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Form 990

Department of the Treasury

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

2008

Open to Public Inspection

	Revenue						•	Inspection
			ar yea	ar, or tax year beginning 07-01 C Name of organization	-2008 and ending 06-30-200	9	D Employer ide	ntification number
_		pplicable Plea		Bucknell University				
_	dress ch	labe		Doing Business As			24-0772403 E Telephone nu	
Na	me cha		tor See					
Init	tıal retu		cific ruc-		f mail is not delivered to street addre	ess) Room/suite	(570) 577-3 G Gross receipt	
∏ Tei	mınatıc	n tion		Marts Hall			d dross receipt	3 \$ 340,123,310
┌ Am	ended	return		City or town, state or country, ai	nd ZIP + 4	1		
Г _{Арі}	plication	n pending		Lewisburg, PA 17837				
		<u> </u>	Nar	me and address of Principal O	fficer	l 11/-3		
				Mitchell	mcei	n(a) Is the	s a group return tes?	for
				arts Hall Bucknell Univ				
	v-avam			urg, PA 17837 :) (3) ◀ (insert no)	1) or		l affiliates include	
					1) 01 327	7		See instructions)
J W	eb sit	e: 🕨 www buc	knell	edu		H(c) Grou	p Exemption Nur	nber 🗜
					<u> </u>	<u> </u>		
К Тур	e of org	janization J∨ C	orporat	tion trust association other	•	L Year of Fo	rmation 1846 M S	State of legal domicile PA
Pa	rt I		•					
	1			ne organization's mission or m				. Bushaall assles to
<u>త</u>			-	· · · · · · · · · · · · · · · · · · ·	beral arts and professional pro d and to promote justice in way	-		
至		lıfe		,				
Governance	2	Check this b	ox [ıf the organization discontinu	ed its operations or disposed o	of more than 2	5% of its assets	
ŝ	3	Number of v	oting r	members of the governing bod	y (Part VI, line 1a)		з _	40
න් ර	4	Number of in	deper	ndent voting members of the g	overning body (Part VI, line 1	b)	. 4 _	39
ĕ	5	Total numbe	rofer	mployees (Part V , line 2a) .			5 _	3,562
Activities &	6	Total numbe	rofvo	olunteers (estimate if necessa	ry)		6 _	1,900
2	7a	Total gross	unrela	ited business revenue from Pa		7a _	-213,377	
	b	Net unrelate	d busi	iness taxable income from Foi	rm 990-T, line 34		7b	-1,305,164
						Prio	or Year	Current Year
_	8	Contributio	ns and	d grants (Part VIII, line 1h)			28,210,947	29,131,225
ā	9	Program se	rvice	revenue (Part VIII, line 2g)		155,947,476	165,640,418	
Revenue	10	Investment	tincor	me (Part VIII, column (A), lın		12,031,723	3,919,650	
芷	11	O ther reve	nue (P	Part VIII, column (A), lines 5,	6d, 8c, 9c, 10c, and 11e)		3,257,453	5,054,975
	12		ue—a	dd lines 8 through 11 (must e	qual Part VIII, column (A), lır		211,186,036	203,746,268
	13	12)	cimils	ar amounts paid (Part IX, colu	mn / \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		39,060,200	
	14			or for members (Part IX, colu			39,000,200	41,569,252
		•		•	its (Part IX, column (A), lines	_		0
\$	15	10)	iller ct	Jilipelisation, employee belief	its (Fait 1X, Column (A), mies	5-	97,079,762	104,477,990
Expenses	16a	Professiona	al fund	draising fees (Part IX, column	(A), line 11e)			0
Ě	ь	(Total fundra	sına ex	penses, Part IX, column (D), line 25	11,740,478			
ш	17			(Part IX, column (A), lines 11		65,714,457	67,920,974	
	18			-add lines 13–17 (must equal			201,854,419	213,968,216
	19			penses Subtract line 18 from			9,331,617	-10,221,948
ያ ያ			<u> </u>			Beainni	ng of Year	End of Year
9 eg	20	Total accor	ر (P عر	rt X, line 16)			899,285,433	794,817,988
Net Assets or Fund Balances	21		•	Part X, line 26)			127,072,961	
₹ <u>₩</u>			•	,		, ,	132,184,394	
	22			nd balances Subtract line 21		772,212,472	662,633,594	
Pal	rt II	Signatur			ed this return, including accompanying	r cchodulos and s	tatements and to th	no host of my knowledge
					f preparer (other than officer) is base			
Plea		*****				2010-	-05-25	
Sign		Signature	of office	er				
Her	e			/P-Finance & Adminis				
		Type or pr	ınt nam	ne and title				
		Preparer's			Date	Check If	Preparer's PTIN (See Gen Inst)
Paid		signature				self- empolyed •		
Prep	arer's			's L		•	- Francis	
Use (Only	If self-employed address, and Z		<i>,</i> /			EIN 🕨	
							Phone no 🕨	
	the IP	C discuss #5:	c rot	urn with the prepares above at	ove? (See instructions)		1	┌ Yes ┌ No
ırı ayı	rue IK	อ นเธยนรัร เNI	ว เซเน	an with the preparer shown ab	over (see mstructions)			, 165 NO

Form 990 (2008) Part III Statement of Program Service Accomplishments (See the instructions.)

1 See A	Briefly describe the organization's mission dditional Data Table
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?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts 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 \$ 105,582,294 including grants of \$ 41,569,252) (Revenue \$ 139,537,764) Instruction - the expenses of instructional departments and programs
4b	(Code) (Expenses \$ 30,083,460 including grants of \$) (Revenue \$ 1,843,034) Student Services - the expenses of activities and services that indirectly support the educational programs such as library services and athletics/recreation
4c	(Code) (Expenses \$ 26,305,070 including grants of \$) (Revenue \$ 27,757,848) Auxiliary Enterprises - the expenses of room, board, and other services primarily for the University's students
4d	Other program services (Describe in Schedule O)
_	(Expenses \$ 21,133,973 including grants of \$) (Revenue \$)
4e	Total program service expenses \$ 183,104,797 Must equal Part IX, Line 25, column (B).

Part IV	Chec	klist o	f Required	d Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Νο
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Νο
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		N o
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		N o
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νο
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		Νο
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	282		No.
	20a		I NO
Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	Yes	
Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
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		No
Did the organization conduct more than 5 percent 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,	37		Νο
	or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV. Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV. Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV. Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV. 28a Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV. 28b Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV. Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M and the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . 33 Awas the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part SII, III, IV, and V, line 1 . 15 any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . 36 Did the organization conduct more than 5 percent 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, Art V, line 2 . 37 Did the organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Art V, line 2 . 38 Did the organization and that is treated as a partnership for federal income tax purposes? If "	or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV 28a Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, Iine 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2 35 Yes 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, Iine 2 Did the organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 37

Fine the number reported in Box 3 of Form 1098, Annual Summary and Transmitted 1a	Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
a 481 b Enter the number of Forms W-26 included in line 1 a Enter-0- if not applicable c Did the organization comply with backus withholding rules for reportable againing (againing) cambility or practice on Form W-3, Transmitted of Mage and Yax againing or Manager or practice on Form W-3, Transmitted of Mage and Yax againing or Manager or practice on Form W-3, Transmitted of Mage and Yax agains (agains) or which they see covered by this return. 3,562 10 If If a least one is reported in 23, did the organization for which the years covered by the setting. 11 If a least one is reported in 23, did the organization for which the years covered by the setting. 12 If Yes in the setting of the setting or the setting of the setting. 13 If Yes in the setting of the setting or the setting of the setting. 14 If Yes in the setting of the setting or the setting or the setting or the setting. 15 If Yes in the setting of the setting or the setti				Yes	No
b Enter the number of Forms W-2G included in line 1a. Enter-0- if not applicable 2 Did the organization comply with backup withholding rules for reportable payments to wendors and reportable gaining (gambling) with backup withholding rules for reportable payments to wendors and reportable gaining (gambling) with making the prize without the war of the prize of the calendar year ending with or within the year covered by this part of the calendar year ending with or within the year covered by the part of the prize of the calendar year ending with or within the year covered by the part of the part of the calendar year ending with or within the year covered by the part of	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
Enter the number of Forms W-2G included in line 1a. Enter-0- if not applicable c. Did the organization comply with biskup withholding rules for reportable payments to vendors and reportable gamming (ambining) within size to prize where? 2a. Enter the number of employees reported on Form W-3, Transmitted of Mage and Tax. Statements field for the calinard year and may the restluted by the statement of the first setum. 3,562 b. If states to one reported in 1a, die the organization file all required federal employment bax returns? Notes! The sum of I mere 1a and 2a is greater than 250, you may be required to e-fire this return. 1b. If Yes, The sit filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0. 3b. Yes. 1if Yes, The sit filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0. 3b. Yes. 1if Yes, The sit filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0. 3c. Yes. 1if Yes, The sit filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0. 3c. Yes. 1if Yes, The sit filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0. 3c. Yes. 1if Yes, The sit filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0. 3c. Yes. 1if Yes, The sit filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0. 3c. Yes. 1if Yes, The sit filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0. 3c. Yes. 1if Yes, The sit filed a Form 990-T for this year? If Wo, provide an interest in, or a signature or other authority work, in familiar that year in the site of the schedule of the schedule of the contributions of the schedule of the schedule of the contributions of the schedule of the contributions of the schedule of the schedule of the contributions of case, board of the schedule of the schedule of the schedule of the schedule of the		of U.S. Information Returns. Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable against to vendors and reportable against (gambling) within packup withholding rules for reportable against to vendors and reportable against (gambling) within packup within packup and Tax Statements filed for the calendar year ending with or writin the year covered by this return. 3,552 B If at least one is reported in 12, did the organization file all required federal employment tax returns? 30 Dit the organization have unreliated business gross income of \$1,000 or more during the year covered by this return? 31 Dit Tess, "has it filed a Form 90-1" for this year? If TWo, provide an explanation in Schedule 0. 32 D Yes. 33 Dit the organization have unreliated business gross income of \$1,000 or more during the year covered by this return? 34 At any time during the calendar year, did the organization have an interest in, or a significant or other authority over, a financial account, and the organization of the organization in seal and the organization in seal and the organization of the organization of the organization of the organization of the organization and any time during the tax year? 32 D If Yes, "did the organization aparty to a prohibited tax shalter transaction at any time during the tax year? 33 D Yes S Was the organization of the organization file form 8886-1, Descape by Test-Exempt Entity Regarding Prohibited Test Shelter Transaction? 45 D Id any taxable party nobity the organization file form 8886-1, Descape by Test-Exempt Entity Regarding Prohibited Test Shelter Transaction? 46 D If the organization organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 47 Organizations that may receive deductible contributions were section 120(c). 48 D If Yes, "did the organization notify the donor of the value of the goods or services provided? 49 D If the organization organization include with every solicitation an express statement that such contributions		1a 481			
a Enter the number of employees reported on Form W-3, Transmitted of Wage and Tax Statements flied for the calendar year ending with or within the year covered by this return. b If at least one is reported in 12, did the organization file all required federal employment tax returns? 30 Did the organization have unrelisted business gross in come of \$2,000 or more during the year covered by this return. b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0. 30 A tan by time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; year that the secondary of the file of the provide of the provide of the secondary of the file of the provide an explanation in Schedule 0. b If "Yes," has it filed a Form 990-T for this year? If No," provide an explanation in Schedule 0. 30 A tan by time during the calendar year, did the organization than an interest in, or a signature or other authority over, a financial account; year that the name of the foreign country (such as a bank account, securities account, or other financial accounts). 50 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 51 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 52 Was the organization aparty to a prohibited tax shelter transaction at 17 Yes, if the foreign granization and the organization that it was on is a party to a prohibited tax shelter transaction? 52 Was the organization of the organization that it was on is a party to a prohibited tax shelter transaction? 53 Was the organization of the organization that the war on say the prohibited tax shelter transaction? 54 Was the organization of the organization that the value of the value of the prohibited tax shelter transaction? 55 Was the organization and the organization and was account. To foreign the prohibited tax shelter transaction? 56 Was the organization and the	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
Date the number of employees reported on form Min 3, Transmitted of Wage and Tark Statements field for the calendar year and use with or within the year covered by this return. **Notes!** field for the calendar year and use with or within the year covered by this return. **Notes!** field for the calendar year and use a greater than 250, you may be recurred to e-file this return. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 990-T for this year? If "Mo," provide an explanation in Schedule O. **Bottes!** field a Form 10 For	c		_		
Statements field for the calendar year ending with or within the year covered by this return 1			1c	Yes	
b If at least one is reported in 2.a. did the organization file all required fideral employment tax returns? Note: If the sum of hore is and Zea groated that 250, year way be required to efficie that return. 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b If "Yes," has it filed a Form 990-T for this year? If 'No," provide an explanation in Schedule 0. 4a At any time during the celendar year, did the organization have an interest in, or a signature or other authority over, a hismanical account in a freing country (such as a bank account, securities account, or other financial account in a freing country (such as a bank account, securities account, or other financial account in a freing country (such as a bank account, securities account, or other financial account in a freing country (such as a bank account, securities account, or other financial account in a freing country (such as a bank account, securities account, or other financial account in a freing country (such as a bank account, securities account, or other financial account in a freing country (such as a bank account, securities account, or other financial financial Accounts. 5a Was the organization in provide groat and filing requirements for Form TDF 90-22.1, Report of Foreign Bank and financial Accounts. 5b If "Yes," to Se or Sb, did the organization final free or is a party to a prohibited tax sheller transaction? 6c If "Yes," to Se or Sb, did the organization final free or is a party to a prohibited tax sheller transaction? 6c If "Yes," do the organization include with every solicitation an express statement that such contributions or griss were not tax deductible? 7b Organizations that may receive deductible centributions under section 170(c). 8c If "Yes," did the organization notify the donor of the value of the goods or services provided? 9c If "Yes," did the organization notify the donor of the value of the goods or services provided? 9c If "Yes," did the org	2a	Statements filed for the calendar year ending with or within the year covered by this			
138 Deturn of the organization have unrelated business gross income of \$1,000 or more during the year covered by this peturn of the peturn of	ь	If at least one is reported in 2a, did the organization file all required federal employment tax returns?	2h	Vac	
b If "Yes," has it field a Form 990-T for this year? If "No," provide an explanation in Schedule O. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts in a foreign country XE See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization apprity to a prohibited tax shelter transaction at any time during the tax year? 5b If "Yes," in the the organization in the times or is a party to a prohibited tax shelter transaction? 5c If "Yes," in to See of St. did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," did the organization solicit any contributions that were not tax deductible? 6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c In the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 6c In the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 7a Yes 6c In the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 7a In Yes," did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more? 7b If "Yes," indicate the number of Forms 8282 filed during the year. 7d If "Yes," indicate the number of Forms 8282 filed during the year. 7d In Yes," indicate the number of Forms 8282 filed during the year. 7d In Yes, indicate the number of Forms 8282 filed during the year or indirectly, or a personal benefit contract? 7d No Provide the organization, during the year, pay premiums, directly or indirectly	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
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more? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year	7	Organizations that may receive deductible contributions under section 170(c).			
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file Form 8282?	b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	c		7c		Νο
benefit contract?	d	If "Yes," indicate the number of Forms 8282 filed during the year			
For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	e		7e		No
For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	f				
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?					
required?			, 9		
supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			7h		No
year?	8	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966?			8		Νο
a Did the organization make any taxable distributions under section 4966?	9	· ·			
b Did the organization make a distribution to a donor, donor advisor, or related person?	а		9a		Νο
a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders	_		9b		Νο
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations Enter a Gross income from members or shareholders	10	Section 501(c)(7) organizations. Enter			
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a Gross income from members or shareholders	11	Section 501 (c)(12) organizations. Enter			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)					
against amounts due or received from them)		11a			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the	U	· · · · · · · · · · · · · · · · · · ·			
1126	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νο
	b	12h			

Section A. Governing Body and Management

No

Νo

Νo

Νo

Νo

Νo

Νo

Yes

Yes

2

3

4

5

6

7a

7b

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances
processes, or changes in Schedule O. See instructions.

	processes, or changes in Schedule O. See instructions.	,	,
а	Enter the number of voting members of the governing body	1a	40
Ь	Enter the number of voting members that are independent	1b	39
	Did any officer, director, trustee, or key employee have a family relationship or a bus	siness	relationship with any

other officer, director, trustee, or key employee?
Did the organization delegate control over management duties customarily performed by or under the direct
supervision of officers, directors or trustees, or key employees to a management company or other person?

supervision of officers, directors of trustees, or key employees to a management company of other person?
Did the organization make any significant changes to its organizational documents since the prior Form 990 was
filed?

;	Did the organization become aware during the year of a material diversion of the organization's assets?		L
,	Does the organization have members or stockholders?		

•																										
Does the organiz	atıo	n ha	ave	mei	nbe	rs, s	stoc	kho	lde	rs, c	or ot	her	per	son	s wh	no n	пау	eled	ct o	ne c	r m	ore	me	mbe	rs of	the
governing body?													•			•										

b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? •	
	Did the organization contemporaneously document the meetings held or written actions undertaken during the	e

the organization o	contemporaneously	document the	meetings held	d or written actions	undertaken during the
by the following					

	year by the following																
а	the governing body?	•			٠		•		•	•	•	•	•	•	•		•

D	each committee with authority to act on behalf of the governing body?	•	•	•	•	•	•	•	•	•	•	•	•
1	Does the organization have local chapters, branches, or affiliates? .												

b	If "Yes," does the organization have written policies and procedures governing the activities of su	ıch	cha	pter	s,
	affiliates, and branches to ensure their operations are consistent with those of the organization?				

Was a copy of the Form 990 provided to the organization's governing body before it was filed? All orga	nıza	ition	าร
must describe in Schedule O the process, if any, the organization uses to review the Form 990			

11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached	at
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	

	8a	Yes	
	8b	Yes	
	9a		Νo
	9b		No
	10	Yes	
t	11		No
	11		Νο

Section B. Policies

		Yes	No
Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
Does the organization have a written whistleblower policy?	13	Yes	
Does the organization have a written document retention and destruction policy?	14	Yes	
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			
The organization's CEO, Executive Director, or top management official?	15a	Yes	
Other officers or key employees of the organization?	15b		Νo
Describe the process in Schedule O			
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		No
	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Does the organization have a written conflict of interest policy? If "No", go to line 13 . Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed WA, NJ, NH
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. another's website. upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

David J Surgala 209 Marts Hall Bucknell University Lewisburg, PA 17837 (570) 577-3811

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

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

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

The check this box in the organization and i	·	Posit	(C) chec	:k al				(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

			tion that a			all			(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			-							
							<u> </u>			
		-	+				\vdash			
			-				\vdash			
			+							
1b Total							-	3,946,369		907,670

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶105

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		Νο
4	For any individual listed online 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	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Zartman ConstructionInc 3000 PtTwnshp Dr Northumberland, PA 17857	Construction	937,446
Silvertip Inc 600 St Mary Street Lewisburg, PA 17837	Construction	755,838
Security Services&Technologies 2450 BGenerals Norristown, PA 19403	Construction	1,022,182
Parkhurst Dining Service PO BOX 644091 Pittsburgh, PA 15264	Food Management	9,270,782
Keister Construction Inc 2867 W Branch Hwy Lewisburg, PA 17837	Construction	662,762
Total number of independent contractors (including those in 1 from the organization	• • • • • • • • • • • • • • • • • • • •	37

Part VIII Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC
	1a	Federated campaigns .	. 1a			Revenue		512, 513, or 514
nts Dis	ь	Membership dues						
gra nou	С	Fundraising events	1b 					
iffs, arag	d	Related organizations .	1 c					
% E∭	e	Government grants (contribution		4,248,522				
Contributions, gifts, grants and other similar amounts	f	All other contributions, gifts, grasimilar amounts not included al	bove	24,882,703				
ontrib nd off	g	Noncash contributions in	1f cluded in 2,207,287					
ŏ≅	h	lines 1a-1f \$			29,131,225			
				Business Code				
euri	2a	Tuition & Fees			139,537,764	139,537,764		
æ	ь	Residence Halls & Dining			24,858,697	24,858,697		
JC e	c d	Related Auxiliary Svcs			1,243,957	1,243,957		
Ser	e							
an E	f	All other program service	revenue					
Program Serwce Revenue	g	Total. Add lines 2a-2f .						
		> \$ 165,640,418						
	3	Investment income (incluother similar amounts).	_	•	15,892,783			15,892,783
	_	Income from investment of tax		▶	0			
	4			Mu proceeds . ►	0			
	5	Royalties (i) Re		(II) Personal	O			
	6a	Gross Rents		(,				
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss	s)		0			
		(i) Secur	rities 8,108,389	(II) O ther				
	7a	Gross amount 128 from sales of assets other	8,108,389					
	ь	than inventory	0,081,522					
		other basis and sales expenses	0,001,522					
	С		1,973,133		44.070.400	44.070.400		
	d	Net gain or (loss)		. •	-11,973,133	-11,973,133		
	8a	Gross income from fundra events (not including	aising					
ne ne		\$ of contributions reported	on line					
₽		1c) See Part IV, line 18 Attach Schedule G if total e	exceeds					
æ		\$15,000						
Other Revenue	b c	Less direct expenses . Net income or (loss) from		ng events	0			
Ò	9a	Gross income from gamin		⊨ ing events				
	"	activities See part IV, lir	ne 19					
		Complete Schedule G if total exceeds \$15,000	aı					
	_		а					
	b c	Less direct expenses . Net income or (loss) from		activities	0			
				>				
	10a	Gross sales of inventory, returns and allowances						
			a	5,170,491				
	b c	Less cost of goods sold Net income or (loss) from		4,295,720 Inventory ►	874,771	874,771		
	<u> </u>	Miscellaneous Revenue	. 54,65 01	Business Code	,	',' · · 2		
	11a	Other Revenue			4,393,581	4,393,581		
	ь	Income from partnerships	 5	523,000	-993,800		-993,800	
	С	Golf course revenue		713,910	780,423		780,423	
	d	All other revenue						
	е	Total. Add lines 11a-11d		 \$ 4,180,204				
	12	Total Revenue. Add lines	1h, 2g, 3		203,746,268	158,935,637	-213,377	15,892,783
		8c, 9c, 10c, and 11e		. ▶				

Page **9**

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) org).
Do r	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	35,949,529	35,949,529		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	5,619,723	5,619,723		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,883,034	1,237,438	2,338,272	307,324
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	73,059,886	61,891,774		5,357,036
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	6,229,961	5,273,549	499,881	456,531
9	Other employee benefits	15,864,147	13,210,978	1,541,272	1,111,897
10	Payroll taxes	5,440,962	4,481,465	559,129	400,368
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	258,709	64,259	190,850	3,600
c	Accounting	149,839		149,839	
d	Lobbying	121,098		121,098	
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	2,754,991		2,754,991	
g	Other	17,159,898	14,364,515	2,015,600	779,783
12	Advertising and promotion	183,468	84,709	89,445	9,314
13	Office expenses	10,766,728	8,505,388	917,852	1,343,488
14	Information technology	1,793,800	1,669,858	110,884	13,058
15	Royalties	0			
16	Occupancy	269,175	242,665	10,200	16,310
17	Travel	5,017,107	3,277,118	454,700	1,285,289
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	0			
20	Interest	1,783,528	1,783,528		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	13,728,058	13,338,030	266,500	123,528
23	Insurance	902,369	878,771	16,124	7,474
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Utilities & fuel	8,990,271	8,961,909	27,681	681
ь	Real Estate Taxes	130,292	125,307	4,985	
c	Other Repair and Maintenance	3,294,949	2,783,295	428,703	82,951
d	Miscellanous	616,694	529,565	79,556	7,573
e	Alloc operation & maintenance	·	-1,168,576	734,303	434,273
f	All other expenses	0	. ,		· · ·
25	Total functional expenses. Add lines 1 through 24f	213,968,216	183,104,797	19,122,941	11,740,478
26	Joint Costs. Check if if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	,	,,,	,	,

Dart V	Balance	Shoot
Part X	Balance	Sheet

						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				693,092	1	230,364
	2	Savings and temporary cash investments		31,710,231	2	35,287,722		
	3	Pledges and grants receivable, net				19,178,015	3	20,830,525
	4	Accounts receivable, net				3,368,596	4	2,780,689
	5	Receivables from current and former officers, directors, trustee other related parties Complete Part II of Schedule L			loyees or		5	101,667
	6	Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B) Complete Part II of					6	0
	7	Notes and loans receivable, net				6,087,595	7	8,910,914
	8	Inventories for sale or use				1,013,612	8	434,071
90	9	Prepaid expenses and deferred charges				1,544,683	9	1,785,992
ssets	10a							
AS		Land, buildings, and equipment cost basis	10a		425,077,862			
	ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10ь		201,330,551	216,441,466	10c	223,747,311
	11	Investments—publicly traded securities		<u> </u>		255.043.514		216.885.948
	12	Investments—other securities See Part IV, line 11 Complete Packedule D	Part VI.	I of	•	363,763,148		283,557,764
	13	Investments—program-related See Part IV, line 11 Complete of Schedule D .		441,481	13	265,021		
	14	Intangible assets			14	0		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			15	0		
	16	Total assets. Add lines 1 through 15 (must equal line 34)				899,285,433		794,817,988
	17	Accounts payable and accrued expenses .				75,919,275	17	80,108,400
	18	Grants payable					18	
	19	Deferred revenue				7,172,565	19	8,582,493
	20	Tax-exempt bond liabilities				41,987,827	20	39,768,249
S.	21	Escrow account liability Complete Part IV of Schedule D					21	· · ·
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		-				
Ę		persons Complete Part II of Schedule L					22	
_	23	Secured mortgages and notes payable to unrelated third partie	s .			222,174	23	222,174
	24	Unsecured notes and loans payable			24			
	25	Other liabilities Complete Part X of Schedule D				1,771,120	25	3,503,078
	26	Total liabilities. Add lines 17 through 25				127,072,961	26	132,184,394
ф 8		Organizations that follow SFAS 117, check here 🕨 🔽 and com	plet e l	ines	27			
ĕ	27	through 29, and lines 33 and 34. Unrestricted net assets				346,161,159	27	301,160,820
Balance	28	Temporarily restricted net assets				250,316,364		179,280,538
<u> </u>	29	Permanently restricted net assets		175,734,949		182,192,236		
Fund	29	Organizations that do not follow SFAS 117, check here ▶ □ a	•	173,734,043	29	102,132,230		
or F		lines 30 through 34.	-					
	30	Capital stock or trust principal, or current funds			30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31			
	32	Retained earnings, endowment, accumulated income, or other f			32			
Net	33	Total net assets or fund balances				772,212,472	33	662,633,594
-	34	Total liabilities and net assets/fund balances				899,285,433	34	794,817,988
Pa	rt XI	Financial Statements and Reporting						

ParitXI	Financial	Statements	and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 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?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
ь	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

Employer identification number

SCHEDULE A

Name of the organization

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Buckn	ell Univ	ersity								_		
Do	rt I	Poscon	for Dublic C	harity Status (to be see	malatad	by all or	aanizatio		-077240			
				harity Status (to be co ation because it is (Please					msuucu	10115)		
1	- Gain.		•	nurches, or association of ch					Δ \(i)			
2	<u>'</u>	•		·			- Section 1	170(1)(1)(A /(י)·			
3	ļ.	A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)										
4	<u>'</u>											
-	,									inter the		
5	_			or the benefit of a college or	univareiti	v ownod o	roporatod	l by a gove	rnmantal	unit docc	rihad in	
3	,			(Complete Part II)	universit	y Owned O	i operateu	i by a gove	eriiiieiitai	unit desc	iibeu iii	
•	_			overnment or governmental	unit docon	uhad in C a	ation 170	/L\/4\/A\	/\			
6 7	<u>'</u>	•	, -	<u>=</u>					• •	n tha aana	aral nublic	
,	'			ally receives a substantial p p)(1)(A)(vi) (Complete Par		support in	om a gove	ininental t	iiiit or iror	n the gene	erar public	
8	\vdash		-	oed in Section 170(b)(1)(A)	•	nlata Par	+ TT \					
9	Ė.		•	ally receives (1) more than		•	•	antrihiitior	ns membe	rshin fees	s and aross	
	,	_		lated to its exempt functions					•	•		
		•		estment income and unrelate	-		•	, ,	•	•		
				on after June 30, 1975 See						()	311103303	
10	Г			and operated exclusively to						ee instruc	tions)	
11	Ĺ.	_	-		-		-				•	
	•		An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See Section 509(a)(3). Check									
		the box that describes the type of supporting organization and complete lines 11e through 11h										
	_	•	• •				-		d		III - Other	
е	ı	•	-	rtify that the organization is agers and other than one or			•			•	•	
		section 50		agers and other than one or	more publ	псту зарр	orteu orga	11124110113	aescribeu	III Section	1303(a)(1)01	
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportir	ng organization,	
		check this						6.1			Г	
g		following pe		as the organization accepted	d any gift	or contrib	ution from	any of the	!			
				r indirectly controls, either a	alone or to	gether wi	th persons	describe	d ın (ıı)		Yes No	
		and (III) be	low, the governi	ng body of the the supported	d organiza	tion?				11g	(i)	
		(ii) a family	/ member of a p	erson described in (i) above	?					11g(
		(iii) a 35%	controlled enti	ty of a person described in ((i) or (ii) al	bove?				11g(iii)	
h		Provide the	following infor	mation about the organizatio	ns the org	janization	supports				<u> </u>	
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) I	s the	(vii) A mount of	
		oorted nization		(described on lines 1 - 9		ation in Iisted in		inization i) of your	_	ation in	support?	
	Organ	lization		above or IRC section (See Instructions))	your go		supp			rganized US?		
				(000 1,)		ment?	347	,,,,,	""			
	Yes				Yes	No	Yes	No	Yes	No		
					I	1		I	1			

Total

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 100, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts 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 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV	Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)					
	Facts and Circumstances Test					

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

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

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

- ◆ 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 th		es," to Form 990, Part IV, Line 5 (Pr		(.,,,,				
Na	ame of the organization cknell University	zatoris complete i art iii		Employer ide	ntıficatıon number			
buc	ckrich Offiversity			24-0772407	7			
Par		by all organizations exempt to the exempt of the constructions for Schedule (n 501(c) and section	527			
1	Provide a description of the or	ganization's direct and indirect politi	cal campaign act	civities in Part IV				
2	Political expenditures				\$			
3	V olunteer hours							
Par	rt I-B To be completed I for Schedule C for d	oy all organizations exempt etails.)	under sectio	n 501(c)(3). (See the	instructions			
1	Enter the amount of any excis	e tax incurred by the organization und	der section 4955	;	\$			
2	Enter the amount of any excis	e tax incurred by organization manag	ers under sectio	n 4955	\$			
3	If the organization incurred in	a section 4955 tax, did it file Form 4	720 for this yeai	·?	┌ Yes ┌ No			
4a	Was a correction made?				┌ Yes ┌ No			
Ь	If "Yes," describe in Part IV							
Par		oy all organizations exempt s for Schedule C for details.)	under sectio	n 501(c), except sec	tion 501(c)(3).			
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	ot function activities	\$			
2	Enter the amount of the filing of 527 exempt funtion activities	organization's internal funds contribut	ted to other orga	nızatıons for section	\$			
3	Total of direct and indirect exe 1120-POL, line 17b	empt function expenditures Add lines	s 1 and 2 and ent	er here and on Form	\$			
4	Did the filing organization file	Form 1120-POL for this year?			┌ Yes ┌ No			
5	State the names, addresses a were made Enter the amount political contributions receive segregated fund or a political a	al funds or were as a separate						
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's internal funds If none, enter - 0 -	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-			

d Grassroots non-taxable amount

f Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line d, column (e))

P	art II-A To be completed by (election under sec						768
	Check If the filing organization	belongs to an affili	ated group				
<u>B</u>	Check If the filing organization Limits on Lo (The term "expenditure	bbying Expend	litures—		oly	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)			
ь	Total lobbying expenditures to influe	nce a legislative b	ody (direct lobby	yıng)			
c	Total lobbying expenditures (add line	es 1a and 1b)					
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures	(add lines 1c and 1	Ld)				
f	Lobbying nontaxable amount Enters columns— If the amount on line 1e, column (a) or (b) is: Not over \$500,000		taxable amount				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$	500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	of the excess over \$	51,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	f the excess over \$1	1,500,000			
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (ente	er 25% of line 1f)					
h	Subtract line 1g from line 1a Enter	0- ıflıne g ıs more	than line a				
i	Subtract line 1f from line 1c Enter-	0- ıflıne fıs more t	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h c	or line 11, did the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	(Some organizations tha columns below.		on 501(h) el	ection do not	: have to cor		he five
	Lobb	ying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fisca beginning in)	l year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
_2a	Lobbying non-taxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
	: Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2008

incuaic e (i	om 330 0/330 E2/2000		raye
Part II-B	To be completed by organizations exempt under section $501(c)(3)$ that I	nave NOT file	ed Form
	5768 (election under section 501(h)). (See the instructions for Schedule C fo	r details.)	

	• • • • • • • • • • • • • • • • • • • •	(a	a)	(b)
		Yes	No	A mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines c through i)?	Yes		
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		121,098
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		No	
i	Other activities If "Yes," describe in Part IV		No	
j	Total lines 1c through			121,098
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes" enter the amount of any tax incurred under section 4912		ı	
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912		Ī	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		l No	
Pai	To be completed by all organizations exempt under section 501(c)(4) section 501(c)(6). (See the instructions for Schedule C for details.)	, section	501(c)(5), or

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

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Ret urn Reference	Explanation

Part IV Supplemental I	Part IV Supplemental Information						
Ident if ier	Return Reference	Explanation					

Schedule C (Form 990 or 990EZ) 2008

DLN: 93493145012100

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

Name of the organization Bucknell University

Employer identification number

			2	<u>4-0772407 </u>		
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99		r Similar Fund	s or Accour	nts. Comple	te if the
	organization answered les to form 93	(a) Donor advised	funds	(b) Funds ar	ıd other accou	nts
L	Total number at end of year					
2	Aggregate Contributions to (during year)					
3	Aggregate Grants from (during year)					
ı	Aggregate value at end of year					
5	Did the organization inform all donors and donor advifunds are the organization's property, subject to the			dvised	┌ Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?			/ be	☐ Yes	□ No
Рa	rt II Conservation Easements. Complete	ıf the organization answ	ered "Yes" to Fo	rm 990. Parl		,
<u> </u>	Purpose(s) of conservation easements held by the o			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11, 1110 7.	
-	Preservation of land for public use (e g , recreati		servation of an his	torically import	antly land are	а
	Protection of natural habitat	☐ Pres	servation of certifie	ed historic stru	cture	
	Preservation of open space					
2	Complete lines 2a-2d if the organization held a qual on the last day of the tax year	ified conservation contribut	ion in the form of a	conservation	easement	
				Held	at the End of	the Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easement	S		2b		
c	Number of conservation easements on a certified hi	storic structure included in	(a)	2c		
d	Number of conservation easements included in (c) a	acquired after 8/17/06		2d		
3	Number of conservation easements modified, transfe	rred, released, extinguishe	d, or terminated by	the organizati	on during	
	the taxable year ►					
1	Number of states where property subject to conserva	ation easement is located 🕨	-			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		spection, violation	is, and	☐ Yes	┌ No
5	Staff or volunteer hours devoted to monitoring, inspe	cting and enforcing easeme	nts during the yea	r►		
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easement	s during the year l	- \$		
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requi	rements of section		☐ Yes	┌ No
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easer	the footnote to the organiza			•	
ar	t III Organizations Maintaining Collection Complete if the organization answered '			Other Simila	ar Assets.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	116, not to report in its re- for public exhibition, educa	venue statement a tion or research in	furtherance of		e,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education				
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
2	If the organization received or held works of art, hist following amounts required to be reported under SFA	•		ancıal gaın, pr	ovide the	
	- •	-				

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Par	TITE Organizations Maintaining Co	llections of Art,	His	tori	<u>cal Tre</u>	asures, or	<u>Othe</u>	<u>r Similar</u>	<u>Asse</u>	ts (cc	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	ofth	ne fol	lowing th	at are a sıgnıfı	cant u	ise of its coll	ection		
а	Public exhibition		d	Γ	Loan or	exchange pro	grams	i			
b	Scholarly research		e	Γ	Other						
c	✓ Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n hov	w the	v further	the organization	on's ex	xempt purpos	se in		
_	Part XIV				,	3					
5	During the year, did the organization solicit							nılar			
Do	assets to be sold to raise funds rather than to the Trust, Escrow and Custodial							orad "Vac"	to Fo		V No
PG	Trust, Escrow and Custodial A Part IV, line 9, or reported an ar						alisw	reieu ies	to ro	ל וווו	90,
1a	Is the organization an agent, trustee, custoo						sets	not			
	ıncluded on Form 990, Part X?								Γ,	Yes	Г No
b	If "Yes," explain why in Part XIV and comple	te the following tabl	e					1			
									A mou	nt	
c	Beginning balance						1c				
d	Additions during the year						1d				
е	Distributions during the year						1e				
f	Ending balance						1f				
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						Γ,	Yes	Г No
	If "Yes," explain the arrangement in Part XI\										
Pa	rt V Endowment Funds. Complete									Faur V	na ra Da ale
1a	Beginning of year balance	(a) Current Year 554,592,841	(E)Prior	rear	(c)Two Years Ba	ск ј(а,) i nree Years Ba	ск (е)	Four Ye	ears back
ь	Contributions	10,134,058									
c	Investment earnings or losses	-91,127,874									
d	Grants or scholarships	9,830,053									
e	Other expenditures for facilities	18,088,277									
Ū	and programs	, ,									
f	Administrative expenses	2,854,704									
g	End of year balance	442,825,991									
2	Provide the estimated percentage of the yea	r end balance held a	s								
а	Board designated or quasi-endowment 🕨	32 000 %									
ь	Permanent endowment 🕨 68 000 %										
С	Term endowment ► 0 %										
3a	Are there endowment funds not in the posse	ssion of the organiza	tion	thata	are held a	and administer	ed for	the			
	organization by							Г		Yes	No
	(i) unrelated organizations		•	•				_	3a(i) 3a(ii)	Yes	
b	(ii) related organizations				 Jula P2		•	· · · [3b	165	l No
4	Describe in Part XIV the intended uses of th	•							<u> </u>		110
Par	rt VI Investments—Land, Building), Part X, lin	e 10.				
					Cost or oth					(4) D-	. 1 1
	Description of investment			basi	s (ınvestme	ent) basis (otl	ner)	(c) Depreciat	ion	(a) Boo	ok value
1a	Land					5,2	92,551				5,292,551
b	Buildings					268,8	54,846	82,970	,436	18	5,884,410
c	Leasehold improvements					7,4	99,386				7,499,386
d	Equipment					101,8	60,169	87,751	,973	1.	4,108,196
_e	Other					41,5	70,910	30,608	,142	1	0,962,768
Tota	II. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	orm 990, Part X, colum	nn (B,), line	10(c).)					22	3,747,311
								Schedul	e D (F	orm 9	90) 2008

uncertain tax positions under FIN 48

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12.	
(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		Cost of end-of-year market value
Closely-held equity interests	241,679,674	
Other		
otal. (Column (b) should equal Form 990, Part X, col (B) line 12)	283,557,764	
Towards December 2		
art VIII Investments—Program Related. See		. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
raternity Mortgages	56,173	
Shared Services Consortium	55,000	
Campus Theater - mortgage	108,848	
Bison Ventures, Inc	45,000	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	- 1F	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
(2)		(2,222
「otal. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X		
(a) Description of Liability	(b) A mount	
ederal Income Taxes	057.267	
Funds held in custody for others	957,367	
Funds held for student organizations	904,105	
Capital Lease Payable	1,641,606	
Fotal. (Column (b) should equal Form 990, Part X, col (B) line 25)	3,503,078	
In Part XIV, provide the text of the footnote to the organiza		t reports the organization's liability for

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	203,746,268
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	213,968,216
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-10,221,948
4	Net unrealized gains (losses) on investments	4	-98,843,347
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-513,583
9	Total adjustments (net) Add lines 4 - 8	9	-99,356,930
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-109,578,878
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial	_	64,544,251
_	statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)	2-	142 407 727
е 3	Add lines 2a through 2d	2e 3	-143,497,737 208,041,988
4	.		208,041,988
4 a	Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
a b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	-4,295,720
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	203,746,268
	Reconciliation of Expenses per Audited Financial Statements With Expenses		· · · · · · · · · · · · · · · · · · ·
1	Total expenses and losses per audited financial statements	1	174,123,129
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	4,809,303
3	Subtract line 2e from line 1	3	169,313,826
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 3,085,138		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	44,654,390
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	213,968,216

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII. lines 2d and 4b

Ident if ier	Return Reference	Explanation
Part X	Part X FIN48 Footnote	Effective July 1, 2007, the University adopted the provisions of FASB Interpretation No 48, Accounting for Uncertainty in Income Taxes (FIN 48) FIN 48 prescribes a threshold of more likely than not for recognition and derecognition of tax positions taken or expected to be taken in a tax return FIN 48 also recognizes related guidance on measurement, classification, interest and penalties, and disclosure The University does not believe that there are any unrecognized tax benefits or costs that should be recorded
Part XIII, Line 4b	Part XIII, Line 4b Other revenue amounts included on 990 but not included in F/S	Institutional scholarships \$41569252
Part XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	Cost of goods sold, sales of inventory \$4295720 Part XI, Line 8, Postretirement charges \$513583
Part XI, Line 8	Part XI, Line 8 Other Changes in Net Assets or Fund Balances	Postretirement charges other than periodic expense \$ -513583
Part V , Line 4	Part V, Line 4 Intended uses of the endowment fund	The university's endowment fund provides a relatively stable investment income stream to the university's operations. As noted in Schedule D, Part V, Line 1(d), a significant portion of that investment income is restricted by endowment donors for student scholarships. The remaining endowment investment income provides annual support to various programs of the university.
Part III, Line 4	Part III, Line 4 Description of organization's collections and how it furthers its purpose	The University has obtained certain art work, rare books, and historical artifacts that are held in safekeeping at the University's library and art gallery. These items are used for educational purposes as the University is a private institution of higher education.
Part III, Line 1a	Part III, Line 1a If organization elected under SFAS 116 to not report are, historical treasures, o	Although not disclosed in the June 30, 2009 financial statements, the University has followed the practice as permitted under SFAS 116 of not capitalizing works of art, historical treasures and other similar assets

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Schools

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization **Employer identification number Bucknell University** 24-0772407 YES NO 1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes 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 Yes The University's racial non-discrimination policy is available on the university's website and is printed in University publications Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo 5h h Other extracurricular activities? Νo If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement) 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes **h** Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either 6a or b, please explain using an attached statement 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05

of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," attach an explanation

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493145012100

OMB No 1545-0047

2008

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

Statement of Activities Outside the United States

Open to Public **Inspection**

Name of the organization	Employer identification number
Bucknell University	
	24-0772407

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

- For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award ▼ Yes
- For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States
- Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

p (-		(altional space is necaca ,		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in
Sub-Saharan Africa	0	0	Scholarships		656,278
South Asia	0	0	Scholarships		680,738
South America	0	0	Scholarships		269,891
Russia and Ind States	0	0	Scholarships		163,908
North America	0	0	Scholarships		315,357
Mıddle East/Nrth Africa	0	0	Scholarships		77,722
Europe	3	3	Program Services	Study Abroad Prog	1,235,053
Europe	0	0	Scholarships		1,817,061
East Asia/Pacific	0	0	Scholarships		1,338,859
Central A merica	0	0	Scholarships		254,484
Central A merica	0	0	Program Services	Study Abroad Prog	186,033
Central America	0	0	Program Services	Student Philanthropy	74,809
		_			7.072.422
Totals ▶	3	3	Cat Na		7,070,193

L	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
		_							
		_							
		_							
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		_							
2	Enter total nu		ations that are re	cognized as charities	s by the foreign cou	ntry or for which the	e grantee or counse	7	

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Scholarships-BU Students Abroad	Sub-Saharan Africa	8			45,425	Financial Aid	FMV
Scholarships-BU Students Abroad	South America	6			46,630	Financial Aid	FMV
Scholarships-BU Students Abroad	Russia/Ind States	2			28,715	Financial Aid	FMV
Scholarships-BU Students Abroad	Mid East/Nrth Afr	1			8,974	Financial Aid	FMV
Scholarships-BU Students Abroad	Europe	79			752,383	Financial Aid	FMV
Scholarships-BU Students Abroad	East Asia/Pacific	20			240,758	Financial Aid	FMV
Scholarships-BU Students Abroad	Central A merica	4			97,566	Financial Aid	FMV
Scholarships to Non-US Citizens	Sub-Saharan Africa	13			656,278	Financial Aid	FMV
Scholarships to Non-US Citizens	South Asia	19			680,738	Financial Aid	FMV
Scholarships to Non-US Citizens	South America	5			223,261	Financial Aid	FMV
Scholarships to Non-US Citizens	Russia/Ind States	3			135,193	Financial Aid	FMV
Scholarships to Non-US Citizens	North America	8			315,357	Financial Aid	FMV
Scholarships to Non-US Citizens	Mid East/Nrth Afr	2			68,748	Financial Aid	FMV
Scholarships to Non-US Citizens	Europe	40			1,064,678	Financial Aid	FMV
Scholarships to Non-US Citizens	East Asia/Pacific	37			1,098,101	Financial Aid	FMV
Scholarships to Non-US Citizens	Central A merica	4			156,918	Financial Aid	FMV

Part IV	Supplemental Infor		ın Part I, line 2, and any other additional information.
	Identifier	ReturnReference	Explanation
	r's Description of How Used in Foreign Country	ixetarimeterenee	The University provides grants in the form of University scholarship for certain non-US citizens attending the University These scholarships are posted directly to the recipient's University billing account and, thus, reduce tuition, room and/or board fees billed to the recipient The University also provides grants in the form of University scholarship for certain Bucknell University students to study abroad Scholarship is posted to the University billing account and, thus, reduces tuition, room and/or board fees billed to the recipient The majority of these scholarships are need-based financial aid

Software ID: 08000091

Software Version: 2008v2.7

EIN: 24-0772407

Name: Bucknell University

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
--------------------------	---	------------	-------------------------	------------------------------	------------------------------------	---	--	--

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DLN: 93493145012100

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

2008

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Bucknell University

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

Open to Public Inspect ion

Employer identification number

						24-0772407	
Part I General Infor	mation on Gra	nts and Assistance	2				
Does the organization m the selection criteria useDescribe in Part IV the organization	ed to award the gra	nts or assistance?					✓ Yes
Part II Grants and Ot Form 990, Part Part IV and Sch	her Assistance	to Governments any recipient that receptional space is	and Organizations	in the United Stat 00. Check this box	tes. Complete if the confirmation one recipient rec		
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Enter total number of seconganizationsEnter total number of oth							
3 Enter total number of oth			<u> </u>	Cat No 50055			hedule I (Form 990) 2008
. o apc. mork reduction Act No	area, see the mistine	101 1 01 111 220.		cat No 500551	•	30	

	•						
Part III	Grants	nd Other Assistance to In-	dividuals in the United States.	Complete if the organization	answered "Yes"	on Form 990,	Part IV, line 22.
	Use Sch	dule I-1 (Form 990) if additioi	nal space is needed.	-			

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Scholarships to Attend Bucknell University			35,949,529	FMV	Credit to Student Billing Account

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. See Additional Data Table

Ident if ier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		The University provides grants in the form of University scholarship for certain individuals attending the University These scholarships are posted directly to the recipient's University billing account and, thus, reduces tuition, room and/or board fees billed to the to the recipient. The majority of these scholarships are need-based financial aid
	i	

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As Filed Data -

DLN: 93493145012100

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

ın Part III

Internal Revenue Service

Compensation Information

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Open to Public Inspection

Bucknell University 24-0772407 **Questions Regarding Compensation** Νo Yes Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items Housing allowance or residence for personal use First class or charter travel Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain **1**b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Written employment contract Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a Receive a severance payment or change of control payment? Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Yes 4c Νo Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III 501(c)(3) and 501(c)(4) organizations only must complete lines 5-8. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe

Νo

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
See Addıtıonal Data Table (i)							
(ii)							
(i)							
(ii)							
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(i)							
(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanation
Line 1a	Part I, Line 1a Relevant information in regards to selections on 1a	FIRST CLASS OR CHARTER TRAVEL - the president is permitted to travel by first class airfare in limited circumstances per university policy. First class travel costs is not considered taxable compensation. Furthermore, the president's spouse, employed by the university as the special advisor to the chair of the board of trustees, is permitted to first class travel under the same limited circumstances per university policy. TRAVEL FOR COMPANIONS - Travel costs of companions of university trustees, officers, and key employees are reimbursed in limited circumstances and such reimbursement is considered taxable income to the trustee, officer, or key employee unless the companion's travel would otherwise be considered deductible under the Interal Revenue Code. Such taxable reimbursements to companions of university officers were approximately \$1,500 for the calendar year 2008 and are included in Schedule J, Part II, column (B)(iii). TAX INDEMNIFICATION & GROSS UP PAYMENTS - Tax gross-up payments, considered taxable compensation, were provided to 8 officers and key employees listed in Part II of Schedule J for one or more of the following items. (a) golf club membership at the university's golf course, (b) taxable tuition remission benefits, or (c) years of service recognition awards. HOUSING ALLO WANCE OR RESIDENCE FOR PERSONAL USE - By contract with the president, the university requires the president to reside in a specific campus building. The estimated fair rental value of the personal living space, including utilities, is not considered taxable income since on-campus residency is a contractual reequirement imposed by the university. The estimated fair value is included in Schedule J HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES - As described above, certain employees have golf memberships at the university owned golf course. In addition, the university pays membership dues at certain private establishments for the purpose of holding business or fundraising events PERSONAL SERVICES-Certain facilities and maintena

Software ID: 08000091 **Software Version:** 2008v2.7

EIN: 24-0772407

Name: Bucknell University

Form 990, Schedule J, Part	II - Officers, Direc	tors, Trustees, Ke	y Employees, and	Highest Compens	sated Employees		
(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
	(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
Wayne Bromfield (II	200,600			20,060	392	221,052	
Warren Abrahamson (II			523	15,420	10,718	189,392	
Scott G Rosevear (II			2,500	15,498	13,521	178,860	
Samuel Lundquist (I			4,477	23,000	14,930	294,449	
Richard D Myers		22,500	3,050	15,375	305	194,980	
Peter F Mackey (II	166,271		2,535	17,320	12,190	198,316	
Param S Bedi (II		17,600	1,887	17,952	15,290	223,215	
Michael S Cover (II			11,033	15,300	5,795	181,761	
Michael A Smyer (II		40,000	4,004	13,250	5,564	192,358	
Kurt M Thiede (I			7,084	19,055	41,651	250,435	
John Hardt (II			6,632	17,740	53,827	247,516	
James P Rice (II				15,931	28,227	206,007	
James Orbison (II				17,175	53,768	241,432	
Donald Stechschulte (II				16,084	13,147	183,591	
Dennis W Swank (II			1,667	16,400	12,092	187,949	
David R Paulsen (I	103,570	40,000	5,713	9,250	8,286	166,819	
David J Surgala (I		5,000	41,167	23,000	35,925	352,371	
Christopher Zappe (II) 173,443		242	17,175	13,532	204,392	
Chistopher Brown (II			32,709	26,083	15,941	234,614	
Brian C Mitchell (I	403,708	60,000	19,321	194,971	26,530	704,530	

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DLN: 93493145012100

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

► Attach to Form 990 or Form 990-EZ. ▶ To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,

Transactions with Interested Persons

Department of the Treasury or Form 990-EZ, Part V lines 38b or 40b. Internal Revenue Service

Employer identification number						Bucknell University							
				-077								,	
- !:=: 40b	- +\/ [Excess Benef To be completed	
Corrected		90-62,	יל ווזלי.					3 Ulifui	15 Wereu ie				
	Yes			ction 	n of transad	cription	(b) Desc			person	me of disqualifie	(a) Name	1
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+	+												
+	+												
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			> \$									ıon 4958 	sectio
		<u> </u>	> \$	•		<u> </u>	anızatıon .					r the amount of tax	
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3 a	(f)			פפוחו	e 26, 01 1 0	1v , iiiie	N 990, Fait.	es on i			eted by Olyaniza	To be complete	
g) Written	ved (g	Appro		(e)		\ <u></u>	al principal	(c)0 ri		(b) Loar from	d person and	me of interested p	(a) Nan
greement?	1 -	default? by board		lance due l	(d)Balance due		amount	organization?		a pare :	purpose	(- -/	
Yes No		Yes	No	Yes					From	То			
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ıstance	ofassı	t or type	fgran	unt of	(c) A mo	rson				(b	ested person) Name of interest	(a)
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		_	_										
						\longrightarrow				\dashv			
		t or type	No f gran			90, Pa	on Form 9 nterested per	ered "Ye	that answ Relationshi	zations	oleted by organ		- Relocation Total . Part III

Business Transactions Involving Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organı	aring of zation's nues?
organization			Yes	No
Key Emp Spouse	10,924	employment		Νο
Officer's Spouse	50,468	employment		Νο
Officer's Spouse	52,796	employment		Νο
President's Spouse	85,958	employment		Νο
	between interested person and the organization Key Emp Spouse Officer's Spouse Officer's Spouse	between interested person and the organization Key Emp Spouse 10,924 Officer's Spouse 50,468 Officer's Spouse 52,796	between interested person and the organization Key Emp Spouse Officer's Spouse Officer's Spouse (c) A mount of transaction (d) Description of transaction transaction (d) Description of transaction transaction 50,468 employment 50,468 employment	between interested person and the organization Key Emp Spouse Officer's Spouse Officer's Spouse (c) A mount of transaction (d) Description of transaction organization Yes organization Officer's Spouse 50,468 employment Officer's Spouse 52,796 employment

DLN: 93493145012100

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

Non-Cash Contributions

Open to Public Inspection

	e of the organization ell University		Employer identificat	ion numl	ber			
					24-0772407			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of d rever	etermını	ng	
1	Art—Works of art	X	14					
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							
	Intellectual property							
	Securities—Publicly traded .	X	116	2,207,287	Gift Date FMV			
	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Q ualified 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	Х	3					
23	Scientific specimens							
24	Archeological artifacts	Х	3					
	Athletic							
25	Other (describe Equip)	X	1					
26	Education Other (describe Equip)	×	6					
27	Other (describe Supplies)	Х	29					
28	·							
29	Number of Forms 8283 received which the organization complete Acknowledgement	d Form 828		ar for contributions for	29			14
		· •				1	res	No
30a	During the year, did the organiza hold for at least three years from the date of							
	for the entire holding period? .			not required to be used for	evembe barboses	20-		No
b	If "Yes", describe the arrangement					30a	\dashv	110
31	Does the organization have a gif			eview of any non-standard	contributions?	31 Y	'es	
32a	Does the organization hire or us	e thırd part	ies or related organizations	to solicit, process, or sell	non-cash			
h	contributions?					32a	\dashv	Νo
						i I	- 1	

checked, describe in Part II

33 If the organization did not report revenues in Column (c) for a type of property for which Column (a) is

Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. ReturnReference Explanation Part I, Line 33, Revenues Not As permitted under SFAS 116, the University does not capitalize its collections of artwork and historical collections for financial Reported statement purposes Furthermore, certain donated goods incidental to University operations are acknowledged by the University but not recorded in revenues nor expenses for financial statement purposes

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SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

DLN: 93493145012100

Inspection

Name of the organization

Employer identification number

24-0772407

ldentifier	Return Reference	Explanation
	I FORM YYU SCHANIIA I	During the year ended June 30, 2009, Bucknell University engaged a government relations and business development firm to assist the University in identifying Congressional-directed grants that may benefit programs of Bucknell University Professional fees paid to the firm totaled \$120,365 and Bucknell staff travel expenses totaled \$733. The funds expended on these activities represent less than one-tenth of 1% of the University's total expenses.

ldenti	ier Return Reference	Explanation
	Form 990, Schedule R, Part VI	Bison Ventures, Inc. was formed in May 2009 with no revenue or expenses from date of inception to June 30, 2009

Identifier	Return Reference	Explanation
	' '	The University files a copy of the Form 990 in New Jersey, New Hampshire and Washington in order to maintain the University's certification to solicit Charitable Gift Annuities in those states

Identifier	Return Reference	Explanation
	Form 990, Part V, Line 4b	The University has an interest in and/or signing authority over bank accounts in England, France, Spain and Barbados for the University's Study Abroad Programs in those countries

	ldentifier	Return Reference	Explanation
- 1	·	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The University makes 5 years of financial statements available on the University's Finance Office wiebsite

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	The president's compensation was reviewed and approved by the Executive Resource Committee of the Board of Trustees. The Committee used various sources of data, including but not limited to, an independent compensation consultant, other organizations' Form 990s and compensation surveys. There is a written employment contract in place which is signed by the president and the Chairperson of the Board of Trustees in addition, compensation of certain officers and key employees (employees reporting directly to the president) are reviewed by the Executive Resource Committee and approved by the president of the university. The president and Committee used various sources of data, including but not limited to, an independent compensation consultant, other organizations' Form 990s and compensation surveys.

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	All trustees are required to complete and submit an annual conflict of interest statement to the University's General Counsel. All Officers and Key Employees are required to complete and submit an annual conflict of interest statement to the University's Vice President for Finance and Administration. All statements are reviewed by General Counsel and/or the VP for Finance and Administration to determine if the possible conflicts of interest noted are actual conflicts and what action should be taken including prohibiting an individual from participating in any deliberations, decisions or transactions related to the conflict, and whether disclosures regarding the conflict should be made in financial statements or other documents

	ldentifier	Return Reference	Explanation
	m 990, Part Line 10		The final Form 990 is provided to the University's Committee of Audit and Risk Management for review. The Form 990 is made available electronically to the trustees prior to filing

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 2	Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	Glenn D Steele, Jr, Trustee and Brian C Mitchell, President and Trustee - Business Relationship As disclosed in the University's financial statements, the trustee is president and chief operating officer of a healthcare organization providing certain competitively bid healthcare insurance services to the University Amounts paid for those insurance services totaled \$2,740,000 and \$2,669,000 for the years ended June 30, 2009 and 2008, respectively Since September 2006, the University's president serves on the board of directors of the healthcare organization referred to above

ldentifier	Return Reference	Explanation
Form 990, Part III, Line 4d		OTHER PROGRAM SERVICES 5 Academic Support - the expenses of activities and services that directly support instruction

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

Cat No 51056K

Schedule O (Form 990) 2008

DLN: 93493145012100

2008

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

Department of the Treasury

(Form 990)

SCHEDULE R

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Internal Revenue Service Name of the organization **Employer identification number Bucknell University** 24-0772407 Part I Identification of Disregarded Entities (D) (B) (C) Name, address, and EIN of disregarded entity Legal domicile (state Total income End-of-year assets Direct controlling Primary activity or foreign country) entity Part II Identification of Related Tax-Exempt Organizations (B) Name, address, and EIN of related organization Legal domicile (state Exempt Code section Public charity status Direct controlling Primary activity or foreign country) (if section 501(c)(3)) entity

art III Identification of				<u> </u>	I	Τ		1		ı	1 .	
(A) Name, address, and EIN of related organization	(B) Primary ac	tivity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H Disprop allocat	rtionate :ions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana parti	
								Yes	No		Yes	No
	I			l				<u> </u>	<u> </u>		<u> </u>	
Part IV Identification of	Related Org	anizations	Taxable a	s a Corporation	or Trust							
(A) Name, address, and EIN of related		(B) Primary activ		(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 incom	ne	Sha end-c	re of Perce	H) entage ership	
ison Ventures Inc See Schedule O 01 Moore Avenue ewisburg, PA17837 6-4730096		Bookstore Operations		РА	N/A	C Corp				45,000 100 (000 %	

(5)

(6)

Note. Complete line 1 if any entity is listed in Parts II, III or IV 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 (iv) rent from a controlled entity b Gift, grant, or capital contribution to other organization(s) c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) f Sale of assets to other organization(s) g Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s) k Performance of services or membership or fundraising solicitations for other organization(s)		Yes	No
 b Gift, grant, or capital contribution to other organization(s) c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) f Sale of assets to other organization(s) g Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s) j Lease of facilities, equipment, or other assets from other organization(s) 			140
 b Gift, grant, or capital contribution to other organization(s) c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) f Sale of assets to other organization(s) g Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s) j Lease of facilities, equipment, or other assets from other organization(s) 			
c Gift, grant, or capital contribution from other organization(s) d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) f Sale of assets to other organization(s) g Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s)	1a		No
d Loans or loan guarantees to or for other organization(s) e Loans or loan guarantees by other organization(s) f Sale of assets to other organization(s) g Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s)	1b	Yes	
 Loans or loan guarantees by other organization(s) Sale of assets to other organization(s) Purchase of assets from other organization(s) Exchange of assets Lease of facilities, equipment, or other assets to other organization(s) Lease of facilities, equipment, or other assets from other organization(s) 	1c		No
 f Sale of assets to other organization(s) g Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s) j Lease of facilities, equipment, or other assets from other organization(s) 	1d		No
 p Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s) j Lease of facilities, equipment, or other assets from other organization(s) 	1e		No
 p Purchase of assets from other organization(s) h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s) j Lease of facilities, equipment, or other assets from other organization(s) 			
 h Exchange of assets i Lease of facilities, equipment, or other assets to other organization(s) j Lease of facilities, equipment, or other assets from other organization(s) 	1f		No
 i Lease of facilities, equipment, or other assets to other organization(s) j Lease of facilities, equipment, or other assets from other organization(s) 	1 g		No
j Lease of facilities, equipment, or other assets from other organization(s)	1h		No
	1 i		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1j		No
R Terrormance of Services of membership of fandraising Softerations for other organization(5)	1k		No
I Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m Sharing of facilities, equipment, mailing lists, or other assets	1m	ı	No
n Sharing of paid employees	1 n		No
• Reimbursement paid to other organization for expenses	10		No
p Reimbursement paid by other organization for expenses	1р		No
q O ther transfer of cash or property to other organization(s)	1 q		No
r Other transfer of cash or property from other organization(s)	1 r		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresh	olds		
(A) (B) (C)			
Name of other organization(s) Transaction type(a-r) Amount In			
(1) Bison Ventures Inc See Schedule O b		45,00	0
(2)			
(3)			
(4)			

Part VI Unrelated Organizations Taxable as a Partnership

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

									_		
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproprtionate allocations?		(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?)	
			Yes	No		Yes	No		Yes	No	
			•	•		•		Sabadula	D / Form		

Software ID: Software Version:

EIN: 24-0772407

Name: Bucknell University

Form 990, Part VII - Section Aaa

Politi 990, Part VII - Section Ada		Posit t	(C lon (hat a	chec		I			(5)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
William D Dearstyne Jr , Board Secretary		Х						0	0	0	
William A Graham IV , Trustee		X						0	0	0	
Wayne Bromfield , General Counsel	40 00			Х				200,600	0	20,452	
Warren Abrahamson , Professor	40 00					Х		163,254	0	26,138	
Susan M Baird , Trustee		X						0	0	0	
Susan J Crawford , Board Chair		Х						0	0	0	
Stuart E Berelson , Trustee		Х						0	0	0	
Stephen P Holmes , Trustee		Х						0	0	0	
Scott G Rosevear , Assoc VP Develop	40 00					Х		149,841	0	29,019	
Scott G Nichols , Trustee		Х						0	0	0	
Samuel Lundquist , VP Dev & Alum	40 00			Х				256,519	0	37,930	
Ronald L Benjamın , Trustee		Х						0	0	0	
Robert A Bonellı , Trustee		Х						0	0	0	
Richard D Myers , Secretary	40 00			Х				179,300	0	15,680	
Peter F Mackey , VP-Communicatio	40 00			Х				168,806	0	29,510	
Peter C Gerhard , Trustee		Х						0	0	0	
Paul J Mejean , Trustee		Х						0	0	0	
Param S Bedi , Chief Inform O	40 00			Х				189,973	0	33,242	
Nancy B Prial , Trustee		Х						0	0	0	
Michael S Cover , Treas/Controll	40 00			Х				160,666	0	21,095	
Mıchael E Flowers , Trustee		Х						0	0	0	
Mıchael A Smyer , Provost	40 00			Х				173,544	0	18,814	
Marthann Lauver Samek , Trustee		Х						0	0	0	
Marlene A Hurd , Trustee		Х						0	0	0	
Lında G Greenberg , Trustee		Х						0	0	0	
Lawrence S Klock , Trustee		Х						0	0	0	
Kurt M Thiede , VP Enroll Mgmt	40 00			Х				189,729	0	60,706	
Kenneth W Freeman , Trustee		Х						0	0	0	
Juanita O ra Luckett Brown , Trustee		Х						0	0	0	
Joseph A Cıffolillo , Vıce Chair		Х						0	0	0	

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa									 1
		Posit t	(C tion (hat a	chec		I		(E)	(F)
(A) Name and Title	(B) Average hours per week	erage The Reportable compensation urs The Compensation of the Comp		(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations				
John Hardt , Director of Athletics	40 00				Х		175,949	0	71,567
John H Mathias , Trustee		Х					0	0	0
John E Bachman , Trustee		Х					0	0	0
Jane Taylor Elfers , Trustee		Х					0	0	0
Jane J Thompson , Trustee		Х					0	0	0
Jamey Bennett , Trustee		Х					0	0	0
James P Rice , Assoc Provost	40 00					Х	161,849	0	44,158
James Orbison , Dean of Engineering	40 00				Х		170,489	0	70,943
James H DeGraffenreidtJr , Trustee		Х					0	0	0
J Randall MacDonald , Trustee		Х					0	0	0
Glenn D Steele Jr , Trustee		Х					0	0	0
Frank Arentowicz , Trustee		Х					0	0	0
Ellen Q Bush , Trustee		Х					0	0	0
Edward F Stalano , Trustee		Х					0	0	0
Donald Stechschulte , Dır Stdt Health	40 00					Х	154,360	0	29,231
Dennis W Swank , Assc VP-Finance	40 00			Х			159,457	0	28,492
David T Scadden , Trustee		Х					0	0	0
David R Paulsen , Coach Men's Bask	40 00					Х	149,283	0	17,536
David Maurrasse , Trustee		Х					0	0	0
David J Surgala , VP Fin & Adm	40 00			Х			293,446	0	58,925
D Lee Hamilton , Trustee		Х					0	0	0
Craig D Mills , Trustee		Х					0	0	0
Christopher Zappe , Dean of Arts and Sciences	40 00				х		173,685	0	30,707
Chistopher Brown , Chief Invest O	40 00			Х			192,590	0	42,024
Charles W Berger , Trustee		Х					0	0	0
C Alan Walker , Trustee		Х					0	0	0
Brian C Mitchell , President	40 00	Х		Х			483,029	0	221,501
Bentley T Elliott , Trustee		Х					0	0	0
Barry E Tague , Trustee		Х					0	0	0

Form 990, Part III, Line 1 - Briefly describe the organization's mission:

Bucknell is a unique national university where liberal arts and professional programs complement each other. Bucknell educates men and women for a lifetime of critical thinking and strong leadership characterized by continued intellectual exploration, creativity, and imagination. A Bucknell education enables students to interact daily with faculty who exemplify a passion for learning and a dedication to teaching and scholarship. Bucknell fosters a residential, co-curricular environment in which students develop intellectual maturity, personal conviction and strength of character, informed by a deep understanding of different cultures and diverse perspectives. Bucknell seeks to educate our students to serve the common good and to promote justice in ways sensitive to the moral and ethical dimensions of life. Bucknells rich history and heritage will influence its planning for the future. Bucknells potential as an institution of higher learning extends beyond that of a traditional liberal a