** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

Department of the Treasury Internal Revenue Service

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

A F	or the	2023 calendar year, or tax year beginning $JUL 1$, 2023 and ending	JUN 30, 202	4					
B c	heck if oplicable	C Name of organization	D Employer ident	fication number					
	Addres	S WIDENER UNIVERSITY							
	Name change		23-1386						
	Initial return Final	Number and street (or P.O. box if mail is not delivered to street address) ONE UNIVERSITY PLACE	•	E Telephone number (610) 499-4396					
	Jreturn/ termin- ated		G Gross receipts \$	100 171 010					
	Amend return			H(a) Is this a group return					
	Applica tion		HD for subordinate						
	pendin	SAME AS C ABOVE	H(b) Are all subordinates						
<u> </u>	ax-exe	mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or		a list. See instructions					
	Vebsit		H(c) Group exempt	ion number					
			Year of formation: 1821	M State of legal domicile; PA					
Pa		Summary							
ø		Briefly describe the organization's mission or most significant activities: EMPOWERI		NITY OF					
Activities & Governance		LEARNERS TO DISCOVER AND CREATE BETTER FUTURE	ES.						
š	2	Check this box if the organization discontinued its operations or disposed of n	1						
ŏ									
<u>ھ</u>		Number of independent voting members of the governing body (Part VI, line 1b)							
es		Total number of individuals employed in calendar year 2023 (Part V, line 2a)							
ïvit		Total number of volunteers (estimate if necessary)							
Act		Total unrelated business revenue from Part VIII, column (C), line 12							
_	D	Net unrelated business taxable income from Form 990-T, Part I, line 11	Prior Year	Current Year					
		Contributions and grants (Part VIII line 1h)	12,598,348						
ine		Contributions and grants (Part VIII, line 1h)	224,902,180						
Revenue		Program service revenue (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	5,662,014						
Re		Other revenue (Part VIII, column (A), lines 5, 4, 8c, 9c, 10c, and 11e)	387,816						
		Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	243,550,358						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	92,339,059						
		Benefits paid to or for members (Part IX, column (A), line 4)	0						
ú		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	96,221,371						
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	0						
be		Total fundraising expenses (Part IX, column (D), line 25) 2,902,385.							
ŭ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	57,711,623						
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	246,272,053						
		Revenue less expenses. Subtract line 18 from line 12	-2,721,695	12,606,227.					
ces			Beginning of Current Yea						
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	416,458,447						
t As	21	Total liabilities (Part X, line 26)	167,156,735						
		Net assets or fund balances. Subtract line 21 from line 20	249,301,712	. 238,015,044.					
	rt II	Signature Block							
Unde	er penal	ties of perjury, I declare that I have examined this return, including accompanying schedules and sta Signed by: , and complete. Declaration of preparer (other than officer) is based on all information of which prep	tements, and to the best of i	my knowledge and belief, it is					
true,	correc	Heatur Meur	5/1	0/2025					
C:	.	Signature of officer 55F3CF359DC04C7	I Date						
Sign Here		HEATHER MEIER, VP ADMIN & FINANCE/CFO							
пег		Type or print name and title							
		Print/Type preparer's name Preparer's signature	Date Check	PTIN					
Paid	ŀ	LAURA J. KENNEY LAURA J. KENNEY	05/09/25 if self-emp						
Prep	1	Firm's name CLIFTONLARSONALLEN LLP		41-0746749					
Use	1	Firm's address TWO INTERNATIONAL PLACE, 22ND FLOOR	7.3.110 2.114						
		BOSTON, MA 02110	Phone no. (617) 717-0831					
May	the IR	S discuss this return with the preparer shown above? See instructions	,,	X Yes No					

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Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: EMDOWED INC. OUR. COMMINITED OF LEADNERS TO DISCOVER AND CREATE RETURNS.
	EMPOWERING OUR COMMUNITY OF LEARNERS TO DISCOVER AND CREATE BETTER FUTURES.
	FUIUKES.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 183,169,209. including grants of \$ 110,811,473.) (Revenue \$ 225,823,548.)
	INSTRUCTIONAL/GRANTS - EXPENSES INCURRED WITH THE ACADEMIC INSTRUCTION
	OF OUR STUDENT BODY AS WELL AS GRANTS TO STUDENTS. THE UNIVERSITY
	COMPRISES OF EIGHT SCHOOLS AND COLLEGES THAT OFFER LIBERAL ARTS AND
	SCIENCES, PROFESSIONAL, AND PREPROFESSIONAL CURRICULA. A METROPOLITAN
	TEACHING INSTITUTION, THE UNIVERSITY IS A THREE-CAMPUS UNIVERSITY
	OFFERING MORE THAN 100 PROGRAMS OF STUDY LEADING TO ASSOCIATES,
	BACHELORS, MASTERS, OR DOCTORAL DEGREES. IN THE FALL SEMESTER OF 2023,
	THE UNIVERSITY HAD ENROLLED 5,610 STUDENTS COMPRISED OF 2,811
	UNDERGRADUATE, 1,693 GRADUATE, AND 1,106 SCHOOL OF LAW STUDENTS.
	04 014 066
4b	(Code:) (Expenses \$24 , 014 , 966including grants of \$) (Revenue \$22 , 694 , 445)
	AUXILIARY SERVICES - EXPENSES INCURRED PRIMARILY FOR HOUSING AND
	FEEDING STUDENTS
4c	(Code:) (Expenses \$23,941,470. including grants of \$0. (Revenue \$1,444,011.)
	STUDENT SERVICES - EXPENSES INCURRED FOR PROGRAMS THAT SERVICE
	WIDENER'S STUDENT BODY, SUCH AS ATHLETICS, STUDENT ORGANIZATIONS,
	CAREER PLACEMENT, STUDENT HEALTH, AND STUDENT COUNSELING. IN ADDITION,
	THIS INCLUDES DEPARTMENTS THAT SUPPORT STUDENT ADMISSIONS, FINANCIAL
	AID, THE BURSAR, AND REGISTRAR.
4d	Other program services (Describe on Schedule O.)
4.	(Expenses \$ 16,277,180 • including grants of \$ 0 •) (Revenue \$ 0 •)

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)? Х If "Yes," complete Schedule A 2 Х Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for Х public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Х during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X 5 similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to Х provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Х 8 Schedule D, Part III 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? Х 9 If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in donor-restricted endowments Х or in quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Х 11a Part VI 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 Х 11b Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c 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 Х 11d Part X, line 16? If "Yes," complete Schedule D, Part IX Х 11e e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes." complete Schedule D. Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete Х Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? Х 12b If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes." complete Schedule E 13 X **14a** Did the organization maintain an office, employees, or agents outside of the United States? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 Х or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any 15 Х foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 Х column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 Х 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes." 19 complete Schedule G, Part III 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

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domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II

Pai	Crecklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	·	24a	х	
L	Schedule K. If "No," go to line 25a	24b	- 21	X
		240		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			.
	any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
00		21		
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			37
	"Yes," complete Schedule L, Part IV	28a	77	X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	X	├─
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
24	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34			Х	
^-	Part V, line 1	34	X	├─
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Λ	├─
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		17	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	├──
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	L
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
	. ,		Yes	No
19	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 471			
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 471 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
C		10	Х	
000		1c		(2023)
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Form 990 (2023) WIDENER UNIVERSITY

Part V Statements Regarding Other IRS Filings and Tax Compliance

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Par	Statements Regarding Other IRS Fillings and Tax Compliance (continued)								
				Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	0.605							
	, , , , , , , , , , , , , , , , , , , ,	2697							
			2b	X	-				
			3a	X	\vdash				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b	X	_				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		_	37					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a	X					
b	If "Yes," enter the name of the foreign country COSTA RICA								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).								
			5b		X				
	, , , , , , , , , , , , , , , , , , , ,		5c						
oa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solic any contributions that were not tax deductible as charitable contributions?		6a		x				
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		<u> </u>						
b			6b						
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).		OD						
	The state of the s	navor?	7a		Х				
b			7b		<u> </u>				
·	to file Form 8282?		7c		x				
d									
e	Did the consist for the distribution of the di		7e		х				
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h									
8									
	sponsoring organization have excess business holdings at any time during the year?								
9									
а	a Did the sponsoring organization make any taxable distributions under section 4966?								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b						
10	Section 501(c)(7) organizations. Enter:								
а									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11	Section 501(c)(12) organizations. Enter:								
а									
b	Gross income from other sources. (Do not net amounts due or paid to other sources against								
	amounts due or received from them.)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		40-						
а	Is the organization licensed to issue qualified health plans in more than one state?		13a						
L	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans								
•									
	Did the constitution of th		14a		Х				
	16 10 4 11 11 11 11 11 11 11 11 11 11 11 11 1		14b						
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		. 						
	excess parachute payment(s) during the year?		15		x				
	If "Yes," see the instructions and file Form 4720, Schedule N.								
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		х				
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	ļ							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		1				
	If "Yes," complete Form 6069.								

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Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 23 **1a** Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O. 22 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 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? Х The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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 Х exempt status with respect to such arrangements? 16h Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed PA Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website X Upon request Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records HEATHER MEIER, VP A&F/CFO - (610) 499-1168

Form **990** (2023)

19013

ONE UNIVERSITY PLACE, CHESTER, PA

Form 990 (2023)

WIDENER UNIVERSITY

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	box	Posit (do not check m box, unless pers officer and a dire			than o	n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer B	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) STACEY M. ROBERTSON, PH.D. PRESIDENT	0.30	Х		х				615,460.	0.	70,329.
(2) ANDREW WORKMAN	60.00							020,2001		7,000
PROVOST	0.00			х				390,707.	0.	32,847.
(3) LINDA KIRALY GILBERT	60.00									,
VP FOR ADMINISTRATION & FINANCE	1.30			Х				368,007.	0.	20,404.
(4) THERESA TRAVIS	60.00									•
VP ADVANCEMENT	0.00			Х				312,756.	0.	36,512.
(5) JOSEPH HOWARD	60.00									
VP FOR ENROLLMENT	0.00			Х				313,581.	0.	17,711.
(6) FRED AKL	40.00									
DEAN SCHOOL OF ENGINEERING	0.00					Х		283,402.	0.	38,054.
(7) KATHRYN HERSCHEDE	60.00									
VP FOR STRATEGIC INITIATIVES	0.00			Х				301,731.	0.	17,343.
(8) ALICIA KELLY	60.00									
VICE DEAN, DELAWARE LAW	0.00					X		222,140.	0.	90,986.
(9) ERIC BEHRENS	60.00									
VP FOR LIBRARY & INFORMATION SYSTEMS	0.00			Х				259,606.	0.	30,484.
(10) MICHELLE DAVIS	60.00									
CHIEF DIVERSITY OFFICER	0.00			Х				269,398.	0.	15,805.
(11) ANTHONY R. WHEELER	40.00									
DEAN SCHOOL OF BUSINESS	0.00					X		241,444.	0.	31,576.
(12) ANNE M. KROUSE	40.00								_	
DEAN SCHOOL OF NURSING	0.00					X		247,443.	0.	17,893.
(13) MICHAEL HUSSEY	60.00								_	
DEAN, COMMONWEALTH LAW	0.00					X		231,654.	0.	8,710.
(14) PAUL S. BEIDEMAN	2.00								_	
CHAIR OF THE BOARD	0.00	Х		Х				0.	0.	0.
(15) JAMES J. MACK, III	2.00									
VICE CHAIR OF THE BOARD	0.00	X		Х				0.	0.	0.
(16) CYNTHIA H. SARNOSKI, PH.D.	2.00								_	•
VICE CHAIR OF THE BOARD	0.00	X		Х		_		0.	0.	0.
(17) NANCY G. HESSE	2.00	٠,		37					_	•
TREASURER OF THE BOARD	0.00	X		X	<u> </u>			0.	0.	990 (2022)

332007 12-21-23

Form 990 (2023)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			(0				(D)	(E)	(F)	
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)				an	Reportable compensation from	Reportable compensation from related	Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations	
(18) EUGENE D. MCGURK JR., ESQ.	2.00							_	_	_	
SECRETARY OF THE BOARD	0.00	Х		Х				0.	0.	0.	
(19) JOHN H. TILELLI, JR. PAST CHAIR OF THE BOARD	0.00	х		х				0.	0.	0.	
(20) DOMENIC C. COLASANTE	2.00										
TRUSTEE	0.00	Х						0.	0.	0.	
(21) DEXTER HAMILTON	2.00										
TRUSTEE	0.00	Х						0.	0.	0.	
(22) JAMES J. HARGADON TRUSTEE	2.00	Х						0.	0.	0.	
(23) J. MATTHEW HARTLEY, PH.D.	2.00										
TRUSTEE	0.00	Х						0.	0.	0.	
(24) JAMES W. HIRSCHMANN, III TRUSTEE	2.00	х						0.	0.	0.	
(25) ANTOINETTE LEATHERBERRY	2.00	Δ						0.	0.	<u> </u>	
TRUSTEE	0.00	Х						0.	0.	0.	
(26) CHRISTIAN NASCIMENTO	2.00										
TRUSTEE	0.00	Х						0.	0.	0.	
1b Subtotal								4,057,329.	0.	428,654.	
c Total from continuation sheets to Part VI	I, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)								4,057,329.	0.	428,654.	

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

194

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

Section B. Independent Contractors

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
ARAMARK SERVICES, INC		
806 TYVOLA ROAD, CHARLOTTE, NC 28217	FOOD SERVICES	6,143,211.
PJ DICK	CONSTRUCTION	
225 NORTH SHORE DRIVE, PITTSBURGH, PA 15212	MANAGEMENT	3,597,868.
HSC BUILDERS CONSTRUCTION	CONSTRUCTION	
304 NEW MILL LANE, EXTON, PA 19341	MANAGEMENT	2,892,430.
ELITE BUILDING SERVICES, 2200 CONCORD	HOUSEKEEPING	
PIKE, 9TH FLR, WILMINGTON, DE 19803	SERVICES	1,973,222.
P. AGNES	CONSTRUCTION	
2101 PENROSE AVENUE, PHILADELPHIA, PA 19145	MANAGEMENT	1,941,666.
2 Total number of independent contractors (including but not limited to those listed	d above) who received more than	
\$100,000 of compensation from the organization 78		
G =	~	000

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2023)

2023.05070 WIDENER UNIVERSITY

Form 990 WIDENER UNIVERSITY 23-1386178

	UNIVERSI	TY	<u> </u>						23-138	6178
Part VII Section A. Officers, Directors,	Trustees, Key Er	nplo	yee	s, aı	nd F	lighe	est (Compensated Employe	ees (continued)	
(A)	(B)				C)			(D)	(F)	
Name and title	Average				ition	ı		Reportable	(E) Reportable	Estimated
	hours	(cl	(check all that apply)		compensation	compensation	amount of			
	per							from	from related	other
	week					yee		the	organizations	compensation
	(list any	recto				em plc		organization	(W-2/1099-MISC)	from the
	hours for	ordi	ee ee			ated		(W-2/1099-MISC)		organization
	related	ustee	trust		99	ubeus				and related organizations
	organizations below	dual tr	tional	١.	n ploy	stcon	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) MIGUEL O. PENA	2.00									
TRUSTEE	0.00	Х						0.	0.	0.
(28) IRAKLIS PROKOPAKIS	2.00									
TRUSTEE	0.00	Х						0.	0.	0.
(29) CATHERINE PULOS	2.00									
TRUSTEE	0.00	Х						0.	0.	0.
(30) LOUIS RODRIGUEZ, JR.	2.00									
TRUSTEE	0.00	Х						0.	0.	0.
(31) TIMOTHY SPEISS	2.00									
TRUSTEE	0.00	Х						0.	0.	0.
(32) MIN S. SUH, ESQ.	2.00									
TRUSTEE	0.00	Х						0.	0.	0.
(33) RICHARD L.P. TAN	2.00							_	_	_
TRUSTEE	0.00	Х						0.	0.	0.
(34) DOUGLAS M. WOLFBERG, ESQ.	2.00	ļ.						_		
TRUSTEE	0.00	Х						0.	0.	0.
(35) MARITZA GARCIA	2.00	l								
STUDENT TRUSTEE	0.00	Х						0.	0.	0.
		ł								
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Revenuè excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1a 1 a Federated campaigns 1b **b** Membership dues c Fundraising events 50. 1c **d** Related organizations 1d 4,464,731 e Government grants (contributions) 1e f All other contributions, gifts, grants, and 5,769,994 similar amounts not included above 1f 83,632 g Noncash contributions included in lines 1a-1f 10,234,775 h Total. Add lines 1a-1f **Business Code** 2 a TUITION/FEES 611600 225695890, 225695890, Program Service Revenue b AUXILIARY ENTERPRISES 721310 22694445 22,694,445 FEES, PARKING, ETC 900099 965,542. 965,542. ATHLETICS INCOME 611710 470,229. 470,229 INTEREST FEES ON LOANS 127,658 127,658, 900099 All other program service revenue 900099 8,240 8,240 249962004 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 10,807,256 11061448 -254,192 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 149,778 6 a Gross rents 168,000. 6b **b** Less: rental expenses -18,222. c Rental income or (loss) -18,222 -18,222. d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of 7a 130,378,310. 360,000. assets other than inventory b Less: cost or other basis 7b 133,993,341 552,000 and sales expenses Other Revenue -192,000 -3,615,031. c Gain or (loss) -3,807,031. -3807031. d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 12,070. **b** Less: direct expenses 19,339. -7,269 -7,269. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 9b **b** Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10a **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a MISCELLANEOUS 525990 249,910 249,910. 713940 WELLNESS CENTER 240 d All other revenue 250,150 Total. Add lines 11a-11d 267421663 7478836. 249962004 -253,952. Total revenue. See instructions 12

332009 12-21-23

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com			mplete column (A).	
	Check if Schedule O contains a respon			(C)	/D)
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic	110 011 472	110 011 472		
	individuals. See Part IV, line 22	110,011,4/3.	110,811,473.		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	3,034,237.		3,034,237.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	35,000.		35,000.	
7	Other salaries and wages	83,984,504.	69,589,525.	12,684,146.	1,710,833.
8	Pension plan accruals and contributions (include	, , , , , , , , , , , , , , , , , , , ,	,	,	. , , , , , , , , , , , , , , , , , , ,
-	section 401(k) and 403(b) employer contributions)	2,865,976.	2,337,142.	471,376.	57,458.
9	Other employee benefits	10,372,791.	8,437,464.	1,727,895.	57,458. 207,432. 120,873.
10	Payroll taxes	6,133,648.	4,916,592.	1,096,183.	120.873.
11	Fees for services (nonemployees):	0,200,0201	1,310,331	2,030,2001	220,0707
	Management				
		750,576.		750,576.	
	Legal	184,642.		184,642.	
	Accounting	104,042.		104,042.	
	Lobbying				
_	Professional fundraising services. See Part IV, line 17	250,518.		250 510	
f	Investment management fees	230,310.		250,518.	
g	Other. (If line 11g amount exceeds 10% of line 25,	15 600 100	10 546 160	2 047 500	206 512
	column (A), amount, list line 11g expenses on Sch 0.)	15,690,182.	12,546,169.	2,847,500.	296,513. 29,387.
12	Advertising and promotion	1,985,609.		1,420,249.	29,387.
13	Office expenses	1,912,203.		505,464.	56,613.
14	Information technology	5,129,619.	2,603,252.	2,368,119.	158,248.
15	Royalties	4 505 040	2 455 452	4 050 050	4 500
16	Occupancy	4,737,942.	3,465,472.	1,270,872.	1,598.
17	Travel	1,936,941.	1,802,067.	82,152.	52,722.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials \dots	41.4.001	000 050	101 000	0.664
19	Conferences, conventions, and meetings	414,821.	283,259.	121,898.	9,664.
20	Interest	3,310,963.	3,310,963.		
21	Payments to affiliates	1	1		
22	Depreciation, depletion, and amortization		15,507,861.		
23	Insurance	2,148,019.	2,148,019.		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	BOOKS/PERIODICALS	2,671,728.	2,671,728.	0.	0.
b	STUDENT/FACULTY/ALUMNI	1,365,355.	951,562.	256,643.	157,150.
c	FEES/DUES	1,243,424.	865,914.	369,249.	8,261.
d		,	,	,	<u>, </u>
	All other expenses	3,549,858.	3,268,264.	245,961.	35,633.
25	Total functional expenses. Add lines 1 through 24e		247,402,825.	29,722,680.	2,902,385.
26	Joint costs. Complete this line only if the organization	, , , , , , , , , , , ,	, , ,	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
		I	ı	1	5 QQQ (2222)

WIDENER UNIVERSITY

23-1386178 Page **11**

Form 990 (2023)

Part X | Balance Sheet

Pa	rt X	Balance Sheet							
		Check if Schedule O contains a response or note to	o any	line in this Part X					
					(A) Beginning of year		(B) End of year		
	1	Cash - non-interest-bearing			61,185,173.	1	48,446,660.		
	2	Savings and temporary cash investments				2			
	3	Pledges and grants receivable, net	2,864,947.	3	3,517,867.				
	4	Accounts receivable, net	5,449,492.	4	7,765,988.				
	5	Loans and other receivables from any current or fo							
		trustee, key employee, creator or founder, substan-							
		controlled entity or family member of any of these p		5					
	6	Loans and other receivables from other disqualified							
		under section 4958(f)(1)), and persons described in	sect	ion 4958(c)(3)(B)		6			
ţ	7	Notes and loans receivable, net				7			
Assets	8	Inventories for sale or use		8					
ď	9	Prepaid expenses and deferred charges	706,826.	9	875,535.				
	10a	Land, buildings, and equipment: cost or other							
		basis. Complete Part VI of Schedule D	10a	493,265,174.					
	b			283,877,173.	209,925,992.	10c	209,388,001.		
	11	Investments - publicly traded securities			97,167,401.	11	94,860,459.		
	12	Investments - other securities. See Part IV, line 11		31,473,627.		33,130,701.			
	13	Investments - program-related. See Part IV, line 11			6,444,880.	13	7,520,354.		
	14	Intangible assets	1 240 100	14	660 206				
	15	Other assets. See Part IV, line 11			1,240,109.	15	660,396.		
	16	Total assets. Add lines 1 through 15 (must equal li			416,458,447.	16	406,165,961. 22,828,626.		
	17	Accounts payable and accrued expenses			5,002,558.	17	5,081,184.		
	18	Grants payable		6,929,877.	18 19	8,571,949.			
	19 20	Deferred revenue			104,415,084.	20	101,238,405.		
	21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Par			101,113,001.	21	101,230,403		
	22	Loans and other payables to any current or former				21			
Liabilities	~~	trustee, key employee, creator or founder, substant							
ij		controlled entity or family member of any of these		22					
<u> </u>	23	Secured mortgages and notes payable to unrelated		23					
	24	Unsecured notes and loans payable to unrelated th				24			
	25	Other liabilities (including federal income tax, payals							
		parties, and other liabilities not included on lines 17							
		of Schedule D	,		30,351,714.	25	30,430,753.		
	26	T . I. I. I. I			167,156,735.	26	168,150,917.		
		Organizations that follow FASB ASC 958, check	here	X					
Ses		and complete lines 27, 28, 32, and 33.							
auc	27	Net assets without donor restrictions			177,608,760.	27	162,418,449.		
Ba	28	Net assets with donor restrictions	71,692,952.	28	75,596,595.				
nd		Organizations that do not follow FASB ASC 958,	, che	ck here					
Ę		and complete lines 29 through 33.							
S	29	Capital stock or trust principal, or current funds	apital stock or trust principal, or current funds						
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or equip	omer	nt fund		30			
t As	31	Retained earnings, endowment, accumulated incor	me, c	or other funds		31			
Set	32	Total net assets or fund balances			249,301,712.	32	238,015,044.		
	33	Total liabilities and net assets/fund balances			416,458,447.	33	406,165,961.		
							Form 990 (2023)		

orm	990 (2023) WIDENER UNIVERSITY	<u> 23</u> -	13861	78	Pag	ge 12
Pa	t XI Reconciliation of Net Assets				,	
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	267,			
2	Total expenses (must equal Part IX, column (A), line 25)	2	280,			
3	Revenue less expenses. Subtract line 2 from line 1	3	-12,			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	249,			
5	Net unrealized gains (losses) on investments	5	6,	996	, 6	<u>55.</u>
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 on Schedule O)	9	-5,	677	7,09	96.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	238,	015	5,0	<u>44.</u>
Pa	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			_		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		L	2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		L	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		L	За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audi	t			

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

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization

WIDENER UNIVERSITY

Employer identification number 23-1386178

OMB No. 1545-0047

			TATIC ONLANDIC					3 1300170			
Pa	rt I	Reason for Public (Charity Status.	All organizations must c	omplete th	nis part.) S	ee instructions.				
he (organ	ization is not a private found	ation because it is: (F	or lines 1 through 12, cl	neck only	one box.)					
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2	X	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3	一	A hospital or a cooperative				(b)(1)(A)(ii	i).				
4	Ħ	A medical research organization					•	the hospital's name.			
•		city, and state:		,				,			
5			or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental unit describe	ed in			
5	ш		ion operated for the benefit of a college or university owned or operated by a governmental unit described in								
_		section 170(b)(1)(A)(iv). (C				-0/1 \/ 4\/ 4 \	, ,				
6		A federal, state, or local gov	-								
7		An organization that norma	•	ntial part of its support fr	om a gove	ernmental i	unit or from the general i	public described in			
		section 170(b)(1)(A)(vi). (C									
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Part	: II.)						
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(i	x) operate	ed in conju	inction with a land-grant	college			
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of the college	e or			
		university:									
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership fees, and	d gross receipts from			
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its support f	rom gross investment			
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acquii	red by the organization a	after June 30, 1975.			
		See section 509(a)(2). (Cor	mplete Part III.)								
11		An organization organized a	•	vely to test for public sat	ety. See	section 50)9(a)(4).				
12		An organization organized a	•		•			purposes of one or			
		more publicly supported or	•	•	•		•	• •			
		lines 12a through 12d that	-								
а		Type I. A supporting orga	* *					aivina			
u		the supported organization	· · · · · · · · · · · · · · · · · · ·			-					
		• • • •			majority o	i the direc	tors or trustees or the st	apporting			
		organization. You must o	=		:		al augustiana(a) laur la au	otan ac			
D			· ·					-			
		control or management o			ame perso	ns that coi	ntrol or manage the supp	oorted			
		organization(s). You mus									
С			- ' '				• •	ed with,			
	_	its supported organization	n(s) (see instructions)	. You must complete F	Part IV, Se	ections A,	D, and E.				
d			integrated. A supp	orting organization oper	ated in cor	nnection w	rith its supported organiz	zation(s)			
		that is not functionally int	egrated. The organiz	ation generally must sati	sfy a distr	ibution rec	uirement and an attentiv	veness			
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V.				
е		Check this box if the orga	anization received a v	vritten determination from	m the IRS	that it is a	Type I, Type II, Type III				
		functionally integrated, or	Type III non-function	nally integrated supportir	ng organiz	ation.					
f	Ente	er the number of supported o	organizations								
g		vide the following information	about the supporte	d organization(s).							
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed na document?	(v) Amount of monetary	(vi) Amount of other			
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)			
ota											
ULD							i e	İ.			

Schedule A (Form 990) 2023

WIDENER UNIVERSITY

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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.)

Sed	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	9982933.	<u> 10426923.</u>	<u> 19186977.</u>	<u> 12598348.</u>	10234775.	62429956.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	0002022	10426022	10106077	1 2 5 0 0 2 4 0	10001775	62429956.
	Total. Add lines 1 through 3	9904933.	10420923.	191009//-	12390340.	10234//5.	02429930.
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.						62429956.
	ction B. Total Support						<u> </u>
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4				12598348.		
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	6355139.	7515736.	7618652.	9851640.	<u> 11211226.</u>	42552393.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on			331,689.			331,689.
10	Other income. Do not include gain						
	or loss from the sale of capital	600 765	E40 067	640 660	270 200	040 010	0440410
	assets (Explain in Part VI.)	628,765.	549,867.	649,669.	370,208.		
	Total support. Add lines 7 through 10		``				107762457 ,282,999.
	Gross receipts from related activities,						, 404, 999.
13	First 5 years. If the Form 990 is for the	•		•		. , . ,	
Sec	organization, check this box and stop ction C. Computation of Publi						
	Public support percentage for 2023 (li			column (f))		14	57.93 %
	Public support percentage from 2022					15	58.95 %
	33 1/3% support test - 2023. If the o						
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the c		•				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts	-					
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circum	stances test, che	ck this box and st	t op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	alifies as a publicly	supported organiz	zation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	s
						Schedule A	(Form 990) 2023

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

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

Sec	ction A. Public Support	now, please comp	Diete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and	(4) 2010	(5) 2020	(0) 2021	(4) 2022	(6) 2020	(i) rotal
-	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
2	Gross receipts from activities that						
3	are not an unrelated trade or bus-						
	iness under section 513						
4							
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5					+	
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons				-	1	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	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						
С	Add lines 10a and 10b						
	Net income from unrelated business						
	activities not included on 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						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for th	e organization's fi	ret second third	fourth or fifth tax	vear as a section	-I 501(c)(3) organizatio	n
17	check this box and stop here	ŭ		•	•	. , . ,	· —
Sec	etion C. Computation of Publi					•••••	
	Public support percentage for 2023 (li			column (f))		15	%
						16	<u> </u>
	Public support percentage from 2022 ction D. Computation of Inves					10	90
	Investment income percentage for 20			ine 13 column (f)\		17	%
	Investment income percentage from 2					18	
ıya	33 1/3% support tests - 2023. If the						r is not
	more than 33 1/3%, check this box ar	=	-	•			
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, check						
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	 a. or 19b. check th 	ns box and see in	structions	

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Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
ŀ	1		
	2		
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	За		
ŀ	3b		
	3с		
ŀ	30		
	4a		
ŀ	4b		
	4c		
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	10b		
ule	A (Forn	n 990)	2023

332025 12-21-23 Schedule A (Form 990) 2023

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes." describe in **Part VI** the role played by the organization in this regard.

За

3b

23-1386178 Page 6 WIDENER UNIVERSITY Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 」Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part Ⅵ). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions **3** Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 Multiply line 5 by 0.035. 6 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount Current Year 1 1 Adjusted net income for prior year (from Section A, line 8, column A) 2 Enter 0.85 of line 1. 2 3 Minimum asset amount for prior year (from Section B, line 8, column A) Enter greater of line 2 or line 3. 4

Schedule A (Form 990) 2023

5

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

Income tax imposed in prior year

instructions)

emergency temporary reduction (see instructions)

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

5

6

Schedule A (Form 990) 2023 WIDENER UNIVERSITY 23-1386178 Page 7

<u>Par</u>	t V Type III Non-Functionally Integrated 509		nizations (continu		3-13861/8 Pag
	on D - Distributions	(u)(o) cappoig c. ga	meanone (continu	<u>leu)</u>	Current Year
	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
	Amounts paid to perform activity that directly furthers exemp	<u> </u>			
_	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		3	
4	Amounts paid to acquire exempt-use assets	or supported organizations	•	4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovido dotaile in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.	ovide details in Furt VI)		6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
Ū	(provide details in Part VI). See instructions.	to organization to responsive		8	
9	Distributable amount for 2023 from Section C, line 6			9	
	Line 8 amount divided by line 9 amount			10	
10	Line o amount divided by line 9 amount	(i)	(ii)	10	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	ıs	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
С	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
-	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
	Tall VI. 300 mondono.				

Schedule A (Form 990) 2023

and 4c.
 B Preakdown of line 7:
 Excess from 2019
 Excess from 2020
 Excess from 2021
 Excess from 2022
 Excess from 2023

7 Excess distributions carryover to 2024. Add lines 3j

23-1386178 Page 8 WIDENER UNIVERSITY Schedule A (Form 990) 2023 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: MISCELLANEOUS INCOME 2019 AMOUNT: \$ 497,729. 2020 AMOUNT: \$ 335,098. 490,920. 2021 AMOUNT: \$ 2022 AMOUNT: \$ 224,458. 2023 AMOUNT: 249,910. INTEREST FEES ON LOANS 2019 AMOUNT: \$ 131,036. 2020 AMOUNT: \$ 214,769. 2021 AMOUNT: \$ 158,749. 2022 AMOUNT: 145,750.

332028 12-21-23 Schedule A (Form 990) 2023

Schedule B

(Form 990)

Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

Employer identification number

Name of the organization WIDENER UNIVERSITY 23-1386178 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

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

religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

- Constant B (1 on 11 cos) (2020)	i ago
Name of organization	Employer identification number
WIDENER UNIVERSITY	23-1386178

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a)	(b)	(c) Total contributions	(d)
No1	Name, address, and ZIP + 4	\$ 1,488,553.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)

323452 12-26-23

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization Employer identification number

WIDENER UNIVERSITY 23-1386178

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Page 4 Schedule B (Form 990) (2023) Name of organization **Employer identification number** 23-1386178 WIDENER UNIVERSITY Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			Emp	oloyer identification number
		UNIVERSITY			23-1386178
Pa	art I-A Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 o	rganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures			
Pa	art I-B Complete if the org	anization is exempt und	ler section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955		\$
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 4955		\$
3	If the organization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				1/21
Pa	art I-C Complete if the org	anization is exempt und	ler section 501(c),	except section 501(c)(3).
	Enter the amount directly expended	, , ,	•	***************************************	\$
2	Enter the amount of the filing organ				
	exempt function activities				\$
3	Total exempt function expenditures		·		•
	line 17b				\$ <u></u>
	3 3				
5	Enter the names, addresses, and er made payments. For each organiza				
	contributions received that were pro	·			·
	political action committee (PAC). If				0 0
	(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

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

Sch		WIDENER UN				.386178 Page 2
Pa	art II-A Complete if the org	anization is exe	mpt under section	n 501(c)(3) and file	ed Form 5768 (ele	ection under
	section 501(h)).					
Α	Check if the filing organiza	tion belongs to an a	ffiliated group (and list ir	n Part IV each affiliated	group member's nam	e, address, EIN,
	expenses, and shar	re of excess lobbying	g expenditures).			
<u>B</u>	Check if the filing organiza	tion checked box A	and "limited control" pro	ovisions apply.	T	Т
		ts on Lobbying Exp ditures" means amo	enditures ounts paid or incurred.))	(a) Filing organization's totals	(b) Affiliated group totals
1	Total lobbying expenditures to influence	uence public opinion	(grassroots lobbying)			
	b Total lobbying expenditures to influ		1 (1) 11 11 1 1			
	c Total lobbying expenditures (add li	~				
	d Other exempt purpose expenditure					
	e Total exempt purpose expenditure		1)			
	f Lobbying nontaxable amount. Ente	er the amount from t	ne following table in bot	h columns.		
	If the amount on line 1e, column (a) o	r (b) is: The lo	bbying nontaxable am	ount is:		
	not over \$500,000,	20% c	f the amount on line 1e.			
	over \$500,000 but not over \$1,000),000, \$100,	000 plus 15% of the exc	ess over \$500,000.		
	over \$1,000,000 but not over \$1,5	00,000, \$175,0	000 plus 10% of the exc	ess over \$1,000,000.		
	over \$1,500,000 but not over \$17,0	000,000, \$225,0	000 plus 5% of the exce	ss over \$1,500,000.		
	over \$17,000,000,	\$1,000	0,000.			
	g Grassroots nontaxable amount (en	,				
	h Subtract line 1g from line 1a. If zer	•				
	i Subtract line 1f from line 1c. If zero					
	j If there is an amount other than ze		r line 1i, did the organiza	ation file Form 4720	ı	
	reporting section 4911 tax for this					Yes No
	(Some organizations t		veraging Period Under	• •	of the five columns b	alow
	(Some organizations to		rate instructions for li	-	in the live columns b	CIOW.
_		Lobbying Exp	enditures During 4-Yea	ar Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
	a 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					

Schedule C (Form 990) 2023

WIDENER UNIVERSITY

23-1386178 Page 3

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 e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	a)	(b)	
	e lobbying activity.	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:			
а			Х	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х	
С	Media advertisements?		Х	
d			X	
е	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		X	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i	Other activities?	X		1,180.
j	Total. Add lines 1c through 1i			1,180.
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X	
	If "Yes," enter the amount of any tax incurred under section 4912			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), section	 n 501(c)(5), or sec	tion
	501(c)(6).			Van Na
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
3 Par	Did the organization agree to carry over lobbying and political campaign activity expenditures from the till-B Complete if the organization is exempt under section 501(c)(4), section	e prior year n 501(c)(? 3 5) or sec	tion
. u.	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered			
	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 expenditures)	cal		
	expenses for which the section 527(f) tax was paid).			
а	,			
b	Carryover from last year		2b	
С	Total		I	
3			3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical		
_	expenditures next year?		4	
5 Dar	Taxable amount of lobbying and political expenditures. See instructions t IV Supplemental Information		5	
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II	-A, lines 1 a	nd 2 (see
instru	actions); and Part II-B, line 1. Also, complete this part for any additional information.			
PAF	RT II-B, LINE 1, LOBBYING ACTIVITIES:			
THE	E UNIVERSITY IS A MEMBER OF THE ASSOCIATION OF INDE	ENDEN'	COLL:	EGES
ANI	UNIVERSITIES OF PENNSYLVANIA (AICUP). THE ASSOCIAT	ION IS	S THE	ONLY
STA	ATEWIDE ORGANIZATION THAT SERVES EXCLUSIVELY THE INT	EREST	S OF P	RIVATE
HIC	HER EDUCATION WITHIN THE COMMONWEALTH, AND EXISTS T	O COM	PLEMEN'	T AND
SUI	PPORT THE WORK OF CAMPUS LEADERS. THE FIGURE DISCLOS	SED ON	PART	II-B
			Schedu	ile C (Form 990) 2023

Schedule C (Form 990) 2023 WIDENER UNIVERSITY	23-1386178	Page 4
Part IV Supplemental Information (continued)		
IS EQUAL TO THE PORTION OF DUES PAID BY WIDENER UNIVERSITY T	HAT WERE	
USED BY THE ASSOCIATION TO SUPPORT ATTEMPTS TO INFLUENCE LEG	ISLATION	
WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVE	NUE CODE	
("LOBBYING").		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

2023
Open to Public Inspection

Name of the organization

WIDENER UNIVERSITY

Employer identification number 23-1386178

Par	t I Organizations Maintaining Donor Advised Fu	ınds or Other Similar F	unds or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.			·
		(a) Donor advised funds		b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing	g that the assets held in dono	or advised fund	ds
	are the organization's property, subject to the organization's exclu-	ısive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisor	ors in writing that grant funds	can be used o	nly
	for charitable purposes and not for the benefit of the donor or dor	or advisor, or for any other pu	urpose conferr	ing
	impermissible private benefit?			
Par	t II Conservation Easements. Complete if the organiz	ation answered "Yes" on Forr	n 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization (c			
	Preservation of land for public use (for example, recreation of	or education) Preserv	ation of a histo	orically important land area
	Protection of natural habitat	Preserv	ation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified of	onservation contribution in th	e form of a co	
	day of the tax year.			Held at the End of the Tax Year
_				2a
b				2b
C	Number of conservation easements on a certified historic structur			2c
d	Number of conservation easements included on line 2c acquired a			
•	on a historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, release	d, extinguished, or terminated	by the organi	zation during the tax
	year	at to to out and		
4	Number of states where property subject to conservation easeme		line of	
5	Does the organization have a written policy regarding the periodic		-	Yes No
6	violations, and enforcement of the conservation easements it hold Staff and volunteer hours devoted to monitoring, inspecting, hand			
U	Stan and volunteer riours devoted to monitoring, inspecting, nanc	illing of violations, and emorci	ig conservatio	in easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling	of violations, and enforcing co	nservation ea	sements during the year
•	7 thount of expenses mounted in monitoring, inspecting, harding	or violations, and emoreing ec	nioci vation ca	someries during the your
8	Does each conservation easement reported on line 2d above satisfied above sati	sty the requirements of section	n 170(h)(4)(B)(i	
_	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation ea			
	balance sheet, and include, if applicable, the text of the footnote t		•	
	organization's accounting for conservation easements.	-		
Par	t III Organizations Maintaining Collections of Art	, Historical Treasures,	or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form 990	, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958, no	t to report in its revenue state	ement and bala	ance sheet works
	of art, historical treasures, or other similar assets held for public e	xhibition, education, or resear	ch in furtherar	nce of public
	service, provide in Part XIII the text of the footnote to its financial	statements that describes the	se items.	
b	If the organization elected, as permitted under FASB ASC 958, to	report in its revenue statemer	nt and balance	sheet works of
	art, historical treasures, or other similar assets held for public exhi	bition, education, or research	in furtherance	of public service,
	provide the following amounts relating to these items.			
	(i) Revenue included on Form 990, Part VIII, line 1			
	(ii) Assets included in Form 990, Part X			\$
2	If the organization received or held works of art, historical treasure	es, or other similar assets for f	inancial gain, p	provide
	the following amounts required to be reported under FASB ASC 9	58 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			\$
	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions for	Form 990.		Schedule D (Form 990) 2023

		ER UNIVERSIT					886178	Pa	age 2
Par	rt III Organizations Maintainir	ng Collections of Ar	t, Historical Tre	asures, or Oth	er Sir	nilar Asset	s (continu	ued)	
3	Using the organization's acquisition, acc	cession, and other record	s, check any of the f	ollowing that make	signific	cant use of its			
	collection items (check all that apply).								
а		d		hange program					
b	X Scholarly research	е	X Other CO	MMUNITY EN	RIC	HMENT			
С	X Preservation for future generation	S							
4	Provide a description of the organization	n's collections and explair	n how they further th	e organization's ex	empt p	urpose in Par	t XIII.		
5	During the year, did the organization so	licit or receive donations of	of art, historical treas	sures, or other simil	ar asse	ets			_
	to be sold to raise funds rather than to l						Yes	X	No
Pai	rt IV Escrow and Custodial A		te if the organization	answered "Yes" o	n Form	990, Part IV,	line 9, or		
	reported an amount on Form 990	D, Part X, line 21.							
1a	Is the organization an agent, trustee, cu	stodian, or other intermed	diary for contribution	s or other assets no	ot inclu	ded			_
	on Form 990, Part X?					[Yes		No
b	If "Yes," explain the arrangement in Par				_				
							Amount		
С	Beginning balance				L	1c			
d	Additions during the year				L	1d			
	Distributions during the year					1e			
f					L	1f			
2a	Did the organization include an amount				oility?		Yes		No
b	If "Yes," explain the arrangement in Par								
Pai	rt V Endowment Funds Compl	ete if the organization ans	swered "Yes" on For	m 990, Part IV, line	10.				
		(a) Current year	(b) Prior year	(c) Two years back	(d) ⊺	hree years back	(e) Four	years	back
1a	Beginning of year balance	112904047.	113852608.	114875751		90171765	. 9	4623	615.
b	Contributions	1,536,580.	447,611.	9,901,731		1,862,479	,	279,	925.
С	Net investment earnings, gains, and los	ses 10859068.	5,862,702.	-4111726		29243046	, –	207,	474.
d	Grants or scholarships	1,708,145.	1,604,552.	1,519,657		1,407,595	. 1,	375,	993.
е	Other expenditures for facilities								
	and programs	6,051,808.	5,654,322.	5,293,491		4,993,944	3,	148,	308.
f	Administrative expenses								
g		117520742	112904047.	113852608		114875751	. 9	0171	765.
2	Provide the estimated percentage of the	e current year end balance	e (line 1g, column (a)) held as:					
а	Board designated or quasi-endowment	38.0698	%						
b	Permanent endowment 61.692	2 <mark>4</mark> %							
С	Term endowment 237	^{'8} %							
	The percentages on lines 2a, 2b, and 2d	should equal 100%.							
За	Are there endowment funds not in the p	ossession of the organiza	ition that are held an	d administered for	the				
	organization by:							Yes	No
	(i) Unrelated organizations?						3a(i)		X
									X
b	If "Yes" on line 3a(ii), are the related org								
4	Describe in Part XIII the intended uses of								
Par	rt VI Land, Buildings, and Equ								
	Complete if the organization ans	-	, Part IV, line 11a. S	ee Form 990, Part 3	K, line 1	10.			
	Description of property	(a) Cost or o				nulated	(d) Book	valu	Α
	2000 in property	basis (investr	, ,	1 ' '	lepreci		(4) 2001	· vaia	•
1a	Land	,	,	4,730.			L6,454	. , 7	30.
	Buildings			7,006.205	. 217				
	Leasehold improvements		555,57	.,	, _ /	,	,	_, _,	- · •
	Equipment		71 48	6,686. 65	729	473	5,757	. 2:	13.
	Other			6,752. 12			2,716		
	al. Add lines 1a through 1e. (Column (d) m		•				9,388	_	

WIDENER UNIVERSITY 23-1386178 Page 3 Schedule D (Form 990) 2023 Part VII Investments - Other Securities Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (including name of security) (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) Financial derivatives (2) Closely held equity interests (3) Other (A) VENTURE CAPITAL 12,904,352. END-OF-YEAR MARKET VALUE 5,957,964. NATURAL RESOURCES END-OF-YEAR MARKET **VALUE** 10,019,503. REAL ESTATE END-OF-YEAR MARKET VALUE OTHER 4,248,882. END-OF-YEAR MARKET VALUE (D) (E) (F) (G) (H) 33,130,701. Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related. Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6)(7) (8) (9)Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1)(2) (3) (4)(5) (6) (7)(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)) Other Liabilities Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	ASSET RETIREMENT OBLIGATION	4,730,807.
(3)	ACCRUED POST RETIREMENT BENEFITS	25,028,307.
(4)	FINANCE LEASE OBLIGATIONS	377,874.
(5)	OPERATING LEASE OBLIGATION	293,765.
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, line 25, col. (B))	30,430,753.

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

THE UNIVERSITY HAS ELECTED PURSUANT TO GENERALLY ACCEPTED ACCOUNTING STANDARDS NOT TO REPORT IN ITS REVENUE STATEMENT AND BALANCE SHEET WORKS OF ART. THE FOOTNOTE READS "THE UNIVERSITY HOUSES A COLLECTION OF AMERICAN PAINTINGS AND THE ALFRED O. DESHONG COLLECTION OF EUROPEAN PAINTINGS AND ORIENTAL ART OBJECTS THAT IT DOES NOT CAPITALIZE. THESE COLLECTIONS ADHERE TO THE UNIVERSITY'S POLICY TO (A) MAINTAIN THEM FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH; AND (B) PROTECT, KEEP UNENCUMBERED, CARE FOR, AND PRESERVE THEM; AND (C) USE ANY PROCEEDS FROM SALE OF COLLECTION ITEMS TO ACQUIRE NEW COLLECTION ITEMS OR THE DIRECT CARE OF THE EXISTING COLLECTION. THE UNIVERSITY DEFINES DIRECT CARE AS ACTIVITIES TO ENHANCE THE LIFE, USEFULNESS, OR QUALITY OF THE COLLECTION, THEREBY ENSURING THAT

Schedule D (Form 990) 2023 WIDENER UNIVERSITY 23-1386178 Page 5

Part XIII Supplemental Information (continued)

IT WILL CONTINUE TO BENEFIT THE PUBLIC FOR YEARS TO COME."

PART III, LINE 4:

THE WIDENER UNIVERSITY ART COLLECTION HOUSES THE UNIVERSITY'S DIVERSE

COLLECTION OF AMERICAN PAINTINGS AND THE ALFRED O. DESHONG COLLECTION OF

EUROPEAN PAINTINGS AND ORIENTAL ART OBJECTS. THE COLLECTION PROVIDES

NUMEROUS EDUCATIONAL OPPORTUNITIES TO OUR STUDENTS THROUGH ITS EXISTING

ASSORTMENT. IT ALSO PROVIDES CULTURAL ENRICHMENT TO THE FACULTY, STAFF,

AND SURROUNDING COMMUNITIES.

PART V, LINE 4:

ENDOWMENT FUNDING SUPPORTS SCHOLARSHIPS, FACULTY DEVELOPMENT, CHAIRS,

AWARDS, THE LIBRARY, AS WELL AS OTHER INITIATIVES.

PART X, LINE 2:

THE UNIVERSITY HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS A

TAX-EXEMPT ORGANIZATION DESCRIBED IN SECTION 501(C)(3) OF THE INTERNAL

REVENUE CODE. AS SUCH, IT IS SUBJECT TO TAX ONLY ON INCOME FROM ACTIVITIES

UNRELATED TO ITS TAX EXEMPT MISSION. FOR THE YEARS ENDED JUNE 30, 2024 AND

2023, THE UNIVERSITY GENERATED NO SIGNIFICANT UNRELATED BUSINESS INCOME

SUBJECT TO TAX, AND NO PROVISION FOR INCOME TAXES WAS PROVIDED. THE

UNIVERSITY BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS.

PART X	, LINE	2D	_	OTHER	ADJUSTMENTS:
--------	--------	----	---	-------	--------------

RENTAL EXPENSE	168,000.
NET SPECIAL FUNDRAISING EVENT EXPENSE	19,339.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	187,339.

Schedule D (Form 990) 2023 WIDENER UNIVERSITY Part XIII Supplemental Information (continued)	23-1386178 Page 5
Part XIII Supplemental Information (continued)	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
SCHOLARSHIPS	110,811,473.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSE	168,000.
NET SPECIAL FUNDRAISING EXPENSE	19,339.
EXPENSE OF AFFILIATE REPORTED ON A SEPARATE RETURN	48,669.
AFFILIATE CLOSE-OUT	554,022.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	790,030.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
SCHOLARSHIPS	110,811,473.
Belloharbilieb	
	Sahadula D (Farm 000) 2022

WIDENER UNIVERSITY

SCHEDULE E (Form 990)

Schools

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

OMB No. 1545-0047

ZUZJ

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Attach to Form 990 or Form 990-EZ.

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

Pa				
	ırt I		YES	NO
4	Does the examination have a recially pendiceriminatory policy toward at idente by etatement in its charter		TES	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	х	
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	х	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
•	homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or 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		Х
	OUR POLICY IS PUBLISHED IN ALL CATALOGS, PRINTED MATERIALS			
	AND ON THE UNIVERSITY'S WEBSITE.			
4	Does the organization maintain the following?		.,,	
а	7, 7,		X	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	4c	X	
d	I Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. If you need more space, use Part II.	4d	Х	
5	Does the organization discriminate by race in any way with respect to:			
		5a		X
а	Students' rights or privileges?	5a 5b		Х
a b				X
a b c	Students' rights or privileges? Admissions policies?	5b		X X X
a b c	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff?	5b 5c		X X X X
a b c	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies?	5b 5c 5d		X X X X
a b c d e f	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e		X X X X X X
a b c d e f	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f		X X X X
a b c d e f	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs?	5b 5c 5d 5e 5f 5g		X X X X X
a b c d e f	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f 5g		X X X X X
a b c d e f	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities?	5b 5c 5d 5e 5f 5g		X X X X X
a b c d e f g h	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5b 5c 5d 5e 5f 5g 5h	v	X X X X X
a b c d e f g h	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency?	5b 5c 5d 5e 5f 5g 5h	X	X X X X X
a b c d e f g h	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	5b 5c 5d 5e 5f 5g 5h	X	X X X X X
a b c d e f g h	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" on either line 6a or line 6b, explain on Part II.	5b 5c 5d 5e 5f 5g 5h	X	X X X X X
a b c d e f g h	Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	5b 5c 5d 5e 5f 5g 5h	X	X X X X X

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

Schedule E (Form 990) 2023 WIDENER UNIVERSITY	23-1386178 Page 2
Part II Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and	d 7, as
applicable. Also provide any other additional information. See instructions.	
LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:	
IN THE NORMAL COURSE OF BUSINESS, THE UNIVERSITY ROUTINELY	RECEIVES
FUNDING FROM FEDERAL STATE AND LOCAL GOVERNMENTS FOR STU	DENT FINANCIAL
TONDING TROM THE BUILD, STRILL, THE LOCAL GOVERNMENTS TON STOR	
Supplemental Information. Provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also provide any other additional information. See instructions.	
AID.	

Schedule E (Form 990) 2023 332062 10-25-23

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization					Employer identi	fication number
WIDENER UNIVERS	ΙΤΥ				23-13861	78
		ctivities Out	side the United States. Comple	ete if the organ	ization answered "	Yes" on
Form 990, Part IV						
•	J		ds to substantiate the amount of its gra		,	
the grantees' eligibility fo	or the grants or a	assistance, and t	the selection criteria used to award the	grants or assis	stance? L	Yes No
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and of	her assistance out	side the
United States.			p. 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	granic and co	.,	
3 Activities per Region. (Th	ne following Part	I, line 3 table ca	an be duplicated if additional space is n			
(a) Region	(b) Number of offices	(c) Number of employees,	(d) Activities conducted in the region (by type) (such as, fundraising, pro-		vity listed in (d)	(f) Total expenditures
	in the region	agents, and independent	gram services, investments, grants to		gram service, e specific type	for and
		contractors in the region	recipients located in the region)	1	(s) in the region	investments in the region
		in the region				
CENTRAL AMERICA AND						
THE CARIBBEAN	0	0	INVESTMENTS			13238345
CENTRAL AMERICA AND						
THE CARIBBEAN	0	0	PROGRAM SERVICES	STUDENT TRI	P	69,180.
EUDODE / INGLUDING						
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	STUDENT TRI	·p	24,376.
TOURING & GREENBING,			Thousan Danvield	DIODENI INI		21,370.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDENT TRI	P	25,366.
3 a Subtotal	0	0				13357267
b Total from continuation	0					_
sheets to Part I c Totals (add lines 3a	-	0				0.
and 3b)	0	0				13357267

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

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

Part II

WIDENER UNIVERSITY

23-1386178

Page 2

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

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

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

Schedule F (Form 990) 2023

³ Enter total number of other organizations or entities

Schedule F (Form 990) 2023 WIDENER UNIVERSITY 23-1386178 Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash noncash assistance assistance

· u··	To leight offis	
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 the Instructions for Form 926)	X Yes No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may	
	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and	
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a	
	U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes."	
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to	
	Certain Foreign Corporations (see the Instructions for Form 5471)	X Yes No
		·····
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a	
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,	
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing	
	Fund (see the Instructions for Form 8621)	X Yes No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes."	
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain	
	Foreign Partnerships (see the Instructions for Form 8865)	Yes X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If	
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see	
	the Instructions for Form 5713; don't file with Form 990)	Yes X No
		Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization							Employer identification number
	NIVERSITY						23-1386178
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records		-					
criteria used to award the grants or assi	stance?						X Yes No
2 Describe in Part IV the organization's pr	ocedures for monit	oring the use of grant	funds in the United	l States.			
Part II Grants and Other Assistance to recipient that received more than					anization answered "Y	es" on Form 990, Par	t IV, line 21, for any
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total number of section 501(c)(3) a 3 Enter total number of other organization	-						

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

Schedule I (Form 990) 2023

Schedule I (Form 990) 2023 WIDENER UNIVERSITY

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

Part III 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 noncash assistance
STUDENT FINANCIAL AID/GRANTS/AWARDS	4205	110811473.	0.		
Part IV Supplemental Information Provide the information red	uired in Part I lin	e 2: Part III. column	(b): and any other ac	I Iditional information	

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

CONTINUOUS IF INSTITUTIONAL FINANCIAL NEED REMAINS, ALL REQUIRED DOCUMENTS

PART I, LINE 2:

FINANCIAL AID AND SCHOLARSHIPS ARE AWARDED IN AN OBJECTIVE AND

NONDISCRIMINATORY MANNER. SCHOLARSHIPS AND GRANTS FOR STUDENTS ARE APPLIED

DIRECTLY TO A STUDENT'S UNIVERSITY ACCOUNT AND APPLIED TO TUITION, FEES,

ROOM AND BOARD. ALL FINANCIAL AID IS SUBJECT TO REVISION BASED ON

AVAILABILITY, CHANGES IN FAMILY CONTRIBUTION, HOUSING STATUS, AND/OR CREDIT

LOAD. SATISFACTORY ACADEMIC PROGRESS MUST BE MAINTAINED ACCORDING TO

STANDARDS PRESCRIBED BY THE UNIVERSITY. ANNUAL RENEWAL OF FINANCIAL AID IS

Page 2

Schedule I (Form 990) WIDENER UNIVERSITY	23-13	86178	Page 2
Schedule I (Form 990) WIDENER UNIVERSITY Part IV Supplemental Information			<u> </u>
ARE COMPLETED BY THE PUBLISHED DEADLINE AND SATISFACTORY	ACADEMIC	PROGRE	ss
IS MAINTAINED CONSISTENT WITH THE UNIVERSITY'S POLICY.			

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

WIDENER UNIVERSITY

 $\begin{array}{c} \textbf{Employer identification number} \\ 23-1386178 \end{array}$

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Lag Health or social club dues or initiation fees			
	Discretionary spending account X Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
_				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year did any parent listed on Form 200. Bort VII. Coation A line to with respect to the filing			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
_	organization or a related organization: Receive a severance payment or change-of-control payment?	4a		х
a h	Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	Х	<u> </u>
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	10		
	The second and the second and provide and approach and an expension and the second and the secon			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	<u> </u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			1
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	X	
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		7-	
	Regulations section 53.4958-6(c)?	9	X	

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

Schedule J (Form 990) 2023

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) STACEY M. ROBERTSON, PH.D.	(i)	447,802.	75,000.	92,658.	5,625.	64,704.	685,789.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ANDREW WORKMAN	(i)	292,399.	50,000.	48,308.	8,262.	24,585.	423,554.	0.
PROVOST	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) LINDA KIRALY GILBERT	(i)	260,971.	75,000.	32,036.	7,395.	13,009.	388,411.	0.
VP FOR ADMINISTRATION & FINANCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) THERESA TRAVIS	(i)	233,839.	50,000.	28,917.	6,194.	30,318.	349,268.	0.
VP ADVANCEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JOSEPH HOWARD	(i)	215,026.	75,000.	23,555.	5,993.	11,718.	331,292.	0.
VP FOR ENROLLMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) FRED AKL	(i)	249,797.	0.	33,605.	15,975.	22,079.	321,456.	0.
DEAN SCHOOL OF ENGINEERING	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KATHRYN HERSCHEDE	(i)	203,200.	75,000.	23,531.	5,737.	11,606.	319,074.	0.
VP FOR STRATEGIC INITIATIVES	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ALICIA KELLY	(i)	211,458.	0.	10,682.	6,375.	84,611.	313,126.	0.
VICE DEAN, DELAWARE LAW	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) ERIC BEHRENS	(i)	197,216.	50,000.	12,390.	5,398.	25,086.	290,090.	0.
VP FOR LIBRARY & INFORMATION SYSTEMS	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) MICHELLE DAVIS	(i)	192,273.	65,125.	12,000.	5,100.	10,705.	285,203.	0.
CHIEF DIVERSITY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) ANTHONY R. WHEELER	(i)	240,652.	0.	792.	6,120.	25,456.	273,020.	0.
DEAN SCHOOL OF BUSINESS	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) ANNE M. KROUSE	(i)	219,568.	0.	27,875.	6,101.	11,792.	265,336.	0.
DEAN SCHOOL OF NURSING	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) MICHAEL HUSSEY	(i)	212,761.	0.	18,893.	5,763.	2,947.	240,364.	0.
DEAN, COMMONWEALTH LAW	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE:

FOR THE PRESIDENT OF THE UNIVERSITY, HOUSING IS REQUIRED BY THE UNIVERSITY

AS A CONDITION OF EMPLOYMENT. THE USE OF THE HOUSE IS EXCLUDED FROM INCOME

PURSUANT TO INTERNAL REVENUE CODE SECTION 119(A)(2). THE FAIR RENTAL VALUE

OF THE HOUSING IS \$38,444 AND IS INCLUDED IN THE AMOUNT REPORTED AS

NONTAXABLE BENEFITS ON SCHEDULE J, PART II, COLUMN D.

HEALTH OR SOCIAL CLUBS:

THE UNIVERSITY MAINTAINS A WRITTEN ACCOUNTABLE POLICY REGARDING THE PAYMENT

OR REIMBURSEMENT OF SOCIAL AND HEALTH CLUBS. FOR FY24, \$24,963 WAS PAID TO

THE UNION LEAGUE OF PHILADELPHIA FOR THE PRESIDENT TO CONDUCT UNIVERSITY

BUSINESS AT THE CLUB. THIS AMOUNT IS NOT TREATED AS TAXABLE INCOME.

PERSONAL SERVICES:

OFFICERS AND KEY EMPLOYEES MAY USE A CAR SERVICE FOR EXTENDED TRAVEL IN

ORDER TO CONDUCT UNIVERSITY BUSINESS. THIS AMOUNT IS NOT TREATED AS TAXABLE

INCOME. THE UNIVERSITY ALSO PROVIDES CLEANING SERVICES FOR THE PRESIDENT'S

RESIDENCE. FOR STACEY M. ROBERTSON, PH.D., THE FAIR VALUE OF THIS SERVICE

Schedule J (Form 990) 2023

Part III Supplemental Information

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

IS \$1,532 AND IS INCLUDED IN THE AMOUNT REPORTED AS TAXABLE INCOME ON

SCHEDULE J, PART II, COLUMN B(III).

PART I, LINE 4B:

THE UNIVERSITY PROVIDES A NON-QUALIFIED 457(F) SUPPLEMENTAL EXECUTIVE

RETIREMENT PLAN WITH A BENEFIT OF \$300,000 TO STACEY M. ROBERTSON, PH.D.,

PRESIDENT. THIS BENEFIT FULLY VESTS ON JUNE 30, 2027, PROVIDED DR.

ROBERTSON REMAINS CONTINUOUSLY EMPLOYED THROUGH THAT DATE AS PRESIDENT.

CONTRIBUTIONS TO THE PLAN SHALL VEST IN FULL IMMEDIATELY UPON THE DEATH OR

PERMANENT DISABILITY OF DR. ROBERTSON OR, IN THE EVENT OF THE TERMINATION

OF HER EMPLOYMENT WITHOUT SERIOUS CAUSE PRIOR TO JUNE 30, 2027,

CONTRIBUTIONS TO THE PLAN SHALL VEST ON A PRO-RATA BASIS DETERMINED BY THE

CALCULATION RESULTING FROM THE NUMBER OF MONTHS OF SERVICE COMPLETED AS

PRESIDENT AS THE NUMERATOR DIVIDED BY THE 60 MONTH SERVICE PERIOD OF THE

TERM AS THE DENOMINATOR.

THE UNIVERSITY DID NOT MAKE ANY SECTION 457(F) PLAN DEFERRALS OR PAYMENTS

DURING THE TAX YEAR.

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

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

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

2023
Open to Public Inspection

Employer identification number Name of the organization 23-1386178 WIDENER UNIVERSITY SEE PART VI FOR COLUMN CONTINUATIONS (A) Part I **Bond Issues** (g) Defeased (h) On behalf (a) Issuer name (c) CUSIP # (d) Date issued (f) Description of purpose (i) Pooled (b) Issuer EIN (e) Issue price of issuer financing Yes No Yes No Yes No PENNSYLVANIA HIGHER A EDUCATIONAL FACILITIES A 23-2243852 70917 SLY7 09/11/14 20396446. REFINANCING Х Х Х PENNSYLVANIA HIGHER B EDUCATIONAL FACILITIES A 23-2243852 070917 JM6 11/01/13 53440880. REFINANCING Х Х Х PENNSYLVANTA HIGHER c EDUCATIONAL FACILITIES A 23-2243852 70917 TEB3 07/14/21 30284229. CAPITAL PROJECTS Х Х X D **Proceeds** Part II C D 6,236,446. 13,355,880. Amount of bonds retired 36,270,000. Amount of bonds legally defeased 20,396,446. 30,284,229 53,440,880. Total proceeds of issue Gross proceeds in reserve funds Capitalized interest from proceeds 6 Proceeds in refunding escrows 310,928. 344,468. 277,936 Issuance costs from proceeds 8 Credit enhancement from proceeds 9 Working capital expenditures from proceeds 24,881,910 Capital expenditures from proceeds 20.085.518. 53.096.412. 11 Other spent proceeds 5,124,383 Other unspent proceeds 2013 2014 Year of substantial completion No No Yes Yes Yes No Yes No 14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, Х Х Х if issued prior to 2018, a current refunding issue)? 15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if Х Х Х issued prior to 2018, an advance refunding issue)? Х Х Х Has the final allocation of proceeds been made? Does the organization maintain adequate books and records to support the Х Х Х final allocation of proceeds?

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

Schedule K (Form 990) 2023

 Schedule K (Form 990) 2023
 WIDENER UNIVERSITY
 23-1386178
 Page 2

Part III Private Business Use								
		A		В	(Ç)
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
which owned property financed by tax-exempt bonds?		X		X		X		
2 Are there any lease arrangements that may result in private business use of								
bond-financed property?		X		X		X		
3a Are there any management or service contracts that may result in private								
business use of bond-financed property?		X		X		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?		Х		X		x		
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities		•		'				
other than a section 501(c)(3) organization or a state or local government		.00 %		.00 %		.00 %		%
5 Enter the percentage of financed property used in a private business use as a		,,		, ,		, ,		70
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		.12 %		.02 %		.09 %		%
6 Total of lines 4 and 5		.12 %		.02 %		.09 %		/ 0
7 Does the bond issue meet the private security or payment test?		X		1 x		X		/0
8a Has there been a sale or disposition of any of the bond-financed property to a non-				 				
governmental person other than a 501(c)(3) organization since the bonds were issued?		X		x		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		70		70		70		70
sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all				+ +				
nonqualified bonds of the issue are remediated in accordance with the								
·	х		х		х			
requirements under Regulations sections 1.141-12 and 1.145-2? Part IV Arbitrage	Δ	1	77	1	77			
raitiv Aibitage		^		В		С		`
1 Han the inquer filed Form 9039 T. Arbitrage Debate World Deduction and	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	res	X	res	X	res	X	162	INO
Penalty in Lieu of Arbitrage Rebate?				1 A				
2 If "No" to line 1, did the following apply?	Х		Х	1	X			
a Rebate not due yet?	X	+	X	+ +	^	Х		
b Exception to rebate?	Λ	X	Λ	X	X	^		
c No rebate due?					Λ			
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed		37				77		
3 Is the bond issue a variable rate issue?		X		X		X		<u> </u>

Schedule K (Form 990) 2023 WIDENER UNIVERSITY	23-1386178							
Part IV Arbitrage (continued)								
		١	E	3	(<u>c</u>	Г)
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X		X		X		
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		X		
b Name of provider								
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		X		X		
7 Has the organization established written procedures to monitor the								
requirements of section 148?	Х		X		X			
Part V Procedures To Undertake Corrective Action								
		١	E	3	(<u>c</u>	Г)
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
of federal tax requirements are timely identified and corrected through the								
voluntary closing agreement program if self-remediation isn't available under								
applicable regulations?	X		X		X			
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	K. See instru	uctions.					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: PENNSYLVANIA HIGHER EDUCATIONAL	FACILIT	ries au	THORITY	7				
(A) ISSUER NAME: PENNSYLVANIA HIGHER EDUCATIONAL	FACILI	ries au	THORITY	7.				
(A) ISSUER NAME: PENNSYLVANIA HIGHER EDUCATIONAL	FACILI	ries au	THORITY	7.				
SCHEDULE K, PART IV, ARBITRAGE, LINE 2C:								
(A) ISSUER NAME: PENNSYLVANIA HIGHER EDUCATIONAL	FACILI	ries au	THORITY	7.				
DATE THE REBATE COMPUTATION WAS PERFORMED: 07	7/14/202	24						
SCHEDULE K, PART II, LINES 14 AND 15:								
(A) ISSUER NAME: PENNSYLVANIA HIGHER EDUCATIONAL	FACILIT	CIES AU	THORITY	7				
THE REFUNDED BONDS WERE ISSUED: SERIES 2005 BONDS	SISSUEI	02/17	/2005.					
(C) ISSUER NAME: PHILADELPHIA AUTHORITY FOR INDUS	TRIAL I	DEVELOP	MENT					
THE REFUNDED BONDS WERE ISSUED: SERIES 2003 BONDS	ISSUEI	10/03	/2003;					
SERIES 2005 BONDS ISSUED 02/17/2005.			•					
<u> </u>								

Schedule K (Form 990) 2023

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990)

Transactions With Interested Persons

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization	
--------------------------	--

Employer identification number

	WIDENE	R UNIVERSITY		23-1386178								
Pa	rt I Excess Benefit Trans	sactions (section 501(c)(3), section 50	1(c)(4), and section 501(c)(29) organ	izations 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 discussified a succession	(b) Relationship between disqualified	(a) Description of trans		(d) Cori	rected?						
	(a) Name of disqualified person	person and organization (c) Description of transac		action	Yes	No						
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
2	Enter the amount of tax incurred by	the organization managers or disqualifie	d persons during the year under									
	section 4958	-		\$								
3	Enter the amount of tax, if any, on I	ine 2, above, reimbursed by the organiza	tion	\$								
	•											

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?		from the		from the		from the		(e) Original principal amount	(f) Balance due	(g) defa	In ult?	(h) Ap by bo comm	proved ard or nittee?	(i) W agreer	ritten ment?
				То	From			Yes	No	Yes	No	Yes	No						
(1)																			
(2)																			
(3)																			
(4)																			
(5)																			
(6)																			
(7)																			
(8)																			
(9)																			
(10)																			
Total	otal\$																		

Grants or Assistance Benefiting Interested Persons

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

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

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

Schedule L (Form 990) 2023

23-138<u>6178 Page 2</u> WIDENER UNIVERSITY Schedule L (Form 990) 2023 Part IV Business Transactions Involving Interested Persons Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (d) Description of (b) Relationship between interested (a) Name of interested person (c) Amount of organization's person and the organization transaction transaction revenues? Yes No STEPHEN SMITH SPOUSE OF PRESIDENT 35,000. CONSULTING X <u>(1)</u>J• (2) (3) (4) (5) (6) (7) (8) (9) (10)Part V Supplemental Information Provide additional information for responses to questions on Schedule L. See instructions.

Schedule L (Form 990) 2023

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Employer identification number

	WIDENER UNIV.	ERSITY			23-1	3801	L / 8			
Pai	rt I Types of Property									
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	termini	•	s		
1	Art - Works of art									
2	Art - Historical treasures									
3	Art - Fractional interests									
4	Books and publications									
5	Clothing and household goods									
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded	Х	3	83,632.	FAIR MARKET	VAI	JUE			
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other									
15	Real estate - Residential									
16	Real estate - Commercial									
17	Real estate - Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other ()									
26	Other ()									
27	Other ()									
28	Other (
29	Number of Forms 8283 received by the organiz	zation during	the tax year for co	ontributions						
	for which the organization completed Form 828	83, Part V, D	onee Acknowledg	ement 29			0			
							Yes	No		
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it					
	must hold for at least 3 years from the date of	the initial co	ntribution, and whi	ch isn't required to be used	for					
	exempt purposes for the entire holding period?	?		•		30a		Х		
b	If "Yes," describe the arrangement in Part II.									
31										
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash						
	contributions?		•			32a		х		
b	If "Yes," describe in Part II.									
33	If the organization didn't report an amount in c	olumn (c) foi	a type of property	for which column (a) is chec	ked,					
	describe in Part II.	. ,	,, , , , ,	,	•					

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

Schedule M (Form 990) 2023

Schedule M (Form 990) 2023 WIDENER UNIVERSITY	23-1386178	Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33		tion
is reporting in Part I, column (b), the number of contributions, the number of items received, or a com	bination of both. Also comp	olete
this part for any additional information.		
SCHEDULE M, PART I, COLUMN (B):		
, , , , ,		
THE NUMBER OF CONTRIBUTIONS IS REPORTED.		

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

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 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023
Open to Public Inspection

Name of the organization

WIDENER UNIVERSITY

Employer identification number 23-1386178

<u> </u>
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
ACADEMIC SUPPORT - EXPENSES INCURRED TO SUPPORT THE LIBRARY AND
ACADEMIC ADMINISTRATION, INCLUDING PROVOST, DEANS, AND FACULTY
DEVELOPMENT.
EXPENSES \$ 16,277,180. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION A, LINE 1A:
THE EXECUTIVE COMMITTEE, MAY BE CONVENED AT ANY TIME AT THE CALL OF ITS
CHAIR, SHALL HAVE AND EXERCISE AUTHORITY OF THE BOARD IN THE MANAGEMENT OF
ITS AFFAIRS, TO THE EXTENT PERMITTED BY THE DELAWARE CORPORATION LAW AND
THE PENNSYLVANIA CORPORATION NOT-FOR-PROFIT CODE, EXCEPT THAT THE EXECUTIVE
COMMITTEE SHALL NOT HAVE AUTHORITY TO:
(1) FILL VACANCIES IN THE BOARD OF TRUSTEES;
(2) ADOPT, AMEND OR REPEAL THE BYLAWS;
(3) AMEND OR REPEAL ANY RESOLUTION OF THE BOARD;
(4) TAKE ANY ACTION ON MATTERS COMMITTED BY THE BYLAWS OR RESOLUTION OF THE
BOARD OF TRUSTEES TO ANOTHER COMMITTEE OF THE BOARD;
(5) AMEND THE CERTIFICATE OF INCORPORATION;
(6) ADOPT AN AGREEMENT OF MERGER OR CONSOLIDATION;
(7) RECOMMEND THE SALE, LEASE OR EXCHANGE OF ALL OR SUBSTANTIALLY ALL OF
THE UNIVERSITY'S PROPERTY;
(8) RECOMMEND A DISSOLUTION OF THE UNIVERSITY; OR
(9) REVOKE DISSOLUTION OF THE UNIVERSITY.

THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE CHAIR, VICE CHAIRS, THE

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

Schedule O (Form 990) 2023

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization WIDENER UNIVERSITY

PAST-CHAIR.

 $\begin{array}{c} \textbf{Employer identification number} \\ 23-1386178 \end{array}$

TREASURER, THE SECRETARY, THE PRESIDENT OF THE UNIVERSITY, AND THE

VOTE SHALL BE SUFFICIENT TO TAKE ACTION ON A MOTION.

ON INVITATION OF THE CHAIR, ANY MEMBER OF THE BOARD MAY ATTEND AN EXECUTIVE COMMITTEE MEETING. FOUR (4) TRUSTEES SHALL CONSTITUTE A QUORUM. A MAJORITY

AT THE ANNUAL MEETING IN MAY, THE EXECUTIVE COMMITTEE SHALL DECIDE WHICH
CHAIRS OF THE STANDING COMMITTEES WILL ATTEND THE MEETINGS OF THE EXECUTIVE
COMMITTEE FOR THE FOLLOWING YEAR. THE GOAL IS TO HAVE THE CHAIR OF EACH
STANDING COMMITTEE ATTEND AT LEAST ONE EXECUTIVE COMMITTEE MEETING A YEAR.
THE COMMITTEE CHAIRS SHALL HAVE VOTING RIGHTS AT THE STANDING MEETINGS OF
THE EXECUTIVE COMMITTEE. IF THE CHAIR FINDS IT NECESSARY TO CALL A SPECIAL
MEETING OF THE EXECUTIVE COMMITTEE OR MOVE THE EXECUTIVE COMMITTEE MEETING
INTO EXECUTIVE SESSION, THE CHAIR SHALL DECIDE WHICH COMMITTEE CHAIRS SHALL
PARTICIPATE.

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

ONCE A DRAFT OF THE IRS FORM 990 HAS BEEN PREPARED BY OUR INDEPENDENT TAX

ADVISORS WITH INFORMATION PROVIDED BY MANAGEMENT, IT IS REVIEWED BY THE

AUDIT COMMITTEE OF THE BOARD OF TRUSTEES. THE FORM 990 IS NOT FILED UNTIL

THE FULL BOARD OF TRUSTEES HAS REVIEWED IT WITH MANAGEMENT.

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

THE UNIVERSITY HAS CONFLICT OF INTEREST POLICIES FOR THE BOARD OF TRUSTEES,

OFFICERS, KEY EMPLOYEES, FULL-TIME STAFF, AND PART-TIME STAFF INVOLVED IN

PURCHASING. THE BOARD OF TRUSTEES COMPLETE THE CONFLICT OF INTEREST

DISCLOSURE FORM ON AN ANNUAL BASIS, AND THE DISCLOSURE FORMS ARE RECEIVED

Schedule O (Form 990) 2023 Page **2**

Name of the organization Employer identification number WIDENER UNIVERSITY 23-1386178

AND REVIEWED BY THE TRUSTEESHIP COMMITTEE, WHO FORWARD ANY CONFLICTS ON TO
THE EXECUTIVE COMMITTEE OF THE BOARD FOR THEIR REVIEW. BOARD OF TRUSTEES
MEMBERS WITH CONFLICTS ARE EXPECTED TO ABSTAIN FROM VOTING ON ISSUES FOR
THEIR CONFLICT. THE PROCESS, REVIEW, AND REPORTING FOR THE OFFICERS AND KEY
EMPLOYEES IS THE SAME AS THE BOARD OF TRUSTEES. ALL FULL-TIME STAFF AND
PART-TIME STAFF INVOLVED IN PURCHASING COMPLETE A DISCLOSURE FORM ANNUALLY,
AND THESE ARE COLLECTED AND REVIEWED BY THE CHIEF HUMAN RESOURCES OFFICER.
THIS INDIVIDUAL THEN REPORTS THE FINDINGS TO THE VICE
PRESIDENT-ADMINISTRATION & FINANCE AND THE PRESIDENT OF THE UNIVERSITY. A
REPORT IS THEN MADE BY THE VICE PRESIDENT-ADMINISTRATION & FINANCE TO THE
FINANCE AND ADMINISTRATION COMMITTEE OF THE BOARD, WHICH THEN REPORTS THE

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

IT IS THE POLICY OF WIDENER UNIVERSITY AND ITS BOARD OF TRUSTEES (BOARD) TO COMPENSATE ITS EXECUTIVES IN ACCORDANCE WITH THE MARKET AND COMMENSURATE TO THEIR CAREER EXPERIENCE, SERVICE, AND ACCOMPLISHMENT. THE MEMBERS OF THE EXECUTIVE COMMITTEE OF THE BOARD ACT AS THE UNIVERSITY COMPENSATION COMMITTEE AND THEN PRESENT THE COMPENSATION DATA OF ALL DISQUALIFIED PERSONS TO THE BOARD. THIS REVIEW AND APPROVAL PROCESS WAS LAST UNDERTAKEN IN 2024.

THE BOARD'S USE OF COLLEGE AND UNIVERSITY PROFESSIONAL ASSOCIATION (CUPA)

AND SIMILAR INDICES IS FOR GUIDANCE PURPOSES, TAKING INTO CONSIDERATION

THAT THE POSITIONS REPORTED THEREIN ARE NOT, IN MANY INSTANCES, EQUIVALENT

TO THE EXECUTIVE POSITIONS AT THE UNIVERSITY. THUS, WHEN AN INDIVIDUAL

EXECUTIVE ACQUIRES ADDITIONAL RESPONSIBILITIES ABOVE AND BEYOND THOSE

TRADITIONALLY ASSOCIATED WITH THE GENERAL CATEGORY SET FORTH IN THE

Schedule O (Form 990) 2023 Page 2 Name of the organization **Employer identification number** 23-1386178 WIDENER UNIVERSITY COMPARATIVE INDICES, THE BOARD MAY CONSIDER AND AWARD APPROPRIATE COMPENSATION. EXCEPTIONS TO THIS POLICY CAN OCCUR WHERE SPECIAL EXPERTISE, ACCOMPLISHMENT OR EXPERIENCES ARE REQUIRED IN A PARTICULAR POSITION OR AN URGENT NEED HAS ARISEN JUSTIFYING, IN THE BOARD'S ANALYSIS, COMPENSATION AT A LEVEL IN EXCESS OF THE POLICY RANGE ADOPTED BY THE BOARD. WHEN SUCH EXCEPTIONS ARISE, THE BOARD SHALL SET FORTH A STATEMENT OF THEIR REASONING SUPPORTING THE DEPARTURE FROM THE ESTABLISHED EXECUTIVE COMPENSATION POLICY. FINALLY, THE BOARD, IN EVERY THIRD YEAR, WILL ENGAGE AN OUTSIDE CONSULTANT TO VERIFY THAT TOTAL COMPENSATION PAID TO THE EXECUTIVES OF THE UNIVERSITY IS FAIR AND REASONABLE. THE DELIBERATIONS AND DECISIONS REGARDING COMPENSATION ARE CONTEMPORANEOUSLY DOCUMENTED. THE PROCESS DESCRIBED HERE WAS LAST COMPLETED IN 2024. FORM 990, PART VI, SECTION C, LINE 19: THE UNIVERSITY'S AUDITED FINANCIAL STATEMENTS ARE POSTED ON ITS WEBSITE. THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: CHANGE IN PENSION -5,677,096.

SCHEDULE R (Form 990)

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

Open to Public Inspection

OMB No. 1545-0047

WIDENER UNIVE	WIDENER UNIVERSITY										
Part I Identification of Disregarded Entities. Complete	ete if the organization answered "Y	es" on Form 990, Part IV, line 3	3.								
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state of foreign country)	(d) Total inco	eme End-of-year	r assets Direct of	(f) controlling ntity	9				
	_										
Part II Identification of Related Tax-Exempt Organizations during the tax year.	cations. Complete if the organizations.	ion answered "Yes" on Form 990	D, Part IV, line 34,	because it had one	or more related tax-exe	mpt					
(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	contr	g) 512(b)(13) rolled tity?				
THE NEUROPSYCHOLOGY ASSESSMENT CENTER - 42-1682886, ONE UNIVERSITY PLACE, CHESTER,					WIDENER	Yes	No				
PA 19013	EDUCATION	PENNSYLVANIA	501(C)(3)	LINE 12A, I	UNIVERSITY	Х					
For Paperwork Reduction Act Notice, see the Instructio	ns for Form 990.				Schedule R	(Form 99	90) 2023				

78 Page 2

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

		I		I			Т			1	_
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	minant income Share of total Share of Disproportionate Code V-UBI		General	Percentage			
of related organization		(state or	entity	(related, unrelated,	income	end-of-year	alloca	itions?	amount in box	managin partner	Percentage ownership
		foreign country)		(related, unrelated, excluded from tax under sections 512-514)		assets	Yes	No	20 of Schedule K-1 (Form 1065)	Voc N	7
		oodiid y)		000110110 0 12 0 1 1 1			163	140	111 (10111111000)	16314	1
-											
											<u> </u>
	1										

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(l contr ent	tion b)(13) rolled tity?
PROVIDENCE ENTERPRISES, INC 51-0260604									
ONE UNIVERSITY PLACE			WIDENER						
CHESTER, PA 19013	INACTIVE	PA	UNIVERSITY	C CORP	0.	0.	100%	X	
PIONEER PUB OF WIDENER, INC - 23-2777365									
ONE UNIVERSITY PLACE			WIDENER						
CHESTER, PA 19013	REAL ESTATE	PA	UNIVERSITY	C CORP	0.	648,685.	100%	X	
ACNP CORPORATION - 23-2540747									
ONE UNIVERSITY PLACE	RESTAURANT		WIDENER						
CHESTER, PA 19013	(DISSOLVED)	PA	UNIVERSITY	C CORP	0.	0.	100%		Х
CARES TWENTY ONE S.R.L.									
ONE UNIVERSITY PLACE	REAL ESTATE	COSTA	PIONEER PUB OF						
CHESTER, PA 19013	(DISSOLVED)	RICA	WIDENER, INC	C CORP	0.	0.	100%		Х

1a

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

Yes No

X

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

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)				1b		<u> </u>
С					_		X
d	Loans or loan guarantees to or for related organization(s)				1d		X
е	Loans or loan guarantees by related organization(s)				1e		X
f	Dividends from related organization(s)				1f		X
	Sale of assets to related organization(s)						X
	Purchase of assets from related organization(s)						X
i	Exchange of assets with related organization(s)				1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)				<u>1j</u>		X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X
ı	Performance of services or membership or fundraising solicitations for related organ						X
	n Performance of services or membership or fundraising solicitations by related organ						X
	Sharing of facilities, equipment, mailing lists, or other assets with related organization					X	
0	Sharing of paid employees with related organization(s)				10		X
р	Reimbursement paid to related organization(s) for expenses				1p		X
q	Reimbursement paid by related organization(s) for expenses				1q		X
r	Other transfer of cash or property to related organization(s)				<u>1r</u>	 	X
	Other transfer of cash or property from related organization(s)					X	
2	If the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the answer to any of the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on whether the above is "Yes," see the instructions for information on the above is "Yes," see the instruction of the above is "Yes," and "Yes," in the above is "Yes," and "Yes," in the above is "Yes," in the ab	ho must complete th	is line, including covered rela	tionships and transaction threshold	ds.		
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	amount involved		
1) (CARES TWENTY ONE S.R.L	S	552,305.C	ASH VALUE			
	l de la companya de						
2)							
	l de la companya de						
3)							
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C)	l de la companya de						
6) 2012	0.00.00.00	1			Sobodula D /Fa::	m 000	1) 2022
3216	3 09-28-23	6.1		•	Schedule R (For	11 990	ı) 2023

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership
	-									

Schedule R (Form 990) 2023 WIDENER UNIVERSITY	23-1386178	Page 5
Part VII Supplemental Information		
Provide additional information for responses to questions on Schedule R. See instructions.		
SCHEDULE R, PART V, LINE 1N:		
THE UNIVERSITY SHARES ITS FACILITIES WITH NEUROPSYCHOLOGY AS	SESSMENT	
CENTER AT WIDENER UNIVERSITY.		

Schedule R (Form 990) 2023 332165 09-28-23

Form **8868** (Rev. January 2024)

Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or **Print** WIDENER UNIVERSITY 23-1386178 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour ONE UNIVERSITY PLACE return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. 19013 CHESTER. PA Enter the Return Code for the return that this application is for (file a separate application for each return) 01 Application Is For Return Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 12 05 Form 8870 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 07 Form 5330 (other than individual) 14 Form 990-T (corporation) Form 1041-A 80 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of HEATHER MEIER, VP A&F/CFO ONE UNIVERSITY PLACE - CHESTER, PA 19013 Telephone No. (610) 499-1168 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for. , 20 25 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 X tax year beginning JUL 1 , 20 23 , and ending JUN 30 . If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3h

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

Form 8868 (Rev. 1-2024)

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