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DLN: 93493137045020

Form **990**

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2008

Open to Public

Department of the Treasury

Internal I	Revenue	e Service	► The or	ganization may have to use a c	opy of this return to satisfy s	tate reporting	requirements	Inspection
A Fo	r the	2008 cal	endar yea	r, or tax year beginning 07-01-2	2008 and ending 06-30-200	9	D Fundamenida	i G
			Please	C Name of organization RANDOLPH-MACON COLLEGE			. ,	ntification number
☐ Add	lress cl	hange	use IRS label or	Doing Business As			54-0505940 E Telephone nu	
☐ Nar	ne cha	ange	print or type. See	Dolling Business As			·	
Init	ıal retu	ırn	Specific Instruc-	Number and street (or P O box if r	mail is not delivered to street addre	ess) Room/suite	(804) 798-8 G Gross receipts	
Г Теп	mınatıd	on	tions.	POST OFFICE BOX 5005			d dross receipts	5 \$ 67,000,147
┌ Am	ended	return		City or town, state or country, and	ZIP + 4			
┌ _{App}	lication	n pending		ASHLAND, VA 230055505				
		-	F Nan	ne and address of Principal Offi	cer	H(a) Is the	s a group return	for
			ROBER	T R LINDGREN		affilia	s a group return tes?	Yes V No
				D FFICE BOX 5005 ND, VA 230055505				
Tax	x-exen	npt status		(3) ◀ (insert no)	or $\ \ \ \ \ \ \ \ \ $	` '	l affiliates include	•
	- h - i h			, , , , , , , , , , , , , , , , , , , ,		1	o," attach a list p Exemption Nur	See instructions) nber ►
) W	eb sit	e: ► www	rmc eau			11(6) 0100	p Exemperon Nur	in bei F
К Туре	e of or	ganızatıon	Corporat	ion	-	L Year of Fo	rmation 1830 M s	State of legal domicile VA
		l c						
Pa	rt II			e organization's mission or mos	t significant activities			
a.	_	•		e organization's mission or mos F A Randolph-Macon EDUCATI	-	IND AND CH	ARACTER OF IT	SSTUDENTS
ဍ		1112 1 01	(1032 01	A Kandolphi-Macon Eboca 11	ON 15 TO DEVELOP THE P	IND AND CIT	ARACIEROIII	SSIODENIS
图								
Governance	2	Check th	nis box [ıf the organization discontinued	its operations or disposed o	of more than 2	5% of its assets	
ŝ	3		,	nembers of the governing body				44
	4		_	dent voting members of the gov				44
<u>8</u>	5			nployees (Part V, line 2a)		-,		1,103
Activities &	6			lunteers (estimate if necessary			6	100
ខ្	_			ted business revenue from Part		7a	414,451	
				ness taxable income from Form		•	76 <u> </u>	37,828
						Prio	or Year	Current Year
	8	Contrib	utions and	i grants (Part VIII, line 1h) .	- 1115	10,460,363	8,360,548	
횰	9			revenue (Part VIII, line 2g)		38,659,037	41,273,507	
Revenue	10			ne (Part VIII, column (A), lines		10,939,385	-4,896,287	
2	11			art VIII, column (A), lines 5, 6			3,063,003	834,853
	12		-	dd lines 8 through 11 (must equ		e	2,000,000	
		12)					63,121,788	45,572,621
	13	Grants	and sımıla	er amounts paid (Part IX, colum	n (A), lines 1—3)		13,063,190	14,748,325
	14	Benefit	s paid to o	r for members (Part IX, column	(A), line 4)			0
ø	15		s, other co	empensation, employee benefits	(Part IX, column (A), lines	5 –	20 251 521	21 552 644
Expenses	16-	10)		mariana fara (Dant IV. asluma (A	\ luma 4.4.a\		20,351,531	21,552,644
<u>क</u>	16a			raising fees (Part IX, column (A				19,205
五	Ь	•		penses, Part IX, column (D), line 25 <u>3,</u>				
	17			Part IX, column (A), lines 11a-			17,835,451	21,007,825
	18			add lines 13–17 (must equal P			51,250,172	57,327,999
<u>₩</u> 47	19	Kevenu	e iess exp	penses Subtract line 18 from lii	ie 12	P	11,871,616	-11,755,378
කි වෙසි							ng of Year	End of Year
556 3æ	20			t X, line 16)			196,245,903	166,387,038
Net Assets or Fund Balances	21		•	Part X, line 26)			35,865,099	37,624,935
	22			d balances Subtract line 21 fro	om line 20		160,380,804	128,762,103
Par	t II	_	ture Blo					
				rjury, I declare that I have examined correct, and complete Declaration of p				
Plea	se	****		ser, and complete beddiation of p	(said dian office) is base	1	·05-14	a.iij kiiomeage
Sign			ture of office	er		2010- Date	-03-14	
Here	2	ROBE	RT R LINDGE	REN PRESIDENT				
			or print nam					
		Preparer's			Date	Check If	Preparer's PTIN (See Gen Inst)
Paid		signature		. Duerk		self-		,
Prepa	arer'e	Firm's par	me (or your	BROWN EDWARDS & COMPANY L		empolyed 🕨 🦵		
Use (ıf self-em		•	LF		EIN 🕨	
	- · · · y	address, a	and ZIP + 4	319 MCCLANAHAN ST			Phono no 🕨 /54	0) 245 0026
		<u> </u>		ROANOKE, VA 24014			Phone no 🕨 (54	,
Mayt	he IR	RS discuss	this retu	rn with the preparer shown abov	re? (See instructions)			✓ Yes

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

1 See A	Briefly describe the organiza dditional Data Table	tion's impaien				
2	Did the organization under the prior Form 990 or 99		nt program services	during the year v	which were not listed on	Yes ✓ No
	If "Yes," describe these r	new services on Sch	nedule O			
3	Did the organization ceas		ke significant chang	es in how it cond	lucts any program 	Yes
	If "Yes," describe these o	changes on Schedul	e O			
4		l) organizations and	4947(a)(1) trusts a	re required to re	argest program services by e port the amount of grants an 1	
4a	(Code RANDOLPH-MACON COLLEGE STUDENTS) (Expenses \$ IS AN INSTITUTION OF		ng grants of \$ OVIDING A FOUR YEA	14,748,325) (Revenue \$ AR LIBERAL ARTS CURRICULUM TO) APPROXIMATELY 1,175
4b	(Code) (Expenses \$	ıncluding	g grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	ıncludını	g grants of \$) (Revenue \$)
4d	Other program services (Expenses \$		ding grants of \$) (Revenue \$)
4e	Total program service e	xpenses \$	47,320,444 Mus	st equal Part IX, L	Line 25, column (B).	

27111V Checklist of Required Schedule:	art IV	Checkli	st of F	Required	Schedules
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			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		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C,	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		
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, 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		N o
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	
	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
	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		Νο
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? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
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? <i>If</i> "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	Yes	
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		No
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		No
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		No
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	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νο
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
ь	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		No
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)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	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			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		No
С	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
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	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		No
35	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		No
36	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		Νο
37	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, Part VI	37		Νo

Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 1,472			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		v	
_	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	- 50	163	
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country EI			
	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		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
_	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	<u> </u>		
·	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7с		No
a	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νο
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		No
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the	8		
9	year?			
	Did the organization make any taxable distributions under section 4966?	9a		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
11	Section 501(c)(12) organizations Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

Section A. Governing Body and Management

No

Yes

11

Νo

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

the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, deprocesses, or changes in Schedule O. See instructions.	escribe the circumst	ances,					
1a	Enter the number of voting members of the governing body 1	a	44					
Ь	Enter the number of voting members that are independent 1	b	44					
2	Did any officer, director, trustee, or key employee have a family relationship or a busine other officer, director, trustee, or key employee?			2		No		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?							
4	Did the organization make any significant changes to its organizational documents sincifiled? \cdot	e the prior Form 99	00 was	4		No		
5	Did the organization become aware during the year of a material diversion of the organization's assets?							
6	Does the organization have members or stockholders?							
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?							
Ь	b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?							
8	Did the organization contemporaneously document the meetings held or written actions year by the following	undertaken during	the					
а	the governing body?			8a	Yes			
Ь	each committee with authority to act on behalf of the governing body?		[8b	Yes			
9a	Does the organization have local chapters, branches, or affiliates?		. [9a		No		
b	If "Yes," does the organization have written policies and procedures governing the actival affiliates, and branches to ensure their operations are consistent with those of the organization.		,	9b				
10	Was a copy of the Form 990 provided to the organization's governing body before it was must describe in Schedule O the process, if any, the organization uses to review the Fo	•		10	Yes			
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, v	vho cannot be reach	ned at					

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Yes	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	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	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		Νo
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
b	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		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- 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
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization JOHN C CONKRIGHT ASSIST SEC TO THE

204 HENRY STREET

ASHLAND, VA 23005 (804) 752-7211

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				(5)	(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)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

			tıon	C) (check all apply)					(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
			1	\vdash						
			<u> </u>							
			-				\vdash			
			-	\vdash			\vdash			
1b Total							►	1,048,299)	181,407

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►8

			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

\$100,000 of compensation from the organization			
(A) Name and business address	(B) Description of services	(C) Compensation	
CHARTWELLS PO BOX 91337 CHICAGO, IL 606931337	FOOD SERVICES	2,833,702	
ROYALL & COMPANY 1920 EAST PARHAM ROAD RICHMOND, VA 23228	DIRECT MARKETING CONSULTANTS	464,958	
USI INSURANCE SERVICES 4880 COX ROAD SUITE 102 GLEN ALLEN, VA 23060	INSURANCE SERVICES	288,070	
EMC BUILDING TECHNOLOGIES COMPANY PO BOX 6328 RICHMOND, VA 23230	HVAC CONTRACTOR	285,762	
SCENIC AMERICA INC 10210 MARSH ROAD BEALETON, VA 22712	TRANSPORTATION SERVICES	201,072	
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization			

					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
.,	1a	Federated can	npaigns 1a					. ,
ınts	ь	Membership d	ues					
gra	c	Fundraising ex	1b /ents					
its,			1c					
Contributions, gifts, grants and other similar amounts	d		izations1d					
ons, sim	e	Government gran			ļ			
iği ye	f	All other contribut similar amounts r	tions, gifts, grants, and not included above	7,855,554				
き		Noncob	1f rıbutıons ıncluded ın					
<u> </u>	g	lines 1a-1f \$						
O®	h		es 1a-1f)		8,360,548			
				Business Code				
III e	2a	TUITION AND FEE	ES	611,600	32,926,884	32,926,884		
eve	b	AUXILIARY SERVI	CES	611,600	8,346,623	8,317,898	28,725	
a Fr	С							
rwc	d							
38	e							
ran.	f	All other prog	ram service revenue					
Program Service Revenue	g	Total. Add line ► \$ 41,273,50	es 2a-2f					
	3		come (including divi	dends, ınterest				
			imounts)	· · · · · · · · · · · · · · · · · · ·	5,748,340		27,613	5,720,727
	4	Income from inve	estment of tax-exempt be	ond proceeds				
	5	D Ib		▶				
	5	Royalties .	(ı) Real	(II) Personal				
	6a	Gross Rents	42,260	(ii) i ersonar				
	ь	Less rental	30,852					
	С	expenses Rental income	11,408					
	d	or (loss)	ome or (loss)		11,408			11,408
		Traction and		▶	·			·
	7a	Gross amount	(ı) Securities 10,644,627	(II) O ther				
	74	from sales of assets other	,					
		than inventory Less cost or	21,289,254					
	ь	other basis and	21,269,234					
	с	sales expenses Gaın or (loss)	-10,644,627					
	d	Net gaın or (lo	ss)		-10,644,627			-10,644,627
	8a		from fundraising	. •				
Other Revenue		\$of contribution 1c) See Part : Attach Schedul	ns reported on line					
<u> </u>	ь	Less directe	xpensesb					
o∯	С	Net income or	(loss) from fundrais	ing events				
_	9a	Gross income activities See Complete Sched exceeds \$15,00	e part IV , line 19 dule G if total					
	P		a					
	b c		xpensesb (loss) from gaming a					
				······• ►				
	10a	Gross sales of returns and al	f inventory, less lowances					
		. ocarno unu di	a	1,130,427				
	ь	Less cost of	goods sold b					
	С		(loss) from sales of		223,007	50,588	172,419	
		Miscellaneou		Business Code				222
	11a		OUS PROGRAMS	900,099	494,291		185,694	308,597
	Ь	PRESENT VA	LUE ADJUST-A	900,099	106,147			106,147
	С							
	d	All other reve	nue					
	e	Total. Add line	es 11a-11d	 \$ 600,438				
	12	Total Revenue	. Add lines 1h, 2g, 3		45,572,621	41,295,370	414,451	-4,497,748
		8c,	l1e					Form 990 (2008)

Page **9**

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).							
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							
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	14,748,325	14,748,325					
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors, trustees, and key employees	497,607	192,306	192,306	112,995			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$							
7	Other salaries and wages	16,235,840	12,173,196		1,481,211			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,275,115	1,011,302	170,608	93,205			
9	Other employee benefits	2,272,988	1,530,202	599,696	143,090			
10	Payroll taxes	1,271,094	988,403	192,189	90,502			
11	Fees for services (non-employees)							
а	Management							
b	Legal	130,501		130,501				
c	Accounting	75,800		75,800				
d	Lobbying							
e	Professional fundraising See Part IV, line 17	19,205			19,205			
f	Investment management fees							
g	Other	199,273	90,584	64,838	43,851			
12	Advertising and promotion	910,224	748,636	3,210	158,378			
13	Office expenses	1,188,022	635,820	328,346	223,856			
14	Information technology	752,037	101,581	646,097	4,359			
15	Royalties				_			
16	Occupancy	4,198,587	3,929,038	183,293	86,256			
17	Travel	896,461	781,476	57,031	57,954			
18	Payments of travel or entertainment expenses for any Federal, state or local public officials							
19	Conferences, conventions and meetings	70,823	56,525	12,763	1,535			
20	Interest	886,306	783,561	95,363	7,382			
21	Payments to affiliates							
22	Depreciation, depletion, and amortization	2,258,274	2,197,711	15,687	44,876			
23	Insurance	232,522		232,522				
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	OTHER SUPPLIES & SERVIC	3,409,548	2,416,893	536,618	456,037			
b	POST RETIREMENT BENEFIT	2,581,391	1,987,671	403,730	189,990			
c	STUDENT FOOD SERVICE	2,340,991	2,340,991		-			
d	OTHER NON-OPERATING EXP	351,236	270,452	54,933	25,851			
e	LIBRARY & LIBRARY SERVI	336,566	335,771	795	· · · · · ·			
f	All other expenses	189,263		189,263				
25	Total functional expenses. Add lines 1 through 24f	57,327,999	47,320,444	6,767,022	3,240,533			
26	Joint Costs. Check 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	,,	,-20,1	-,, 3,,,	-,,			

Dart V	Balance	Shoot
Part X	Balance	Sheet

			(A)		(B)
	1	Cash—non-interest-bearing	Beginning of year 6,917,084	1	End of year 4,869,102
	2	Savings and temporary cash investments	3,566,103	_	4,878,866
	3	Pledges and grants receivable, net	5,648,260		5,807,623
	4	Accounts receivable, net	906,748		1,146,304
	5	Receivables from current and former officers, directors, trustees, key employees or	333,113	-	1,110,001
	,	other related parties Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net	4,301,587	7	4,312,584
	8	Inventories for sale or use	237,456	8	233,673
2	9	Prepaid expenses and deferred charges		9	
Assets	10a	Land, buildings, and equipment cost basis			
⋖	_	10a 82,973,531	_		
	b	Less accumulated depreciation Complete Part VI of Schedule D	45,278,925	10c	45,219,660
	11	Investments—publicly traded securities	96,696,644	11	68,080,286
	12	Investments—other securities See Part IV, line 11 Complete Part VII of Schedule D	30,342,887	12	29,880,671
	13	Investments—program-related See Part IV, line 11 Complete Part VIII			
	14	of Schedule D . Intangible assets		13 14	
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule	2,350,209	14	1,958,269
	15	D	2,550,209	15	1,950,209
	16	Total assets. Add lines 1 through 15 (must equal line 34)	196,245,903	16	166,387,038
	17	Accounts payable and accrued expenses .	2,249,006	17	2,307,380
	18	Grants payable		18	
	19	Deferred revenue	1,545,783	19	1,433,308
	20	Tax-exempt bond liabilities		20	
<u>ā</u>	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			
ï		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	23,539,546	23	22,567,835
	24	Unsecured notes and loans payable		24	
	25	Other liabilities Complete Part X of Schedule D	8,530,764	25	11,316,412
	26	Total liabilities. Add lines 17 through 25	35,865,099	26	37,624,935
s ф		Organizations that follow SFAS 117, check here ► 🔽 and complete lines 27 through 29, and lines 33 and 34.			
auc	27	Unrestricted net assets	84,459,514	27	73,472,617
Balance	28	Temporarily restricted net assets	38,233,647	28	16,853,544
<u> </u>	29	Permanently restricted net assets	37,687,643	29	38,435,942
Fund		Organizations that do not follow SFAS 117, check here ► ☐ and complete lines 30 through 34.			
0 C	30	Capital stock or trust principal, or current funds		30	
Ą	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	160,380,804		128,762,103
Ź	34	Total liabilities and net assets/fund balances	196,245,903		166,387,038
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		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	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	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

Employer identification number

3493137045020

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

2008

Open to Public
Inspection

≀AND	OLPH-M	iacon college										
									-0505940			
	rt I			harity Status (to be co					Instruct	ions)		
	organı			ation because it is (Please								
1	<u> </u>	-		nurches, or association of ch			Section :	170(b)(1)((A)(i).			
2	<u> </u>	A school de	escribed in Sect	t ion 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E)						
3	Γ	A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H)										
4	Γ	A medical research organization operated in conjunction with a hospital described in Section 170(b)(1)(A)(iii). Enter the										
		hospital's name, city, and state										
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
		Section 170	D(b)(1)(A)(iv).	(Complete Part II)								
6	Γ	A federal, s	tate, or local go	overnment or governmental	unıt desci	ribed in Se	ct ion 170	(b)(1)(A)	(v).			
7	Γ	An organiza	ation that norma	ally receives a substantial p	art of its	support fro	m a gove	rnmental u	ınıt or fron	n the gene	ral publi	С
		described i	n Section 170(b))(1)(A)(vi) (Complete Par	tII)							
8	Γ	A communi	ty trust describ	ed in Section 170(b)(1)(A)	(vi) (Com	nplete Pari	tII)					
9	Γ	An organiza	ation that norma	ally receives (1) more than	331/3% 0	fits supp	ort from c	ontributior	ıs, membe	rship fees	, and gr	oss
		receipts fro	m activities rel	ated to its exempt functions	s—s ubject	to certair	n exceptio	ns, and (2) no more	than 331/	'3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (less sectio	on 511 tax	x) from bu	sinesses	5
		acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complet	e Part III)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See S e	ct ion 509((a)(4). (Se	ee instruc	tions)	
11	Γ	An organiza	atıon organızed	and operated exclusively fo	r the bene	fit of, to p	erform the	functions	of, or to o	arry out t	he purpo	ses of
				orted organizations describe						Section 5	09(a)(3)).Check
				type of supporting organiza								
_	_	a ∏T				- Function			d			
e	ı	•	- '	rtify that the organization is agers and other than one or			•			•	•	
		section 50		agers and other than one or	more pub	iici, supp	orteu orgu	mzations (acsembed	III Section	, 505 (u)	(1)01
f		If the organ	nization receive	d a written determination fro	m the IRS	5 that it is	a Type I,	Type II o	r Type III	supportin	ng organi	zation <u>,</u>
		check this						6.11				
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
			•	ng body of the the supported		-	•		. ,	11g		
			· -	erson described in (i) above	_					11g(+
			•	ty of a person described in (bove?				11g(+
h				nation about the organizatio			supports					
			J	, and the second	•	•	• •					
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did)	ou notify	(vi) I	s the	(vii) A	mount of
		oorted			_	organization in the organ				ation in	sup	port?
	Organization			above or IRC section		listed in		i) of your		rganized		
				(See Instructions))		verning ment?	sup	oort?	In the	US?		
					Yes	No	Yes	No	Yes	No	†	
					1.63	110	1.63	1.10	1.03	1,10		
						 				 		

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, 160, 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						
c	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

lf th	e organization answered "Ye	t have NOT filed Form 5768 (elections," to Form 990, Part IV, Line 5		(h)) Complete Part II-B Do r	not complete Part II-A
N a	ection 501(c)(4), (5), or (6) organi ame of the organization NDOLPH-MACON COLLEGE	zations complete Part III			itification number
Par	To be completed by	y all organizations exem	nt under section	54-0505940	527
		e the instructions for Schedu		- Joi(e) and section	
1	Provide a description of the or	ganızatıon's dırect and ındırect po	olitical campaign act	ivities in Part IV	
2	Political expenditures				\$
3	V olunteer hours				
Par	rt I-B To be completed to for Schedule C for d	oy all organizations exem etails.)	pt under section	n 501(c)(3). (See the	instructions
1	Enter the amount of any excis	e tax incurred by the organization	under section 4955		\$
2	Enter the amount of any excis	e tax incurred by organization ma	nagers under section	n 4955	\$
3	If the organization incurred in	a section 4955 tax, did it file Fori	m 4720 for this year	?	☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
ь	If "Yes," describe in Part IV				
Par		oy all organizations exem s for Schedule C for details.)	pt under section	n 501(c), except sect	tion 501(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exemp	ot function activities	\$
2	Enter the amount of the filing of 527 exempt funtion activities	organızatıon's ınternal funds contr	ributed to other orga	nızatıons for section	\$
3	Total of direct and indirect exe 1120-POL, line 17b	empt function expenditures Add I	ines 1 and 2 and ent	er here and on Form	\$
4	Did the filing organization file l	Form 1120-POL for this year?			☐ Yes ☐ No
5	were made Enter the amount political contributions receive	nd Employer Identification Numbe paid and indicate if the amount wa d and promptly and directly delive action committee (PAC) If addition	s paid from the filing red to a separate po	j organization's own interna blitical organization, such a	l funds or were s 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-
		1			1

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

Cat No 50084S

Schedule C (Form 990 or 990-EZ) 2008

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						
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

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form **5768** (election under section **501(h)).** (See the instructions for Schedule C for details.)

	· · · · · · · · · · · · · · · · · · ·	(a	1)	(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?		Νo	
Ь	Paid staff or management (include compensation in expenses reported on lines c through i)?		Νο	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo	
i	Other activities If "Yes," describe in Part IV	Yes		13,534
j	Total lines 1c through			13,534
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo	
ь	If "Yes" enter the amount of any tax incurred under section 4912			
c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912		Ī	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	t III-A To be completed by all organizations exempt under section 501(c)(4),	section	501(c)(5), or

section 501(c)(6). (See the instructions for Schedule C for details.)

			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 \$

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

Dues, assessments and similar amounts from members

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

Ident if ier	Return Reference	Explanation
Part II-B, Line 11	Explanation of Other Lobbying Activities	The College is a member of the Council of Independent Colleges in Virginia, an association of 27 independent colleges and universities CICV works to promote the interests of non-profit, independent higher education in Virginia CICV worked to initiate and continues to promote the states non-need based tuition assistance program for Virginia students attending a private institution Additionally, CICV monitors legislative and regulatory actions which affect the membership by a presence during the General Assembly sessions to review proposed legislation and interacting with various administrative agencies CICV is engaged in promoting the awareness of Virginias independent colleges to potential students through publications and by sponsoring VA Private College Week CICV also provides analyzed data to member institutions and appropriate state agencies to promote ventures where efficiencies can be achieved by the participation of a group of institutions. The College pays a membership based upon student population and is unaware of the amount of funding expended on the various projects of CICV.

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

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ 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.

Employer identification number Name of the organization RANDOLPH-MACON COLLEGE

		54-0505940			
art I Organizations Maintaining Donor A organization answered "Yes" to Form 99		Funds or Accounts. Complete if the			
organization anomered 100 to 101m 3.	(a) Donor advised funds	(b) Funds and other accounts			
Total number at end of year					
Aggregate Contributions to (during year)					
Aggregate Grants from (during year)					
Aggregate value at end of year					
Did the organization inform all donors and donor adv funds are the organization's property, subject to the		onor advised Yes No			
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the beinpermissible private benefit?					
art II Conservation Easements. Complete	ıf the organization answered "Yes	" to Form 990, Part IV, line 7.			
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space	ion or pleasure)	an historically importantly land area certified historic structure			
Complete lines 2a-2d if the organization held a qual on the last day of the tax year	lified conservation contribution in the fo	rm of a conservation easement Held at the End of the Yea			
Total number of conservation easements		2a			
	•	2b			
, otal acroage restricted by conservation casemen					
	Number of conservation easements on a certified historic structure included in (a) 2c				
Number of conservation easements included in (c)	•	2d			
Number of conservation easements modified, transf	erred, released, extinguished, or termina	ated by the organization during			
the taxable year ►					
Number of states where property subject to conserv	ation easement is located ►				
Does the organization have a written policy regardin enforcement of the conservation easements it holds		olations, and Yes No			
Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during t	he year 🕨			
A mount of expenses incurred in monitoring, inspect	-				
Does each conservation easement reported on line $(170(h)(4)(B)(I))$ and $(170(h)(4)(B)(II))$?	2(d) above satisfy the requirements of s	ection Yes No			
In Part XIV, describe how the organization reports or balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financ				
Complete if the organization answered	"Yes" to Form 990, Part IV, line 8.	<u> </u>			
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 file.	l for public exhibition, education or rese	arch in furtherance of public service,			
If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or researc	•			
(i) Revenues included in Form 990, Part VIII, line 1	L	► \$			
(ii) Assets included in Form 990, Part X		▶ \$ 1,226,555			
If the organization received or held works of art, hist following amounts required to be reported under SFA		s for financial gain, provide the			
Revenues included in Form 990, Part VIII, line 1		▶ \$			
Assets included in Form 990, Part X					

<u>ar'</u>	Organizations Maintaining Collections of Art	t, His	tori	<u>cal Treası</u>	ires, or Othe	<u>r Similar Asse</u>	ets (co	ntınued)
3	Using the organization's accession and other records, check an items (check all that apply)	ny of th	ne foll	owing that ar	e a sıgnıfıcant u	se of its collectio	n	
а	Public exhibition	d	\vdash	Loan or exc	hange programs			
b	Scholarly research e Other							
С	Preservation for future generations							
4	Provide a description of the organization's collections and expla Part XIV	ain hov	w they	further the	organization's ex	empt purpose in		
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Vo							
Pai	rt IV Trust, Escrow and Custodial Arrangements.				nızatıon answ	ered "Yes" to F	orm 9	90,
	Part IV, line 9, or reported an amount on Form 9	90, Pa	art X	, lıne 21.				
1a	Is the organization an agent, trustee, custodian or other interm included on Form 990, Part X?	ediary	for c	ontributions	or other assets r		Yes	┌ No
b	If "Yes," explain why in Part XIV and complete the following tab	ole						
						A mo	unt	
С	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 Form 990, Part X, lin	ne 21?				Г	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Complete if the organization							
ı _	(a)Current Year Beginning of year balance 127,907,075	<u> </u>)Prior	Year (c)Ti	wo Years Back (d)	Three Years Back (6	≘) Four Ye	ears Back
la L	Beginning of year balance	_						
b	Investment earnings or losses28,490,056	_						
c d	Grants or scholarships	_						
e	Other expenditures for facilities 4,303,907	_						
	and programs	_						
f	Administrative expenses	_						
g	End of year balance	<u> </u>						
2	Provide the estimated percentage of the year end balance held	as						
а	Board designated or quasi-endowment 🕨 55 000 %							
Ь	Permanent endowment 🕨 37 000 %							
c	Term endowment ► 8 000 %							
За	Are there endowment funds not in the possession of the organiz	ation	that a	re held and a	administered for	the		
	organization by					2-(:)	Yes	No
	(i) unrelated organizations		• •			3a(i) 3a(ii)	Yes	
b	(ii) related organizations					<u> 3a(11)</u> 3b	1 163	
1	Describe in Part XIV the intended uses of the organization's en							
aı	rt VI Investments—Land, Buildings, and Equipme				art X, line 10.			
	Description of investment		(a)	Cost or other s (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Boo	ok value
la	Land				2,927,072			2,927,07
ь	Buildings	•			62,840,402	25,929,251		5,911,15
	Leasehold improvements				308,834	21,876		286,95
d	Equipment				15,459,556	11,802,744		3,656,812
e	Other				1,437,667			1,437,667

45,219,660

Tall vii Investments—Other Securities. See	roi iii 990, Part X, iiile 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		
inancial derivatives and other financial products		Cost of the of year market value		
Closely-held equity interests				
Other CASH AND TEMPORARY INVESTMENTS	5,709,978			
ther MARKETABLE ALTERNATIVE ASSETS	15,288,202			
Other NONMARKETABLE ALTERNATIVE ASSETS	5,959,682			
Other REAL ESTATE/MORTGAGES AND OTHER				
THE REAL ESTATE/MORIGAGES AND OTHER	2,922,809			
otal. (Column (b) should equal Form 990, Part X, col (B) line 12)	29,880,671			
		12		
art VIII Investments—Program Related. Sec		L3. (c) Method of valuation		
(a) Description of investment type	(b) Book value	Cost or end-of-year market value		
otal. (Column (b) should equal Form 990, Part X, col (B) line 13)				
Part IX Other Assets. See Form 990, Part X, III	ne 15.			
(a) Descrip		(b) Book value		
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				
NNUITIES PAYABLE	1,317,728			
OST RETIREMENT BENEFIT LIABILITY	7,676,583			
EFUNDABLE LOAN PROGRAMS	2,322,101			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	11,316,412			

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	45,5/2,62
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	57,327,999
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-11,755,378
4	Net unrealized gains (losses) on investments	4	-19,863,323
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-19,863,32
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-31,618,70
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		· · · · · ·
1	Total revenue, gains, and other support per audited financial statements	1	11,899,24!
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		· · · ·
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 938,272		
e	Add lines 2a through 2d	2e	-18,925,05
3	Subtract line 2e from line 1	3	30,824,296
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b 14,748,325		
c	Add lines 4a and 4b	4c	14,748,32!
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	45,572,62
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Reti	ırn
1	Total expenses and losses per audited financial statements	1	43,517,946
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	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	938,272
3	Subtract line 2e from line 1	3	42,579,674
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		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	14,748,32!
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)		57,327,999

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

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 III, Line 4		Randolph-Macon College maintains a collection of original art which serves as a primary source for research, education and edification Built around a donation of Oriental Art from the estate of Senator Hugh Scott, an alumnus of the college, the present collection has been formed mostly from donations to further the permanent holdings in art for the benefit of faculty and students. No aspect or item from the permanent collection is offered for sale or purchase, the collection remains intact for academic study.

Employer identification number

OMB No 1545-0047

2008

Open to Public Inspection

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service 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.

Schools

Name of the organization RANDOLPH-MACON COLLEGE

54-0505940 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 COLLEGE'S NON-DISCRIMINATORY POLICY IS STATED IN THE COLLEGE CATALOG, ADMISSIONS BROCHURES AND IN RECRUITING MATERIALS 4 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 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 h Other extracurricular activities? 5h 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

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DLN: 93493137045020

OMB No 1545-0047

Department of the Treasury

(Form 990 or 990-EZ)

SCHEDULE G

🟲 Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV,

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public

Internal Revenue Service	lines 17, 18, or 19), and by organiz	ations tha	t enter more than \$15,000 on F	Inspection		
Name of the organization RANDO LPH-MACON CO					Employer ider 54-0505940	ntification number	
Part I Fundraisir	ng Activities. Com	plete if the	organız	ation answered "Yes	to Form 990, Part IV	', line 17.	
a	ns ons ons itations				f non-government grants f government grants aısıng events		
b If "Yes," list the ten	, n highest paid individua	ls or entities	(fundraı		I fundraising activities? ments under which the fui uired to complete this ta		
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) [fundraise custod contro contribut	r have y or ol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
GRENZEBACH GLIER &	CAMPAIGN READINESS ASSESSMENT	Yes	No	0	19,205	0	
Total	1	1 1					

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

			(a) Event #1	(b) Event #2	(c) O ther Events	(d) Tot (Add col		
			(event type)	(event type)	(total number)		(0)	
至	1	Gross receipts						
Revenue	2	Less Charitable contributions						
	3	Gross revenue (line 1 minus line 2)						
	4	Cash Prizes						
s မေ	5	Non-cash Prizes						
Expenses	6	Rent/Facility costs						
	7	Other direct expenses						
Direct	8	Direct expense summary Add lin	es 4 through 7 ın columr	n(d)	🛌			
	9	Net income summary Combine li	·	-				
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	art IV, line 19, or repo	orted more	e than	
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total col (a) thr		
<u>~</u>	1	Gross revenue						
မ မ	2	Cash prizes						
pens	3	Non-cash prizes						
Direct Expenses	4	Rent/facility costs						
₽ B	5	Other direct expenses						
	6	Volunteer labor	┌ Yes%	┌ Yes	┌ Yes%			
	7	Direct expense summary Add line	s 2 through 5 ın column	(d)				
	8	Net gaming income summary Com	bine lines 1 and 7 in col	umn (d)	🕨			
9		er the state(s) in which the organiza the organization licensed to operate		·		· 9a	Yes	No
a		No," Explain						
	If"	, ,						
a b	— We	re any of the organization's gaming l Yes," Explain	icenses revoked, suspe	nded or terminated during	g the tax year?	10a		
a b 10a	Wei	re any of the organization's gaming l				10a		

			
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

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

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

OMB No 1545-0047

2008

DLN: 93493137045020

Schedule I (Form 990) 2008

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

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

Open to Public Inspect ion

Name of the organization						Employer identi	fication number
RANDOLPH-MACON COLLEGI	Ē					54-0505940	
Part I General Inform	nation on Gra	nts and Assistance	9			·	
Does the organization ma the selection criteria used Describe in Part IV the or	d to award the gra rganızatıon's proc	nts or assistance? edures for monitoring th	e use of grant funds in t	he United States			
Form 990, Part I Part IV and Scho	V, line 21 for a edule I-1 if addi	ny recipient that rece tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the oil if no one recipient rece	eived more than \$5,	
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
2 Enter total number of seconganizations					•		
3 Enter total number of other							<u> </u>

Cat No 50055P

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, P	art IV, line 22.
	Use Schedule I-1 (Form 990) if additional 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
COLLEGE DESIGNATED (UNFUNDED) GRANTS AND SCHOLARSHIPS	1150	12,832,092			
DONOR RESTRICTED (FUNDED) GRANTS AND SCHOLARSHIPS	295	1,829,332			
FEDERAL SUPPLEMENTAL GRANTS	84	86,901			

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

Ident if ier	Return Reference	Explanation

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DLN: 93493137045020

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

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

Name of the organization	Employer identification number
RANDOLPH-MACON COLLEGE	
	54 0505040

|54-0505940 **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 First class or charter travel Housing allowance or residence for personal use 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 Compensation survey or study Independent compensation consultant 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

Cat No 50053T

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	W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base (ii) Bonus & incentive compensation		(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
ROBERT R LINDGREN	(1) (11)	256,319		1,539	31,700	42,737	332,295	178,472
JOHN A AHLADAS	(ı) (ıı)	145,090			13,245	288	158,623	77,821
WILLIAM W JOHNSTON	(ı) (ıı)	139,907			12,725	8,008	160,640	83,365
DIANE M LOWDER	(ı) (ıı)	144,023		5,250	15,800	8,562	173,635	85,820
m THOMAS INGE	(ı) (ıı)	134,361			11,691	6,166	152,218	76,108
	(ii)							
	(i)							
	(ii) (i)							
	(ii)							
-	(i)							
	(ii)							
	(i)							
	(ii)							
	(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	Return Reference	Explanation
-		
	·	

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service To be completed by organizations that answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O.

Name of the organization
RANDOLPH-MACON COLLEGE

Employer identification number

54-0505940

										54-0505	4 0			
Pa	Bond Issues (Required	for 2008)								•				
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Des	cription of	Purpose	(g) De	eased	Issuer	
											Yes	No	Yes	No
A 	INDUSTRIAL DEVELOPMENT AUTHORITY OF THE TOWN OF ASHLAND VIRGINIA	52-1353936		12-15-2	2004	4,9	900,000	RENOVATE DORMITORIES, REFURBISH GYM, UPGRADE IVAC IN GYM & ADDITIONAL DORMS			x		x	
Pa	rt II Proceeds (Optional for 2	2008)				1				1				
	Takal Day and de of Lance						В	<u> </u>	<u> </u>	D		1	E	
1	Total Proceeds of Issue				4,900,000									
2	Gross Proceeds in Reserve Funds													
3	Proceeds in Refunding or Defeasance Escrows													
4	O ther Unspent Proceeds													
5	Issuance Costs from Proceeds				59,895									
6	Working Capital Expenditures from Proceeds													
7	Capital Expenditures from Proceed	ls			4,840,105									
8	Year of Substantial Completion			20	07			•				•		
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	s	No
9	Were the bonds issued as part of a	current refunding issue	7		х									
10	Were the bonds issued as part of a	n advance refunding iss	ue?		Х									
11	Has the final allocation of proceeds	s been made?		Х										
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?			Х										
Pai	TIIII Private Business Use ((Optional for 2008)						_						
			A	ı	В	B	C	:	D			E		
				Yes	No	Yes	No	Yes	No	Yes	No	Yes	i	No
1	Was the organization a partner in a which owned property financed by t		er of an LLC,		Х									
2	Are there any lease arrangements which may result in private busines		nced property		Х									
For	Paperwork Reduction Act Notice, see the	Instructions for Form 99	0.			Cat No 501	93E			Sch	nedule K (Form 99	0) 2008	

Schedule K (Form 990) 2008

Part III Private Business Use (Continued)

			Α		В		C		D		E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		Х								
3b	A re there any research agreements with respect to the financed property which may result in private business use?		Х								
3с	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		×								
4	Enter the percentage of financed property used in a private business use by entities other than a 501(c)(3) organization or a state or local government	0 %									
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another 501(c)(3) organization, or a state or local government	0 %									
6	Total of lines 4 and 5		0 %								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	х									
Par	t IV Arbitrage (Optional for 2008)					T				T	
			A	В		С		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T been filed wth respect to the bond issue?		Х								
2	Is the bond issue a variable rate issue?		Х								
3a	Has the organization or the government issuer identified a hedge with respect to the bond issue on its books and records?		Х								
b	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х								
b	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		х								
5	Were any gross proceeds invested beyond an available temporary period?		Х								
6	Did the bond issue qualify for an exception to rebate?		Х								

DLN: 93493137045020

OMB No 1545-0047

Open to Public Inspection

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

Name of the organization RANDOLPH-MACON COLLEGE

Employer identification number

Do	Tunes of Dronouty				54-0505940			
Pa	rt I Types of Property	(a) Check If	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d) Method of de reven	etermi	nıng	
		applicable		1 g				
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional Interests							
	Books and publications	X		2,424	donor value			
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	30	662,751	ave high/low at trans	sfer		
10	Securities—Closely held stock $$.							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Qualified conservation contribution (other)							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
	EQUIPMENT							
25	& Other (describe <u>FURNITURE</u>) ATHLETIC	x	2	1,378	DONOR VALUE			
26	Other (describe SUPPLIES)	×	3	2,593	DONOR VALUE			
	OTHER							
27	Other (describe <u>SUPPLIES</u>)	X	6	5,450	donor value			
	Other (describe		1.0	24 225	JONOB WALLE			
105	SPITALITIY)	X	16	,	donor value			
20	Other (describe other)		<u> </u>		donor value			
29	Number of Forms 8283 received which the organization complete			ar for contributions for	29			
	Acknowledgement		•		l l			
							Yes	No
30a	During the year, did the organization hold for at	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it must			
	least three years from the date of			not required to be used for e	exempt purposes			
	for the entire holding period? .					30a		No
	If "Yes", describe the arrangeme							
31	Does the organization have a gif	t acceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part	ies or related organizations	to solicit, process, or sell i	non-cash	32a		No
b	If "Yes", describe in Part II							
	If the organization did not report	revenuesı	n Column (c) for a type of p	roperty for which Column (a	a) is			

checked, describe in 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.			
Identifier	ReturnReference	Explanation	
240111111	Notal III Colored	Explanation	
	1	1	

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DLN: 93493137045020

SCHEDULE O (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.

2008

Open to Public
Inspection

Name of the organization RANDOLPH-MACON COLLEGE Employer identification number

54-0505940

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		Process for reviewing 990. The Treasurer, Controller and President consult to determine that a draft of the 990 form is accurate to the best of their knowledge. The draft is then made available to all members of the BOT electronically. Corrections, comments and suggestions from all members are compiled and incorporated into the return before final filing.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Annually each fall the Assistant Secretary to the Board of Trustees distributes the conflict of interest disclosure statements to the trustees and to covered employees. He is responsible for ensuring that all distributed statements are completed and returned and reviewed for potential conflicts. The Vice President for Finance and Administration reports the results of the questionnaires to the Audit Committee of the Board. The Audit Committee reports conflicts to the full Board for appropriate resolution.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Yes Initially, a Board committee appointed to hire a President works with professional search consultants for hiring. The Compensation Committee of the Board used multiple benchmarks to determine an employment package, the results of which deliberation are borne out by the salary letter signed by the Chair of the Board. These steps were followed in hiring a new President in early 2006. The Compensation Committee meets as needed to evaluate the performance of the President and to determine compensation adjustments based on current benchmarking information.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 18		UPON REQUEST

ldentifier	Return Reference	Explanation	
Form 990, Part VI, Section C, line 19		UPON REQUEST	

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		THE AUDIT COMMITTEE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 1	CONTINUATION OF MISSION STATEMENT	At Randolph-Macon the maturation and testing of the skills, values, and character required for a lifetime of challenges extends beyond the classroom Students are encouraged to meet with faculty both socially and intellectually, and they have the opportunity to participate in a variety of extra-curricular activities. Interaction within the college community is assured by residential environment and an enrollment of approximately one thousand. Located in Ashland, Virginia Randolph-Macon College offers a curriculum and a cultural life enriched by the close proximity of Metropolitan Richmond and Washington, D.C. A Randolph-Macon education conveys a sense of life defined by historical continuity and ethical responsibility. Founded by Methodists in 1830, Randolph-Macon is an independent college that retains a relationship with the United Methodist Church. Through this living tie the College draws strength from a religious tradition that nurtures creative social change and personal accountability. Randolph-Macon believes that a liberal arts education challenges the intellect, imagination, and character. Graduates of the College have the capacity to realize their potential as professionals, leaders, and lifelong learners. The comprehensive nature of a liberal arts education at Randolph-Macon College prepares students to respond to the changing career opportunities and to meet life's challenges with confidence, enthusiasm, and ethical awareness.

ldentifier	Return Reference	Explanation
FORM 990, PART IX, LINE 12	LINE 12 Advertising and promotion	Advertising and promotion expenses include, but are not limited to, the printing and publication of materials to make potential students aware of the College's programs and opportunities. This line also includes the expenses of publicizing events and activities sponsored by Alumni Relations, Office of Advancement, Athletics and other departments on campus to students, faculty, staff, alumni and the general public

ldentifier	Return Reference	Explanation
	LINE 24A OTHER SUPPLIES AND SERVICES	This amount includes purchases of supplies, equipment and maintenance expense as well as activities related to classrooms, laboratories, athletics programs and other departments

ldentifier	Return Reference	Explanation
SCHEDULE K	SCHEDULE K, SUPPLEMENTAL INFORMATION ON TAX-EXEMPT BONDS	General Form 8038 filed by Industrial Development Authority of the Town of Ashland, Virginia, was prepared using employer identification number 56-6001129 before receiving notification that their correct FEIN is 52-1353936. We have used this correct identifier in completing our Schedule K. Further, the Form 8038 reports on Educational Facilities Revenue Note (Randolph-Macon College Project), Series 2004A and B, our Schedule K reports on Series 2004A only. The period covered by Schedule K is the fiscal year, July 1, 2008-June 30, 2009. Part I line A, column (e) Issue price of Educational Facilities Revenue Note (Randolph-Macon College Project), Series 2004A and B is shown on Form 8038 as \$6,500,000. The issue price of Series 2004A alone was \$4,900,000. Part II line 5 Amount shown in column A is 100% issuance cost, no credit enhancement fees have been paid.

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

Cat No 51056K

Schedule O (Form 990) 2008

Software ID: Software Version:

EIN: 54-0505940

Name: RANDOLPH-MACON COLLEGE

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Ada										
	(B) Average hours per week	(C) Position (check all that apply)							(5)	(F)
(A) Name and Title		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
JOHN PHILIP COUGILL , TRUSTEE	1 00	Χ						0	0	0
A DOUGLAS DALTON , TRUSTEE	1 00	Х						0	0	0
RALPH R CROSBY JR , TRUSTEE	1 00	Х						0	0	0
MACON F BROCK JR , TRUSTEE	1 00	Х						0	0	0
CHARLES B King , TRUSTEE	1 00	Х						0	0	0
J W WHITING CHISMAN J , TRUSTEE	1 00	Х						0	0	0
JOHN P CLARKE MD , TRUSTEE	1 00	Х						0	0	0
JOHN c lee ıv , TRUSTEE	1 00	Х						0	0	0
S ANDREW BANKS , TRUSTEE	1 00	Х						0	0	0
ROBIN ANNE FLOYD , TRUSTEE	1 00	Х						0	0	0
DOUGLAS W FOARD , TRUSTEE	1 00	Х						0	0	0
JAMES A DAVIS , TRUSTEE	1 00	Х						0	0	0
EDMUND T DEJARNETTE , TRUSTEE	1 00	Х						0	0	0
PARKER O DILLARD , TRUSTEE	1 00	Х						0	0	0
THE REV MARK V OGREN , TRUSTEE	1 00	Х						0	0	0
JACK M ENOCH JR , TRUSTEE	1 00	Х						0	0	0
PATRICIA G HANBACK , TRUSTEE	1 00	Х						0	0	0
BARBARA L HOPKINS , TRUSTEE	1 00	Х						0	0	0
ALAN B RASHKIND , TRUSTEE	1 00	Х						0	0	0
STEVEN M PARKER , TRUSTEE	1 00	Х						0	0	0
DAVID B ROBINSON , TRUSTEE	1 00	Х						0	0	0
JAMES E SANDERLIN , TRUSTEE	1 00	Х						0	0	0
CHARLENE P KAMMERER , TRUSTEE	1 00	Х						0	0	0
DONALD E PERRY , TRUSTEE	1 00	Х						0	0	0
STEPHEN P LONG , TRUSTEE	1 00	Х						0	0	0
E JACKSON LUCK , TRUSTEE	1 00	Х						0	0	0
THOMAS G SHAFRAN , TRUSTEE	1 00	Х						0	0	0
HAROLD E STARKE JR , TRUSTEE	1 00	Х						0	0	0
ROBERT Earl RILEY , TRUSTEE	1 00	Х						0	0	0
CHARLES W WORNOM , TRUSTEE	1 00	Х						0	0	0

Form 990, Part VII - Section Aaa

Torin 330, rure VII Section Aud										
	(B) Average hours per week		(C tion (hat a	chec		I		(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(A) Name and Title		Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			
R DOUGLAS WHITE , TRUSTEE	1 00	Х						0	0	0
WILLIAM B KILDUFF , TRUSTEE	1 00	X						0	0	0
Anne D mcdougall , TRUSTEE	1 00	X						0	0	0
lee b spencer Jr , TRUSTEE	1 00	Х						0	0	0
CHARLES S WILSON JR , TRUSTEE	1 00	Х						0	0	0
DIANNE L REYNOLDS-CANE , TRUSTEE	1 00	X						О	0	0
BENJAMIN S SCHAPIRO , TRUSTEE	1 00	Х						0	0	0
JOHN N VANDERSYDE , TRUSTEE	1 00	Х						0	0	0
MICHAEL A JESSEE , TRUSTEE	1 00	Х						0	0	0
FRANK E LAUGHON JR , TRUSTEE	1 00	Х						0	0	0
ANNE NELSON MORCK , TRUSTEE	1 00	Х						0	0	0
DAVID E YAWARS , TRUSTEE	1 00	Х						0	0	0
ROBERT R LINDGREN , PRESIDENT	40 00			Х				257,858	0	74,437
JOHN A AHLADAS , TREASURER	40 00			Х				145,090	0	13,533
WILLIAM W JOHNSTON , PROVOST	40 00					Х		139,907	0	20,734
DIANE M LOWDER , VP FOR COLLEGE ADVANCEME	40 00					x		149,273	0	24,362
m THOMAS INGE , PROFESSOR	40 00					Х		134,361	0	17,857
JOHN CONKRIGHT , EXEC ASSISTANT TO PRES	40 00					Х		114,194	0	18,508
STEVEN W NAPE , dean of admissions & fin	40 00					x		107,616	0	11,976

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

Randolph-Macon is an undergraduate, coeducational college of the liberal arts. The purpose of a Randolph-Macon education is to develop the mind and the character of its students. They are challenged to communicate effectively, to think analytically and critically, to experience and appreciate the creative process, to develop qualities of leadership, and to synthesize what they know with who they are. At Randolph-Macon College the liberal arts constitute a comprehensive educational opportunity. The curriculum includes exposure both to broad perspectives and specific concepts. Students explore the natural and social sciences, the arts, and the humanities, while they also achieve a deeper understanding of the single discipline in which they major. They are guided in this endeavor by a faculty of teacher-scholars who are dedicated to the liberal arts and active in their professional disciplines and in the extra-curricular life of the campus. MISSION STATEMENT CONTINUED