



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990

Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 06-01-2012 , 2012, and ending 05-31-2013

<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization Webster University		<b>D Employer identification number</b>  43-0662529	
	Doing Business As			
	Number and street (or P O box if mail is not delivered to street address) 470 East Lockwood Avenue Suite	Room/suite	E Telephone number  (314) 968-6900	
	City or town, state or country, and ZIP + 4 St Louis, MO 631193194		<b>G</b> Gross receipts \$ 329,223,139	
	<b>F</b> Name and address of principal officer DR ELIZABETH STROBLE 470 EAST LOCKWOOD AVENUE ST LOUIS,MO 631193194		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)  <b>H(c)</b> Group exemption number ▶	
<b>I</b> 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				
<b>J Website:</b> ▶ www.webster.edu				

<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation 1924	<b>M</b> State of legal domicile MO
--	---------------------------------	-------------------------------------

Part I

Summary

Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities WEBSTER UNIVERSITY, A WORLDWIDE INSTITUTION, ENSURES HIGH QUALITY LEARNING EXPERIENCES THAT TRANSFORM STUDENTS FOR GLOBAL CITIZENSHIP AND INDIVIDUAL EXCELLENCE		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a) . . . . .	<b>3</b>	40
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b) . . . . .	<b>4</b>	33
	<b>5</b>	Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . . .	<b>5</b>	5,108
	<b>6</b>	Total number of volunteers (estimate if necessary) . . . . .	<b>6</b>	1,946
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .	<b>7a</b>	-14,491
	<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34 . . . . .	<b>7b</b>	-49,894
	Revenue	<b>8</b>	Contributions and grants (Part VIII, line 1h) . . . . .	<b>Prior Year</b>
<b>9</b>		Program service revenue (Part VIII, line 2g) . . . . .	7,139,728	4,944,798
<b>10</b>		Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .	191,987,615	191,948,269
<b>11</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	6,425,932	7,087,047
<b>12</b>		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	1,381,525	1,378,458
			206,934,800	205,358,572
Expenses	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .	21,456,265	24,688,776
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4) . . . . .	0	0
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	108,689,051	110,514,233
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e) . . . . .	259,131	152,711
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶3,557,697		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .	61,242,261	63,828,186
	<b>18</b>	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	191,646,708	199,183,906
	<b>19</b>	Revenue less expenses Subtract line 18 from line 12 . . . . .	15,288,092	6,174,666
Net Assets or Fund Balances		<b>Beginning of Current Year</b>	<b>End of Year</b>	
	<b>20</b>	Total assets (Part X, line 16) . . . . .	413,477,948	437,734,612
	<b>21</b>	Total liabilities (Part X, line 26) . . . . .	123,932,281	124,570,972
	<b>22</b>	Net assets or fund balances Subtract line 21 from line 20 . . . . .	289,545,667	313,163,640

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	*****		2014-02-17	
	Signature of officer		Date	
Paid Preparer Use Only	GREG GUNDERSON VP FINANCE & ADMIN, CFO			
	Type or print name and title			
	Prnt/Type preparer's name Donna J Larson	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	Firm's name ▶ BKD LLP		Firm's EIN ▶	
	Firm's address ▶ 211 N BROADWAY SUITE 600 ST LOUIS, MO 631022733		Phone no (314) 231-5544	

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

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

☐

1

Briefly describe the organization's mission

WEBSTER UNIVERSITY STRIVES TO BE A PREMIER U S BASED INTERNATIONAL UNIVERSITY SETTING A DISTINCT STANDARD FOR GLOBAL EDUCATION

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ 172,693,137 including grants of \$ 24,688,776 ) (Revenue \$ 192,246,681 )

SEE SCHEDULE O

4b

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d

Other program services (Describe in Schedule O )



















(Expenses \$ including grants of \$ ) (Revenue \$ )

4e

Total program service expenses 172,693,137

Part IV

Checklist of Required Schedules

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

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> . . . . .	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		No
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b	Yes	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	324
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	5,108
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes
b	If "Yes," enter the name of the foreign country AU , CH , NL , SZ , TH , GH See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Part VI

Governance, Management, and Disclosure

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

Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1a	40		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent		
1b	33		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	8a	Yes
b	Each committee with authority to act on behalf of the governing body?	8b	Yes
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	CA , GA , MD , MA , MI , OK , SC
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	GREG GUNDERSON 470 EAST LOCKWOOD AVENUE ST LOUIS, MO (314) 246-7406

Check if Schedule O contains a response to any question in this Part VII . . . . . ☒

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

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

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

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

[illegible]



## Part VII

(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			
<b>1b</b> Sub-Total . . . . .										
<b>c</b> Total from continuation sheets to Part VII, Section A . . . . .										
<b>d</b> Total (add lines 1b and 1c) . . . . .							2,518,927	0	359,650	

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 98

		Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	3 Yes	
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> . . . . .	4 Yes	
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> . . . . .	5	No

## **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)	(B)	(C)
Name and business address	Description of services	Compensation
PARIC CORPORATION , 1001 BOARDWALK SPRINGS PS STE 220 OFALLON MO 63368	CONSTRUCTION	2,857,320
THE HUGHES GROUP INC , 1141 S 7TH STREET ST LOUIS MO 63104	ADVERTISING SERVICES	3,409,888
SODEXO INC , 4880 PAYSHERE CIRCLE CHICAGO IL 60674	FOOD SERVICE	2,776,653
WORLD WIDE TECHNOLOGY , 56 WELDON PARKWAY MARYLAND HEIGHTS MO 63043	COMPUTER SERVICES	1,306,223
SPELLMAN BRADY COMPANY , 8251 MARYLAND AVE 300 ST LOUIS MO 63106	INTERIOR DESIGN	1,278,694

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►48

Part VIII

Statement of Revenue

Check if Schedule O contains a response to any question 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, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a			
	b	Membership dues . . . . .	1b			
	c	Fundraising events . . . . .	1c	38,275		
	d	Related organizations . . . .	1d			
	e	Government grants (contributions)	1e	1,644,776		
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,261,747		
	g	Noncash contributions included in lines 1a-1f \$		835,174		
	h	Total. Add lines 1a-1f . . . . .		4,944,798		
Program Service Revenue	2a	ANCILLARY OPERATIONS	Business Code 611710	149,349	149,349	
	b	AUXILIARY ENTERPRISES	611710	8,019,313	8,019,313	
	c	TUITION AND FEES	611600	183,779,607	183,779,607	
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f . . . . .		191,948,269		
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .		4,655,818	
4		Income from investment of tax-exempt bond proceeds . . .		0		
5		Royalties . . . . .		0		
6a		Gross rents	(i) Real 1,822,012	(ii) Personal		
b		Less rental expenses	1,209,020			
c		Rental income or (loss)	612,992	0		
d		Net rental income or (loss) . . . . .		612,992	-35,909	648,901
7a		Gross amount from sales of assets other than inventory	(i) Securities 125,079,071	(ii) Other		
b		Less cost or other basis and sales expenses	122,577,603	70,239		
c		Gain or (loss)	2,501,468	-70,239		
d		Net gain or (loss) . . . . .		2,431,229		2,431,229
8a		Gross income from fundraising events (not including \$ 38,275 of contributions reported on line 1c) See Part IV, line 18 . . . . .	a 21,409			
b		Less direct expenses . . . . .	b 7,705			
c		Net income or (loss) from fundraising events . . .		13,704		13,704
9a		Gross income from gaming activities See Part IV, line 19 . . . . .	a			
b		Less direct expenses . . . . .	b			
c		Net income or (loss) from gaming activities . . .		0		
10a		Gross sales of inventory, less returns and allowances . . . . .	a			
b		Less cost of goods sold . . . . .	b			
c		Net income or (loss) from sales of inventory . . .		0		
Miscellaneous Revenue		Business Code				
11a		TENNIS CENTER INCOME	713990	21,343		21,343
b	ATHLETIC INC CAMPS/APPAREL SALES/TRAVEL STIPEN	900099	183,694	183,694		
c	VA REPORTING FEE	900099	47,591		47,591	
d	All other revenue . . . . .		499,134	114,718	75	
e	Total. Add lines 11a-11d . . . . .		751,762			
12	Total revenue. See Instructions . . . . .		205,358,572	192,246,681	-14,491	8,181,584

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 to any question in this Part IX

☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	404,089	404,089		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	24,284,687	24,284,687		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members.	0			
5	Compensation of current officers, directors, trustees, and key employees.	1,598,928	371,830	1,227,098	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	13,348	13,348		
7	Other salaries and wages.	87,760,663	79,423,967	6,489,902	1,846,794
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	4,022,250	3,534,476	345,003	142,771
9	Other employee benefits.	10,743,165	8,568,947	1,836,786	337,432
10	Payroll taxes.	6,375,879	5,740,594	507,042	128,243
11	Fees for services (non-employees):				
a	Management.	0			
b	Legal.	989,065	23,525	965,540	
c	Accounting.	134,533		134,533	
d	Lobbying.	88,229		88,229	
e	Professional fundraising services. See Part IV, line 17.	152,711			152,711
f	Investment management fees.	115,009		115,009	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	5,609,670	3,467,439	2,064,495	77,736
12	Advertising and promotion.	7,170,381	7,160,410	9,336	635
13	Office expenses.	9,752,174	7,414,612	2,099,192	238,370
14	Information technology.	4,149,048	3,122,402	916,206	110,440
15	Royalties.	0			
16	Occupancy.	11,070,745	9,989,820	1,039,057	41,868
17	Travel.	3,246,953	2,557,556	606,014	83,383
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19	Conferences, conventions, and meetings.	2,037,659	1,632,500	221,028	184,131
20	Interest.	2,639,588	2,147,878	457,696	34,014
21	Payments to affiliates.	0			
22	Depreciation, depletion, and amortization.	11,452,467	9,321,675	1,984,929	145,863
23	Insurance.	1,726,122	682,294	1,037,685	6,143
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	BAD DEBTS	1,223,707	1,216,634		7,073
b	MEMBERSHIP FEES	607,614	379,536	217,769	10,309
c	GRADUATION EXPENSE	227,190	223,561	3,185	444
d	BOND FEES	77,002	62,680	13,344	978
e	All other expenses	1,511,030	948,677	553,994	8,359
25	<b>Total functional expenses.</b> Add lines 1 through 24e.	199,183,906	172,693,137	22,933,072	3,557,697
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

Check if Schedule O contains a response to any question in this Part X

☐

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		17,004,982	1	20,146,803
	2	Savings and temporary cash investments		3,717,016	2	22,017,129
	3	Pledges and grants receivable, net		11,198,232	3	10,269,252
	4	Accounts receivable, net		35,333,592	4	29,233,395
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		2,233,712	7	5,161,927
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		3,522,922	9	2,433,305
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a265,556,831			
	b	Less accumulated depreciation	10b115,235,760	146,360,677	10c	150,321,071
	11	Investments—publicly traded securities		181,909,274	11	185,127,553
	12	Investments—other securities See Part IV, line 11		8,637,513	12	9,666,365
	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		3,560,028	15	3,357,812
	16	Total assets. Add lines 1 through 15 (must equal line 34)		413,477,948	16	437,734,612
Liabilities	17	Accounts payable and accrued expenses		18,223,441	17	20,370,244
	18	Grants payable		2,262,316	18	2,255,664
	19	Deferred revenue		25,269,348	19	24,557,321
	20	Tax-exempt bond liabilities		63,071,971	20	62,800,961
	21	Escrow or custodial account liability Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		15,105,205	23	14,586,782
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	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		0	25	0
	26	Total liabilities. Add lines 17 through 25		123,932,281	26	124,570,972
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		250,356,178	27	270,041,572
	28	Temporarily restricted net assets		22,510,747	28	24,714,748
	29	Permanently restricted net assets		16,678,742	29	18,407,320
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		289,545,667	33	313,163,640
	34	Total liabilities and net assets/fund balances		413,477,948	34	437,734,612

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . .

1	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	1	205,358,572
2	Total expenses (must equal Part IX, column (A), line 25) . . . . .	2	199,183,906
3	Revenue less expenses Subtract line 2 from line 1 . . . . .	3	6,174,666
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	4	289,545,667
5	Net unrealized gains (losses) on investments . . . . .	5	14,928,641
6	Donated services and use of facilities . . . . .	6	
7	Investment expenses . . . . .	7	
8	Prior period adjustments . . . . .	8	
9	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	9	2,514,666
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	313,163,640

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . .

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?	Yes	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	Yes	

Additional Data

Software ID:

Software Version:

EIN: 43-0662529

Name: Webster University

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
SHEILA BAXTER TRUSTEE	1 0	X						0	0	0
AMELIA J BOND TRUSTEE	1 0	X						0	0	0
LAURANCE L BROWNING JR LIFE TRUSTEE, DECEASED 12/2012	1 0	X						0	0	0
MARK BURKHART TRUSTEE	1 0	X						0	0	0
DALE CAMMON TRUSTEE	1 0	X						0	0	0
A BAYARD CLARK III TRUSTEE	1 0	X						0	0	0
THOMAS CORNWELL TRUSTEE	1 0	X						20,035	0	0
ROBERT M COX JR TRUSTEE	1 0	X						0	0	0
CLARK S DAVIS TRUSTEE	1 0	X						0	0	0
DARRYL W DAVIS TRUSTEE	1 0	X						0	0	0
MICHAEL DEHAVEN TRUSTEE	1 0	X						0	0	0
ALISON N FERRING TRUSTEE	1 0	X						0	0	0
STEVEN L FINERTY TRUSTEE	1 0	X						0	0	0
MARILYN FOX TRUSTEE	1 0	X						0	0	0
EDWARD L GLOTZBACH TRUSTEE	1 0	X						0	0	0
KRISTOFER KNAPESTEIN TRUSTEE	1 0	X						0	0	0
PHILIP J KOEN TRUSTEE	1 0	X						0	0	0
RONALD J KRUSZEWSKI TRUSTEE	1 0	X						0	0	0
PAUL LEE TRUSTEE	1 0	X						0	0	0
P JOSEPH MCKEE III TRUSTEE	1 0	X						0	0	0
LEE J METCALF TRUSTEE	1 0	X						0	0	0
MICHAEL NEIDORFF TRUSTEE	1 0	X						0	0	0
GREGORY L NELSON TRUSTEE	1 0	X						0	0	0
BRENDA NEWBERRY CHAIR OF THE BOARD	1 0	X						0	0	0
JERRY RITTER TRUSTEE	1 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ELIZABETH ROBB TRUSTEE	1 0	X						0	0	0
GEORGE SCHERER TRUSTEE	1 0	X						0	0	0
WILLIAM W SNYDER TRUSTEE	1 0	X						0	0	0
DAVID STEWARD TRUSTEE	1 0	X						0	0	0
STEVEN SWYERS VICE CHAIR OF THE BOARD	1 0	X						0	0	0
ANTHONY THOMPSON TRUSTEE	1 0	X						0	0	0
EUGENE TOOMBS TRUSTEE	1 0	X						0	0	0
MARKUS TRICE TRUSTEE	1 0	X						0	0	0
GEORGE H WALKER III LIFE TRUSTEE	1 0	X						0	0	0
JAMES WEDDLE TRUSTEE	1 0	X						0	0	0
PATRICIA D WHITAKER TRUSTEE	1 0	X						0	0	0
LYNN WITTELS TRUSTEE	1 0	X						0	0	0
DOUGLAS H YAEGER TRUSTEE	1 0	X						0	0	0
MICHAEL ZAMBRANA TRUSTEE	1 0	X						0	0	0
ELIZABETH STROBLE PRESIDENT	38 0	X		X				427,966	0	76,590
JULIAN SCHUSTER PROVOST & SENIOR VP	38 0	X		X				324,204	0	26,819
GREG GUNDERSON VP FINANCE & ADMIN, CFO	38 0	X		X				185,745	0	32,787
LAURA REIN UNIVERSITY SECRETARY	38 0	X		X				144,913	0	27,934
NEIL J GEORGE CHANCELLOR	38 0			X				319,893	0	36,154
BENJAMIN AKANDE DEAN-GHW SCHOOL OF BUS TECH	38 0					X		226,994	0	57,455
PAUL CARNEY VP ENR MGT/STUDENT AFFAIRS	38 0					X		192,300	0	30,596
FAITH MADDY VP OF DEV & ALUMNI PROGRAMS	38 0					X		189,969	0	25,122
WILLIAM FREEMAN VP & CHIEF INFORMATION OFFICER	38 0					X		171,239	0	22,920
BARBARA O'MALLEY ASSOC VP & CHIEF COMM OFFICER	38 0					X		165,669	0	23,273
DAVID GARAFOLA FORMER VP OF FINANCE & ADMIN							X	150,000	0	0

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

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 11, 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 )
- 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 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 )
- 10

☐

An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Non-functionally integrated
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii)

A family member of a person described in (i) above?

(iii)

A 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14		
15 Public support percentage for 2011 Schedule A, Part II, line 14	15		
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			▶
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			▶
17a 10%-facts-and-circumstances test—2012. 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 IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization			▶
b 10%-facts-and-circumstances test—2011. 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 IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization			▶
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			▶

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
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 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2011. 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** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047

2012

Open to Public Inspection

If the organization answered “Yes” to 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” to 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” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

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

Name of the organization Webster University	Employer identification number  43-0662529
--	--

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	
2	Political expenditures	▶ \$
3	Volunteer hours	

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?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> 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-

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 (grass roots 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><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><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></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 instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(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)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		88,229
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?		No	
j	Total. Add lines 1c through 1i.			88,229
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
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).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

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."

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

Part IV

Supplemental Information

Complete this part to 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, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
------------	------------------	-------------

SCHEDULE D  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)  
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area  
☐ Protection of natural habitat ☐ Preservation of a certified historic structure  
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	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? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, 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)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ 29,929

(ii) Assets included in Form 990, Part X ▶ \$ 4,526,573

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$

b Assets included in Form 990, Part X ▶ \$

Part III

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

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒

Public exhibition

b

☐

Scholarly research

c

☒

Preservation for future generations

d

☒

Loan or exchange programs

e

☐

Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to 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

	Amount
1c	
1d	
1e	
1f	

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

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

☐

Part V

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back	
1a	Beginning of year balance	86,453,025	87,580,816	63,754,627	49,191,886	70,285,654
b	Contributions	10,243,472	6,426,338	11,086,568	5,469,078	808,613
c	Net investment earnings, gains, and losses	18,344,564	-4,959,387	15,395,841	11,843,362	-19,197,493
d	Grants or scholarships	1,001,265	531,417	625,269	538,299	539,446
e	Other expenditures for facilities and programs	2,462,923	1,946,694	1,903,558	2,048,920	1,999,735
f	Administrative expenses	121,981	116,631	127,393	162,480	165,707
g	End of year balance	111,454,892	86,453,025	87,580,816	63,754,627	49,191,886

2

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

a

Board designated or quasi-endowment

75.600 %

b

Permanent endowment

16.400 %

c

Temporarily restricted endowment

8.000 %

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

3a

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

(i)

unrelated organizations

3a(i)

☐ Yes

☐ No

(ii)

related organizations

3a(ii)

☐ Yes

☐ No

b

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

3b

☐

☐

4

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

Part VI

Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		14,666,451		14,666,451
b Buildings		186,033,375	77,910,697	108,122,678
c Leasehold improvements		2,108,318	1,868,122	240,196
d Equipment		38,675,135	27,537,037	11,138,098
e Other		24,073,552	7,919,904	16,153,648
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				150,321,071





Part XI

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements . . . . .		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments . . . . .	2a		
b	Donated services and use of facilities . . . . .	2b		
c	Recoveries of prior year grants . . . . .	2c		
d	Other (Describe in Part XIII ) . . . . .	2d		
e	Add lines 2a through 2d . . . . .		2e	
3	Subtract line 2e from line 1 . . . . .		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	4a		
b	Other (Describe in Part XIII ) . . . . .	4b		
c	Add lines 4a and 4b . . . . .		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 ) . . . . .		5	

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

Part XIII

Supplemental Information

Complete this part to 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.

Identifier	Return Reference	Explanation
DESCRIPTION AND USE OF THE ORGANIZATION'S COLLECTIONS	PART III, LINE 4	TO RECOGNIZE LOCAL, NATIONAL, AND GLOBAL ARTISTIC ENDEAVORS AND TO ENRICH COMMUNITY MEMBERS, WEBSTER UNIVERSITY DISPLAYS ARTWORK OF VARIOUS FORMS THROUGHOUT ITS CAMPUSES. WEBSTER'S COLLECTION ALSO SUPPLEMENTS AND ENHANCES A RICH CURRICULUM AND MAKES THE STUDENTS AWARE OF THE VARIOUS ART SPECIALTIES. THIS COLLECTION INCLUDES PAINTINGS, SCULPTURES, AND CERAMICS ALONG WITH OTHER ART FORMS.
USE OF ENDOWMENT FUNDS	PART V, LINE 4	WEBSTER UNIVERSITY'S ENDOWMENT FUNDS ARE AN IMPORTANT SOURCE OF REVENUE WHICH SUPPORTS TEACHING AND PUBLIC SERVICE MISSIONS. THE UNIVERSITY HAS MANY DIFFERENT ENDOWMENT FUNDS WHICH ARE DEDICATED TO DONOR RESTRICTED PURPOSES AND THAT THE UNIVERSITY IS LEGALLY REQUIRED TO UPHOLD THE INTENDED USE OF THE DONOR RESTRICTED ENDOWMENTS. WOULD INCLUDE - UNDERGRADUATE AND GRADUATE STUDENT FINANCIAL AID - TEACHING/SUPPORT PROFESSORSHIP - PUBLIC SERVICE PROGRAMS AND ACTIVITIES - ATHLETICS - COMMUNITY MUSIC SCHOOL SCHOLARSHIPS - BEATRICE AND DAVID KORNBLUM INSTITUTE - LIBRARY RESOURCES - LORETTO HILTON CENTER BUILDING MAINTENANCE AND EQUIPMENT - LEIGH Gerdine COLLEGE OF FINE ARTS - PRIEST CENTER BUILDING MAINTENANCE - LECTURE SERIES - HERNDON AND SMITH INSTITUTE - ORGEL FOUNTAIN MAINTENANCE - ACADEMIC AWARDS AND PRIZES. IN ADDITION, THE UNIVERSITY'S BOARD DESIGNATED ENDOWMENT SPENDING CONTRIBUTES RESOURCES TOWARDS THE UNIVERSITY'S OPERATING BUDGETS, THUS HELPING TO KEEP TUITION BELOW THE LEVEL THAT WOULD BE NECESSARY IF TUITION ALONE PAID THE TRUE COST OF EDUCATING A STUDENT.
FIN 48 FOOTNOTE	PART X, LINE 2	MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740. BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS.

SCHEDULE E  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Schools

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

Part I

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

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

Identifier	Return Reference	Explanation
PUBLICATION OF THE ORGANIZATION'S NONDISCRIMINATORY POLICY	PART I, LINE 3	THE FOLLOWING IS PRINTED ON ALL PUBLISHED MATERIALS "IT IS THE POLICY OF WEBSTER UNIVERSITY NOT TO DISCRIMINATE IN ITS EDUCATIONAL PROGRAMS, ACTIVITIES OR EMPLOYMENT POLICIES ON THE BASIS OF RACE, SEX, COLOR, CREED, AGE, ETHNIC OR NATIONAL ORIGIN OR NON-DISQUALIFYING HANDICAP AS REQUIRED BY FEDERAL LAWS AND REGULATIONS INCLUDING TITLE IX OF THE 1972 EDUCATIONAL AMENDMENTS "
FINANCIAL AID OR ASSISTANCE RECEIVED FROM A GOVERNMENTAL AGENCY	PART I, LINE 6A	WEBSTER UNIVERSITY PARTICIPATES IN THE FOLLOWING US GOVERNMENT GRANTS AND CONTRACTS: FEDERAL PELL GRANT PROGRAM; FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS; FEDERAL WORK STUDY PROGRAM; FEDERAL PERKINS LOAN PROGRAM; FEDERAL DIRECT LOANS; TEACH GRANT; CULTURALLY RESPONSIVE INSTRUCTION FOR ENGLISH LEARNERS; PROJECT ADVANCED EDUCATION; NURSING GRANT PROGRAM.

SCHEDULE F  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

Part I

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☒ Yes ☐ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States.
- 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
Europe (Including Iceland and Greenland)	5	103	Program Services	EDUCATIONAL	29,201,196
East Asia and the Pacific	4	64	Program Services	EDUCATIONAL	357,140
Sub-Saharan Africa	1	3	Program Services	EDUCATIONAL	357,845
Central America and the Caribbean			Investments		9,559,675
3a Sub-total	10	170			39,475,856
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	10	170			39,475,856

**Part II**

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

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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

## Part III

**(a) Type of grant or assistance**

**(b) Region**

(c) Number of recipients

**(d)** Amount of cash grant

**(e) Manner of cash disbursement**

(f) Amount of non-cash assistance

**(g) Description of non-cash assistance**

**(h)** Method of valuation (book, FMV, appraisal, other)

**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 file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes ☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☒ Yes ☐ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, 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 file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐ Yes ☒ No



## Supplemental Information

Complete this part to 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).

[illegible]

SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and email solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☒

Special fundraising events

d

☒

In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
RUFFALO CODY	PHONATHON		No	57,463	58,545	
Total . . . . . ▶				57,463	58,545	

3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

CO, FL, IN, KY, MD, MA, MI, MS, NV, NC, SC, TN, VA

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GORLOK OPEN (event type)	(event type)	0 (total number)	(add col (a) through col (c))
Revenue	1	Gross receipts . . . .	54,810		54,810
	2	Less Contributions . . .	38,275		38,275
	3	Gross income (line 1 minus line 2) . . . .	16,535		16,535
Direct Expenses	4	Cash prizes . . . .			
	5	Noncash prizes . . .			
	6	Rent/facility costs . . .			
	7	Food and beverages .	6,848		6,848
	8	Entertainment . . . .			
	9	Other direct expenses .	187		187
	10	Direct expense summary Add lines 4 through 9 in column (d) . . . . . ▶			
	11	Net income summary Combine line 3, column (d), and line 10 . . . . . ▶			
					(7,035)
					9,500

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue . . . . .			
	2	Cash prizes . . . . .			
	3	Non-cash prizes . . . .			
	4	Rent/facility costs . . . .			
	5	Other direct expenses . . .			
Direct Expenses	6	Volunteer labor . . . .			
	7	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶			
	8	Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶			

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No


b If "Yes," explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does the organization operate gaming activities with nonmembers? ☒ **Yes** ☐ **No**

**12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ **Yes** ☐ **No**



<b>13</b> Indicate the percentage of gaming activity operated in	
<b>a</b> The organization's facility	<b>13a</b>
<b>b</b> An outside facility	<b>13b</b>

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name  \_\_\_\_\_

Address  \_\_\_\_\_

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☐ **No**

**b** If "Yes," enter the amount of gaming revenue received by the organization  \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party  \$ \_\_\_\_\_


**c** If "Yes," enter name and address of the third party

Name  \_\_\_\_\_

Address  \_\_\_\_\_

**16** Gaming manager information

Name  \_\_\_\_\_


Gaming manager compensation  \$ \_\_\_\_\_

Description of services provided  \_\_\_\_\_

☐ Director/officer ☐ Employee ☐ Independent contractor

**17** Mandatory distributions

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ **Yes** ☐ **No**

**b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year  \$ \_\_\_\_\_

**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation
BENEFIT OF FUNDRAISING ACTIVITIES	PART I, LINE 2B	RUFFALO CODY THE SERVICES OF RUFFALO CODY ARE USED IN THE UNDERGRADUATE ALUMNI GIFT PROGRAM ONE OF THE PRIMARY OBJECTIVES OF THE PROGRAM IS MARKET DEVELOPMENT WEBSTER UNIVERSITY'S GOAL IS TO EXPAND AND GROW THE DONOR BASE, WHILE STRIVING TO UPGRADE THE GIFTS OF CURRENT DONORS

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

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

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

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

DLN: 93493050003204

OMB No 1545-0047

2012

Open to Public  
Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

Part I

General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ASSOCIATION OF INTERNATIONAL EDUCATION CAMPUS BOX 90704 DURHAM,NC 27708	43-1427422	501(C)(6)	8,000				GENERAL SUPPORT
(2) CASTLE ROCK CHAMBER OF COMMERCE 420 JERRY ST CASTLE ROCK,CO 80104	84-0802658	501(C)(6)	6,000				GENERAL SUPPORT
(3) FAIR ST LOUIS FOUNDATION 301 PROSPECT AVE ST LOUIS,MO 63110	43-1218720	501(C)(3)	25,000				GENERAL SUPPORT
(4) THE SUSAN POLGAR FOUNDATION INC 11939 MANCHESTER ROAD 129 DES PERES,MO 63131	37-1444375	501(C)(3)	30,000				GENERAL SUPPORT
(5) WEBSTER COMMUNITY ARTS 292 EAST AVENUE WEBSTER GROVES,MO 63119	75-3088822	501(C)(3)	6,000				GENERAL SUPPORT
(6) SHAKESPEARE FESTIVAL OF ST LOUIS 5715 ELIZABETH AVE ST LOUIS,MO 63110	43-1815139	501(C)(3)	5,850				GENERAL SUPPORT

2

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

4

3

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

2

**Part III**

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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) SCHOLARSHIPS/GRANTS/TUITION DISCOUNTS	5087	24,284,687			

**Part IV**

**Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE UNITED STATES	PART I, LINE 2	THE DEVELOPMENT OFFICE SERVES AS THE COORDINATING DEPARTMENT FOR ALL TYPES OF FUND RAISING PROGRAMS AND FOR SOLICITATION OF GIFTS SCHOLARSHIP AWARDS/RESTRICTIONS ARE MADE AND MONITORED BY ADMISSIONS OFFICE AND DEANS THE ACCOUNTING STAFF RECORDS THE TRANSACTIONS IN SEPARATE GENERAL LEDGER ACCOUNTS

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

Part I

Questions Regarding Compensation

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

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

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

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



**Part III Supplemental Information**

Complete this part to 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.

Identifier	Return Reference	Explanation
PRESIDENT, PROVOST, AND CFO HOUSING ALLOWANCE	PART I, LINE 1(A)	IN RECOGNITION OF THE UNIQUE ROLE OF THE PRESIDENT AND PROVOST IN REPRESENTING THE UNIVERSITY, WEBSTER UNIVERSITY'S POLICY PROVIDES EACH A SUITABLE RESIDENCE FOR CARRYING OUT REQUIRED OFFICIAL DUTIES. THESE DUTIES INCLUDE, BUT ARE NOT LIMITED TO, EXTENDING OFFICIAL HOSPITALITY FOR EVENTS FOR COMMUNITY MEMBERS, LOCAL, NATIONAL, AND INTERNATIONAL DIGNITARIES, TRUSTEES, FACULTY, STAFF, STUDENTS, ALUMNI, DONORS AND OTHER CONSTITUENTS TO BE CONDUCTED AT SAID RESIDENCES. DURING THE CALENDAR YEAR ENDED DECEMBER 31, 2012, THE UNIVERSITY PROVIDED THE PRESIDENT WITH A TAXABLE HOUSING ALLOWANCE IN THE AMOUNT OF \$15,000, AND IN MARCH, THE PRESIDENT MOVED INTO A UNIVERSITY PROVIDED RESIDENCE. DURING THE CALENDAR YEAR ENDED DECEMBER 31, 2012, THE PROVOST WAS SUPPLIED ACCESS TO A UNIVERSITY RESIDENCE AND PROVIDED A TAXABLE HOUSING ALLOWANCE OF \$15,000.
HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES	PART I, LINE 1(A)	NEIL GEORGE AND BENJAMIN AKANDE RECEIVED HEALTH OR SOCIAL CLUB MEMBERSHIPS IN WHICH THE PERSONAL USE WAS TREATED AS TAXABLE INCOME.
FIRST CLASS OR CHARTER TRAVEL	PART I, LINE 1(A)	DURING THE FISCAL YEAR, SIX TICKETS FOR FIRST CLASS TRAVEL WERE PURCHASED BY THE UNIVERSITY FOR PERSONS LISTED IN FORM 990, PART VII, SECTION A, LINE 1A. IN THE CASE OF FIVE OF THE TICKETS, AT THE TIME OF PURCHASE, THE FIRST CLASS FARE WAS LESS EXPENSIVE THAN THE BUSINESS CLASS FARE. THE REMAINING FIRST CLASS TICKET WAS PURCHASED BECAUSE A BUSINESS CLASS TICKET WAS UNAVAILABLE. THE TICKETS WERE PURCHASED FOR THE PRESIDENT, PROVOST AND THE VP OF DEVELOPMENT AND ALUMNI PROGRAMS. THE TICKETS WERE NOT TREATED AS TAXABLE COMPENSATION TO THE TRAVELER.
NON-FIXED PAYMENTS	PART I, LINE 7	ELIZABETH STROBLE, JULIAN SCHUSTER, GREG GUNDERSON, LAURA REIN AND FAITH MADDY WERE AWARDED AT-RISK COMPENSATION DURING THE CALENDAR YEAR 2012. THE AT-RISK COMPENSATION WAS DETERMINED AND APPROVED BY A BOARD OF TRUSTEES COMMITTEE. ELIZABETH STROBLE AND JULIAN SCHUSTER'S CONTRACTS CONTAIN LANGUAGE REGARDING THE PAYMENT.

Software ID:  
Software Version:  
EIN: 43-0662529  
Name: Webster University

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
ELIZABETH STROBLE	(i) (ii)	312,712 0	85,000 0	30,254 0	23,750 0	52,840 0	504,556 0	0 0
JULIAN SCHUSTER	(i) (ii)	260,205 0	45,000 0	18,999 0	23,750 0	3,069 0	351,023 0	0 0
GREG GUNDERSON	(i) (ii)	174,820 0	10,000 0	925 0	17,300 0	15,487 0	218,532 0	0 0
LAURA REIN	(i) (ii)	134,397 0	10,000 0	516 0	13,760 0	14,174 0	172,847 0	0 0
NEIL J GEORGE	(i) (ii)	264,818 0	0 0	55,075 0	23,750 0	12,404 0	356,047 0	0 0
BENJAMIN AKANDE	(i) (ii)	226,509 0	0 0	485 0	20,192 0	37,263 0	284,449 0	0 0
PAUL CARNEY	(i) (ii)	184,762 0	0 0	7,538 0	18,136 0	12,460 0	222,896 0	0 0
FAITH MADDY	(i) (ii)	173,312 0	10,000 0	6,657 0	16,571 0	8,551 0	215,091 0	0 0
WILLIAM FREEMAN	(i) (ii)	170,125 0	0 0	1,114 0	11,628 0	11,292 0	194,159 0	0 0
BARBARA O'MALLEY	(i) (ii)	165,393 0	0 0	276 0	15,858 0	7,415 0	188,942 0	0 0
DAVID GARAFOLA	(i) (ii)	150,000 0	0 0	0 0	0 0	0 0	150,000 0	0 0

Schedule K  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

Part I

Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A HEALTH AND EDUCATION FACILITIES AUTHORITY OF MO	43-1178966	60636ABY8	07-13-2011	63,275,228	REFUND BONDS & FINANCE NEW BLDG		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	0							
2	Amount of bonds legally defeased	0							
3	Total proceeds of issue	63,275,228							
4	Gross proceeds in reserve funds	809,325							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrows	41,479,283							
7	Issuance costs from proceeds	986,620							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	20,000,000							
11	Other spent proceeds	0							
12	Other unspent proceeds	0							
13	Year of substantial completion	2012							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III

Private Business Use

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

Part III

Private Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		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?								
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	0 00000%							
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	0 00000%							
6	Total of lines 4 and 5	0 00000%							
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?		X						
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?		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 you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?		X						
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X						
b	Name of provider	0							
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								

Part IV

Arbitrage (Continued)

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

Part V

Procedures To Undertake Corrective Action

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X							

Part VI

Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Identifier	Return Reference	Explanation
------------	------------------	-------------

Schedule L  
(Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2012

Open to Public Inspection

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization  
Webster University

Employer identification number  
  
43-0662529

Part I

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

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

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

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

Part II

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

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

Part III

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)		2,000	SCHOLARSHIP	EDUCATIONAL

**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
See Additional Data Table					

**Part V Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
------------	------------------	-------------

Additional Data

Software ID:  
Software Version:  
EIN: 43-0662529  
Name: Webster University

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(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) PARIC CORPORATION	ENTITY OWNED 90% BY	194,973	INDEPENDENT CONTRACTOR		No
(2) -	P JOSEPH MCKEE, TRUSTEE				
(3) WORLD WIDE TECHNOLOGY	DAVID STEWARD, TRUSTEE IS	1,117,486	TECHNOLOGY SERVICES		No
(4) -	CHAIRMAN OF WORLD WIDE				
(5) -	TECHNOLOGY				
(6) PAUL STROBLE	SPOUSE OF ELIZABETH	13,348	EMPLOYMENT		No
(7) -	STROBLE, PRESIDENT OF				
(8) -	WEBSTER UNIVERSITY				



SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

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	16	31,034	APPRAISED VALUE
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .	X		1,241	FAIR MARKET VALUE
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	X	15	753,325	FAIR MARKET VALUE
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 . . . . .	X	3	20,354	APPRAISED VALUE
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
PRINTERS &				
25 Other ► ( <u>INK</u> )	X	1	25,500	FAIR MARKET VALUE
26 Other ► ( <u>PIANO</u> )	X	1	1,400	FAIR MARKET VALUE
PLASTIC				
27 Other ► ( <u>BINS</u> )	X	1	2,100	FAIR MARKET VALUE
PHOTO				
28 Other ► ( <u>EQUIPMENT</u> )	X	1	220	FAIR MARKET VALUE

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 . . . . .

6

30a

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

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

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

31

Yes

32a

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

32a

No

b

If "Yes," describe in Part II

33

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

Part II

Supplemental Information.

Complete this part to 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.

Identifier	Return Reference	Explanation
REPORTING METHOD OF EACH TYPE OF PROPERTY RECEIVED	PART I	THE ORGANIZATION IS REPORTING THE NUMBER OF DONORS CONTRIBUTING THE ITEMS RECEIVED ON LINES 25, 27, AND 28 ALL OTHER LINES ARE REPORTING THE NUMBER OF ITEMS RECEIVED BY THE ORGANIZATION

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public

Inspection

Name of the organization

Webster University

Employer identification number

43-0662529

Identifier	Return Reference	Explanation
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT	FORM 990, SUPPLEMENT TO PART III, LINE 4A	<p>WEBSTER UNIVERSITY, FOUNDED IN 1915 WITH ITS HOME CAMPUS BASED IN ST LOUIS, MISSOURI, USA, IS THE ONLY TIER 1, PRIVATE, NONPROFIT UNIVERSITY WITH CAMPUS LOCATIONS AROUND THE WORLD INCLUDING METROPOLITAN, MILITARY, ONLINE AND CORPORATE, AS WELL AS AMERICAN-STYLE TRADITIONAL CAMPUSES IN NORTH AMERICA, EUROPE AND ASIA THE UNIVERSITY ATTRACTS DIVERSE, INTERESTING AND ACCOMPLISHED STUDENTS, FACULTY AND STAFF WHO THRIVE IN AND CONTRIBUTE TO THE PREMIER GLOBAL NETWORK FOR LEARNING STUDENTS, FACULTY AND STAFF ARE LOCALLY COMMITTED, WHILE TAKING FULL ADVANTAGE OF THE OPPORTUNITIES AFFORDED THEM BY THEIR GLOBAL COLLEAGUES FACULTY, STAFF AND GRADUATES ARE EQUIPPED TO WORK WELL WITH PEOPLE OF ALL CULTURES AND BE SUCCESSFUL IN THEIR CHOSEN CAREERS ANYWHERE IN THE WORLD PROGRAMS REFLECT GLOBAL ACADEMIC EXCELLENCE AND ARE PURPOSEFULLY STRUCTURED TO HELP STUDENTS SUCCEED IN THEIR LIVES AND IN THEIR CAREERS WEBSTER'S INVITING GLOBAL CAMPUS ENVIRONMENT ATTRACTS STUDENTS FROM DIVERSE CULTURES, AGES AND SOCIOECONOMIC BACKGROUNDS, AND INSTILLS IN THEM A RESPECT FOR DIVERSITY AND AN UNDERSTANDING OF THEIR OWN AND OTHERS' VALUES THE UNIVERSITY'S DISTINGUISHED FACULTY HAVE THE RIGHT BALANCE OF GLOBAL SCHOLARSHIP AND PROFESSIONAL EXPERIENCE TO BRING FIRST-CLASS, REAL-WORLD KNOWLEDGE TO THEIR CLASSROOMS SMALL, HIGHLY INTERACTIVE CLASSES ENCOURAGE INNOVATION, COLLABORATION AND SELF-EXPRESSION FACULTY AND STAFF AT EACH CAMPUS LOCATION HAVE STRONG LOCAL AND INTERNATIONAL CONNECTIONS AND PROVIDE UNPARALLELED PERSONAL SERVICE TO OUR STUDENTS STUDENTS, FACULTY AND STAFF HAVE EXCEPTIONAL OPPORTUNITIES TO CONNECT WITH PEOPLE FROM AROUND THE WORLD MORE THAN 160,000 ALUMNI FORM AN ELITE GLOBAL NETWORK OF ACCOMPLISHED AND CONNECTED CITIZENS, EQUIPPED TO ADVANCE THEIR CURRENT CAREERS, START A NEW CAREER OR EXPAND THEIR BUSINESS TO NEW MARKETS WEBSTER UNIVERSITY CURRENTLY EDUCATES MORE THAN 25,000 UNDERGRADUATE AND GRADUATE STUDENTS GLOBALLY, AND HAS BEEN RECOGNIZED AS A LEADER IN BOTH INTERNATIONAL AND MILITARY EDUCATION FOR MORE THAN 30 YEARS</p>

Identifier	Return Reference	Explanation
FAMILY/BUSINESS RELATIONSHIPS	FORM 990, PART VI, SECTION A, QUESTION 2	MICHAEL NEIDORFF AND GEORGE H WALKER III HAVE A BUSINESS RELATIONSHIP MICHAEL NEIDORFF AND DAVID STEWARD HAVE A BUSINESS RELATIONSHIP JERRY RITTER AND EUGENE TOOMBS HAVE A BUSINESS RELATIONSHIP JAMES WEDDLE AND EDWARD GLOTZBACH HAVE A BUSINESS RELATIONSHIP

Identifier	Return Reference	Explanation
REVIEW PROCESS	FORM 990, PART VI, SECTION B, QUESTION 11B	THE FORM 990 HAS BEEN REVIEWED BY THE DIRECTOR OF ACCOUNTING, THE COMPTROLLER, THE ASSOCIATE VICE-PRESIDENT/ASSISTANT TREASURER, AND THE TREASURER/VICE PRESIDENT/CFO THE FORM WAS MADE AVAILABLE TO BOARD MEMBERS ON THE UNIVERSITY'S INTRANET FOR A PERIOD OF TWO WEEKS

Identifier	Return Reference	Explanation
COMPLIANCE WITH CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, LINE 12C	<p>THE UNIVERSITY HAS AN ETHICS/CODE OF CONDUCT POLICY THAT IS LOCATED ON THE UNIVERSITY WEBSITE. COMMUNICATION IS MADE VIA E-MAIL AND IS AVAILABLE ON-LINE. EMPLOYEES SIGN A FORM AT NEW EMPLOYEE ORIENTATION THAT HE/SHE HAS BEEN INFORMED OF THE POLICY WEBSITE AND IT IS THEIR RESPONSIBILITY TO ADHERE TO THE POLICY. MANAGERS AND SUPERVISORS ARE RESPONSIBLE FOR IMPLEMENTING AND MONITORING COMPLIANCE WITH THE POLICY. EMPLOYEES WHO VIOLATE THE LETTER OR SPIRIT OF THE UNIVERSITY'S ETHICS/CODE OF CONDUCT ARE SUBJECT TO DISCIPLINARY ACTION. THE CONFLICT OF INTEREST POLICIES APPLY TO ALL "COVERED PERSONS" OF THE UNIVERSITY. EACH OFFICER AND DIVISION HEAD ANNUALLY COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE PROVIDED BY THE UNIVERSITY, AND UPDATE SUCH QUESTIONNAIRE AS NECESSARY TO REFLECT CHANGES DURING THE COURSE OF THE YEAR.</p> <p>1 COVERED PERSONS ALL TRUSTEES AND EMPLOYEES OF THE UNIVERSITY ARE "COVERED PERSONS" FOR THE PURPOSE OF THIS POLICY.</p> <p>2 RELATED PERSONS ALL FAMILY MEMBERS OF COVERED PERSONS, INCLUDING A SPOUSE, CHILD, PARENT, SIBLING, GRANDPARENT, GRANDCHILD, GREAT-GRANDCHILD, IN-LAW, OR ANY OTHER PERSON WHO RESIDES IN THE SAME HOUSEHOLD AS A COVERED PERSON IS A "RELATED PERSON" FOR THE PURPOSE OF THIS POLICY.</p> <p>3 TRANSACTING PARTY FOR THE PURPOSE OF THIS POLICY, A "TRANSACTING PARTY" IS ANY PARTY WHO ENTERS INTO A TRANSACTION WITH THE UNIVERSITY, OR AN AFFILIATE OF THE UNIVERSITY, WHERE THE VALUE OF THE TRANSACTION IS \$1,000 OR MORE.</p> <p>4 COVERED TRANSACTIONS A TRANSACTION BETWEEN THE UNIVERSITY, OR ANY AFFILIATE OF THE UNIVERSITY AND TRANSACTION PARTY SHALL BE DEEMED A "COVERED TRANSACTION" IF A COVERED PERSON AND RELATED PERSON COLLECTIVELY OWN MORE THAN TEN PERCENT (10%) OF THE EQUITY OF THE TRANSACTION PARTY OR IF THE COVERED PARTY OR THE RELATED PERSON ARE AN OFFICER, DIRECTOR, MANAGER, TRUSTEE, PARTNER, EMPLOYEE OR CONSULTANT TO THE TRANSACTING PARTY.</p> <p>DISCLOSURE, REFRAIN FROM INFLUENCE, AND REFUSAL WHEN A COVERED PERSON BECOMES AWARE OF A PROPOSED COVERED TRANSACTION, HE OR SHE HAS A DUTY TO TAKE THE FOLLOWING ACTIONS:</p> <p>(A) IMMEDIATELY DISCLOSE THE EXISTENCE AND CIRCUMSTANCES OF THE COVERED TRANSACTION TO THE UNIVERSITY'S DESIGNATED PERSON IN WRITING. IN MOST INSTANCES, THE DESIGNATED PERSON SHALL BE THE SECRETARY OF THE BOARD UNLESS THE COVERED PERSON IS THE PRESIDENT OR THE SECRETARY IN WHICH CASE THE DESIGNATED PERSON SHALL BE THE CHAIR OF THE AUDIT COMMITTEE. ALL DISCLOSURE TO THE SECRETARY SHALL PROMPTLY BE FORWARDED TO THE CHAIR OF THE AUDIT COMMITTEE.</p> <p>(B) REFRAIN FROM USING HIS OR HER PERSONAL INFLUENCE TO ENCOURAGE THE UNIVERSITY TO ENTER INTO COVERED TRANSACTION, AND</p> <p>(C) PHYSICALLY EXCUSE HIMSELF/HERSELF FROM ANY DISCUSSIONS REGARDING THE COVERED TRANSACTION EXCEPT TO ANSWER QUESTIONS, FROM THE SECRETARY, THE CHAIR OF THE AUDIT COMMITTEE OR THE BOARD OF TRUSTEES, INCLUDING ANY DECISIONS ON THE SUBJECT.</p> <p>STANDARD FOR APPROVAL OF COVERED TRANSACTIONS THE UNIVERSITY MAY ENTER INTO A COVERED TRANSACTION WHERE:</p> <p>(A) SUCH COVERED TRANSACTION DOES NOT CONSTITUTE AN ACT OF SELF DEALING, AND</p> <p>(B) THE SECRETARY, OR IF THE MATTER IS REFERRED TO THE AUDIT COMMITTEE, THE CHAIR OF THE AUDIT COMMITTEE, DETERMINES THAT SUCH COVERED TRANSACTION IS FAIR AND REASONABLE TO THE UNIVERSITY.</p> <p>THE SECRETARY OR CHAIR OF THE AUDIT COMMITTEE, AS THE CASE MAY BE, MAY CONSULT THE UNIVERSITY'S COUNSEL AS NECESSARY TO ENSURE THAT THE TRANSACTION DOES NOT CONSTITUTE AN ACT OF SELF DEALING.</p>

Identifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	FORM 990, PART VI, SECTION B, LINE 15A/B	IN 2010, MERCER CONSULTING CONDUCTED A COMPREHENSIVE COMPENSATION REVIEW OF THE PRESIDENT, PROVOST AND ALL OTHER MEMBERS OF THE ADMINISTRATIVE LEADERSHIP TEAM AS WELL AS DEANS SALARIES THAT WERE BELOW MARKET MEDIAN WERE ADJUSTED TO THE MEDIAN IN 2011 THE PRESIDENT'S COMPENSATION IS RECOMMENDED BY THE BOARD COMPENSATION COMMITTEE AND APPROVED BY THE BOARD EXECUTIVE COMMITTEE ON AN ANNUAL BASIS INCREASES TO BASE COMPENSATION SINCE THAT TIME FOR THIS GROUP HAVE NOT EXCEEDED THE INCREASE AMOUNT AWARDED TO OTHER EMPLOYEES OF THE ORGANIZATION

Identifier	Return Reference	Explanation
PROCESS FOR MAKING DOCUMENTS AVAILABLE TO PUBLIC	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY , AND FINANCIAL STATEMENTS AVAILABLE ON THE UNIVERSITY'S WEBSITE AND/OR UPON REQUEST



Identifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSETS	FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS \$ 77,828 FOREIGN CURRENCY TRANSLATIONS 170,188 CONSOLIDATING ENTRIES/INDIRECT COSTS 3,048,469 NON-CURRENT PORTION OF S/L LEASE ADJUSTMENT (781,819) ----- \$ 2,514,666

Identifier	Return Reference	Explanation
CHANGE IN OVERSIGHT PROCESS OR SELECTION PROCESS	FORM 990, PART XII, LINE 2C	WEBSTER USED THE REQUEST FOR PROPOSAL PROCESS BETWEEN THE TIME PERIOD OF 10/2012 THROUGH 02/2013 THE CURRENT AUDITOR WAS THEN SELECTED FROM THE PROPOSALS RECEIVED

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization  
Webster University

Employer identification number  
43-0662529

Part I

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) OLD ORCHARD SHOPPING CENTER LLC 23 OLD ORCHARD AVENUE WEBSTER GROVES, MO 63119 43-0662529	RENTAL	MO	-102,932	4,714,191	WEBSTER UNIV

Part II

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) WEBSTER UNIV-TONG TU ENTERPRSE MGMT CONS  ROOM 303 BLDG 4 NO 3288JIN HAI RD PUDONG NEW AREA CH	EDUCATIONAL	CH	N/A	N/A	WEBSTER UNIV	Yes	
(2) FONDATION WEBSTER(WEBSTER UNIV-GENEVA)  15 ROUTE DE COLLEX 1293 BELLEVUE GENEVA SZ	EDUCATIONAL	SZ	N/A	N/A	WEBSTER UNIV	Yes	
(3) WEBSTER UNIVERSITY-VIENNA  BERCHTOLDGASSE 1 1-1220 VIENNA AU	EDUCATIONAL	AU	N/A	N/A	WEBSTER UNIV	Yes	
(4) WEBSTER UNIV IN LEIDEN(THE NETHERLANDS)  BOOMMARKT 1 2311 E A LEIDEN NL	EDUCATIONAL	NL	N/A	N/A	WEBSTER UNIV	Yes	

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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) Disproporionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to 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 TRUSTS (4)	INVESTMENT	MO	WEBSTER UNIV	TRUST					

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

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

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

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

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

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

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

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

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

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

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

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

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

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

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

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

Yes

No

1a

No

1b

Yes

1c

No

1d

No

1e

No

1f

No

1g

No

1h

No

1i

No

1j

Yes

1k

No

1l

Yes

1m

No

1n

No

1o

Yes

1p

Yes

1q

Yes

1r

Yes

1s

Yes

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
See Additional Data Table			

Schedule R (Form 990) 2012

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

[illegible]

Software ID:

Software Version:

EIN: 43-0662529

Name: Webster University

Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS	SCHEDULE R, PART II	THE UNIVERSITY'S FOREIGN CORPORATIONS ARE AN EXTENSION OF THE TAX EXEMPT MISSION AND PURPOSE EVEN THOUGH THEY MIGHT BE CONSIDERED TAXABLE WITHIN THE LOCAL JURISDICTIONS

--> Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
FONDATION WEBSTER (WEBSTER UNIV - GENEVA )	B	1,383,623	ACTUAL COSTS
FONDATION WEBSTER (WEBSTER UNIV - GENEVA )	J	829,986	ACTUAL COSTS
FONDATION WEBSTER (WEBSTER UNIV - GENEVA )	O	111,706	ACTUAL COSTS
FONDATION WEBSTER (WEBSTER UNIV - GENEVA )	P	30,123	ACTUAL COSTS
FONDATION WEBSTER (WEBSTER UNIV - GENEVA )	Q	92,861	ACTUAL COSTS
FONDATION WEBSTER (WEBSTER UNIV - GENEVA )	R	560,744	ACTUAL COSTS
FONDATION WEBSTER (WEBSTER UNIV - GENEVA )	S	1,390,249	ACTUAL COSTS
WEBSTER UNIVERSITY IN LEIDEN (NETHERLANDS)	J	123,138	ACTUAL COSTS
WEBSTER UNIVERSITY IN LEIDEN (NETHERLANDS)	L	569,345	ACTUAL COSTS
WEBSTER UNIVERSITY IN LEIDEN (NETHERLANDS)	O	6,717	ACTUAL COSTS
WEBSTER UNIVERSITY IN LEIDEN (NETHERLANDS)	P	13,869	ACTUAL COSTS
WEBSTER UNIVERSITY IN LEIDEN (NETHERLANDS)	Q	84,024	ACTUAL COSTS
WEBSTER UNIVERSITY IN LEIDEN (NETHERLANDS)	R	1,789,891	ACTUAL COSTS
WEBSTER UNIVERSITY IN LEIDEN (NETHERLANDS)	S	1,887,741	ACTUAL COSTS
WEBSTER U-TONG TU ENTERPR MGMT CONS	L	222,847	ACTUAL COSTS
WEBSTER U-TONG TU ENTERPR MGMT CONS	O	76,348	ACTUAL COSTS
WEBSTER U-TONG TU ENTERPR MGMT CONS	P	35,254	ACTUAL COSTS
WEBSTER U-TONG TU ENTERPR MGMT CONS	S	521,770	ACTUAL COSTS
WEBSTER UNIVERSITY - VIENNA	B	12,050	ACTUAL COSTS
WEBSTER UNIVERSITY - VIENNA	L	1,390,338	ACTUAL COSTS
WEBSTER UNIVERSITY - VIENNA	O	41,670	ACTUAL COSTS
WEBSTER UNIVERSITY - VIENNA	P	7,843	ACTUAL COSTS
WEBSTER UNIVERSITY - VIENNA	Q	109,501	ACTUAL COSTS
WEBSTER UNIVERSITY - VIENNA	R	936,628	ACTUAL COSTS
WEBSTER UNIVERSITY - VIENNA	S	2,074,427	ACTUAL COSTS