

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.

A For the 2019 calendar year, or tax year beginning 07/01, 2019, and ending 06/30, 2020

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <u>WESLEYAN UNIVERSITY</u>		D Employer identification number <u>06-0646959</u>
	Doing business as		E Telephone number <u>(860) 685-2000</u>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ <u>824,064,429.</u>
	<u>237 HIGH STREET NORTH COLLEGE</u>		
City or town, state or province, country, and ZIP or foreign postal code <u>MIDDLETOWN, CT 06459</u>		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
F Name and address of principal officer: <u>MICHAEL ROTH</u> <u>237 HIGH STREET, MIDDLETOWN, CT 06459</u>		H(c) Group exemption number ▶	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ <u>WWW.WESLEYAN.EDU</u>			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: <u>1831</u> M State of legal domicile: <u>CT</u>	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>WESLEYAN UNIVERSITY IS DEDICATED TO PROVIDING AN EDUCATION IN LIBERAL ARTS BY BUILDING A DIVERSE, ENERGETIC COMMUNITY OF STUDENTS, FACULTY, AND STAFF. SEE SCHEDULE O.</u>		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	<u>34.</u>
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	<u>32.</u>
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	<u>3,954.</u>
	6 Total number of volunteers (estimate if necessary)	6	<u>921.</u>
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	<u>-2,530,211.</u>
7b Net unrelated business taxable income from Form 990-T, line 39	7b	<u>-3,974,259.</u>	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	<u>39,299,000.</u>	<u>56,283,000.</u>
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>226,509,000.</u>	<u>225,449,000.</u>
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>29,405,000.</u>	<u>39,103,000.</u>
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>9,744,000.</u>	<u>5,757,000.</u>
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u>304,957,000.</u>	<u>326,592,000.</u>
	14 Benefits paid to or for members (Part IX, column (A), line 4)	<u>67,611,381.</u>	<u>70,017,597.</u>
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u>0.</u>	<u>0.</u>
	16a Professional fundraising fees (Part IX, column (A), line 11e)	<u>128,197,999.</u>	<u>138,238,660.</u>
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>7,779,705.</u>	<u>0.</u>	<u>0.</u>
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u>94,742,620.</u>	<u>82,900,743.</u>
Net Assets or Fund Balances	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u>290,552,000.</u>	<u>291,157,000.</u>
	19 Revenue less expenses. Subtract line 18 from line 12	<u>14,405,000.</u>	<u>35,435,000.</u>
	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	<u>1,541,592,000.</u>	<u>1,706,429,000.</u>
22 Net assets or fund balances. Subtract line 21 from line 20	<u>353,364,000.</u>	<u>433,810,000.</u>	
		<u>1,188,228,000.</u>	<u>1,272,619,000.</u>

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.

Sign Here	<u>Andrew Tanaka</u> Signature of officer	<u>7-6-2021</u> Date
	<u>ANDREW TANAKA</u> Type or print name and title	<u>SR VP, CAO, & TREAS</u>

Paid Preparer Use Only	Print/Type preparer's name <u>GENEVA FURLANO</u>	Preparer's signature <u>[Signature]</u>	Date <u>07/01/2021</u>	Check <input type="checkbox"/> if self-employed	PTIN <u>P01877392</u>
	Firm's name ▶ <u>KPMG LLP</u>	Firm's EIN ▶ <u>13-5565207</u>		Phone no. <u>617-988-1000</u>	
	Firm's address ▶ <u>60 SOUTH STREET BOSTON, MA 02111</u>				

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2019)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

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

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

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 \$ 185,747,000. including grants of \$ 69,966,000.) (Revenue \$ 183,263,000.)

INSTRUCTION AND RESEARCH WESLEYAN UNIVERSITY OFFERS INSTRUCTION IN 45 DEPARTMENTS, 45 MAJOR FIELDS OF STUDY, 29 MINOR FIELDS OF STUDY, AND 3 CERTIFICATES OF STUDY, AND AWARDS THE BACHELOR OF ARTS AND GRADUATE DEGREES. THE MASTER OF ARTS DEGREE AND THE DOCTOR OF PHILOSOPHY ARE REGULARLY AWARDED IN SIX FIELDS OF STUDY. STUDENTS MAY CHOOSE FROM MORE THAN 1000 COURSES EACH YEAR AND MAY BE COUNTED UPON TO DEVISE, WITH THE FACULTY, SOME 800 INDIVIDUAL TUTORIALS AND LESSONS. PLEASE SEE SCHEDULE O FOR DETAIL.

4b (Code:) (Expenses \$ 48,043,000. including grants of \$) (Revenue \$ 41,534,000.)

AUXILIARY SERVICES AND OTHER AUXILIARY SERVICES INCLUDE THE COSTS OF ROOM AND BOARD FOR APPROXIMATELY 3,000 STUDENTS RESIDING ON A 316 ACRE CAMPUS. THERE ARE 8 RESIDENCE HALLS, 7 APARTMENT COMPLEXES AND OVER 25 PROGRAM HOUSES IN ADDITION TO OVER 140 HOUSE UNITS ON CAMPUS FOR UPPER-CLASS STUDENTS. WORKING IN PARTNERSHIP WITH STUDENTS AND COLLABORATIVELY WITH OTHER MEMBERS OF THE WESLEYAN COMMUNITY, THE OFFICE OF RESIDENTIAL LIFE STRIVES TO PROVIDE A SAFE AND SUPPORTIVE RESIDENTIAL ENVIRONMENT WHICH COMPLEMENTS AND EXTENDS STUDENTS' EDUCATIONAL EXPERIENCE. PLEASE SEE SCHEDULE O FOR DETAIL.

4c (Code:) (Expenses \$ 11,632,000. including grants of \$) (Revenue \$)

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

4d Other program services (Describe on Schedule O.)

(Expenses \$ 9,895,254. including grants of \$ 51,597.) (Revenue \$ 5,961,000.)

4e Total program service expenses 255,317,254.

Part IV Checklist of Required Schedules

Table with 3 columns: Question Number, Question Text, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Description, and Yes/No response. Rows 22-38 cover various organizational requirements and reporting obligations.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question number, Description, and Yes/No response. Rows 1a-1c cover Form 1096 reporting and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 16 regarding employee counts, tax returns, business income, foreign accounts, prohibited transactions, and charitable contributions.

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 on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include 1a (34), 1b (32), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CT,
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHAEL S. ROTH PRESIDENT AND TRUSTEE	38.00 0.	X		X				761,912.	0.	428,475.
(2) ANNE MARTIN CHIEF INVESTMENT OFFICER	38.00 0.				X			878,928.	0.	121,335.
(3) DAVID STUART WINAKOR GENERAL COUNSEL/SECRETARY	38.00 0.			X				258,875.	0.	114,192.
(4) JONATHAN DON FARRAR DIRECTOR OF INVESTMENTS	38.00 0.					X		290,888.	0.	81,208.
(5) LISA C. DIERKER PROFESSOR	38.00 0.					X		234,951.	0.	131,555.
(6) ANDREW TANAKA SVP, CHIEF ADMIN OFF. & TREAS	38.00 0.			X				256,594.	0.	84,765.
(7) ALAN RUBACHA DIR. CONSTRUCT. & INFRASTRUCT.	38.00 0.					X		229,984.	0.	66,950.
(8) MICHAEL F. WHALEN DIRECTOR OF ATHLETICS	38.00 0.					X		219,753.	0.	73,830.
(9) MICHAEL J. WHALEY VP FOR STUDENT AFFAIRS	38.00 0.				X			226,444.	0.	63,551.
(10) NATHANAEL GREENE PROFESSOR	38.00 0.					X		236,886.	0.	52,452.
(11) SEAN MCCANN CHAIR OF FACULTY	38.00 0.				X			184,663.	0.	97,219.
(12) FRANTZ WILLIAMS JR. VP FOR ADVANCEMENT	38.00 0.				X			229,843.	0.	51,816.
(13) DAVE BAIRD VICE PRESIDENT FOR IT/CIO	38.00 0.				X			207,313.	0.	68,533.
(14) J. DONALD MOON FMR CHAIR OF FACULTY	38.00 0.						X	212,002.	0.	54,677.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) BARBARA-JAN WILSON FMR VP FOR UNIV. RELATIONS	38.00 0.						X	213,553.	0.	44,471.
(16) NICOLE LYNN STANTON PROVOST, SR VP ACADEMIC AFF.	38.00 0.				X			158,095.	0.	62,108.
(17) NANCY HARGRAVE MEISLAHN DEAN ADMISS/FIN. AID THRU 8/20	38.00 0.				X			168,903.	0.	51,204.
(18) JOYCE JACOBSEN FMR PROVOST AND VICE PRESIDENT	38.00 0.						X	160,908.	0.	45,619.
(19) JANICE R. NAEGELE FMR CHAIR OF FACULTY	38.00 0.						X	155,290.	0.	29,379.
(20) LAURA GRABEL FMR CHAIR OF FACULTY	38.00 0.						X	142,863.	0.	0.
(21) LEO Y. AU TRUSTEE	1.00 0.	X						0.	0.	0.
(22) SOULEYMANE BA TRUSTEE	1.00 0.	X						0.	0.	0.
(23) ESSEL BAILEY JR. TRUSTEE	1.00 0.	X						0.	0.	0.
(24) ADAM BIRD TRUSTEE	1.00 0.	X						0.	0.	0.
(25) PHOEBE C. BOYER TRUSTEE	1.00 0.	X						0.	0.	0.
1b Sub-total								5,428,648.	0.	1,723,339.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								5,428,648.	0.	1,723,339.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 263

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	X	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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
ATTACHMENT 2		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 18

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) ANDREW M. BRANDON-GORDON TRUSTEE	1.00 0.	X					0.	0.	0.	
(27) MARC N. CASPER TRUSTEE	1.00 0.	X					0.	0.	0.	
(28) KAREN DONFRIED TRUSTEE	1.00 0.	X					0.	0.	0.	
(29) JOHN B. FRANK TRUSTEE	1.00 0.	X					0.	0.	0.	
(30) MICHAEL T. FRIES TRUSTEE	1.00 0.	X					0.	0.	0.	
(31) ANNE S. GOLDRACH TRUSTEE	1.00 0.	X					0.	0.	0.	
(32) SUSANNAH GRAY TRUSTEE	1.00 0.	X					0.	0.	0.	
(33) EMILY GREENHOUSE TRUSTEE	1.00 0.	X					0.	0.	0.	
(34) EDWARD J. HEFFERNAN TRUSTEE	1.00 0.	X					0.	0.	0.	
(35) KATHERINE G. KENNEDY TRUSTEE	1.00 0.	X					0.	0.	0.	
(36) C. ANDREW MCGADNEY TRUSTEE	1.00 0.	X					0.	0.	0.	
1b Sub-total							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 263

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(37) PRITHA MITTAL ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(38) DONNA S. MOREA ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(39) MARC O. NACHMANN ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(40) ROBERT A. PRUZAN ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(41) PHILIP J. RAUCH ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(42) JOHN B. RHEA ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(43) RASHIDA RICHARDSON ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(44) MICHAEL ROBERTS ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(45) LAURA ROSS ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(46) JOHN SHAPIRO ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(47) SHANA A. SIMMONS ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 263

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(48) FRANKLIN SIRMANS ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(49) ADAM USDAN ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(50) ELLEN WEST ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(51) LUKE WOOD ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(52) ALFORD A. YOUNG, JR. ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
(53) DONNA S. ZILKHA ----- TRUSTEE	1.00 ----- 0.	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 263

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

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

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions) . .	1e	7,809,000.					
	f All other contributions, gifts, grants, and similar amounts not included above .	1f	48,474,000.					
	g Noncash contributions included in lines 1a-1f.	1g	\$ 10,870,382.					
	h Total. Add lines 1a-1f			56,283,000.				
	Program Service Revenue				Business Code			
2a TUITION AND FEES			611710	183,915,000.	183,915,000.			
b AUXILIARY SERVICES			611710	41,534,000.	41,534,000.			
c								
d								
e								
f All other program service revenue								
g Total. Add lines 2a-2f				225,449,000.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts).			1,210,000.		-2,999,502.	4,209,502.	
	4 Income from investment of tax-exempt bond proceeds .			0.				
	5 Royalties			14,000.			14,000.	
	6a Gross rents	6a	(i) Real	(ii) Personal				
			b Less: rental expenses	6b				
			c Rental income or (loss)	6c				
	d Net rental income or (loss)				0.			
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
			b Less: cost or other basis and sales expenses . .	7b	495,932,000.	105,000.		
			c Gain or (loss)	7c	37,811,000.	82,000.		
	d Net gain or (loss)				37,893,000.		469,291.	37,423,709.
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a			0.			
			b Less: direct expenses	8b	0.			
			c Net income or (loss) from fundraising events.			0.		
	9a Gross income from gaming activities. See Part IV, line 19	9a			0.			
b Less: direct expenses			9b	0.				
c Net income or (loss) from gaming activities.					0.			
10a Gross sales of inventory, less returns and allowances	10a			1,869,429.				
		b Less: cost of goods sold	10b	1,435,429.				
		c Net income or (loss) from sales of inventory.			434,000.			434,000.
Miscellaneous Revenue				Business Code				
	11a OTHER REVENUE		531390	5,309,000.	5,309,000.			
	b							
	c							
	d All other revenue							
e Total. Add lines 11a-11d				5,309,000.				
12 Total revenue. See instructions				326,592,000.	230,758,000.	-2,530,211.	42,081,211.	

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	51,597.	51,597.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	66,589,295.	66,589,295.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	3,376,705.	3,376,705.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	4,400,277.	1,289,000.	2,427,428.	683,849.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	874,208.	874,208.		
7 Other salaries and wages	100,132,542.	86,587,878.	9,396,137.	4,148,527.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	9,107,000.	7,740,950.	1,001,770.	364,280.
9 Other employee benefits	16,434,973.	14,503,026.	1,419,867.	512,080.
10 Payroll taxes	7,289,660.	6,174,400.	790,719.	324,541.
11 Fees for services (nonemployees):				
a Management	5,304,927.	4,148,203.	907,775.	248,949.
b Legal	370,339.	37,656.	332,683.	
c Accounting	346,536.		346,536.	
d Lobbying	645.	645.		
e Professional fundraising services. See Part IV, line 17.	0.			
f Investment management fees	3,647,000.		3,647,000.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	79,776.	67,449.	5,438.	6,889.
12 Advertising and promotion	4,652,500.	4,443,709.	141,563.	67,228.
13 Office expenses	1,812,619.	1,416,339.	296,972.	99,308.
14 Information technology	2,399,511.	1,370,597.	863,252.	165,662.
15 Royalties	0.			
16 Occupancy	12,214,635.	8,934,507.	3,021,836.	258,292.
17 Travel	2,295,272.	1,954,481.	216,626.	124,165.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	194,251.	132,488.	50,278.	11,485.
20 Interest	13,742,153.	12,505,359.	893,240.	343,554.
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	11,021,453.	10,029,523.	716,394.	275,536.
23 Insurance	732,525.		732,525.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DINING	13,240,529.	13,240,529.		
b FOREIGN PROGRAM	5,388,646.	5,388,646.		
c FELLOWSHIPS, PRIZES, & AWARD	2,554,920.	2,554,920.		
d MISCELLANEOUS	2,902,506.	1,905,144.	852,002.	145,360.
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	291,157,000.	255,317,254.	28,060,041.	7,779,705.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0.			

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	27,091,000.	1	17,604,000.
	2 Savings and temporary cash investments	37,058,000.	2	142,582,000.
	3 Pledges and grants receivable, net	15,539,000.	3	22,474,000.
	4 Accounts receivable, net.	963,000.	4	1,084,000.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0.	5	0.
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	0.	6	0.
	7 Notes and loans receivable, net	4,027,000.	7	3,381,000.
	8 Inventories for sale or use	1,314,000.	8	1,329,000.
	9 Prepaid expenses and deferred charges	899,000.	9	1,029,000.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 639,402,000.		
	b Less: accumulated depreciation	10b 275,002,000.		
		347,521,000.	10c	364,400,000.
	11 Investments - publicly traded securities.	638,703,000.	11	644,587,000.
	12 Investments - other securities. See Part IV, line 11	464,445,000.	12	502,964,000.
	13 Investments - program-related. See Part IV, line 11.	0.	13	0.
	14 Intangible assets	0.	14	0.
15 Other assets. See Part IV, line 11	4,032,000.	15	4,995,000.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,541,592,000.	16	1,706,429,000.	
Liabilities	17 Accounts payable and accrued expenses	20,621,000.	17	18,504,000.
	18 Grants payable	0.	18	0.
	19 Deferred revenue.	1,915,000.	19	5,958,000.
	20 Tax-exempt bond liabilities.	20,105,000.	20	20,105,000.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D.	0.	21	0.
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0.	22	0.
	23 Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24 Unsecured notes and loans payable to unrelated third parties.	250,000,000.	24	325,000,000.
	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	60,723,000.	25	64,243,000.
	26 Total liabilities. Add lines 17 through 25.	353,364,000.	26	433,810,000.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	396,851,000.	27	425,030,000.
	28 Net assets with donor restrictions.	791,377,000.	28	847,589,000.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund.		30	
	31 Retained earnings, endowment, accumulated income, or other funds.		31	
	32 Total net assets or fund balances	1,188,228,000.	32	1,272,619,000.
33 Total liabilities and net assets/fund balances	1,541,592,000.	33	1,706,429,000.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	326,592,000.
2	Total expenses (must equal Part IX, column (A), line 25)	2	291,157,000.
3	Revenue less expenses. Subtract line 2 from line 1	3	35,435,000.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,188,228,000.
5	Net unrealized gains (losses) on investments	5	52,130,000.
6	Donated services and use of facilities	6	0.
7	Investment expenses	7	0.
8	Prior period adjustments	8	0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-3,174,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,272,619,000.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form **990** (2019)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization

WESLEYAN UNIVERSITY

Employer identification number

06-0646959

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

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

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	55,323,000.	63,726,080.	41,162,724.	39,299,000.	56,283,000.	255,793,804.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3.	55,323,000.	63,726,080.	41,162,724.	39,299,000.	56,283,000.	255,793,804.
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).						14,938,494.
6 Public support. Subtract line 5 from line 4						240,855,310.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4.	55,323,000.	63,726,080.	41,162,724.	39,299,000.	56,283,000.	255,793,804.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,972,643.	2,391,770.	3,489,090.	3,610,842.	4,223,502.	15,687,847.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . ATCH. 1	850,654.	1,031,854.	951,377.	2,280,102.	1,869,429.	6,983,416.
11 Total support. Add lines 7 through 10						278,465,067.
12 Gross receipts from related activities, etc. (see instructions)					12	1,102,642,948.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)).	14	86.49%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	85.29%
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization. ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

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

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

Section A. Public Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2015, (b) 2016, (c) 2017, (d) 2018, (e) 2019, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.)

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

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 2019, 2018. Row 15: Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f)). Row 16: Public support percentage from 2018 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2019, 2018. Row 17: Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f)). Row 18: Investment income percentage from 2018 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

19b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.

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

Part IV Supporting Organizations

(Complete only if you checked a box 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>	2	

Section 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1	

Section 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3	

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>	2b		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	3b		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
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		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
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		

Section 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-functionally integrated Type III supporting organization (see instructions).

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

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.)

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2015	2016	2017	2018	2019	TOTAL
SALES OF INVENTORY	850,654.	1,031,854.	951,377.	2,280,102.	1,869,429.	6,983,416.
TOTALS	<u>850,654.</u>	<u>1,031,854.</u>	<u>951,377.</u>	<u>2,280,102.</u>	<u>1,869,429.</u>	<u>6,983,416.</u>

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2019

Open to Public Inspection

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.**

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization WESLEYAN UNIVERSITY	Employer identification number 06-0646959
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$ _____
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2019

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 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)															
c Total lobbying expenditures (add lines 1a and 1b)															
d Other exempt purpose expenditures															
e Total exempt purpose expenditures (add lines 1c and 1d)															
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.															
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g Grassroots nontaxable amount (enter 25% of line 1f)															
h Subtract line 1g from line 1a. If zero or less, enter -0-															
i Subtract line 1f from line 1c. If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
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)).

Table with 3 main columns: Description, (a) Yes/No, and (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; a Volunteers?; b Paid staff or management...; c Media advertisements?; d Mailings to members...; e Publications...; f Grants to other organizations...; g Direct contact with legislators...; h Rallies, demonstrations...; i Other activities?; j Total. Add lines 1c through 1i; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; b If "Yes," enter the amount of any tax incurred under section 4912; c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 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?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 main columns: Description and sub-column (1-5). Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); a Current year; b Carryover from last year; c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SEE PAGE 4

Part IV Supplemental Information *(continued)*

OTHER LOBBYING ACTIVITIES

PART IV, LINE 1I

WESLEYAN UNIVERSITY BELONGS TO THE CONNECTICUT CONSORTIUM OF INDEPENDENT COLLEGES (CCIC), WHICH AT TIMES MAY ENGAGE IN LOBBYING ACTIVITIES. OF THE \$26,100 PAID IN DUES TO CCIC, APPROXIMATELY \$645, OR 2.47%, WAS USED FOR LOBBYING.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization

WESLEYAN UNIVERSITY

Employer identification number

06-0646959

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. (Sub-rows 2a-2d), 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1., (ii) Assets included in Form 990, Part X., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1., b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2019

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
a [X] Public exhibition
b [X] Scholarly research
c [X] Preservation for future generations
d [] Loan or exchange program
e [] Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? [] Yes [X] No

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? [] Yes [] No
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Table with columns: Description, Amount
1c Beginning balance
1d Additions during the year
1e Distributions during the year
1f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? [] Yes [] No
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII []

Part V Endowment Funds.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g End of year balance.

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

- a Board designated or quasi-endowment 29.2700 %
b Permanent endowment 32.5600 %
c Term endowment 38.1700 %

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

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations
(ii) Related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b

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

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

Part VI Land, Buildings, and Equipment.

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

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) REAL ASSETS	99,829,000.	FMV
(B) PRIVATE EQUITY	403,135,000.	FMV
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	502,964,000.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) TERM LOANS	12,920,000.
(3) LIABILITIES RELATED TO INVESTMENTS	8,454,000.
(4) CHARITABLE REMAINDER TRUSTS	10,398,000.
(5) POST-RETIREMENT BENEFITS	20,314,000.
(6) PERKINS LOAN PROGRAM	3,409,000.
(7) ASSET RETIREMENT OBLIGATION	11,908,000.
(8) BOND PREMIUM	-3,160,000.
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	64,243,000.

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

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 326,592,000.

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 291,157,000.

Part XIII Supplemental Information.

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

SEE PAGE 5

Multiple horizontal lines provided for entering supplemental information.

Part XIII Supplemental Information (continued)

CONSERVATION EASEMENTS

PART II, LINE 9

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

ORGANIZATIONS COLLECTIONS OF ARTS

PART III, LINE 4

THE UNIVERSITY MAINTAINS WORKS OF ART IN THE DAVISON ART CENTER (DAC), OLIN LIBRARY, SCIENCE LIBRARY AND ARCHIVES. WESLEYAN STUDENTS IN MANY DEPARTMENTS USE THE DAC COLLECTION FOR CLASS ASSIGNMENTS OR VIEWINGS, AS WELL AS FOR INDIVIDUAL RESEARCH PROJECTS WITH UNIVERSITY FACULTY, AND THE MUSEUM ALSO ENCOURAGES TEACHING AND LEARNING FROM OBJECTS IN A WIDE RANGE

Part XIII Supplemental Information (continued)

OF OTHER WAYS. THE LIBRARY MAINTAINS SPECIAL COLLECTIONS AND ARCHIVES, WHICH INCLUDES AROUND 25,000 RARE BOOKS AND COLLECTIONS THAT SERVE TO STIMULATE UNDERGRADUATE MINDS ABOUT THE PAST, OFFER LABORATORY MATERIALS IN THE HUMANITIES, AND PROVIDE SOME PREPARATION FOR ADVANCED SCHOLARSHIP.

ENDOWMENT FUNDS

PART V, LINE 4

THE UNIVERSITY'S ENDOWMENT CONSISTS OF APPROXIMATELY 1,300 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS. THE UNIVERSITY HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS. THE UNIVERSITY FOLLOWS A SPENDING POLICY KNOWN AS THE TOBIN SPENDING RULE, NAMED FOR JAMES TOBIN, RECIPIENT OF THE 1971 NOBEL PRIZE IN ECONOMICS. THIS RULE SETS THE ANNUAL DISTRIBUTION USING A QUANTITATIVE FORMULA THAT COMBINES ELEMENTS OF STABILITY AND MARKET CONDITIONS. THE UNIVERSITY'S ENDOWMENT SPENDING IS 70% BASED ON THE PRIOR YEAR'S SPENDING PLUS INFLATION (MEASURED BY THE HIGHER EDUCATION PRICE INDEX (HEPI) AS OF JUNE 30 OF THE PAST FISCAL YEAR) AND 30% FROM 4.5% OF THE MARKET VALUE OF ENDOWMENT AS OF JUNE 30 OF THE PREVIOUS FISCAL YEAR. ABOUT 91% OF THE PERMANENTLY RESTRICTED NET ASSETS CONSIST OF THOSE FOR WHICH INCOME IS RESTRICTED TO FINANCIAL AID, INSTRUCTION AND RESEARCH.

WESLEYAN UNIVERSITY HAS ADOPTED FASB ASU 2016-14, PRESENTATION OF THE

Part XIII Supplemental Information (continued)

FINANCIAL STATEMENTS FOR NOT-FOR-PROFIT ENTITIES. AS A RESULT, ITS FINANCIAL STATEMENTS CLASSIFY NET ASSETS AS EITHER NET ASSETS WITHOUT DONOR RESTRICTIONS OR NET ASSETS WITH DONOR RESTRICTIONS. HOWEVER, FOR THE PURPOSES OF PART VI, LINE 2, WESLEYAN UNIVERSITY CONTINUES TO REPORT ITS ENDOWMENT COMPOSITION USING THE THREE CATEGORIES PROVIDED: BOARD DESIGNATED, PERMANENT ENDOWMENT, AND TERM ENDOWMENT.

UNCERTAIN TAX POSITIONS UNDER FIN 48 (ASC 740)

PART X, LINE 2

THE UNIVERSITY IS GENERALLY EXEMPT FROM INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(A), AS AN ORGANIZATION DESCRIBED IN SECTION 50(C)(3). THE UNIVERSITY ASSESSES UNCERTAIN TAX POSITIONS AND DETERMINED THAT THERE WERE NO SUCH POSITIONS THAT HAVE A MATERIAL EFFECT ON THE FINANCIAL STATEMENTS.

OTHER REVENUE INCLUDED IN AFS NOT IN FORM 990

PART XI, LINE 2D

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	(1,641,000)
POSTRETIREMENT BENEFIT OBLIGATION CHANGES	(1,533,000)

TOTAL	(3,174,000)

**SCHEDULE E
(Form 990 or 990-EZ)**

Schools

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

Name of the organization
WESLEYAN UNIVERSITY

Employer identification number
06-0646959

Part I

	YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	X	
<u>SEE SUPPLEMENTAL PAGE</u>		
4 Does the organization maintain the following?		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II.		
5 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?		X
b Admissions policies?		X
c Employment of faculty or administrative staff?		X
d Scholarships or other financial assistance?		X
e Educational policies?		X
f Use of facilities?		X
g Athletic programs?		X
h Other extracurricular activities?		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.		
6a Does the organization receive any financial aid or assistance from a governmental agency?	X	
b Has the organization's right to such aid ever been revoked or suspended?		X
If you answered "Yes" on either line 6a or line 6b, explain on Part II.		
7 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	X	

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

SCHEDULE E, LINE 3

THE NONDISCRIMINATORY POLICY IS PROMINENTLY DISPLAYED ON ADVERTISEMENT FOR EMPLOYMENT THAT APPEAR IN NEWSPAPERS AND THE INTERNET. IT ALSO APPEARS IN ADMISSIONS CATALOGUES, EMPLOYMENT APPLICATIONS AND EMPLOYEE AND FACULTY HANDBOOKS.

IN ADDITION TO THE OTHER FORMS OF PUBLICATION, THE UNIVERSITY MAKES ITS RACIALLY NONDISCRIMINATORY POLICY AVAILABLE YEAR-ROUND ON ITS WEBPAGE (WWW.WESLEYAN.EDU/HR/HANDBOOK/DISCRIMINATION.HTML).

SCHEDULE E, LINE 6A

THE UNIVERSITY RECEIVES AWARDS FROM THE DEPARTMENT OF EDUCATION TO BE USED FOR STUDENT FINANCIAL ASSISTANCE. IT ALSO RECEIVES VARIOUS RESEARCH AND DEVELOPMENT GRANTS PRIMARILY FROM THE NATIONAL SCIENCE FOUNDATION AND DEPARTMENT OF HEALTH AND HUMAN SERVICES.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **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.**

Name of the organization

WESLEYAN UNIVERSITY

Employer identification number

06-0646959

Part I **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? **Yes** **No**
- 2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA/CARIBBEAN	0.	0.	PROGRAM SERVICES	STDY ABR/RSRCH/RCRT	66,400.
(2) EAST ASIA AND THE PACIFIC	0.	0.	PROGRAM SERVICES	STDY ABR/RSRCH/RCRT	523,125.
(3) EUROPE	0.	0.	PROGRAM SERVICES	STDY ABR/RSRCH/RCRT	5,092,120.
(4) MIDDLE EAST AND NORTH AFRICA	0.	0.	PROGRAM SERVICES	STDY ABR/RSRCH/RCRT	63,674.
(5) NORTH AMERICA	0.	0.	PROGRAM SERVICES	STDY ABR/RSRCH/RCRT	39,629.
(6) RUSSIA/INDEPENDENT STATES	0.	0.	PROGRAM SERVICES	STDY ABR/RSRCH/RCRT	38,033.
(7) SOUTH AMERICA	0.	0.	PROGRAM SERVICES	STDY ABR/RSRCH/RCRT	296,518.
(8) SOUTH ASIA	0.	0.	PROGRAM SERVICES	STDY ABR/RSRCH/RCRT	26,886.
(9) SUB-SAHARAN AFRICA	0.	0.	PROGRAM SERVICES	STDY ABR/RSRCH/RCRT	228,304.
(10) CENTRAL AMERICA/CARIBBEAN	0.	0.	PROGRAM SERVICES	INVESTMENTS	336,435,972.
(11) EUROPE	0.	0.	PROGRAM SERVICES	INVESTMENTS	819,835.
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal					343,630,496.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					343,630,496.

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

Schedule F (Form 990) 2019

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.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

3 Enter total number of other organizations or entities ▶ _____

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) STUDY ABROAD/FIN AID	CENT. AMERICA/CARIBBEAN	3.	64,936.				
(2) STUDY ABROAD/FIN AID	EAST ASIA/PACIFIC	16.	416,416.				
(3) STUDY ABROAD/FIN AID	EUROPE/ICELAND/GREENLAND	81.	2,303,728.				
(4) STUDY ABROAD/FIN AID	MIDDLE EAST/NORTH AFRICA	1.	24,564.				
(5) STUDY ABROAD/FIN AID	RUSSIA/NEWLY IND. STATES	1.	29,821.				
(6) STUDY ABROAD/FIN AID	SOUTH AMERICA	10.	280,539.				
(7) STUDY ABROAD/FIN AID	SOUTH ASIA	1.	19,726.				
(8) STUDY ABROAD/FIN AID	SUB-SAHARAN AFRICA	9.	218,021.				
(9) STUDY ABROAD/FIN AID	NORTH AMERICA	1.	18,954.				
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* **Yes** **No**
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* **Yes** **No**
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* **Yes** **No**
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* **Yes** **No**
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* **Yes** **No**
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* **Yes** **No**

Part V **Supplemental Information**

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

MONITORING THE USE OF GRANT FUNDS

PART I, LINE 2

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

STUDY ABROAD GRANTS

PART III, COLUMN E

FINANCIAL AID IS DETERMINED BASED ON A NEEDS ANALYSIS AND APPLIED TO STUDENT CHARGES THAT SUPPORT THE COST OF ATTENDANCE. STUDENT CHARGES ARE USED IN SUPPORTING THE UNIVERSITY'S MISSION.

WESLEYAN ALTERNATES RUNNING FOREIGN PROGRAMS WITH VASSAR COLLEGE AND WELLESLEY COLLEGE IN SPAIN, ITALY, AND FRANCE. DURING FISCAL YEAR 2020, WESLEYAN RAN THE ITALY AND SPAIN PROGRAMS, SO EXPENSES IN THAT REGION WERE HIGHER THAN THE PRIOR YEAR WHEN THE OTHER COLLEGES RAN THE PROGRAMS.

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

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.

Department of the Treasury
Internal Revenue Service

Name of the organization

WESLEYAN UNIVERSITY

Employer identification number

06-0646959

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) CITY OF MIDDLETOWN 245 DEKOVEN DRIVE MIDDLETOWN, CT 06457	06-6001872	170(B)(1)(A)(V)	51,597.				UNRESTRICTED
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

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

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

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

Schedule I (Form 990) (2019)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 SEOG	257.	808,693.			
2 CT STATE GRANTS	9.	129,750.			
3 TUITION REMISSION	130.	4,926,160.			
4 UNIVERSITY SCHOLARSHIP	1,148.	60,100,322.			
5 HIGHER ED EMERGENCY RELIEF FUND	645.	624,370.			
6					
7					

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

MONITORING THE USE OF GRANT FUNDS

PART I, LINE 2

GRANTS TO ORGANIZATIONS IN THE U.S.

THE UNIVERSITY MAY MAKE DONATIONS TO SUPPORT ITS TOWN OR NON-PROFIT ORGANIZATIONS. IN THESE INSTANCES, THE UNIVERSITY GENERALLY DOES NOT MONITOR THE ULTIMATE USE OF THE FUNDS AS THESE AMOUNTS ARE UNRESTRICTED GRANTS TO MUNICIPALITIES OR ORGANIZATIONS THAT ARE RECOGNIZED AS BEING DESCRIBED IN INTERNAL REVENUE CODE SECTION 501(C).

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

GRANTS TO INDIVIDUALS IN THE U.S.

FINANCIAL AID IS DETERMINED BASED ON A NEEDS ANALYSIS AND APPLIED TO STUDENT CHARGES THAT SUPPORT COST OF ATTENDANCE. STUDENT CHARGES ARE USED IN SUPPORT OF THE UNIVERSITY'S MISSION.

HIGHER EDUCATION EMERGENCY RELIEF FUND

PART III

THE CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY (CARES) ACT WAS ENACTED INTO LAW ON MARCH 27, 2020 AS A \$2 TRILLION NATIONAL ECONOMIC RESCUE PACKAGE. APPROXIMATELY \$14 BILLION ON THE FUNDING WAS RESERVED FOR

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

HIGHER EDUCATION INSTITUTIONS AND THE STUDENTS THEY SERVE THROUGH THE
 HIGHER EDUCATION EMERGENCY RELIEF FUND (HEERF). WESLEYAN WAS ALLOCATED
 \$2,257 OF FUNDING UNDER THE HEERF, OF WHICH 50% MUST BE AWARDED FOR
 EMERGENCY FINANCIAL AID GRANTS TO STUDENTS.

 FOR THE YEAR ENDED JUNE 30, 2020, WESLEYAN RECOGNIZED \$1,248,000 OF HEERF
 REVENUE AND MADE GRANTS TO STUDENTS TOTALING \$624,370 UNDER THIS PROGRAM.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

WESLEYAN UNIVERSITY

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

2019

**Open to Public
Inspection**

Employer identification number

06-0646959

Part I Questions Regarding Compensation

1a 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.

- | | | | |
|-------------------------------------|---|-------------------------------------|---|
| <input checked="" type="checkbox"/> | First-class or charter travel | <input checked="" type="checkbox"/> | Housing allowance or residence for personal use |
| <input type="checkbox"/> | Travel for companions | <input type="checkbox"/> | Payments for business use of personal residence |
| <input type="checkbox"/> | Tax indemnification and gross-up payments | <input type="checkbox"/> | Health or social club dues or initiation fees |
| <input type="checkbox"/> | Discretionary spending account | <input type="checkbox"/> | 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the 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.

- | | | | |
|-------------------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Compensation committee | <input checked="" type="checkbox"/> | Written employment contract |
| <input checked="" type="checkbox"/> | Independent compensation consultant | <input checked="" type="checkbox"/> | Compensation survey or study |
| <input type="checkbox"/> | Form 990 of other organizations | <input checked="" type="checkbox"/> | 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:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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:

- a** The organization?
- b** Any related organization?
- 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:

- a** The organization?
- b** Any related organization?
- 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.

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2019

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	MICHAEL S. ROTH PRESIDENT AND TRUSTEE	(i)	635,339.	110,000.	16,573.	308,700.	119,775.	1,190,387.
		(ii)	0.	0.	0.			
2	ANNE MARTIN CHIEF INVESTMENT OFFICER	(i)	502,931.	375,902.	95.	36,919.	84,416.	1,000,263.
		(ii)	0.	0.	0.			
3	DAVID STUART WINAKOR GENERAL COUNSEL/SECRETARY	(i)	248,875.	10,000.	0.	27,264.	86,928.	373,067.
		(ii)	0.	0.	0.			
4	JONATHAN DON FARRAR DIRECTOR OF INVESTMENTS	(i)	193,966.	96,922.	0.	18,710.	62,498.	372,096.
		(ii)	0.	0.	0.			
5	LISA C. DIERKER PROFESSOR	(i)	234,761.	0.	190.	40,993.	90,562.	366,506.
		(ii)	0.	0.	0.			
6	ANDREW TANAKA SVP, CHIEF ADMIN OFF. & TREAS	(i)	256,594.	0.	0.	42,475.	42,290.	341,359.
		(ii)	0.	0.	0.			
7	ALAN RUBACHA DIR. CONSTRUCT. & INFRASTRUCT.	(i)	167,984.	50,000.	12,000.	15,335.	51,615.	296,934.
		(ii)	0.	0.	0.			
8	MICHAEL F. WHALEN DIRECTOR OF ATHLETICS	(i)	199,603.	20,000.	150.	18,922.	54,908.	293,583.
		(ii)	0.	0.	0.			
9	MICHAEL J. WHALEY VP FOR STUDENT AFFAIRS	(i)	226,319.	0.	125.	20,555.	42,996.	289,995.
		(ii)	0.	0.	0.			
10	NATHANAEL GREENE PROFESSOR	(i)	236,886.	0.	0.	21,752.	30,700.	289,338.
		(ii)	0.	0.	0.			
11	SEAN MCCANN CHAIR OF FACULTY	(i)	184,663.	0.	0.	17,127.	80,092.	281,882.
		(ii)	0.	0.	0.			
12	FRANTZ WILLIAMS JR. VP FOR ADVANCEMENT	(i)	229,613.	0.	230.	20,930.	30,886.	281,659.
		(ii)	0.	0.	0.			
13	DAVE BAIRD VICE PRESIDENT FOR IT/CIO	(i)	207,128.	0.	185.	37,692.	30,841.	275,846.
		(ii)	0.	0.	0.			
14	J. DONALD MOON FMR CHAIR OF FACULTY	(i)	212,002.	0.	0.	37,285.	17,392.	266,679.
		(ii)	0.	0.	0.			
15	BARBARA-JAN WILSON FMR VP FOR UNIV. RELATIONS	(i)	178,238.	35,000.	315.	14,349.	30,122.	258,024.
		(ii)	0.	0.	0.			
16	NICOLE LYNN STANTON PROVOST, SR VP ACADEMIC AFF.	(i)	158,095.	0.	0.	14,346.	47,762.	220,203.
		(ii)	0.	0.	0.			

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

For each individual whose compensation must be reported on Schedule 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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 NANCY HARGRAVE MEISLAHN DEAN ADMISS/FIN. AID THRU 8/20	(i)	142,703.	0.	26,200.	25,446.	25,758.	220,107.	
	(ii)	0.	0.	0.				
2 JOYCE JACOBSEN FMR PROVOST AND VICE PRESIDENT	(i)	142,742.	0.	18,166.	13,542.	32,077.	206,527.	
	(ii)	0.	0.	0.				
3 JANICE R. NAEGELE FMR CHAIR OF FACULTY	(i)	155,290.	0.	0.	12,079.	17,300.	184,669.	
	(ii)	0.	0.	0.				
4 LAURA GRABEL FMR CHAIR OF FACULTY	(i)	142,863.	0.	0.	0.	0.	142,863.	0.
	(ii)	0.	0.	0.				
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

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.

BENEFITS

PART I, LINE 1A

UNDER THE UNIVERSITY'S TRAVEL POLICY, EMPLOYEES MAY TRAVEL IN COACH CLASS ONLY. IN CIRCUMSTANCES WHERE SCHEDULING OR A MEDICAL CONDITION NECESSITATES OTHER ARRANGEMENTS, BUSINESS CLASS TRAVEL IS AUTHORIZED. ON INFREQUENT OCCASIONS WHERE BUSINESS CLASS OPTIONS HAVE NOT BEEN AVAILABLE, THE PRESIDENT HAS TRAVELLED FIRST CLASS WITH THE SPECIFIC APPROVAL OF THE FINANCE OFFICE.

THE PRESIDENT AND VICE PRESIDENT FOR STUDENT AFFAIRS MUST LIVE ON CAMPUS AS A REQUIREMENT OF THEIR EMPLOYMENT AND THE FAIR MARKET VALUE OF THE HOUSING HAS BEEN INCLUDED AS A NON-TAXABLE FRINGE BENEFIT ON SCHEDULE J.

NON-FIXED BONUSSES

PART I, LINE 7

50% OF INVESTMENT OFFICE BONUSSES ARE BASED ON QUANTITATIVE METRICS AND 50% ARE BASED ON A QUALITATIVE ASSESSMENT OF STAFF PERFORMANCE BY THE CIO AND BOARD OF TRUSTEES.

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.

THE PRESIDENT HAS AN INCENTIVE BONUS BASED ON FUNDRAISING TARGETS SET BY
THE BOARD OF TRUSTEES EVERY YEAR.

HOUSING ALLOWANCES

PART II, COLUMN D

THE FAIR MARKET VALUE OF HOUSING PROVIDED TO THE FOLLOWING INDIVIDUALS,
AS A REQUIREMENT OF THEIR EMPLOYMENT, THAT IS REPORTED IN THEIR
NONTAXABLE BENEFITS IS AS FOLLOWS:

PRESIDENT: \$55,046

VICE PRESIDENT FOR STUDENT AFFAIRS: \$11,875

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

WESLEYAN BONDS

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.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

WESLEYAN UNIVERSITY

Employer identification number

06-0646959

Part I Bond Issues

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

Part II Proceeds

	A		B		C		D	
1 Amount of bonds retired								
2 Amount of bonds legally defeased								
3 Total proceeds of issue	20,105,000.							
4 Gross proceeds in reserve funds								
5 Capitalized interest from proceeds								
6 Proceeds in refunding escrows								
7 Issuance costs from proceeds	105,000.							
8 Credit enhancement from proceeds								
9 Working capital expenditures from proceeds								
10 Capital expenditures from proceeds								
11 Other spent proceeds	20,000,000.							
12 Other unspent proceeds								
13 Year of substantial completion	2008							
	Yes	No	Yes	No	Yes	No	Yes	No
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X							
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X						
16 Has the final allocation of proceeds been made?	X							
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

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

Schedule K (Form 990) 2019

Part III Private Business Use		WESLEYAN BONDS							
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c	Are there any research agreements that may result in private business use of bond-financed property?		X						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	.0400 %							
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 50400 %							
7	Does the bond issue meet the private security or payment test?		X						
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b	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?	X							

Part IV Arbitrage									
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		X						
b	Exception to rebate?		X						
c	No rebate due?	X							
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	X							

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

PART I, CHEFA 2010 SERIES G

DEFEASEMENT OF SERIES G

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

PART III LINE 4

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

PART IV, LINE 2A

NO REBATE CALCULATION WAS COMPLETED SINCE THE 2010 BOND ISSUE WAS STRICTLY A REFUNDING OF PRIOR BOND ISSUES AND THERE WERE NO CONSTRUCTION FUND OR ADDITIONAL PROCEEDS EXPENDED.

SCHEDULE L
(Form 990 or 990-EZ)

Transactions With Interested Persons

OMB No. 1545-0047

2019

Open To Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **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.**

Name of the organization
WESLEYAN UNIVERSITY

Employer identification number
06-0646959

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

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

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

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

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
				(1)									
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total ▶							\$						

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

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) ANNE GREENE	FAMILY OF J FRANK-TRUSTEE	249,683.	EMPLOYEE COMPENSATION		X
(2) NATHANAEL GREENE	FAMILY OF J FRANK-TRUSTEE	291,245.	EMPLOYEE COMPENSATION		X
(3) KARI WEIL	SPOUSE OF M ROTH-OFFICER	149,586.	EMPLOYEE COMPENSATION		X
(4) MORGAN FRANK	FAMILY OF J FRANK-TRUSTEE	73,080.	EMPLOYEE COMPENSATION		X
(5) FRANCESCA BAIRD	SPOUSE OF D BAIRD-KEY	110,614.	EMPLOYEE COMPENSATION		X
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

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

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

**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 instructions and the latest information.

Name of the organization

WESLEYAN UNIVERSITY

Employer identification number

06-0646959

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	3 .	1,058,100 .	FMV
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles.				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	85 .	9,808,987 .	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (ATCH 1)		4 .	3,295 .	
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 2 .

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2019

JSA

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

PART I, COLUMN (B)

THE UNIVERSITY REPORTS THE NUMBER OF CONTRIBUTORS IN PART I, COLUMN (B)

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

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>(A) CHECK</u>	<u>(B) NUMBER OF CONTRIBUTIONS</u>	<u>(C) REVENUES REPORTED</u>	<u>(D) METHOD OF DETERMINING</u>
ATHLETIC EQUIPMENT	X	1.	265.	FMV
WINE	X	1.	1,080.	FMV
VARIOUS	X	2.	1,950.	FMV
TOTALS		<u>4.</u>	<u>3,295.</u>	

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

WESLEYAN UNIVERSITY

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Employer identification number

06-0646959

AMENDED RETURN

FORM 990 IS BEING AMENDED TO INCLUDE SCHEDULE K TAK-EXEMPT BOND

INFORMATION THAT WAS INADVERTENTLY OMITTED FROM THE ORIGINALLY FILED FORM

990.

FORM 990, PART I, LINE 1 & PART III, LINE 1

ORGANIZATION'S MISSION

I.

WESLEYAN UNIVERSITY IS DEDICATED TO PROVIDING AN EDUCATION IN THE LIBERAL
ARTS THAT IS CHARACTERIZED BY BOLDNESS, RIGOR, AND PRACTICAL IDEALISM. AT
WESLEYAN, DISTINGUISHED SCHOLAR-TEACHERS WORK CLOSELY WITH STUDENTS,
TAKING ADVANTAGE OF FLUIDITY AMONG DISCIPLINES TO EXPLORE THE WORLD WITH
A VARIETY OF TOOLS. THE UNIVERSITY SEEKS TO BUILD A DIVERSE, ENERGETIC
COMMUNITY OF STUDENTS, FACULTY, AND STAFF WHO THINK CRITICALLY AND
CREATIVELY AND WHO VALUE INDEPENDENCE OF MIND AND GENEROSITY OF SPIRIT.

II. VALUES AND CULTURE

AS A LEARNING COMMUNITY

WESLEYAN EDUCATES STUDENTS TO BECOME INDEPENDENT THINKERS CAPABLE OF
CONTINUING TO LEARN AND ABLE TO TRANSLATE INTELLECTUAL RIGOR INTO
REAL-WORLD ACTION. AT WESLEYAN, STUDENTS ARE DRIVEN TO MAKE KNOWLEDGE
MORE AVAILABLE AND MORE MEANINGFUL, TO PUSH INSIGHTS ACROSS BORDERS INTO
NEW DOMAINS, AND TO ENGAGE WITH NEW OR NEGLECTED AUDIENCES. THEY DISCOVER
WHAT THEY LOVE TO DO AND GET BETTER AT IT - WHILE CONSTANTLY BEING

Name of the organization WESLEYAN UNIVERSITY	Employer identification number 06-0646959
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CHALLENGED TO MAKE WHAT THEY LEARN RELEVANT TO OTHERS. WESLEYAN CREATES AN ENVIRONMENT IN WHICH STUDENTS CAN STRIVE FOR EXCELLENCE THROUGH HARD WORK THAT IS JOYFUL AND SATISFYING. ALUMNI OF THE INSTITUTION CONTINUE TO DRAW ON THEIR LEARNING EXPERIENCES FOR THE REST OF THEIR LIVES AND REMAIN DEVOTED TO THE INSTITUTION.

AS A CENTER FOR CREATIVE PRACTICE

WESLEYAN ATTRACTS FACULTY AND STUDENTS WHO FIND ENORMOUS VALUE IN INDEPENDENT RESEARCH, SCHOLARSHIP, AND CREATIVE PRACTICE. PROFESSORS EMBRACE THEIR ROLE AS SCHOLARS-TEACHERS AND ARE ENERGIZED BY THEIR STUDENTS' DEEP INQUISITIVENESS, UNGUARDED CURIOSITY, AND EAGERNESS TO EXPLORE BEYOND THE SYLLABUS. THE UNIVERSITY'S SMALL GRADUATE PROGRAMS IN THE SCIENCES AND MUSIC FACILITATE COLLABORATIVE RESEARCH. UNDERGRADUATES ARE GIVEN OPPORTUNITIES FOR ADVANCED INDEPENDENT WORK THROUGH WHICH THEY INCREASE THEIR INTELLECTUAL CAPACITIES AND DISCOVER ASPECTS OF THEMSELVES AND THE WORLD THAT WILL REMAIN MEANINGFUL TO THEM LONG AFTER GRADUATION. MEMBERS OF THE WESLEYAN COMMUNITY ADDRESS SCHOLARLY ISSUES OF IMPORTANCE TO THEIR RESPECTIVE FIELDS AND REGULARLY PRODUCE WORK THAT GOES BEYOND ACADEMIC REALMS TO HAVE A POSITIVE IMPACT ON PUBLIC LIFE.

AS AN INSTITUTIONAL CITIZEN AND LEADER IN EDUCATION

WESLEYAN INSPIRES FACULTY, STAFF AND STUDENTS TO PLAY ACTIVE ROLES AS NEIGHBORS AND CITIZENS. THE UNIVERSITY CONTRIBUTES ECONOMICALLY AND CULTURALLY TO MIDDLETOWN, AND IT INSTILLS IN ITS GRADUATES A SENSE OF CIVIC POSSIBILITY AND PURPOSE. WESLEYAN ALUMNI CREATE OPPORTUNITIES TO

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INTEGRATE SERVICE INTO THEIR PROFESSIONAL AND PERSONAL LIVES AND GENEROUSLY SUPPORT THE EDUCATIONAL ENTERPRISE ON CAMPUS. THE UNIVERSITY SUPPORTS THE CONTINUED EVOLUTION OF A LIBERAL ARTS EDUCATION AND MAKES A CASE FOR ITS IMPORTANCE IN THE PUBLIC SPHERE. MEMBERS OF THE WESLEYAN COMMUNITY REGULARLY GO ON TO DISTINGUISHED CAREERS IN PUBLIC SERVICE, AND THE UNIVERSITY PROVIDES SUPPORT FOR DISSEMINATING SCHOLARSHIP THAT CAN HAVE POSITIVE PUBLIC IMPACT.

FORM 990, PART III, LINE 4A

INSTRUCTION AND RESEARCH INCLUDES ALL EXPENDITURES FOR COMPENSATION AND OTHER EXPENSES IN SUPPORT OF INSTRUCTIONAL ACTIVITY.

- 763 BACHELOR OF ARTS AND 78 GRADUATE DEGREES WERE AWARDED IN 2019.
- TODAY WESLEYAN OFFERS INSTRUCTION IN 45 DEPARTMENTS, 45 MAJOR FIELDS OF STUDY, 29 MINOR FIELDS OF STUDY, AND 3 CERTIFICATES OF STUDY AND AWARDS THE BACHELOR OF ARTS AND GRADUATE DEGREES. THE MASTER OF ARTS DEGREE AND THE DOCTOR OF PHILOSOPHY ARE REGULARLY AWARDED IN SIX FIELDS OF STUDY. STUDENTS MAY CHOOSE FROM MORE THAN 1000 COURSES EACH YEAR AND MAY BE COUNTED UPON TO DEVISE, WITH THE FACULTY, SOME 800 INDIVIDUAL TUTORIALS AND LESSONS.
- THE STUDENT BODY IS MADE UP OF APPROXIMATELY 3,100 STUDENTS FULL-TIME UNDERGRADUATES AND 150 GRADUATE STUDENTS, AS WELL AS AROUND 140 PART-TIME STUDENTS PER YEAR IN THE GRADUATE LIBERAL STUDIES PROGRAM. AN ONGOING FACULTY OF MORE THAN 440 IS JOINED EACH SEMESTER BY A DISTINGUISHED GROUP OF VISITING ARTISTS AND PROFESSORS. TODAY'S STUDENT/INSTRUCTOR RATIO IS 8 TO 1, AND ABOUT TWO THIRDS OF ALL COURSES ENROLL FEWER THAN 20 STUDENTS.

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FORM 990, PART III, LINE 4B

AUXILIARY SERVICES INCLUDE THE COSTS OF ROOM AND BOARD FOR APPROXIMATELY 3,000 STUDENTS RESIDING ON A 316 ACRE CAMPUS. THERE ARE 8 RESIDENCE HALLS, 7 APARTMENT COMPLEXES AND OVER 25 PROGRAM HOUSES IN ADDITION TO OVER 140 HOUSE UNITS ON CAMPUS FOR UPPER-CLASS STUDENTS. WORKING IN PARTNERSHIP WITH STUDENTS AND COLLABORATIVELY WITH OTHER MEMBERS OF THE WESLEYAN COMMUNITY, THE OFFICE OF RESIDENTIAL LIFE STRIVES TO PROVIDE A SAFE AND SUPPORTIVE RESIDENTIAL ENVIRONMENT THAT COMPLEMENTS AND EXTENDS STUDENTS EDUCATIONAL EXPERIENCE. STUDENT-CENTERED PROGRAMS AND SERVICES ARE DEVELOPED AND IMPLEMENTED WITH AN EMPHASIS ON HOLISTIC INDIVIDUAL AND COMMUNITY DEVELOPMENT, STUDENT LEADERSHIP, INDIVIDUAL RESPONSIBILITY, ADVOCACY OF ACADEMIC INQUIRY, AND FREEDOM OF THOUGHT, OPINION AND EXPRESSION IN THE SPIRIT OF MUTUAL RESPECT. THESE ARE THE HALLMARKS OF THE WESLEYAN RESIDENTIAL EXPERIENCE, AND THEY PROVIDE THE ESSENTIAL FOUNDATION FOR A QUALITY LIBERAL ARTS EDUCATION WITHIN A DIVERSE AND DYNAMIC COMMUNITY.

FORM 990, PART III, LINE 4C

LIBRARY EXPENSES INCLUDE ACQUISITION OF BOOKS, PERIODICALS AND OTHER MATERIALS, COMPENSATION OF STAFF, AND OTHER EXPENDITURES IN SUPPORT OF THE LIBRARY. THE MISSION OF THE LIBRARY IS TO PROVIDE THE INFORMATION SERVICES AND RESOURCES REQUIRED TO SUPPORT THE LEARNING, TEACHING, AND RESEARCH OF THE WESLEYAN COMMUNITY.

TO CARRY OUT THIS MISSION THE LIBRARY WILL:

- ORGANIZE AND PROVIDE INTELLECTUAL AND PHYSICAL ACCESS TO COLLECTIONS

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AND INFORMATION RESOURCES LOCALLY AND WORLD-WIDE

- DEVELOP AND PRESERVE LOCAL COLLECTIONS
- TEACH AND GUIDE USERS IN THE LIBRARY RESEARCH PROCESS
- PROVIDE AN ATMOSPHERE CONDUCIVE TO STUDY, RESEARCH, AND LEARNING
- CONTRIBUTING TO THE LARGER SCHOLARLY WORLD

THE WESLEYAN LIBRARY WILL PROVIDE UNEXCELLED SERVICES. IT IS A DYNAMIC PLACE WHERE LIBRARY STAFF PROVIDE USERS WITH THE INFORMATION THEY NEED, AS WELL AS A KEEN SENSE THAT THERE ARE MANY PATHS, AND A WIDE RANGE OF SKILLS NECESSARY FOR THE EFFECTIVE USE AND EVALUATION OF INFORMATION RESOURCES.

FORM 990, PART III, LINE 4D

STUDENT SERVICES INCLUDES THE COSTS ASSOCIATED WITH ADMINISTERING THE OFFICE OF ADMISSIONS, REGISTRAR, FINANCIAL AID, CAREER PLANNING, HEALTH SERVICES, INSTITUTIONAL RESEARCH AND DEAN'S OFFICE.

FORM 990, PART VI, SECTION B, QUESTION 11A

FORM 990 REVIEW PROCESS

THE UNIVERSITY'S FISCAL YEAR END IS JUNE 30. THE AUDITED FINANCIAL STATEMENTS ARE FINALIZED IN LATE OCTOBER DUE TO THE TIME IT TAKES TO VALUE ENDOWMENT ASSETS. DURING NOVEMBER AND DECEMBER, A TAX COMMITTEE CONSISTING OF UNIVERSITY GENERAL COUNSEL, ASSOCIATE VP FOR FINANCE, AND CONTROLLER MEET TO DISCUSS ANY SIGNIFICANT CHANGES IN POLICIES, GOVERNANCE, MANAGEMENT AND OTHER ACTIVITY. IN ADDITION, THE FINANCE OFFICE REACHES OUT TO OTHER DEPARTMENTS SUCH AS ACADEMIC AFFAIRS,

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UNIVERSITY RELATIONS, AND ADMISSIONS TO DETERMINE POTENTIAL FILING ACTIVITY. DURING JANUARY AND FEBRUARY THE CONTROLLER'S OFFICE WORKS WITH THE EXTERNAL AUDITORS TO COMPLETE A DRAFT DOCUMENT FOR THE ANNUAL AUDIT COMMITTEE MEETING. THE DOCUMENT IS PROVIDED TO EACH MEMBER OF THE AUDIT COMMITTEE AND DISCUSSED DURING THE MEETING. THE CHAIR OF THE AUDIT COMMITTEE WILL SUMMARIZE THE REVIEW TO THE FULL BOARD OF TRUSTEES THE FOLLOWING DAY. THE FINAL RETURN IS FILED IN MAY WITH A COPY OF THE FINAL RETURN MADE AVAILABLE THROUGH THE TRUSTEE SECURE PORTAL A COUPLE OF WEEKS PRIOR TO THE FINAL FILING TO EACH VOTING MEMBER OF THE GOVERNING BOARD.

FORM 990, PART VI, SECTION B, QUESTION 12C

CONFLICT OF INTEREST POLICY

THE UNIVERSITY POSTS ITS CONFLICT OF INTEREST POLICY ON ITS WEBSITE AND REQUIRES QUESTIONNAIRE COMPLETION FROM UNIVERSITY FACULTY, STAFF AND TRUSTEES ON AN ANNUAL BASIS. FACULTY AND STAFF ARE COLLECTED ELECTRONICALLY THROUGH NETWORK SIGN ON. CONFLICT OF INTEREST QUESTIONNAIRES FROM BOARD MEMBERS ARE COLLECTED BY THE SECRETARY OF THE UNIVERSITY AND REVIEWED BY LEGAL COUNSEL. RESPONSES ARE MONITORED BY THE UNIVERSITY GENERAL COUNSEL IN CONJUNCTION WITH THE PRESIDENT'S OFFICE. ANY SUPERVISOR RECEIVING NOTICE OF A POTENTIAL CONFLICT OF INTEREST SHALL DETERMINE WHETHER THE SITUATION PRESENTS A POTENTIAL CONFLICT OF INTEREST UNDER THIS POLICY AND DOCUMENT THEIR DETERMINATION IN WRITING. UNLESS THE SUPERVISOR IS ABLE TO CLEARLY DETERMINE THAT NO SUCH CONFLICT EXISTS OR IN THE CASE THAT THE INDIVIDUAL DISAGREES WITH THE SUPERVISOR'S DECISIONS, THE SUPERVISOR SHALL REQUIRE THE INDIVIDUAL TO DISCLOSE THE SITUATION IN WRITING AND THE SUPERVISOR AND/OR INDIVIDUAL SHALL FORWARD

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THAT DESCRIPTION TO AN APPROPRIATE VICE PRESIDENT OR SENIOR OFFICER OF THE UNIVERSITY. THE SUPERVISOR SHALL NOT PERMIT ANY INDIVIDUAL TO PARTICIPATE IN THE QUESTIONABLE ACTIVITY UNLESS AND UNTIL A VICE PRESIDENT OR SENIOR OFFICER OF THE UNIVERSITY HAS REVIEWED THE ACTIVITY AND CONFIRMED IN WRITING THAT THE ACTIVITY MAY CONTINUE AND/OR THAT THERE ARE RELEVANT SAFEGUARDS IN PLACE TO PROTECT THE UNIVERSITY. ANY INDIVIDUAL WHO DISAGREES WITH A CONFLICT-RELATED DECISION OF ANY VICE PRESIDENT OR SENIOR OFFICER MAY SEEK REVIEW BY THE PRESIDENT OF THE UNIVERSITY WHOSE DECISION SHALL BE FINAL. ON AN ANNUAL BASIS THE UNIVERSITY DISTRIBUTES AND REQUIRES INDIVIDUALS TO COMPLETE A STATEMENT A) CONFIRMING THAT THEY HAVE READ AND UNDERSTOOD THE CONFLICT OF INTEREST POLICY AND B) THAT THEY HAVE NO KNOWLEDGE OF ANY CONFLICT OF INTEREST EXCEPT FOR THOSE APPROPRIATELY DISCLOSED UNDER THE POLICY.

FORM 990, PART VI, SECTION B, QUESTIONS 15A AND 15B
COMPENSATION POLICY

WESLEYAN UNIVERSITY'S SALARY ADMINISTRATION IS DESIGNED TO ACCOMPLISH
THREE MAJOR OBJECTIVES:

- ATTRACT AND RETAIN HIGHLY QUALIFIED STAFF MEMBERS;
- LINK COMPENSATION TO PERFORMANCE; AND
- PROMOTE CONSISTENCY AND AN INTERNALLY EQUITABLE RELATIONSHIP BETWEEN SALARY AND RESPONSIBILITY

A COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES, COMPOSED OF THREE MEMBERS AND CHAIRED BY THE CHAIR OF THE BOARD OF TRUSTEES, IS RESPONSIBLE FOR EVALUATING THE COMPENSATION REASONABLENESS FOR ALL OFFICERS AND KEY

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EMPLOYEES AS DETERMINED FROM TIME TO TIME. THE COMMITTEE REVIEWS THE PERFORMANCE APPRAISAL OF THE PRESIDENT BY THE BOARD, DETERMINES THE COMPENSATION OF THE PRESIDENT, AND SETS GOALS AND PERFORMANCE MEASURES FOR THE FOLLOWING YEAR. THE COMMITTEE BEGINS DISCUSSION IN THE SECOND HALF OF THE ACADEMIC YEAR. WESLEYAN PARTICIPATES IN AN ANNUAL SURVEY OF ITS PEERS CONDUCTED BY A PRIVATE CONSULTANT. THIS PROCESS ENSURES THAT THE UNIVERSITY REMAINS CONSISTENT WITH THE REGULATORY AND LEGAL REQUIREMENTS OF COMPENSATION IN A 501(C)(3) NON-PROFIT ORGANIZATION.

THE PROCESS FOR DETERMINING THE COMPENSATION OF THE PRESIDENT MEETS THE THREE REQUIREMENTS OF THE REBUTTABLE PRESUMPTION STANDARD. THE COMPENSATION ARRANGMENT IS APPROVED IN ADVANCE BY THE ORGANIZATION'S COMPENSATION COMMITTEE. THE COMMITTEE IS APPOINTED BY THE BOARD OF TRUSTEES FOR THE PURPOSE OF ASSISTING THE BOARD TO FULFILL ITS RESPONSIBILITY TO THE ORGANIZATION AND THE COMMUNITY TO ENSURE THE COMPENSATION IS IN ACCORDANCE WITH THE ORGANIZATION'S POLICIES. PRIOR TO MAKING ANY COMPENSATION DECISIONS, THE COMPENSATION COMMITTEE OBTAINS AND RELIES UPON APPROPRIATE DATA AS TO COMPARABILITY. THE COMMITTEE UTILIZES LOCAL AND NATIONAL COMPENSATION SURVEYS TO SET COMPENSATION LEVELS. FINALLY, THE EXECUTIVE COMPENSATION COMMITTEE ADEQUATELY AND TIMELY DOCUMENTS THE BASIS FOR SETTING COMPENSATION CONCURRENTLY WITH THE MAKING OF THE DETERMINATION.

FORM 990, PART VI, SECTION C, QUESTION 19

PUBLIC DISCLOSURE

THE UNIVERSITY POSTS ITS GOVERNING DOCUMENTS ON ITS WEBSITE AT

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WWW.WESLEYAN.EDU/GENERALCOUNSEL. IN ADDITION, THE UNIVERSITY'S AUDITED FINANCIAL STATEMENTS ARE ON ITS WEBSITE AT WWW.WESLEYAN.EDU/FINANCE. THE UNIVERSITY'S FORM 990 IS POSTED ON WWW.GUIDESTAR.ORG. THE FORM 990, AUDITED FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9

OTHER REVENUE NOT INCLUDED IN AFS NOT IN FORM 990:

POSTRETIREMENT BENEFIT OBLIGATIONS CHANGES	(1,641,000)
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	(1,533,000)

	(3,174,000)

ATTACHMENT 1FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

FRANCE

GERMANY

ITALY

SPAIN

ATTACHMENT 2990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
COMPASS GROUP USA PO BOX 417632 BOSTON, MA 02241	DINING SERVICES	7,282,158.
SMG CORPORATE SERVICES PO BOX 53 BRATTLEBORO, VT 05302-0053	CUSTODIAL SERVICES	2,932,498.

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ATTACHMENT 2 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
FIP CONSTRUCTION INC 1536 NEW BRITAIN AVE FARMINGTON, CT 06032	CONSTRUCTION SVCS	2,789,031.
A/Z CORPORATION 46 NORWICH-WESTERLY RD NORTH STONINGTON, CT 06359	CONSTRUCTION SVCS	2,259,587.
MURTHA CULLINA LLP 1 CITY AVE HARTFORD, CT 06103	LEGAL SERVICES	1,990,752.

ATTACHMENT 3

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
FIXED INCOME	73,115,000.	49,660,000.	FMV
US STOCKS	132,980,000.	142,558,000.	FMV
INTERNATIONAL STOCKS	197,252,000.	169,369,000.	FMV
SPLIT INTEREST AGREEMENTS	24,293,000.	24,075,000.	FMV
MARKETABLE ALTERNATIVES	211,063,000.	258,925,000.	FMV
TOTALS	<u>638,703,000.</u>	<u>644,587,000.</u>	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Name of the organization

WESLEYAN UNIVERSITY

Employer identification number

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

Table with 6 columns: (a) Name, address, and EIN (if applicable) of disregarded entity; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Total income; (e) End-of-year assets; (f) Direct controlling entity. Rows 1-6 are empty.

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

Table with 7 columns: (a) Name, address, and EIN of related organization; (b) Primary activity; (c) Legal domicile (state or foreign country); (d) Exempt Code section; (e) Public charity status (if section 501(c)(3)); (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity? (Yes/No). Rows 1-7 are empty.

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

Schedule R (Form 990) 2019

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUST (2) 237 HIGH STREET MIDDLETOWN, CT 06459	INVESTING	CT	N/A	TRUST				X	
(2) CHARITABLE REMAINDER UNITRUST - CT (12) 237 HIGH STREET MIDDLETOWN, CT 06459	INVESTING	CT	N/A	TRUST				X	
(3) POOLED INCOME FUND (2) 237 HIGH STREET MIDDLETOWN, CT 06459	INVESTING	CT	N/A	TRUST				X	
(4) LIFE INCOME AGREEMENTS (1) 237 HIGH STREET MIDDLETOWN, CT 06459	INVESTING	CT	N/A	TRUST				X	
(5)									
(6)									
(7)									

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	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b Gift, grant, or capital contribution to related organization(s)	1b	X
c Gift, grant, or capital contribution from related organization(s)	1c	X
d Loans or loan guarantees to or for related organization(s)	1d	X
e Loans or loan guarantees by related organization(s)	1e	X
f Dividends from related organization(s)	1f	X
g Sale of assets to related organization(s)	1g	X
h Purchase of assets from related organization(s)	1h	X
i Exchange of assets with related organization(s)	1i	X
j Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o Sharing of paid employees with related organization(s)	1o	X
p Reimbursement paid to related organization(s) for expenses	1p	X
q Reimbursement paid by related organization(s) for expenses	1q	X
r Other transfer of cash or property to related organization(s)	1r	X
s Other transfer of cash or property from related organization(s)	1s	X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.
