

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

OMB No 1545-0047

**2005**Open to Public  
Inspection**A** For the 2005 calendar year, or tax year beginning **JUL 1, 2005** and ending **JUN 30, 2006****B** Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type See Specific Instructions

**C** Name of organization**PATRICK HENRY COLLEGE**

Number and street (or P O box if mail is not delivered to street address)

**ONE PATRICK HENRY CIRCLE**

City or town, state or country, and ZIP + 4

**PURCELLVILLE, VA 20132-3198****D** Employer identification number**54-1919810****E** Telephone number**(540) 338-1776****F** Accounting method: ☐ Cash ☒ Accrual  
☐ Other (specify) ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**H and I are not applicable to section 527 organizations****H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates ▶ **N/A****H(c)** Are all affiliates included? **N/A** ☐ Yes ☐ No  
(If "No," attach a list)**H(d)** Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No**I** Group Exemption Number ▶ **N/A****M** Check ☐ if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)**G** Website: ▶ **WWW.PHC.EDU****J** Organization type (check only one) ☒ 501(c) ( 3 ) (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **13,961,432.****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue		Expenses		Net Assets	
<b>1</b>	Contributions, gifts, grants, and similar amounts received				
<b>a</b>	Direct public support	<b>1a</b>	<b>5,719,649.</b>		
<b>b</b>	Indirect public support	<b>1b</b>	<b>635,014.</b>		
<b>c</b>	Government contributions (grants)	<b>1c</b>			
<b>d</b>	Total (add lines 1a through 1c) (cash \$ <b>3,583,683.</b> noncash \$ <b>2,770,980.</b> )	<b>1d</b>	<b>6,354,663.</b>		
<b>2</b>	Program service revenue including government fees and contracts (from Part VII, line 93)	<b>2</b>	<b>6,226,063.</b>		
<b>3</b>	Membership dues and assessments	<b>3</b>			
<b>4</b>	Interest on savings and temporary cash investments	<b>4</b>	<b>98,306.</b>		
<b>5</b>	Dividends and interest from securities	<b>5</b>	<b>175,959.</b>		
<b>6 a</b>	Gross rents <b>SEE STATEMENT 1</b>	<b>6a</b>	<b>70,121.</b>		
<b>b</b>	Less rental expenses	<b>6b</b>			
<b>c</b>	Net rental income or (loss) (subtract line 6b from line 6a)	<b>6c</b>	<b>70,121.</b>		
<b>7</b>	Other investment income (describe ▶ )	<b>7</b>			
<b>8 a</b>	Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
<b>b</b>	Less cost or other basis and sales expenses	<b>8a</b>	<b>630,500.</b>		
<b>c</b>	Gain or (loss) (attach schedule)	<b>8b</b>	<b>182,464.</b>		
<b>d</b>	Net gain or (loss) (combine line 8c, columns (A) and (B))	<b>8c</b>	<b>448,036.</b>		
<b>9</b>	Special events and activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>		<b>STMT 2</b>	<b>8d</b>	<b>448,036.</b>
<b>a</b>	Gross revenue (not including \$ <b>0.</b> of contributions reported on line 1a)	<b>9a</b>	<b>98,000.</b>		
<b>b</b>	Less direct expenses other than fundraising expenses	<b>9b</b>	<b>121,492.</b>		
<b>c</b>	Net income or (loss) from special events (subtract line 9b from line 9a)		<b>SEE STATEMENT 3</b>	<b>9c</b>	<b>&lt;23,492.&gt;</b>
<b>10 a</b>	Gross sales of inventory, less returns and allowances	<b>10a</b>	<b>166,437.</b>		
<b>b</b>	Less cost of goods sold	<b>10b</b>	<b>129,271.</b>		
<b>c</b>	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)		<b>STMT 4</b>	<b>10c</b>	<b>37,166.</b>
<b>11</b>	Other revenue (from Part VII, line 103)			<b>11</b>	<b>141,383.</b>
<b>12</b>	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			<b>12</b>	<b>13,528,205.</b>
<b>13</b>	Program services (from line 44, column (B))			<b>13</b>	<b>9,145,774.</b>
<b>14</b>	Management and general (from line 44, column (C))			<b>14</b>	<b>920,323.</b>
<b>15</b>	Fundraising (from line 44, column (D))			<b>15</b>	<b>653,245.</b>
<b>16</b>	Payments to affiliates (attach schedule)			<b>16</b>	
<b>17</b>	Total expenses (add lines 13 and 14, column (A))			<b>17</b>	<b>10,719,342.</b>
<b>18</b>	Excess or (deficit) for the year (subtract line 17 from line 12)			<b>18</b>	<b>2,808,863.</b>
<b>19</b>	Net assets or fund balances at beginning of year (from line 73, column (A))			<b>19</b>	<b>21,777,099.</b>
<b>20</b>	Other changes in net assets or fund balances (attach explanation)			<b>20</b>	<b>0.</b>
<b>21</b>	Net assets or fund balances at end of year (combine lines 18, 19, and 20)			<b>21</b>	<b>24,585,962.</b>

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02-03-06

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2005)

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2005.06000 PATRICK HENRY COLLEGE

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**Part II** Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ <u>1804102.</u> noncash \$ <u>0.</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	22 1,804,102.	1,804,102.	STATEMENT 8	
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25 Compensation of officers, directors, etc. * *	25 977,930.	401,266.	444,449.	132,215.
26 Other salaries and wages	26 3,018,708.	2,666,978.	61,467.	290,263.
27 Pension plan contributions	27 43,105.	34,484.	8,621.	
28 Other employee benefits	28 305,119.	244,759.	60,360.	
29 Payroll taxes	29 262,409.	209,927.	52,482.	
30 Professional fundraising fees	30 21,030.			21,030.
31 Accounting fees	31 19,979.	17,981.	1,998.	
32 Legal fees	32 58,860.	25,223.	33,637.	
33 Supplies	33 41,318.	37,565.	2,903.	850.
34 Telephone	34 102,347.	93,554.	5,793.	3,000.
35 Postage and shipping	35 79,774.	37,805.	3,682.	38,287.
36 Occupancy	36 1,400,513.	1,292,704.	101,305.	6,504.
37 Equipment rental and maintenance	37 43,000.	42,448.	552.	
38 Printing and publications	38 68,727.	27,869.	2,876.	37,982.
39 Travel	39 118,508.	88,435.	5,020.	25,053.
40 Conferences, conventions, and meetings	40			
41 Interest	41 17,296.	17,296.		
42 Depreciation, depletion, etc. (attach schedule)	42 384,959.	346,463.	38,496.	
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e	43e			
f	43f			
g SEE STATEMENT 6	43g 1,951,658.	1,756,915.	96,682.	98,061.
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44 10,719,342.	9,145,774.	920,323.	653,245.

Joint Costs. Check ☒ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

▶ ☒ Yes ☐ NoIf "Yes," enter (i) the aggregate amount of these joint costs \$ 479,640., (ii) the amount allocated to Program services \$ 167,874.,(iii) the amount allocated to Management and general \$ 71,946., and (iv) the amount allocated to Fundraising \$ 239,820.

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\* \* SEE STATEMENT 7



**Part III** Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► SEE STATEMENT 9	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
<b>a</b> THE COLLEGE HAS RECEIVED CANDIDACY FOR ACCREDITATION STATUS FROM THE TRANSNATIONAL ASSOCIATION OF CHRISTIAN COLLEGES (TRACS).	
(Grants and allocations \$ 1,804,102.) If this amount includes foreign grants, check here ► <input type="checkbox"/>	9,145,774.
<b>b</b> THE COLLEGE HAS BEEN AWARDED THE AUTHORITY TO GRANT DEGREES BY THE STATE COUNCIL OF HIGH EDUCATION OF VIRGINIA (SCHEV).	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>c</b> TOTAL STUDENT POPULATION: 315 (297 ON CAMPUS; 18 CAMPUS AND HOME PROGRAM).	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>d</b> TOTAL STUDENTS WHO HAVE GRADUATED: 131.	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule)	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
<b>f</b> Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	9,145,774.

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**Part IV Balance Sheets** (See the instructions)**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
<b>Assets</b>	45 Cash - non-interest-bearing		45 580.
	46 Savings and temporary cash investments	2,257,728.	46 3,148,222.
	47 a Accounts receivable	47a 1,121,245.	
	b Less: allowance for doubtful accounts	47b 103,000.	47c 951,809.
	48 a Pledges receivable	48a 7,163,364.	
	b Less: allowance for doubtful accounts	48b	48c 7,163,364.
	49 Grants receivable		49
	50 Receivables from officers, directors, trustees, and key employees		50
	51 a Other notes and loans receivable	51a	
	b Less: allowance for doubtful accounts	51b	51c
	52 Inventories for sale or use	37,367.	52 42,495.
	53 Prepaid expenses and deferred charges	134,777.	53 132,730.
	54 Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54
	55 a Investments - land, buildings, and equipment: basis	55a	
	b Less accumulated depreciation	55b	55c
56 Investments - other	SEE STATEMENT 10 3,087,000.	56 3,087,000.	
57 a Land, buildings, and equipment: basis	57a 12,788,870.		
b Less: accumulated depreciation	57b 1,769,972.	57c 10,360,712.	
58 Other assets (describe <input type="checkbox"/> SEE STATEMENT 11 )	184,885.	58 184,885.	
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58	22,382,222.	59 25,796,419.	
<b>Liabilities</b>	60 Accounts payable and accrued expenses	551,373.	60 869,347.
	61 Grants payable		61
	62 Deferred revenue	3,750.	62
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable	50,000.	64b 100,000.
	65 Other liabilities (describe <input type="checkbox"/> CAPITAL LEASE PAYABLE )		65 241,110.
66 <b>Total liabilities.</b> Add lines 60 through 65	605,123.	66 1,210,457.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.</b>		
	67 Unrestricted	15,713,213.	67 16,396,235.
	68 Temporarily restricted	6,063,886.	68 8,189,727.
	69 Permanently restricted		69
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.</b>		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
73 <b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	21,777,099.	73 24,585,962.	
74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	22,382,222.	74 25,796,419.	



**Part IV-A** **Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** (See the instructions.)

<b>a</b>	Total revenue, gains, and other support per audited financial statements		<b>a</b>	11,745,385.
<b>b</b>	Amounts included on line a but not on Part I, line 12:			
<b>1</b>	Net unrealized gains on investments	<b>b1</b>		
<b>2</b>	Donated services and use of facilities	<b>b2</b>		
<b>3</b>	Recoveries of prior year grants	<b>b3</b>		
<b>4</b>	Other (specify): <u>SEE STATEMENT 12</u>	<b>b4</b>	21,282.	
	Add lines <b>b1</b> through <b>b4</b>		<b>b</b>	21,282.
<b>c</b>	Subtract line <b>b</b> from line <b>a</b>		<b>c</b>	11,724,103.
<b>d</b>	Amounts included on Part I, line 12, but not on line a:			
<b>1</b>	Investment expenses not included on Part I, line 6b	<b>d1</b>		
<b>2</b>	Other (specify): <u>SCHOLARSHIPS</u>	<b>d2</b>	1,804,102.	
	Add lines <b>d1</b> and <b>d2</b>		<b>d</b>	1,804,102.
<b>e</b>	Total revenue (Part I, line 12). Add lines <b>c</b> and <b>d</b>		<b>e</b>	13,528,205.

<b>Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>	
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<b>a</b>	Total expenses and losses per audited financial statements	<b>a</b>	8,934,948.
<b>b</b>	Amounts included on line <b>a</b> but not on Part I, line 17:		
<b>1</b>	Donated services and use of facilities	<b>b1</b>	
<b>2</b>	Prior year adjustments reported on Part I, line 20	<b>b2</b>	
<b>3</b>	Losses reported on Part I, line 20	<b>b3</b>	
<b>4</b>	Other (specify): <u>SEE STATEMENT 13</u>	<b>b4</b>	19,708.
	Add lines <b>b1</b> through <b>b4</b>	<b>b</b>	19,708.
<b>c</b>	Subtract line <b>b</b> from line <b>a</b>	<b>c</b>	8,915,240.
<b>d</b>	Amounts included on Part I, line 17, but not on line <b>a</b> :		
<b>1</b>	Investment expenses not included on Part I, line 6b	<b>d1</b>	
<b>2</b>	Other (specify): <u>SCHOLARSHIPS</u>	<b>d2</b>	1,804,102.
	Add lines <b>d1</b> and <b>d2</b>	<b>d</b>	1,804,102.
<b>e</b>	<b>Total expenses</b> (Part I, line 17). Add lines <b>c</b> and <b>d</b>	<b>e</b>	10,719,342.

**Part V-A** **Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
<div>-----</div> <div>SEE STATEMENT 14</div> <div>-----</div>		867,470.	110,460.	0.
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	Yes	No
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13

75b

**x**

SEE STATEMENT 16

75c

**X**

If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization

75d

**X**

**Benefits** (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address NONE	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
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	Yes	No
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76

**X**

77

**X**

78a

N/A

78b

100

79

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**X**

80a

# X

\_\_\_\_\_

ex

☐ nonexempt

**| 81a**

0

81b

# X



Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ 0 . , section 4912 ▶ 0 . , section 4955 ▶ 0 .		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0 .
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0 .
90 a	List the states with which a copy of this return is filed ▶ SEE STATEMENT 17		
b	Number of employees employed in the pay period that includes March 12, 2005	90b	177
91 a	The books are in care of ▶ PATRICK HENRY COLLEGE Telephone no ▶ 540-338-1776 Located at ▶ ONE PATRICK HENRY CIRCLE, PURCELLVILLE, VA ZIP + 4 ▶ 20132-3198		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country ▶ N/A See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country ▶ N/A	91c	X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶	92	N/A

Form 990 (2005)



**Part VII Analysis of Income-Producing Activities** (See the instructions.)**Note:** Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a TUITION AND FEES					4,709,672.
b ROOM AND BOARD					1,246,976.
c SUMMER CAMPS					269,415.
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	98,306.	
96 Dividends and interest from securities			14	175,959.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	70,121.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	448,036.	
101 Net income or (loss) from special events			01	<23,492.>	
102 Gross profit or (loss) from sales of inventory					37,166.
103 Other revenue:					
a SEE STATEMENT 18					141,383.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		768,930.	6,404,612.
105 Total (add line 104, columns (B), (D), and (E))					7,173,542.

**Note:** Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	SEE STATEMENT 20



**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
SEE STATEMENT 19	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Please Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer 		Date 11-15-06	Type or print name and title DARYL WOLKING, CHIEF FINANCIAL OFFICER
Paid Preparer's Use Only	Preparer's signature 	Date 11/14/06	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP + 4 YOUNT, HYDE & BARBOUR, P.C. 50 SOUTH CAMERON STREET WINCHESTER, VA 22601	EIN	Phone no (540) 662-3417	



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

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2005**

Name of the organization

PATRICK HENRY COLLEGE

Employer identification number

54 1919810

**Part I**

**Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
JEFF BURTNER ONE PATRICK HENRY CIRCLE, PURCELLVILL	DIRECTOR OF IT 40.00	120,784.	0.	0.
DAVID NOE ONE PATRICK HENRY CIRCLE, PURCELLVILL	ASSISTANT PROFESSOR 40.00	86,333.	6,943.	0.
MARIAN SANDERS ONE PATRICK HENRY CIRCLE, PURCELLVILL	ASSOC. DEAN 40.00	85,984.	6,879.	0.
RAYMOND BOUCHOC ONE PATRICK HENRY CIRCLE, PURCELLVILL	CHAPLAIN & PROF. 40.00	82,173.	3,134.	0.
MARK MITCHELL ONE PATRICK HENRY CIRCLE, PURCELLVILL	ASSISTANT PROFESSOR 40.00	78,176.	3,639.	0.
Total number of other employees paid over \$50,000 ▶	20			

**Part II-A**

**Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
DANIEL COOK & ASSOCIATES 2909 WASHINGTON BOULEVARD, OGDEN, UT 84401	ARCHITECT	355,879.
HOLLAND & KNIGHT, LLP 2115 HARDEN BLVD., LAKE LAND, FL 33802	ATTORNEY	70,324.
APPTIS, INC. P.O. BOX 8500-1686, PHILADELPHIA, PA 19178-1686	NETWORK CONSULTANTS	55,900.
-----		
-----		
Total number of others receiving over \$50,000 for professional services ▶	0	

**Part II-B**

**Compensation of the Five Highest Paid Independent Contractors for Other Services**

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
BON APPETIT C/O BANK OF AMERICA ILLINOIS, 91337 COLLECTIONS	FOOD SERVICE	759,421.
UNICCO 4002 SOLUTIONS CENTER, CHICAGO, IL 60677	MAINTENANCE SERVICE	406,776.
GROUP BENEFIT SERVICES, INC. P.O. BOX 37216, BALTIMORE, MD 21297-3216	BENEFITS ADMINISTRATOR	122,522.
CITICORP VENDOR FINANCE, INC. P.O. BOX 7247-0118, PHILADELPHIA, PA 19170-0118	LEASING	100,460.
GOOD PRINTERS, INC. 213 DRY RIVER ROAD, BRIDGEWATER, VA 22812	PRINTING	51,171.
Total number of other contractors receiving over \$50,000 for other services ▶	0	



**Part III** Statements About Activities (See page 2 of the instructions)

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities <b>1</b> \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B ) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
<b>a</b> Sale, exchange, or leasing of property? SEE STATEMENT 22	X	
<b>b</b> Lending of money or other extension of credit?		X
<b>c</b> Furnishing of goods, services, or facilities? SEE STATEMENT 23	X	
<b>d</b> Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE STATEMENT 24	X	
<b>e</b> Transfer of any part of its income or assets?		X
<b>3 a</b> Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) SEE STATEMENT 21	X	
<b>b</b> Do you have a section 403(b) annuity plan for your employees?		X
<b>c</b> During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		X
<b>4 a</b> Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
<b>b</b> Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

**Part IV** Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box.)

- 5** ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6** ☒ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7** ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8** ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9** ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state **9** \_\_\_\_\_
- 10** ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a** ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b** ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12** ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13** ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization **13** ☐ Type 1 ☐ Type 2 ☐ Type 3

Provide the following information about the supported organizations (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)



**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting. N/A  
Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)					
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
<b>23</b> Total of lines 15 through 22	0.	0.	0.	0.	0.
<b>24</b> Line 23 minus line 17					
<b>25</b> Enter 1% of line 23					
<b>26</b> Organizations described on lines 10 or 11: <b>a</b> Enter 2% of amount in column (e), line 24					<b>26a</b> N/A
<b>b</b> Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.					<b>26b</b> N/A
<b>c</b> Total support for section 509(a)(1) test: Enter line 24, column (e)					<b>26c</b> N/A
<b>d</b> Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					<b>26d</b> N/A
<b>e</b> Public support (line 26c minus line 26d total)					<b>26e</b> N/A
<b>f</b> Public support percentage (line 26e (numerator) divided by line 26c (denominator))					<b>26f</b> N/A %
<b>27</b> Organizations described on line 12: <b>a</b> For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year. (2004) (2003) (2002) (2001)					
<b>b</b> For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year. (2004) (2003) (2002) (2001)					
<b>c</b> Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					<b>27c</b> N/A
<b>d</b> Add: Line 27a total _____ and line 27b total _____					<b>27d</b> N/A
<b>e</b> Public support (line 27c total minus line 27d total)					<b>27e</b> N/A
<b>f</b> Total support for section 509(a)(2) test: Enter amount on line 23, column (e) ► <b>27f</b> N/A					
<b>g</b> Public support percentage (line 27e (numerator) divided by line 27f (denominator))					<b>27g</b> N/A %
<b>h</b> Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					<b>27h</b> N/A %

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

**Part V Private School Questionnaire** (See page 7 of the instructions.)**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	Yes	No
<b>29</b> 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?	<b>29</b> X	
<b>30</b> 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?	<b>30</b> X	
<b>31</b> Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement ) <b>THIS INFORMATION IS IN THE COLLEGE CATALOG, ADMISSIONS PACKAGES, AND ON THE COLLEGE'S WEB SITE.</b>	<b>31</b> X	
<b>32</b> Does the organization maintain the following		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff?	<b>32a</b> X	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	<b>32b</b> X	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<b>32c</b> X	
<b>d</b> 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, attach a separate statement )	<b>32d</b> X	
<b>33</b> Does the organization discriminate by race in any way with respect to		
<b>a</b> Students' rights or privileges?	<b>33a</b>	X
<b>b</b> Admissions policies?	<b>33b</b>	X
<b>c</b> Employment of faculty or administrative staff?	<b>33c</b>	X
<b>d</b> Scholarships or other financial assistance?	<b>33d</b>	X
<b>e</b> Educational policies?	<b>33e</b>	X
<b>f</b> Use of facilities?	<b>33f</b>	X
<b>g</b> Athletic programs?	<b>33g</b>	X
<b>h</b> Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )	<b>33h</b>	X
<b>34 a</b> Does the organization receive any financial aid or assistance from a governmental agency?	<b>34a</b>	X
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	<b>34b</b>	X
<b>35</b> Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	<b>35</b> X	

Schedule A (Form 990 or 990-EZ) 2005



**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions )

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check ☐ a ☐ if the organization belongs to an affiliated groupCheck ☐ b ☐ if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred )		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
		N/A													
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36													
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38	Total lobbying expenditures (add lines 36 and 37)	38													
39	Other exempt purpose expenditures	39													
40	Total exempt purpose expenditures (add lines 38 and 39)	40													
41	Lobbying nontaxable amount Enter the amount from the following table -														
	<table border="0"> <tr> <td><b>If the amount on line 40 is -</b></td> <td><b>The lobbying nontaxable amount is -</b></td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>	<b>If the amount on line 40 is -</b>	<b>The lobbying nontaxable amount is -</b>	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000	41	
<b>If the amount on line 40 is -</b>	<b>The lobbying nontaxable amount is -</b>														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
42	Grassroots nontaxable amount (enter 25% of line 41)	42													
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43													
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44													

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below See the instructions for lines 45 through 50 on page 11 of the instructions )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
45 Lobbying nontaxable amount					0.
46 Lobbying ceiling amount (150% of line 45(e))					0.
47 Total lobbying expenditures					0.
48 Grassroots nontaxable amount					0.
49 Grassroots ceiling amount (150% of line 48(e))					0.
50 Grassroots lobbying expenditures					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions )

N/A

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

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Yes	No	Amount
		0.





FORM 990

RENTAL INCOME

STATEMENT 1

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
LAND LEASE REVENUE	1	70,121.
TOTAL TO FORM 990, PART I, LINE 6A		70,121.

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FORM 990	GAIN (LOSS) FROM SALE OF OTHER ASSETS	STATEMENT	2
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DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED
SALE OF 2.5 ACRES OF LAND	07/01/00	06/16/06	DONATED

NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	630,500.	182,464.	0.	0.	448,036.
TO FM 990, PART I, LN 8	630,500.	182,464.	0.	0.	448,036.

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FORM 990	SPECIAL EVENTS AND ACTIVITIES	STATEMENT	3
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DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
GOLF TOURNAMENT	26,305.		26,305.	15,197.	11,108.
DEBATE TOURNAMENT	71,695.		71,695.	106,295.	<34,600.>
TO FM 990, PART I, LINE 9	98,000.		98,000.	121,492.	<23,492.>



FORM 990

INCOME AND COST OF GOODS SOLD  
INCLUDED ON PART I, LINE 10

STATEMENT 4

## INCOME

1. GROSS RECEIPTS . . . . .	166,437	
2. RETURNS AND ALLOWANCES . . . . .		
3. LINE 1 LESS LINE 2 . . . . .		166,437
4. COST OF GOODS SOLD (LINE 13) . . . . .	129,271	
5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . .		37,166

## COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR . . . . .	37,367	
7. MERCHANDISE PURCHASED . . . . .		
8. COST OF LABOR . . . . .		
9. MATERIALS AND SUPPLIES . . . . .		
10. OTHER COSTS . . . . .	134,399	
11. ADD LINES 6 THROUGH 10 . . . . .		171,766
12. INVENTORY AT END OF YEAR . . . . .	42,495	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12) . .		129,271

FORM 990	COST OF GOODS SOLD - OTHER COSTS	STATEMENT	5
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DESCRIPTION	AMOUNT
COST OF GOODS SOLD	134,399.
TOTAL INCLUDED ON FORM 990, PART I, LINE 10B	134,399.

FORM 990	OTHER EXPENSES	STATEMENT	6
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DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
ADVERTISING	187,687.	61,768.	54,446.	71,473.
EDUCATION AND TRAINING	32,521.	31,554.	242.	725.
FOOD SERVICE	761,582.	761,582.		
STUDENT EXPENSES	167,332.	165,898.	1,434.	
LIBRARY SUPPLIES	42,554.	42,554.		
TECH, HARDWARE, FAX, COPIERS	230,073.	229,814.	259.	
COPYING	2,035.	2,029.	6.	
SMALL EQUIPMENT	27,398.	26,793.	516.	89.
DUES SUBSCRIPTIONS, ACCREDITATION	90,563.	83,730.	2,248.	4,585.
BOOKS AND PUBLICATIONS	19,006.	12,545.	954.	5,507.
BOARD EXPENSES	11,409.	1,141.	10,268.	
PROFESSIONAL FEES AND CONTRACT LABOR	158,584.	154,107.	4,477.	
TAXES	1,460.	1,314.	146.	
HONORARIUMS AND CONTRIBUTIONS	11,790.	11,525.	265.	
SUMMER CAMP EXPENSES	36,515.	36,515.		
INTERVIEW AND RELOCATION	101,385.	81,689.	4,014.	15,682.
CREDIT CARD FEES	53,831.	49,565.	4,266.	
MEMORIAL EXPENSES	1,499.	1,349.	150.	
CONTRIBUTIONS	14,434.	1,443.	12,991.	
TOTAL TO FM 990, LN 43	1,951,658.	1,756,915.	96,682.	98,061.



FORM 990

OFFICER COMPENSATION ALLOCATION  
PART II, LINE 25

STATEMENT 7

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
MICHAEL P. FARRIS	169,190.	21,529.		190,719.
A. PROGRAM SERVICES	43,143.	5,490.		48,633.
B. MANAGEMENT AND GENERAL	126,047.	16,039.		142,086.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
GRAHAM WALKER	80,969.	2,383.		83,352.
A. PROGRAM SERVICES	20,647.	608.		21,255.
B. MANAGEMENT AND GENERAL	60,322.	1,775.		62,097.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
BLAKE HUDSON	30,177.	2,383.		32,560.
A. PROGRAM SERVICES				
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING	30,177.	2,383.		32,560.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
GENE E. VEITH	7,903.	737.		8,640.
A. PROGRAM SERVICES	7,903.	737.		8,640.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
EARL HALL	100,921.	15,522.		116,443.
A. PROGRAM SERVICES	25,735.	3,958.		29,693.
B. MANAGEMENT AND GENERAL	75,186.	11,564.		86,750.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
DARYL WOLKING	107,723.	9,476.		117,199.
A. PROGRAM SERVICES	27,469.	2,416.		29,885.
B. MANAGEMENT AND GENERAL	80,254.	7,060.		87,314.
C. FUNDRAISING				



NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
GARY MASON	73,391.	9,343.		82,734.
A. PROGRAM SERVICES	73,391.	9,343.		82,734.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
J. VICTOR THOMPSON	76,434.	12,428.		88,862.
A. PROGRAM SERVICES	19,491.	3,169.		22,660.
B. MANAGEMENT AND GENERAL	56,943.	9,259.		66,202.
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
PAUL J. BONICELLI	41,936.	4,804.		46,740.
A. PROGRAM SERVICES	41,936.	4,804.		46,740.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
BRETT RUDOLPH	85,680.	13,975.		99,655.
A. PROGRAM SERVICES				
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING	85,680.	13,975.		99,655.

NAME OF OFFICER, ETC.	COMPENSATION	EMPLOYEE BEN. PLANS	EXPENSE ACCOUNTS	TOTALS
PAUL WILSON	93,146.	17,880.		111,026.
A. PROGRAM SERVICES	93,146.	17,880.		111,026.
B. MANAGEMENT AND GENERAL				
C. FUNDRAISING				

TOTAL PROGRAM SERVICES	401,266.
TOTAL MANAGEMENT AND GENERAL	444,449.
TOTAL FUNDRAISING	132,215.
TOTAL OFFICER, ETC., COMPENSATION INCLUDED ON PARTS V-A AND V-B	977,930.

FORM 990	CASH GRANTS AND ALLOCATIONS	STATEMENT	8
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CLASSIFICATION	DONEE'S NAME	DONEE'S ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
VARIOUS EDUCATIONAL SCHOLARSHIPS	VARIOUS	VARIOUS	NONE	1733550.
TUITION REMISSION	VARIOUS	VARIOUS	EMPLOYEES' CHILDREN	70,552.
TOTAL INCLUDED ON FORM 990, PART II, LINE 22				1804102.



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FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III	STATEMENT	9
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EXPLANATION

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THE COLLEGE PROVIDES EDUCATIONAL SERVICES, WHICH MAY INVOLVE DEGREE AND NON-DEGREE PROGRAMS AT THE UNDERGRADUATE LEVEL, AS WELL AS RESEARCH, SCHOLARSHIP, SERVICE TO THE LOCAL, REGIONAL, AND NATIONAL COMMUNITIES, AND OTHER ACTIVITIES CUSTOMARILY ENGAGED IN BY PRIVATE, RELIGIOUS COLLEGES; ALL FOR THE PURPOSE OF BRINGING HONOR AND GLORY TO THE LORD JESUS CHRIST. THE COLLEGE IS AND SHALL REMAIN IN PERPETUITY, IN ALL ASPECTS OF ITS OPERATION, AN EXPLICITLY CHRISTIAN RELIGIOUS MINISTRY.

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FORM 990	OTHER INVESTMENTS	STATEMENT	10
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DESCRIPTION	VALUATION METHOD	AMOUNT
INVESTMENT IN PHC FREEDOM EXPANSION, LLC	COST	3,087,000.
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		3,087,000.

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FORM 990	OTHER ASSETS	STATEMENT	11
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DESCRIPTION	AMOUNT
EARLY AMERICAN IMPRINTS	97,500.
DEPOSITS	87,385.
TOTAL TO FORM 990, PART IV, LINE 58, COLUMN B	184,885.

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FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	12
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DESCRIPTION	AMOUNT
ELIMINATING ENTRY: LLC AND PHC FOUNDATION ACTIVITY	<229,481.>
COST OF GOODS SOLD	129,271.
GOLF TOURNAMENT EXPENSES	15,197.
DEBATE TOURNAMENT EXPENSES	106,295.
TOTAL TO FORM 990, PART IV-A	21,282.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	13
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## DESCRIPTION

## AMOUNT

ELIMINATING ENTRY: LLC AND PHC FOUNDATION ACTIVITY	<231,055.>
COST OF GOODS SOLD	129,271.
DEBATE TOURNAMENT EXPENSES	106,295.
GOLF TOURNAMENT EXPENSES	15,197.
TOTAL TO FORM 990, PART IV-B	19,708.

FORM 990	PART V-A - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES	STATEMENT	14
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MICHAEL P. FARRIS ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	CHANCELLOR 40.00	169,190.	21,529.	0.
GRAHAM WALKER ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	PRESIDENT 40.00	80,969.	2,383.	0.
J. VICTOR THOMPSON ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	EXECUTIVE VICE PRESIDENT 40.00	76,434.	12,428.	0.
BRETT RUDOLPH ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	VP FOR DEVELOPMENT 40.00	85,680.	13,975.	0.
BLAKE HUDSON ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	VP FOR DEVELOPMENT 40.00	30,177.	2,383.	0.
EARL HALL ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	VP FOR OP. & INFRASTRUC. 40.00	100,921.	15,522.	0.
GENE E. VEITH ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	VP FOR ACADEMIC AFFAIRS 40.00	7,903.	737.	0.



GARY MASON ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	VP FOR STUDENT LIFE 40.00	73,391.	9,343.	0.
PAUL WILSON ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	VP FOR STUDENT LEADERSHIP 40.00	93,146.	17,880.	0.
DARYL WOLKING ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	CHIEF FINANCIAL OFFICER 40.00	107,723.	9,476.	0.
PAUL J. BONICELLI ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	DEAN OF ACADEMIC AFFAIRS 40.00	41,936.	4,804.	0.
JACK W. HAYE ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	CHAIRMAN OF THE BOARD 1.00	0.	0.	0.
JANET ASHCROFT ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	SECRETARY 1.00	0.	0.	0.
RAY ARDIZZONE ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	TRUSTEE 1.00	0.	0.	0.
PAUL DE PREE ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	TRUSTEE 1.00	0.	0.	0.
BARBARA S. HODEL ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	TRUSTEE 1.00	0.	0.	0.
JAMES R. LEININGER ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	TRUSTEE 1.00	0.	0.	0.
RUSSELL B. PULLIAM ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	TRUSTEE 1.00	0.	0.	0.
BILL TEMPLETON ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	TRUSTEE 1.00	0.	0.	0.
JOHN E. URBAN ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	TRUSTEE 1.00	0.	0.	0.

PATRICK HENRY COLLEGE		54-1919810		
KEN CONNOR ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	TRUSTEE			
	1.00	0.	0.	0.
GEORGE W. CLAY ONE PATRICK HENRY CIRCLE PURCELLVILLE, VA 20132	TRUSTEE			
	1.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		867,470.	110,460.	0.

FORM 990

IDENTIFICATION OF RELATED ORGANIZATIONS  
PART VI, LINE 80B

STATEMENT 15

NAME OF ORGANIZATION	EXEMPT	NONEXEMPT
HOME SCHOOL LEGAL DEFENSE ASSOCIATION	X	
HOME SCHOOL FOUNDATION	X	
PHC FREEDOM EXPANSION, LLC		X
PHC FOUNDATION	X	



FORM 990

PART V-A OFFICER COMPENSATION FROM  
RELATED ORGANIZATIONS

STATEMENT 16

OFFICER'S NAME	COMPENSATION	EMPLOYEE BENEFIT PLAN CONTRIBUTION	EXPENSE ACCOUNT
MICHAEL P. FARRIS	141,289.	20,439.	2,433.

NAME OF RELATED ORGANIZATION

EMPLOYER ID NUMBER

HOME SCHOOL LEGAL DEFENSE ASSOCIATION

54-1719605

RELATIONSHIP BETWEEN ORGANIZATIONS

FORM 990

LIST OF STATES RECEIVING COPY OF RETURN  
PART VI, LINE 90

STATEMENT 17

STATES

AK, AZ, CO, KY, MD, MN, MS, NH, NM, NY, OK, OR, SC, UT, VA, WA, WI

FORM 990

## OTHER REVENUE

STATEMENT 18

DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
DINING HALL REVENUE			03		47,473.
VENDING MACHINE REVENUE			03		4,017.
PARKING REVENUE			03		9,212.
DRAMA TICKET REVENUE			03		9,463.
OTHER			03		21,218.
MANAGEMENT FEE					50,000.
TO FORM 990, PART VII, LINE 103					141,383.

## STATEMENT 19

ONE PATRICK HENRY CIRCLE, PURCELLVILLE, VA 20132

EMPLOYER ID NUMBER	PERCENT OWNED	NATURE OF ACTIVITIES	TOTAL INCOME	END-OF-YEAR ASSETS
38-3648255	72.00%	REAL ESTATE OWNERSHIP		

## STATEMENT 20

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
1	1.0000
2	0.9999
3	0.9998
4	0.9997
5	0.9996
6	0.9995
7	0.9994
8	0.9993
9	0.9992
10	0.9991
11	0.9990
12	0.9989
13	0.9988
14	0.9987
15	0.9986
16	0.9985
17	0.9984
18	0.9983
19	0.9982
20	0.9981
21	0.9980
22	0.9979
23	0.9978
24	0.9977
25	0.9976
26	0.9975
27	0.9974
28	0.9973
29	0.9972
30	0.9971
31	0.9970
32	0.9969
33	0.9968
34	0.9967
35	0.9966
36	0.9965
37	0.9964
38	0.9963
39	0.9962
40	0.9961
41	0.9960
42	0.9959
43	0.9958
44	0.9957
45	0.9956
46	0.9955
47	0.9954
48	0.9953
49	0.9952
50	0.9951
51	0.9950
52	0.9949
53	0.9948
54	0.9947
55	0.9946
56	0.9945
57	0.9944
58	0.9943
59	0.9942
60	0.9941
61	0.9940
62	0.9939
63	0.9938
64	0.9937
65	0.9936
66	0.9935
67	0.9934
68	0.9933
69	0.9932
70	0.9931
71	0.9930
72	0.9929
73	0.9928
74	0.9927
75	0.9926
76	0.9925
77	0.9924
78	0.9923
79	0.9922
80	0.9921
81	0.9920
82	0.9919
83	0.9918
84	0.9917
85	0.9916
86	0.9915
87	0.9914
88	0.9913
89	0.9912
90	0.9911
91	0.9910
92	0.9909
93	0.9908
94	0.9907
95	0.9906
96	0.9905
97	0.9904
98	0.9903
99	0.9902
100	0.9901
101	0.9900
102	0.9899
103	0.9898
104	0.9897
105	0.9896
106	0.9895
107	0.9894
108	0.9893
109	0.9892
110	0.9891
111	0.9890
112	0.9889
113	0.9888
114	0.9887
115	0.9886
116	0.9885
117	0.9884
118	0.9883
119	0.9882
120	0.9881
121	0.9880
122	0.9879
123	0.9878
124	0.9877
125	0.9876
126	0.9875
127	0.9874
128	0.9873
129	0.9872
130	0.9871
131	0.9870
132	0.9869
133	0.9868
134	0.9867
135	0.9866
136	0.9865
137	0.9864
138	0.9863
139	0.9862
140	0.9861
141	0.9860
142	0.9859
143	0.9858
144	0.9857
145	0.9856
146	0.9855
147	0.9854
148	0.9853
149	

93 THESE ACTIVITIES ENABLE THE COLLEGE TO ENGAGE IN THE PROVISION OF  
EDUCATIONAL SERVICES, AS WELL AS RESEARCH, SCHOLARSHIP, AND SERVICE TO  
THE LOCAL, REGIONAL, AND NATIONAL COMMUNITIES, AND OTHER ACTIVITIES  
ENGAGED IN BY PRIVATE, RELIGIOUS COLLEGES.

103A FEES CHARGED FOR SERVICES PROVIDED TO PHC LLC

## STATEMENT 21

PATRICK HENRY COLLEGE OFFERS MERIT AND NEED BASED AWARDS. MERIT BASED AWARDS ARE AWARDED BASED ON SAT SCORES AND FACULTY REVIEW OF THE STUDENT'S ACADEMIC PREPARATION. NEED BASED AWARDS ARE AWARDED BASED ON DEMONSTRATIONS OF FINANCIAL NEED PER COMPLETION OF THE COLLEGE BOARD'S PROFILE REPORT WHICH DOCUMENTS INCOME, ASSETS, AND LIABILITIES.



SCHEDULE A

EXPLANATION OF TRANSACTIONS  
PART III, LINE 2A

STATEMENT 22

PATRICK HENRY COLLEGE LEASES DORM SPACE FROM PHC FREEDOM EXPANSION,  
LLC.

## SCHEDULE A

EXPLANATION OF TRANSACTIONS  
PART III, LINE 2C

STATEMENT 23

EMPLOYEES OF THE COLLEGE AND THEIR FAMILIES ARE GRANTED TUITION FROM  
THE COLLEGE AS A BENEFIT.



SCHEDULE A

EXPLANATION OF TRANSACTIONS  
PART III, LINE 2D

STATEMENT 24

THE COLLEGE AUTHORIZES REIMBURSEMENT OF WORK-RELATED EXPENSES TO ITS  
EMPLOYEES.

SCHEDULE A

INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS

STATEMENT 25

PART VII, LINE 51, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

HOME SCHOOL LEGAL DEFENSE ASSOCIATION

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

RENTAL OF FACILITY



SCHEDULE A

AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS

STATEMENT 26

PART VII, LINE 52, COLUMN (C)

NAME OF AFFILIATED OR RELATED ORGANIZATION

HOME SCHOOL LEGAL DEFENSE ASSOCIATION

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

COMMON DIRECTOR

Patrick Henry College  
Fixed Assets - Accumulated depreciation  
990 Part IV, Line 57b  
6/30/2006

54-1919810

Schedule 7

	<u>6/30/2006</u>
Land	3,923,785
Land Improvements	45,051
Building and improvements	5,564,310
Furniture and equipment	938,441
Library books and materials	130,346
Computer equipment and software	1,033,400
Vehicles	48,908
Artwork	41,498
Construction in progress	1,063,131
	<u>12,788,870</u>
Less accumulated depreciation	1,769,972
Net Fixed Assets	<u><u>11,018,898</u></u>

Schedule 7