES A MINIMUM RECOGNITION THRESHOLD AND MEASUREMENT METHODOLOGY THAT A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN IS REQUIRED TO MEET BEFORE BEING RECOGNIZED IN CONSOLIDATED FINANCIAL THE UNIVERSITY'S CONSOLIDATED STATEMENTS OF FINANCIAL POSITION AT JUNE 30, 2018 AND 2017 DO NOT INCLUDE ANY LIABILITIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS; FURTHER, THE UNIVERSITY HAS NO UNRECOGNIZED TAX BENEFITS. THE UNIVERSITY IS NO LONGER SUBJECT TO EXAMINATION OF ITS TAX RETURNS FOR YEARS BEFORE 2015. PART XI, LINE 2D - OTHER ADJUSTMENTS: RENTAL EXPENSES 2,927,255. PART XI, LINE 4B - OTHER ADJUSTMENTS: 18,479,004. STUDENT SCHOLARSHIPS/FINANCIAL AID PART XII, LINE 2D - OTHER ADJUSTMENTS: RENTAL EXPENSES 2,927,255. PART XII, LINE 4B - OTHER ADJUSTMENTS: 18,479,004. STUDENT SCHOLARSHIPS/FINANCIAL AID

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schools**

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

CHATHAM UNIVERSITY

Employer identification number 25-0717890

art I			
		YES	N
Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,			Г
other governing instrument, or in a resolution of its governing body?	1	Х	
Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Х	Г
Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the			П
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.			
	3	Х	
If you need more space, use Part II THE RACIALLY NONDISCRIMINATORY POLICY IS REFERENCED IN PRINT			П
DOCUMENTS AND IS PROMINENTLY DISCLOSED ON THE UNIVERSITY'S			
WEB PAGE.			
<u></u>			
Does the organization maintain the following?			
Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Х	Г
Records indicating the racial composition of the student body, faculty, and administrative start?     Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		X	H
• Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student	40		H
	4c	х	
admissions, programs, and scholarships?		X	H
d. Coming of all markeyint conditions are an institute of the latest the policity contributions of	4 -1		
d Copies of all material used by the organization or on its behalf to solicit contributions?  If you answered "No" to any of the above, please explain. If you need more space, use Part II.	4d	A	
	4d	Α	
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:		Α	
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:  Students' rights or privileges?	5a	A	_
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:  Students' rights or privileges?  Admissions policies?	5a 5b	A	Ī
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?	5a 5b 5c	A	
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?	5a 5b 5c 5d	A	
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?	5a 5b 5c 5d 5e	A	
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  Is use of facilities?	5a 5b 5c 5d 5e 5f	A	
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  Use of facilities?  Athletic programs?	5a 5b 5c 5d 5e 5f 5g	A	
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  Use of facilities?  Athletic programs?  Other extracurricular activities?	5a 5b 5c 5d 5e 5f 5g	A	
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  Use of facilities?  Athletic programs?	5a 5b 5c 5d 5e 5f 5g	A	
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  Use of facilities?  Athletic programs?  Other extracurricular activities?	5a 5b 5c 5d 5e 5f 5g		
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  Use of facilities?  Athletic programs?  Other extracurricular activities?  If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5a 5b 5c 5d 5e 5f 5g	X	
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  I Use of facilities?  Athletic programs?  Other extracurricular activities?  If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5a 5b 5c 5d 5e 5f 5g 5h		
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  If Use of facilities?  Athletic programs?  Other extracurricular activities?  If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.  Does the organization receive any financial aid or assistance from a governmental agency?  Has the organization's right to such aid ever been revoked or suspended?	5a 5b 5c 5d 5e 5f 5g 5h		
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:  Students' rights or privileges?  Admissions policies?  Employment of faculty or administrative staff?  Scholarships or other financial assistance?  Educational policies?  I Use of facilities?  Athletic programs?  Other extracurricular activities?  If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5a 5b 5c 5d 5e 5f 5g 5h		

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

Schedule E (Form 990 or 990-EZ) 2017

#### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

#### Statement of Activities Outside the United States

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

➤ Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

**Employer identification number** 

25-0717890

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

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

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

3 Activities per Region. (T	he following Parl	I, line 3 table ca	an be duplicated if additional space is	needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND					
THE CARIBBEAN -					
ANTIGUA & BARBUDA,					
ARUBA, BAHAMAS,	0	0	INVESTMENTS	N/A	5,100,499.
EUROPE (INCLUDING					
ICELAND & GREENLAND)					
- ALBANIA, ANDORRA,			CHATHAM STUDY ABROAD		
AUSTRIA, BELGIUM	0	0	PROGRAM (GREECE)	EDUCATIONAL ACTIVITIES	38,181.
CENTRAL AMERICA AND			CHATHAM STUDY ABROAD		
THE CARIBBEAN	0	0	PROGRAM(COSTA RICA)	EDUCATIONAL ACTIVITIES	36,730.
EUROPE (INCLUDING					
ICELAND & GREENLAND)					
- ALBANIA, ANDORRA,			CHATHAM STUDY ABROAD		
AUSTRIA, BELGIUM	0	0	PROGRAM (GERMANY/BELGIUM)	EDUCATIONAL ACTIVITIES	72,124.
EAST ASIA AND THE			CHATHAM STUDY ABROAD		
PACIFIC	0	0	PROGRAM (INDONESIA)	EDUCATIONAL ACTIVITIES	64,018.
SOUTH AMERICA -					
ARGENTINA, BOLIVIA,					
BRAZIL, CHILE,			OT FIELD EXPERIENCE		
COLUMBIA, ECUADOR,	0	0	(ECUADOR)	EDUCATIONAL ACTIVITIES	33,000.
EAST ASIA AND THE					
PACIFIC	0	0	MFA FIELD SEMINAR	EDUCATIONAL ACTIVITIES	39,572.
					37,6721
EUROPE (INCLUDING			SCHOLARSHIP FOR STUDY	L	
ICELAND & GREENLAND)	0	0	ABROAD	EDUCATIONAL ACTIVITIES	154,710.
3 a Sub-total	0	0			5,538,834.
<b>b</b> Total from continuation	0	0			234,950.
sheets to Part I		0			234,330.
c Totals (add lines 3a and 3b)	0	0			5,773,784.
and 3b)		<u> </u>			5,,,

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

Schedule F (Form 990) 2017

Schedule F (Form 990)		OMIAFVET		23-07170	90 Page
Part I Continuati	on of Activitie	s per Regio	n.(Schedule F (Form 990), Part I, line 3	3)	
<b>(a)</b> Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN		0	SCHOLARSHIP FOR STUDY ABROAD	EDUCATIONAL ACTIVITIES	55,510
DAGE AGEA AND MUD			GGUOLADGUID FOD GWUDY		
EAST ASIA AND THE PACIFIC	0		SCHOLARSHIP FOR STUDY ABROAD	EDUCATIONAL ACTIVITIES	148,959
TACIFIC	, ·	<u> </u>	ADROAD	EDUCATIONAL ACTIVITIES	140,555
			COULT ADOLL TO COULTY		
SOUTH AMERICA	0	0	SCHOLARSHIP FOR STUDY ABROAD	EDUCATIONAL ACTIVITIES	30,481
	1	, , , , , , , , , , , , , , , , , , ,			30,101
	1				
Totals	•				234,950

CHATHAM UNIVERSITY

Page 2

Schedule F (Form 990) 2017 CHATHAM UNIVERSITY

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

(i) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2017
(h) Description of noncash assistance						Sched
(g) Amount of noncash assistance					xempt	
(f) Manner of cash disbursement					recognized as tax-e	
(e) Amount of cash grant					foreign country, er	
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter  Enter total number of other organizations or entities	
(c) Region					ıs listed above that are r nsel has provided a sect r entities	
(b) IRS code section and EIN (if applicable)					recipient organization the grantee or cour other organizations or	)
1 (a) Name of organization					<ul> <li>Enter total number of recipient organizations listed a</li> <li>by the IRS, or for which the grantee or counsel has</li> <li>3 Enter total number of other organizations or entities</li> </ul>	ı

Schedule F (Form 990) 2017 CHATHAM UNIVERSITY

Schedule F (Form 990) 2017 CHATHAM UNIVERSITY

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)							Schedule F (Form 990) 2017
(b)	N/A	N/A	N/A	N/A			le F (F
(g) Description of noncash assistance	N/A	/A	N/A	N/A			Sched
(f) Amount of noncash assistance	0	0.1/A	0	0			
(e) Manner of cash disbursement	STUDENT ACCOUNT	55,510,STUDENT ACCOUNT	148,959.STUDENT ACCOUNT	30,481,STUDENT ACCOUNT			
(d) Amount of cash grant	154,710.	55,510.	148,959.	30,481.			
(c) Number of recipients	40	16	33	11			
(b) Region	EUROPE (INCLUDING ICELAND & GREENLAND)	CENTRAL AMERICA AND THE CARIBBEAN	EAST ASIA AND THE PACIFIC	SOUTH AMERICA			
(a) Type of grant or assistance (b) Region	STUDY ABROAD SCHOLARSHIP	STUDY ABROAD SCHOLARSHIP	STUDY ABROAD SCHOLARSHIP	STUDY ABROAD SCHOLARSHIP			

Page 4

### Schedule F (Form 990) 2017 (Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X 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; don't file with Form 990)	Yes	X 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)	X 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)	X 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)	X 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; don't file with Form 990)	Yes	X 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.

PART I, LINE 2:
THE OFFICES OF ENROLLMENT MANAGEMENT AND FINANCIAL AID OVERSEE THE
AWARDING OF BOTH NEED-BASED FINANCIAL AID AND MERIT-BASED SCHOLARSHIPS.
ONCE A STUDENT HAS COMPLETED THE FINANCIAL AID APPLICATION PROCESS AND IS
FOUND ELIGIBLE FOR NEED-BASED AND/OR MERIT BASED AID, THE STUDENT WILL
RECEIVE A FINANCIAL AID PACKAGE DETAILING THE COMBINATION OF SOURCES USED
TO PROVIDE FINANCIAL ASSISTANCE. GRANT FUNDS AWARDED TO STUDENTS ARE
APPLIED DIRECTLY TO THEIR STUDENT ACCOUNTS. USAGE IS MONITORED BY VIRTUE
OF DIRECT ACCOUNT POSTING.

## SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization CHATHAM U	CHATHAM UNIVERSITY	}					Employer identification number $25-0717890$
Part I General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate th	ie amount of the grants	or assistance, the	grantees' eligibility	y for the grants or ass	istance, and the selec	tion
criteria used to award the grants or assistance?	istance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for mon.	itoring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Domestic Organ	izations and Domestiv	c Governments. C	omplete if the orga	anization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	\$5,000. Part II cal	n be duplicated if additi	ional space is neec	ded.	-		
1(a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ALLEGHENY CONFERENCE ON COMMUNITY							
DEVELOPMENT - 425 SIXTH AVENUE, SUITE 1100 - PITTSBURGH, PA							
15219-1811	25-0965213	501(C)(3)	15,875.	0.0	N/A	N/A	PROGRAM SUPPORT
2 Enter total number of section 501(c)(3) and government organizations	and government o	rganizations listed in th	listed in the line 1 table				1.
3 Enter total number of other organizations listed in the line 1 table	is listed in the line	1 table					• 0
۱,	see the Instruct	tions for Form 990.					Schedule I (Form 990) (2017)

25-0717890

Schedule I (Form 990) (2017) CHATHAM UNIVERSITY

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EDUCATIONAL GRANTS AND SCHOLARSHIPS	936	18,089,344.	°	N/A	N/A
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	uired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.	
PART I, LINE 2:					
THE OFFICES OF ENROLLMENT MANAGEMENT	AND	FINANCIAL A	AID OVERSEE	THE AWARDING	
OF BOTH NEED-BASED FINANCIAL AID AND	Z	ERIT-BASED SCH	SCHOLARSHIPS.	ONCE A	
STUDENT HAS COMPLETED THE FINANCIAL		AID APPLICATION	PROCESS AND	D IS FOUND	
ELIGIBLE FOR NEED-BASED AND/OR MERIT	IT BASED	AID, THE	STUDENT WILL RECEIVE	LL RECEIVE A	
FINANCIAL AID PACKAGE DETAILING THE	IE COMBINATION	O Fi	SOURCES USED	D TO PROVIDE	
FINANCIAL ASSISTANCE. GRANT FUNDS	AWARDED	TO STUDENTS	ARE	APPLIED DIRECTLY	
TO THEIR STUDENT ACCOUNTS. USAGE	IS MONITORED	BY	VIRTUE OF DI	DIRECT ACCOUNT	
POSTING.					
732102 11-01-17		46			Schedule I (Form 990) (2017)

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

**Compensation Information** 

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

Compensated Employees

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

CHATHAM UNIVERSITY

Employer identification number 25-0717890

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel    X   Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as, maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		37	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee X Written employment contract			
	X   Independent compensation consultant   X   Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
_	organization or a related organization:	40		Х
a	Receive a severance payment or change-of-control payment?  Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b		X
D	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
C	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	70		
	The storage of the state persons and provide the applicable amounts for each term in that in.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (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 aren't listed on Form 990, Part VII.

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

	( <b>B</b> )	(B) Breakdown of W-2		and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	E
(A) Name and Title	Com	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Serience	(a)-(i)(a)	in Column (b) reported as deferred on prior Form 990
(1) DAVID FINEGOLD	(i) 3 E	359,399.	0	19,829.	47,000.	35,459.	461,687.	0
PRESIDENT	(ii)	0	0	• 0		0	0	0
(2) SEAN COLEMAN	(i) 13	31,087.	0	443.	13,18	6,768.	151,480.	0
VP OF PLANNING & ASSISTANT SECRETARY	(ii)	• 0	0	• 0		0	0	0
(3) WALTER B. FOWLER	(i) 25	54,143.	0	4,909.	26,03	18,121.	303,211.	0
SR. VP-FINANCE & ADMIN			0	0		0		0
(4) DARLENE G. MOTLEY	(i) 19	94,880.	0	1,823.	20,163.	17,873.	234,739.	0
DEAN, SCHOOL OF ARTS, SCIENCES			0	• 0		0	0	0
(5) JENNA TEMPLETON	(i) 18	1,26	10,000.	1,690.	19,743.	17,666.	230,361.	0
VP OF ACADEMIC AFFAIRS			0					• 0
(6) AMY BECHER	(i) 16	162,862.	0 •	1,202.	16,32	6,333.	186,717.	0
VP FOR ENROLLMENT MANAGEMENT	(ii)	• 0	0	• 0		• 0	• 0	• 0
(7) PATRICIA DOWNEY	(i) 15	54,852.	0	1,368.	15,759.	8,341.	180,320.	0
DEAN, SCHOOL OF HEALTH SCIENCES	(ii)	• 0	0	0 •				• 0
(8) CAREY MILLER	(i) 16	160,664.	0	258.	16,26	3,244.	180,426.	• 0
VP FOR UNIVERSITY ADVANCEMENT	(ii)	• 0	0 •	0 •		• 0		
(9) DR. ESTHER L. BARAZZONE	(i) 24	242,667.	.000,09	34,472.	27,00	2,668.	366,807.	.000,09
PRESIDENT EMERITA			0.			0 •		
(10) WILLIAM T. CAMPBELL	(i) 16	169,886.	0.	1,119.	17,56	17,187.	205,758.	0
VP MARKETING & COMMUNICATION			0	0 •				
PAUL D. STEINHAUS	(i) 14	41,771.	0.	1,265.	14,756.	16,493.	174,285.	0
CIO, DIRECTOR OF INFO TECH	(ii)		0			0 •		
(12) PETER WALKER		207,388.	0.	2,983.	21,328.	17,351.	249,050.	0
DEAN, FALK SCHOOL FOR SUSTAINABILITY (ii)	(ii)		0					• 0
(13) ZAUYAH WAITE, VP OF STUDENT	(i) 1 ¢	141,712.	0	1,225.	13,858.	5,852.	162,647.	0
AFFAIRS & DEAN OF STUDENTS	(ii)	• 0	0	• 0	• 0	0	0	0
	(i)							
	(ii)							
	<u>(i)</u>							
	(ii)							
	<u> </u>							
	(ii)							

Schedule J (Form 990) 2017

# Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

BASIC EMPLOYEE BENEFITS (INCLUDING HEALTH BENEFITS, LIFE INSURANCE, AND

COLUMN (D). PART II, LONG-TERM CARE INSURANCE) ARE REPORTED ON SCHEDULE J,

RESIDE OL FINEGOLD IS REQUIRED EMPLOYMENT, DR. HIS ОF CONDITION ď AS THE VALUE ATTRIBUTED TO HIS PERSONAL SPACE IS ALSO UNIVERSITY HOUSING.

REPORTED ON SCHEDULE J, PART II, COLUMN (D).

Z REPORTED ARE PLAN, 403(B) THE UNIVERSITY'S OL EMPLOYER CONTRIBUTIONS

COLUMN (C).

CODE ALSO INCLUDE INTERNAL REVENUE (B)(III) COLUMN Z REPORTED AMOUNTS THE PRESIDENT. THE 인 I THE UNIVERSITY ΒY 132 BENEFITS PROVIDED SECTION

FOR UNIVERSITY DOES NOT PROVIDE THE PRESIDENT WITH AN EXPENSE ACCOUNT THE PRESIDENT'S 년 TERMS THE ΒY SPOUSAL TRAVEL IS LIMITED PERSONAL USE.

EMPLOYMENT AGREEMENT.

IN ORDER THAT THE PRESIDENT MAY ENTERTAIN POTENTIAL CLUB MEMBERSHIPS: DONORS AND OTHER BUSINESS ASSOCIATES OF THE UNIVERSITY, THE UNIVERSITY PAYS

THE MEMBERSHIP IN PERIODIC DUES FOR THE PRESIDENT FOR, THE REIMBURSES Schedule J (Form 990) 2017

Schedule J (Form 990) 2017

| Part III | Supplemental Information

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DUQUESNE CLUB AND PITTSBURGH GOLF CLUB. DIRECT EXPENSES FOR UTILIZATION OF
THE CLUBS ARE THE PRESIDENT'S RESPONSIBILITY, EXCEPT WHEN ATTRIBUTABLE TO
ERSITY BUSINESS.
PART I, LINE 7:
DR. ESTHER BARAZZONE - \$60,000 OF BONUS COMPENSATION WAS REPORTED ON THE
2016 FORM 990. THIS AMOUNT WAS APPROVED IN 2016 BUT PAID AND INCLUDED IN
REPORTABLE COMPENSATION IN 2017.
JENNA K. TEMPLETON - \$10,000
Schedule J (Form 990) 2017

**SCHEDULE K** 

Department of the Treasury Internal Revenue Service (Form 990)

► Attach to Form 990.

Supplemental Information on Tax-Exempt Bonds

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 2017 Open to Public Inspection

ŝ (i) Pooled Employer identification number 25-0717890financing × × × Yes ŝ ŝ (g) Defeased (h) On behalf å × × × Ω Ω of issuer Yes Yes Yes ŝ × × × 367,054 6,817,086 Yes 319,232 18,000,000 10,815,860 × × × å ŝ IN PART VI FOLLOW 闰 CAPITAL PURCHASES ΑT AND RENOVATIONS C O (f) Description of purpose SEE DESCRIPTION CONSTRUCTION Yes Yes × CONTINUATIONS PHASE 1B 5,535,000 35,870,000 2,559,375 230,000 33,080,625 × × ဍ ŝ B Ω 000 000 000,000 Yes × × × (e) Issue price 870 000 230,035. 10, 35, 18, 800,000 ,200,000 10,000,000 (王) × × × å ŝ 2009 AND 09/29/08 02/29/12 07/16/14 ⋖ (d) Date issued (A) Yes Yes ത × × FOR COLUMNS (c) CUSIP # NONE NONE NONE Does the organization maintain adequate books and records to support the final allocation of proceeds? Are there any lease arrangements that may result in private business use of Was the organization a partner in a partnership, or a member of an LLC, EDUCATION BUILDING AUTHO25-1650137 EDUCATION BUILDING AUTHO25-1650137 IΛ 25-144811 (b) Issuer EIN Were the bonds issued as part of an advance refunding issue? Were the bonds issued as part of a current refunding issue? UNIVERSITY PART which owned property financed by tax-exempt bonds? SEE Has the final allocation of proceeds been made? Working capital expenditures from proceeds COUNTY HIGHER ALLEGHENY COUNTY HIGHER MCKEESPORT INDUSTRIAL DEVELOPMENT AUTHORITY CHATHAM Credit enhancement from proceeds Capital expenditures from proceeds Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion (a) Issuer name Part III Private Business Use Other unspent proceeds bond-financed property? Amount of bonds retired Total proceeds of issue Other spent proceeds Name of the organization Bond Issues ALLEGHENY Proceeds Part II Part I ပ Q ო 4 2 9 ∞ 10 6 15 16 Q 한 한 4

732121 10-18-17 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 51

Schedule K (Form 990) 2017

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Page 2

25-0717890

Schedule K (Form 990) 2017 CHA!

Part III Private Business Use (Continued)								
	1	A		В	O .			D
3a Are there any management or service contracts that may result in private	Yes	No	Yes	S	Yes	No	Yes	No
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?								
c Are there any research agreements that may result in private business use of bond-financed property?		X		X		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		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of								
unrelated trade or business activity carried on by your organization, another								
section 501(c)(3) organization, or a state or local government▶		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		×		×		×		
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		×		×		X		
<b>b</b> If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed								
of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections								
1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified								
bonds of the issue are remediated in accordance with the requirements under								
Regulations sections 1.141-12 and 1.145-2?	×		×		×			
Part IV Arbitrage								
	•	<	_	В		O		۵
1 Han the inniversity flag Down 9000 T Authitana Debate Viald Dedication and	X	ON O	20,	Ä	S N	QN	20%	QN

		1	1	1	В	)	,	ď	
1 Has	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	oN	Yes	No	Yes	No	Yes	No
Per	Penalty in Lieu of Arbitrage Rebate?	×			×		×		
2    "	2 If "No" to line 1, did the following apply?								
a Ret	a Rebate not due yet?				×		×		
<b>b</b> Exc	b Exception to rebate?				×		×		
o S O	c No rebate due?				×		×		
" <del> </del>	If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
per	performed								
3 lst	3 Is the bond issue a variable rate issue?		X	×			X		
<b>4a</b> Has	4a Has the organization or the governmental issuer entered into a qualified								
hec	hedge with respect to the bond issue?		×		×		×		
<b>b</b> Nar	<b>b</b> Name of provider								

d Was the hedge superintegrated?

c Term of hedge ....

Schedule K (Form 990) 2017

25-0717890

Page 3

Part IV Arbitrage (Continued)

ŝ ŝ Yes Yes ŝ ŝ × × × × O Yes Yes ٩ ٩ × × × × PURPOSE OF CURRENT REFUNDING OF THE 1998 SERIES A BONDS AND 2002 SERIES THE SERIES A OF 2012 BONDS BEAR INTEREST AT RATES RANGING FROM PRINCIPAL DESCRIPTION OF PURPOSE: PHASE 1B CONSTRUCTION AT EDEN HALL CAMPUS ISSUER NAME: ALLEGHENY COUNTY HIGHER EDUCATION BUILDING AUTHORITY ISSUER NAME: ALLEGHENY COUNTY HIGHER EDUCATION BUILDING AUTHORITY Ω A BONDS, AND THE CURRENT AND ADVANCE REFUNDING OF THE 2002 SERIES A REVENUE BONDS SERIES A OF 2012 ON BEHALF OF THE UNIVERSITY FOR THE AUTHORITY ISSUED \$35,870,000 AGGREGATE PRINCIPAL OF ITS UNIVERSITY Yes Yes FINAL Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions SCHEDULE K, PART I, BOND ISSUES: DESCRIPTION OF PURPOSE: SEE DESCRIPTION IN PART VI FOLLOWING ON FEBRUARY 29, 2012, ALLEGHENY COUNTY HIGHER EDUCATION BUILDING OF EACH YEAR, WITH THE INTEREST PAYMENTS ARE REQUIRED SEMIANNUALLY. ŝ ŝ × × × Yes Yes **d** Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Has the organization established written procedures to monitor the requirements of federal tax requirements are timely identified and corrected through the voluntary Has the organization established written procedures to ensure that violations of closing agreement program if self-remediation isn't available under applicable 6 Were any gross proceeds invested beyond an available temporary period? 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? PAYMENTS ARE REQUIRED ON SEPTEMBER 2035. Part V Procedures To Undertake Corrective Action SCHEDULE K, BOND ISSUE, BOND PAYMENT DUE ON SEPTEMBER 5.0% **b** Name of provider section 148? c Term of GIC regulations? 2.0% TO BONDS. (A) (A) (년) (王)

#### **SCHEDULE L**

Department of the Treasury Internal Revenue Service

#### **Transactions With Interested Persons**

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open To Public** Inspection

Name of the organization

Employer identification number

	C	HATHA	M O	M + A + F + P + J	. <u>Y</u>						40	-0/	T / 0	90		
Part I	Excess Bene	fit Trans	sacti	ons (section 50	01(c)(3	3), sect	ion 501	I(c)(4), and 50	)1(c)	(29) organizatior	ns only	/).				
	Complete if the c	organization	n ansv	vered "Yes" on	Form 9	990, Pa	art IV, li	ne 25a or 25b	o, or	Form 990-EZ, P	art V,	line 40	)b.			
1 (a) Nar	ne of disqualified p	erson	(b) F	Relationship bety			lified	lo	:) De	escription of tran	sactio	n				cted?
(u) I vai	Tie of allequalified p	,010011		person and or	rganız	ation			,, 0		- Caotio	11		Ye	es	No
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3 Enter	ine amount of tax,	ii ariy, ori ii	ii le 2, d	above, reimburs	seu by	tile or	yarıızaı					Ψ				
Part II	Loans to and	l/or Fror	n Int	erested Per	sons	<u> </u>										
	Complete if the c						Part \	/ line 38a or F	Forn	n 990 Part IV lir	ne 26:	or if th	ne oraz	nizati	nn -	
	reported an amo	-					, , , , , , ,	, 11110 000 01 1	0111	11000,1 4111, 111	10 20,	01 11 11	io orga	ıınzacı	511	
(a	) Name of	(b) Relatio		(c) Purpose	(d) Lo	an to or	(e)	) Original	(f	) Balance due	(g)	In	(h) App	roved	(i) W	/ritten
intere	ested person	with organi		of loan		n the ization?		ipal amount	l `	,	defa		( <b>h)</b> App by boo comm	ittee?	agree	ment?
					То	From					Yes	No	Yes	No	Yes	No
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otal Part III	Grants or As	oiotopoo	Dor	ofiting Into	rooto	d Do	roono	<b>&gt;</b> \$								
rart III	J			•												
(-) NI	Complete if the c	_								(-D. T			1-1	D		
(a) N	ame of interested p	person	(	<b>b)</b> Relationship interested pers				assistance		(d) Type assistan			, ,	Purp assista		T
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2017

Complete if the organization answered  (a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	aring of zation's
	person and the organization	transaction	transaction	rever Yes	nues?
PARKHURST DINING SERVICES	BOARD MEMBER	3,442,340.	A BOARD MEM		Х
Part V Supplemental Information Provide additional information for response	onses to questions on Schedule L (see	instructions).			
SCH L, PART IV, BUSINESS T	RANSACTIONS INVOLVI	NG INTEREST	ED PERSONS:		
(A) NAME OF PERSON: PARKHU	RST DINING SERVICES				
(D) DESCRIPTION OF TRANSAC	CTION: A BOARD MEMBE	R OF THE UN	IIVERSITY HA	S A	
BUSINESS INTEREST IN AND I	S EMPLOYED BY PARKH	URST DINING	SERVICES.		
PARKHURST PROVIDES ON CAME	US DINING SERVICES.				

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

Name of the organization CHATHAM UNIVERSITY Employer identification number 25-0717890

Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	eterminin		S
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	18	439,814.	FAIR MARKET	' VAL	UE	
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
10	trust interests Securities - Miscellaneous							
12 13	Qualified conservation contribution -							
13								
14	Historic structures  Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18								
19	Collectibles Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ()							
26	Other ()							
27	Other ( )							
28	Other ( )							
29	Number of Forms 8283 received by the organiz	ation durin	g the tax vear for c	ontributions				
	for which the organization completed Form 828			1 1			0	
		, ,	·			1	es	No
30a	During the year, did the organization receive by	contribution	on any property rep	oorted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the date							
	exempt purposes for the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	equires the review	of any nonstandard contrib	utions?	31	Х	
32a	Does the organization hire or use third parties of	-	•	-				
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	ecked,			
	describe in Part II.							

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

Schedule M (Form 990) 2017

Part	is re	porting	ı in Part I	, colun	mation. Pro nn (b), the nu I information.	vide the mber of c	inforr contril	mation required to butions, the num	by Part I, ber of ite	lines 30b, 3 ems receive	32b, and d, or a co	33, an ombina	d whether the org ation of both. Also	anization complete
SCHE	DULE	М,	PART	I,	COLUMN	(B):	:							
THE	NUMBE	ER S	HOWN	IN	COLUMN	(B)	RE	PRESENTS	THE	NUMBE	R OF	THE	3	
CONT	RIBUT	ION	S CH	ATH	AM UNIV	ERSIT	ΓY	RECEVIED	FOR	EACH	TYPE	OF	PROPERTY	FOR
THE	YEAR	END	ED J	JNE	30, 20	18.								

#### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ ► Go to www.irs.gov/Form990 for the latest information. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

CHATHAM UNIVERSITY

**Employer identification number** 25-0717890

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: CITIZEN IN ONE'S COMMUNITIES; RECOGNIZING AND RESPECTING DIVERSITY OF IDENTITY AND OPINION; AND LIVING SUSTAINABLY ON THE PLANET.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

ACADEMIC AND INSTRUCTIONAL EDUCATION:

ACCREDITED BY THE MIDDLE STATES COMMISSION ON HIGHER EDUCATION, CHATHAM UNIVERSITY IS A COED INSTITUTION THAT GRANTS BACHELOR, MASTER AND DOCTORATE LEVEL DEGREES THROUGH FOUR DISTINCTIVE SCHOOLS AND COLLEGES: THE FALK SCHOOL OF SUSTAINABILITY & ENVIRONMENT (HOUSED WITHIN OUR EDEN HALL CAMPUS, THE WORLD'S FIRST ACADEMIC COMMUNITY BUILT FROM THE GROUND UP FOR THE STUDY AND PRACTICE OF SUSTAINABLE LIVING), THE SCHOOL OF HEALTH SCIENCES, THE SCHOOL OF ARTS, SCIENCE AND BUSINESS AND THE SCHOOL OF CONTINUING AND PROFESSIONAL STUDIES. STUDENTS CAN CHOOSE FROM OVER 40 UNDERGRADUATE MAJORS AND OVER 20 MASTERS AND DOCTORAL PROGRAMS, AND ONLINE COURSES OF STUDY. THE UNIVERSITY'S TOTAL ENROLLMENT AS OF FALL 2018 WAS 2,193 STUDENTS.

STUDENT AND COMMUNITY SERVICES: CHATHAM UNIVERSITY STRIVES TO DEVELOP THE WHOLE STUDENT - BOTH IN AND OUTSIDE THE CLASSROOM. WE OFFER ON AND OFF-CAMPUS OPPORTUNITIES FOR PROFESSIONAL SKILL-BUILDING AND EXPERIENTIAL LEARNING. INTERNSHIPS AND MENTORSHIPS OFFER SUPPORT AND OUR INNOVATIVE FOUR PHASES TO YOUR FUTURE WORKS WITH STUDENTS STARTING IN THEIR FIRST YEAR TO EXPLORE THEIR INTERESTS AND PURSUE THEIR GOALS. STUDENT AFFAIRS PLAY AN INTEGRAL ROLE IN HELPING OUR STUDENTS ENHANCE THEIR PHYSICAL, MENTAL, AND SOCIAL WELL-BEING. STUDENTS HAVE A VARIETY LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017) Name of the organization CHATHAM UNIVERSITY **Employer identification number** 25-0717890

OF OPPORTUNITIES HIGHLIGHTED IN THE ANNUAL ACTIVITIES CALENDAR FEATURING OVER 300 EVENTS AND HAPPENINGS THROUGHOUT THE YEAR. CHATHAM OFFERS A NCAA DIVISION III ATHLETIC PROGRAM FEATURING TWENTY VARSITY SPORTS (TEN WOMEN'S, NINE MEN'S AND ONE CO-ED), ANCHORED OUT OF OUR IMPRESSIVE 78,000 SQUARE FOOT ATHLETIC AND FITNESS CENTER. STUDENTS LIVING ON CAMPUS ARE WELCOMED INTO A LIVING AND LEARNING ENVIRONMENT WHERE WELLNESS AND A STRONG SENSE OF COMMUNITY PREVAIL. CHATHAM HAS BEEN SELECTED AS ONE OF ONLY 26 UNIVERSITIES FOR THE 2019 PRINCETON REVIEW'S GREEN HONOR ROLL, WHICH RECOGNIZES THE MOST ENVIRONMENTALLY RESPONSIBLE COLLEGES ACROSS THE UNITED STATES. CHATHAM EARNED A PERFECT GREEN RATING SCORE 99 OUT OF 99, WHICH MEASURES "A SCHOOL'S PERFORMANCE AS AN ENVIRONMENTALLY AWARE AND PREPARED INSTITUTION"

CHATHAM UNIVERSITY HAS BEEN ADMITTED TO THE PRESIDENT'S HIGHER EDUCATION COMMUNITY SERVICE HONOR ROLL FOR ENGAGING ITS STUDENTS, FACULTY, AND STAFF IN MEANINGFUL SERVICE THAT ACHIEVES MEASURABLE RESULTS IN THE COMMUNITY. A HEALTH AND COUNSELING CENTER ASSISTS STUDENTS IN NEED AND PROVIDES AN OPPORTUNITY FOR STUDENTS TO BETTER THEMSELVES THROUGH MANY PROGRAMS AND SERVICES.

LIBRARY SERVICES: THE JENNIE KING MELLON LIBRARY HAS ADDED NEW RESOURCES THAT SUPPORT THE LEARNING AND TEACHING MISSION OF CHATHAM UNIVERSITY, INCLUDING A NUMBER OF FULL-TEXT JOURNAL DATABASES. THE LIBRARY STAFF CONTINUES TO DEVOTE SIGNIFICANT AMOUNTS OF TIME TO RESEARCH CONSULTATIONS. THE ARCHIVE COLLECTION HAS BENEFITTED FROM ENDOWED SUPPORT AND INCREASED STAFF HOURS TO AID IN DOCUMENTATION, ORGANIZATION, AND PRESERVATION.

Name of the organization CHATHAM UNIVERSITY

Employer identification number 25-0717890

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

IN MAY 2008, THE UNIVERSITY RECEIVED THE 388-ACRE EDEN HALL FARM CAMPUS

AS A GIFT FROM THE EDEN HALL FOUNDATION. LOCATED NORTH OF PITTSBURGH IN

RICHLAND TOWNSHIP AND APPROXIMATELY 45 MINUTES FROM CHATHAM'S HISTORIC

SHADYSIDE CAMPUS, EDEN HALL CAMPUS IS HOME TO OUR FALK SCHOOL OF

SUSTAINABILITY & ENVIRONMENT, AND OFFERS UNDERGRADUATE AND GRADUATE

DEGREE PROGRAMS AS WELL AS PROGRAMMING FOR THE SURROUNDING COMMUNITIES.

THE UNIVERSITY OWNS THE OLDEST CIVIL WAR-ERA HOME ON FIFTH AVENUE, THE
HOWE-CHILDS GATE HOUSE, WHICH NOW SERVES AS A GUEST HOUSE FOR
UNIVERSITY VISITORS AS WELL AS HEADQUARTERS FOR THE CAMPUS ARBORETUM.
THE UNIVERSITY IS HOME TO THE OLKES COLLECTION OF AFRICAN ART, ONE OF
THE MOST SIGNIFICANT COLLECTIONS OF AFRICAN TRIBAL ART IN THE TRISTATE
REGION.

THE UNIVERSITY HOSTS NUMEROUS EVENTS ON CAMPUS INCLUDING: PROGRAMS FOR
WOMEN IN BUSINESS AND POLITICS SPONSORED BY THE CENTER FOR WOMEN'S
ENTREPRENEURSHIP AND PENNSYLVANIA CENTER FOR WOMEN IN POLITICS; A
NUMBER OF GLOBAL FOCUS EVENTS; AND VARIOUS PERFORMING AND VISUAL ARTS
EVENTS HELD THROUGHOUT THE ACADEMIC YEAR THAT ARE FREE AND OPEN TO THE
PUBLIC.

FORM 990, PART VI, SECTION A, LINE 1:

THE EXECUTIVE COMMITTEE SHALL HAVE AUTHORITY TO ACT FOR THE BOARD OF
TRUSTEES ON ALL MATTERS EXCEPT FOR THE FOLLOWING WHICH SHALL BE RESERVED
FOR THE BOARD OF TRUSTEES (UNLESS THE BOARD OF TRUSTEES DIRECTS OTHERWISE):
PRESIDENTIAL SELECTION AND TERMINATION; TRUSTEE AND BOARD OFFICER

SELECTION; CHANGES IN INSTITUTIONAL MISSION AND PURPOSES; CHANGES TO THE

Name of the organization CHATHAM UNIVERSITY **Employer identification number** 25-0717890

CHATER; CHANGES TO THE BYLAWS; INCURRING OF CORPORATE INDEBTEDNESS IN EXCESS OF TEN PERCENT (10%) OF THE COLLEGE'S NET WORTH; SALE OF COLLEGE ASSETS OR TANGIBLE PROPERTY IN EXCESS OF ONE PERCENT (1%) OF THE COLLEGE'S NET WORTH; ADOPTION OF THE ANNUAL BUDGET; AND, CONFERRAL OF DEGREES. ADDITION TO ITS AUTHORITY TO TAKE ACTION ON MATTERS WHICH CANNOT OR SHOULD NOT BE DEFERRED TO THE BOARD'S NEXT SCHEDULED MEETING, PROCESS OR PROGRESS ON PLANNING GOALS, THE BOARD'S RESPONSIBILITY TO SUPPORT THE PRESIDENT AND ASSESS HER OR HIS PERFORMANCE AND SHALL REVIEW THE PRESIDENT'S COMPENSATION AND CONDITIONS OF EMPLOYMENT.

FORM 990, PART VI, SECTION A, LINE 2:

THE FOLLOWING INDIVIDUALS HAVE A BUSINESS RELATIONSHIP BY VIRTUE OF EMPLOYMENT BY OR CO-MEMBERSHIP ON THE BOARD OF DIRECTORS OF AN ENTITY (OR ENTITIES) UNRELATED TO CHATHAM UNIVERSITY:

W. DUFF MCCRADY; G. NICHOLAS BECKWITH III; FREDDIE FU, M.D.; BROOKS BROADHURST; DAVID FINEGOLD

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS REVIEWED BY SENIOR FINANCE MANAGEMENT AND THE PRESIDENT IN THE FORM IS THEN DISCUSSED AND REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES. FOLLOWING COMMITTEE LEVEL REVIEW, THE APPROVED DOCUMENT IS PROVIDED TO THE FULL MEMBERSHIP OF THE BOARD BEFORE ELECTRONIC SUBMISSION TO THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

ALL TRUSTEES SHALL DISCLOSE TO THE BOARD OF TRUSTEES ANY POSSIBLE CONFLICT OF INTEREST AT THE EARLIEST PRACTICAL TIME. FURTHERMORE, THE TRUSTEE SHALL 732212 09-07-17 Schedule O (Form 990 or 990-EZ) (2017) Name of the organization CHATHAM UNIVERSITY

Employer identification number 25-0717890

ABSENT HERSELF OR HIMSELF FROM DISCUSSIONS OF, AND ABSTAIN FROM VOTING ON, SUCH MATTERS UNDER CONSIDERATION BY THE BOARD OF TRUSTEES OR ITS COMMITTEES. THE MINUTES OF SUCH MEETING SHALL REFLECT THAT A DISCLOSURE WAS MADE AND THAT THE TRUSTEE HAVING A CONFLICT, OR POSSIBLE CONFLICT, ABSTAINED FROM VOTING. ANY TRUSTEE WHO IS UNCERTAIN WHETHER A CONFLICT OF INTEREST MAY EXIST IN ANY MANNER MAY REQUEST THE BOARD OF TRUSTEES OR COMMITTEE TO RESOLVE THE QUESTION IN HER OR HIS ABSENCE BY MAJORITY VOTE. ANNUALLY, BOARD MEMBERS AND KEY EMPLOYEES SIGN A CONFLICT OF INTEREST DISCLOSURE FORM PROVIDED BY THE SECRETARY OF THE BOARD. THE SIGNED FORM IS THEN FORWARDED TO THE PRESIDENT'S OFFICE AND THE FINANCE DEPARTMENT TO BE LOGGED AND FILED FOR REFERENCE. ANY IDENTIFIED CONFLICTS ARE IMMEDIATELY BROUGHT TO THE ATTENTION OF THE EXECUTIVE COMMITTEE OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 15:

THE PRESIDENT'S COMPENSATION IS ESTABLISHED BY THE BOARD OF TRUSTEES

THROUGH THE EXECUTIVE OR COMPENSATION COMMITTEE USING INDEPENDENT

CONSULTANTS AND DATA FROM PEER INSTITUTIONS. COMPENSATION IS DOCUMENTED IN

THE BOARD MINUTES AND IN A WRITTEN EMPLOYMENT CONTRACT.

COMPENSATION LEVELS OF ALL EMPLOYEES, INCLUDING DIRECT REPORTS TO THE

PRESIDENT, ARE MONITORED BY THE HUMAN RESOURCE DEPARTMENT, THE SENIOR VICE

PRESIDENT OF FINANCE AND ADMINISTRATION, VICE PRESIDENT OF ACADEMIC

AFFAIRS, AND THE PRESIDENT USING CUPA PEER INSTITUTION COMPARATIVE DATA ON

AN ANNUAL BASIS. COMPENSATION INCREASES FOR DIRECT REPORTS TO THE

PRESIDENT ARE GENERALLY INCLUDED IN THE ANNUAL MERIT BUDGET INCREASE POOL

APPROVED BY THE BOARD OF TRUSTEES. FROM TIME TO TIME, THERE ARE

EXTRAORDINARY COMPENSATION ISSUES RELATED TO DIRECT REPORTS TO THE

PRESIDENTS AND IN THESE CASES, THE EXECUTIVE COMMITTEE OF THE BOARD OF

Name of the organization **Employer identification number** CHATHAM UNIVERSITY 25-0717890 TRUSTEES APPROVES ANY RELATED INCREASES, CONTRACTS, AGREEMENT SIDE LETTERS, OR SPECIAL CONSIDERATIONS. FORM 990, PART VI, SECTION C, LINE 19: THE UNIVERSITY'S POLICIES, ORGANIZATIONAL DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST. FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON THE UNIVERSITY'S WEBSITE. FORM 990, PART VII, TRUSTEES EMERITI: THE FOLLOWING INDIVIDUALS ARE EMERITI TRUSTEES WHO MAY ATTEND ALL MEETINGS OF THE BOARD AND COMMITTEES, BUT SHALL HAVE NO VOTING RIGHTS: CORDELIA SURAN JACOBS, NANCY FOLLETT WAICHLER (AS OF JUNE 2018) FORM 990, PART XII, LINE 2C, FINANCIAL STATEMENTS AND REPORTING: THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS APPROVES THE APPOINTMENT OF THE INDEPENDENT ACCOUNTING FIRM ENGAGED TO AUDIT THE UNIVERSITY'S FINANCIAL STATEMENTS ON AN ANNUAL BASIS. IN ADDITION, THE AUDIT COMMITTEE REVIEWS DRAFT FINANCIAL STATEMENTS AND RECEIVES A REPORT ON THE RESULTS OF THE AUDIT FROM THE INDEPENDENT ACCOUNTANT. THE AUDIT COMMITTEE IS ALSO UPDATED REGARDING THE AUDIT BY THE SENIOR VICE PRESIDENT OF FINANCE FOR FINANCE AND ADMINISTRATION AND BY THE ASSISTANT VICE PRESIDENT FOR FINANCE AND ADMINISTRATION.

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SCHEDULE R (Form 990)

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

► Attach to Form 990.

Open to Public Inspection

Go to www.irs.gov/Form990 for instructions and the latest information.

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

CHATHAM UNIVERSITY

Name of the organization

Part I

Department of the Treasury Internal Revenue Service

Employer identification number 25-0717890

(g) Section 512(b)(13) No × controlled entity? Direct controlling 859,393.CHATHAM UNIVERSITY Yes Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. entity Direct controlling entity End-of-year assets N/A status (if section 501(c)(3)) **e** Public charity TYPE I 0 Total income **Exempt Code** 0 section 501(C)(3) ₫ Legal domicile (state or Legal domicile (state or foreign country) foreign country) PENNSYLVANIA PENNSYLVANIA THE FUNCTIONS OF AND CARRY SUPPORT, BENEFIT, PERFORM TO HOLD OWNERSHIP IN A Primary activity OUT PURPOSES OF C.U. Primary activity SOLAR PV PROJECT -90-1022878Name, address, and EIN (if applicable) THE DIETRICH FOUNDATION - 36-4711746 Name, address, and EIN of related organization of disregarded entity 600 GRANT STREET, SUITE 5360 CHATHAM INVESTMENTS, LLC PITTSBURGH, PA 15219 15232 PITTSBURGH, PA WOODLAND ROAD Part II

Schedule R (Form 990) 2017

25-0717890

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CHATHAM UNIVERSITY

Schedule R (Form 990) 2017

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

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

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

(a)	(q)	(0)	(p)	(e)	(f)	(6)	(h)	(i)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	Section 512(b)(13) controlled entity?
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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.				>	Yes	8
1 During the tax year, did the organization engage in any of the following transactior	ns with one or more re	transactions with one or more related organizations listed in Parts II-IV?	in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	ty			1a		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				<b>1</b>		×
c Gift, grant, or capital contribution from related organization(s)				2	×	
				19		×
e Loans or loan guarantees by related organization(s)				<b>1e</b>		×
f Dividends from related organization(s)				#		×
g Sale of assets to related organization(s)				1g		×
h Purchase of assets from related organization(s)				무	_	×
				;=		×
_				<b>;</b> =		×
k Lease of facilities, equipment, or other assets from related organization(s)				<b>*</b>		×
1 Performance of services or membership or fundraising solicitations for related orgi	related organization(s)			=		×
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)	Janization(s)			-1m	_	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	rtion(s)			무		×
o Sharing of paid employees with related organization(s)				9		×
n Baimhursamant naid to ralated organization(s) for expanses				Ę	n	×
				2 2		×
r Other transfer of cash or property to related organization(s)				+		×
s Other transfer of cash or property from related organization(s)				18		×
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.	who must complete the	iis line, including covered	relationships and transaction thresholds.			
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	nvolved		
(1)						
(2)						
(3)						
(4)						
(5)						
(9)						
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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.

age nip				
(k) ercenta wners				
al or Pe				
(j) General or managing partner?				
Code V-UBI General or Percentage amount in box 20 partner? Overschild K-1 partner? Ownership (Form 1065)				
Disproportionate allocations?				
Dis ti				
(g) Share of end-of-year assets				
(f) Share of total income				
(e) Are all Are 360. 501 (c)(3) der Yes No				
(e) Are all partners sec. 501(c)(3) Orgs.? Yes No				
Predominant income predated, unrelated, excluded from tax under sections 512-514)				
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a) Name, address, and EIN of entity				

Schedule R (Form 990) 2017