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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public

^ Eo	rthe 7	2000 calend	lar vear	, or tax year beginning 06-01-200	9 and ending 05-31-20	10				•
				C Name of organization	and ending 03-31-20.			D Employer id	entifica	ntion number
_	ress cha	ange use	IRS	ITHACA COLLEGE		15-0532204				
— Nan	ne char	nge prin	elor ntor e. See	Doing Business As				E Telephone n		
– Initi	al retur	n Spe	e. see ecific truc-	Number and street (or P O box if ma	ıl ıs not delivered to street addr	ress) Room/si	suite	(607) 274-		-75.075
Ten	mınated			953 DANBY ROAD	G Gross receipts	s \$ 865,5	2/3,0/5			
- Ame	ended r	return	Ī	City or town, state or country, and ZI ITHACA, NY 148507002	P + 4	•				
App	lication	pending								
				e and address of principal officer GRECCI			s this ffiliate	a group retur		- Yes ▼ No
		9	953 DA	NBY ROAD		a l	IIIIIate	25 ′	,	res J No
			LIHACA	A,NY 148507002		1 ' '		affiliates inclu		☐ Yes ☐ No
Tax	k-exem	pt status 🔽	501(c)	(3) ◀ (insert no)	527			" attach a list exemption ni		ınstructıons) ►
w (ebsit e	:► WWW IT	THACA	EDU			отопр	exemption in	arriber	-
				on Trust Association Other		I Vear	of form	nation 1892	M State	of legal domicile NY
	rt I	Summar		on nast Association other F		L rear	01 10111	iation 1092	M State	or legal dofficile. Wi
Governance		COLLEGE II TO INCLUD LIBERAL AF HUMANITIE PROGRAMS INTEGRAL NONDENON ARTS STUD	N 1931 DE OTH RTS CU ES AND S, PROF PARTS MINAT: DIES T	EITHACA CONSERVATORY OF DURING THE EARLY DECADE ER PROFESSIONAL FIELDS, AI RRICULA THAT HAVE GRADUA SCIENCES AS A RESULT OF ESSIONAL AND LIBERAL STUI OF A TOTAL ACADEMIC PROCIONAL INSTITUTION OFFERIN HE COLLEGE SEEKS DIVERSIT LIFICATIONS, WITHOUT REGA	S OF THE TWENTIETH ON AT MID-CENTURY, TALLY EVOLVED INTO THE THIS UNUSUAL HISTOR COLLEGEMENT HERE TO LEGEMENT BODENT BODE	CENTURY, HE INSTIT HE LARGE A Y OF INTE GE ARE TO IS A FULL FIED PROO Y AND ADI	THE A TUTIO AND I ERWEA ODAY LY AC GRAM MITS	ACADEMIC FOR BEGAND DIVERSE SCAVING, TWO MUTUALLY CCREDITED, FOR FESAPPLICANT	PROGR EVELO HOOL DISTI SUPPO COED	AM EXPANDED PING THE OF INCT ORTIVE AND UCATIONAL, AL AND LIBERAL
6 2										
acumnes	2									;
] }		Number of voting members of the governing body (Part VI, line 1a)								33
•			Number of independent voting members of the governing body (Part VI, line 1b) Total number of employees (Part V, line 2a)							27
				. , , , , ,				5	·	5,648 0
		Total number of volunteers (estimate if necessary) Total gross unrelated business revenue from Part VIII, column (C), line 12							? 'a	
		_		ness taxable income from Form 9					ч ъ	-179,544
						-	Prior	Year	Cı	urrent Year
a.	8	Contributio	ons and	grants (Part VIII, line 1h) .		1	10,852,508		17,768,368	
Revenue	9			evenue (Part VIII, line 2g) .	-		29,858,783		260,024,553	
Кэу	10 11			ne (Part VIII, column (A), lines 3 art VIII, column (A), lines 5, 6d,	•	•	3,605,326		1,874,962	
	12			d lines 8 through 11 (must equa		ne		3,605,326		1,172,699
		12)		<u> </u>				35,730,401		280,840,582
	13			r amounts paid (Part IX, column			- 6	59,263,263		83,732,886
	14 15			r for members (Part IX, column (<i>f</i> mpensation, employee benefits (5-		+			
\$	15	10)	ther co	impensation, employee benefits (art 1x, column (x), imes	J-	11	12,353,956		113,422,519
Бхрепзев	16a	Profession	al fundr	aising fees (Part IX, column (A),	line 11e)			35,647		2,072
E E	b	Total fundrais	sıng expe	enses (Part IX, column (D), line 25) 🛌 2,	453,876					
	17			Part IX, column (A), lines 11a-1	•		53,858,563		66,942,061	
	18 19			dd lines 13–17 (must equal Par enses Subtract line 18 from line				45,511,429 -9,781,028		16,741,044
8 9 9 8		Kevende le	233 EXP	enses Subtract fine 10 from fine	12	Begin	nning	of Current	E	nd of Year
net Assets of Fund Balances	20	Total acces	to /Dort	· V line 16\			Ye			
d B	21			: X, line 16)				73,789,008 43,970,821		245,415,381
Fem	22		-	balances Subtract line 21 from				29,818,187		362,292,231
Par	t II	Signatu						•		· · · · · · · · · · · · · · · · · · ·
				jury, I declare that I have examined this prrect, and complete Declaration of pre						
Sign		*****				2	2011-04	1-15		
lere		Signature	of officer				Date	. ==		
				IANCE & ADMINISTRATIOn						
		Type or pr	rınt name	e and title	1					
		Preparer's signature	Jeffrey	J Gorsky	Date	Check if self-	_	Preparer's ident (see instruction		ımber
Paid Prens	rer'					empolyed 🕨				
Jse (rer's Only	Firm's name (if self-employ	ed),	P				EIN 🕨		
•	,	address, and a	ZIP + 4	200 E Buffalo St Suite 402			}	Phone no 🕨 (607) 27:	2-5550
		Ithaca, NY 14850 Phone no • (607) 272-5550								

Form 990 (2009)

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

TO PROVIDE A FOUNDATION FOR A LIFETIME OF LEARNING, ITHACA COLLEGE IS DEDICATED TO FOSTERING INTELLECTUAL GROWTH, AESTHETIC APPRECIATION, AND CHARACTER DEVELOPMENT IN OUR STUDENTS THE ITHACA COLLEGE COMMUNITY THRIVES ON THE PRINCIPLES THAT KNOWLEDGE IS ACQUIRED THROUGH DISCIPLINE, COMPETENCE IS ESTABLISHED WHEN KNOWLEDGE IS TEMPERED BY EXPERIENCE, AND CHARACTER IS DEVELOPED WHEN COMPETENCE IS EXERCISED FOR THE BENEFIT OF OTHERS A COMPREHENSIVE COLLEGE THAT SINCE ITS FOUNDING HAS RECOGNIZED THE VALUE OF COMBINING THEORY AND PERFORMANCE, ITHACA PROVIDES A RIGOROUSEDUCATION BLENDING LIBERAL ARTS AND PROFESSIONAL PROGRAMS OF STUDY OUR TEACHING AND SCHOLARSHIP ARE MOTIVATED BY THE NEED TO BE INFORMEDBY, AND TO CONTRIBUTE TO, THE WORLD'S SCIENTIFIC AND HUMANISTIC ENTERPRISES LEARNING AT ITHACA EXTENDS BEYOND THE CLASSROOM TO ENCOMPASS A BROAD RANGE OF RESIDENTIAL, PROFESSIONAL, AND EXTRACURRICULAR OPPORTUNITIES

2	Did the organizatio	n undertake any signific	ant program se	rvices during the year	r which were not listed on	
	the prior Form 990	or 990-EZ?				Yes 🔽 No
	If "Yes," describe t	hese new services on S	chedule O			
3	Did the organization services?	n cease conducting, or	make significant	t changes in how it co		Yes ✓ No
	If "Yes," describe t	hese changes on Scheo	lule O			
4	Section 501(c)(3)		tions and sectio	n 4947(a)(1) trusts a	largest program services by exare required to report the amoun service reported	•
4a	(Code) (Expenses \$	165,518,866	ıncludıng grants of \$	83,732,886) (Revenue \$	212,673,125)
		ARCH, AND PUBLIC SERVICE NAL AREAS AND THE ARTS AN			JDENTS AND OFFERS PRIMARILY UNDE LEGE'S PRIMARY MISSION	ERGRADUATE DEGREES IN
4b	(Code) (Expenses \$	26,895,074	including grants of \$) (Revenue \$	47.351.428)
70	,	, , , ,	<i>, ,</i>	,	BOOKSTORE AND ENHANCE THE COLL	, , ,
4c	(Code) (Expenses \$	17,473,696	including grants of \$) (Revenue \$	0)
					SERVICES, CONTINUING EDUCATION, OF INSTRUCTION, F	
	Other program se	rvices (Describe in Sc	hedule O) See a	lso Additional Data f	or Description	
	(Expenses \$	•	cluding grants of) (Revenue \$)
4e	Total program sei	vice expenses ► \$	229,068,670)		

Dart TV	Checklist	of Deau	irad S	chadulae
	CHECKHSI	. vi keuu	neu si	uneuures

			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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or 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	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ļ	ļ	•
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

	Charlist of Danish d Calcadalas (continued)			Page
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States 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 of grants and other assistance to individuals in the United States 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, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? 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 line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		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, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? 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	Yes	
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? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance	art V	Statements	Regarding	Other IRS	Filings and	Tax (Compliance
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	otatements Regarding ether and a mingo and rax 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			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 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 (see instructions)	2b	Yes	
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶UK See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	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
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
а	Prohibited Tax Shelter Transaction?	5c 6a		Νο
b	organization solicit any contributions that were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
d	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		Νo
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
1	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	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)			
2a	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			

ITHACA, NY 148507002

(607) 274-3118

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

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 33			
b	Enter the number of voting members that are independent 1b 27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	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		Νο
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	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply			
19	Own website Another's website Vupon request Describe in Schedule Owhether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the CARL SGRECCI VP OF FINANCE & ADMIN 953 DANBY ROAD ITHACA COLLEGE	ıe orga	nızatıor	n -

Part VIII 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 Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	Posi t	(C tion (hat a	ched	ckal)	I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee Individual trustee or director		Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b Total	. •	2,615,419	0	417,166
----------	-----	-----------	---	---------

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 123

			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	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	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

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CHRISTA CONSTRUCTION LLC 119 VICTOR HEIGHTS PARKWAY VICTOR, NY 14584	CONSTRUCTION MANAGEMENT	9,234,508
The Pike Company One Circle Street Rochester, NY 14607	General Contractor - Athletics & Events	7,663,163
Williams Scotsman Inc 8211 Town Center Drive Baltimore, MD 21236	Manufacturing and ConSTRUCTION MANAGEMEN	2,205,103
STREETER ASSOCIATES 101 EAST WOODLAWN AVE ELMIRA, NY 14902	CONSTRUCTION MANAGEMENT	2,141,448
Holt Architects PC 217 N Aurora Ave Ithaca, NY 14850	Architectural Services	1,767,766
2 Total number of independent contractors (including but not limited to those listed above \$100,000 in compensation from the organization ►50) who received more than	

Page 8

Form 99		<u> </u>						Page 9
Part V	<u>/##</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
# # # # # # # # # # # # # # # # # # #	1a	Federated cam	paıgns 1a					
or in	ь	Membership du	es 1b					
ું #	c	Fundraising eve	ents 1c					
<u>≅</u> ,⊒	d		zations 1d					
E, E	e	Government grant		3,417,192	ļ			
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no Noncash contri	butions included in	14,351,176				
and	h	lines 1a-1f \$ _ Total. Add lines	s 1a-1f	▶	17,768,368			
				Business Code				
Program Service Revenue	2a	TUITION & FEES		900,099	212,673,125	212,673,125		
£6 ₹	ь	ROOM		721,000	31,100,343	31,100,343		
93	c	BOARD		722,210	11,134,074	11,134,074		
ē.	d	SALES-EDUCATION	I DEPART	611,710	3,862,549	3,862,549		
ج د	e	CONFERENCES		611,710	1,254,462	1,254,462		
⊈ E	f	All other progra	am service revenue					
ج	 g	Total. Add lines	s 2a-2f		260,024,553			
	3		ome (including dividen		200,021,333			
			aramounts)	. ⊨	2,433,907		-184,059	2,617,966
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties						
			(ı) Real	(II) Personal				
	6a	Gross Rents Less rental						
	b	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)	▶				
	7a	Gross amount from sales of assets other than inventory	(i) Securities 579,394,437	(II) O ther 138,020				
	ь	Less cost or other basis and sales expenses	579,911,951	179,451				
	С	Gain or (loss)	-517,514	-41,431	550.045			550.045
	d 8a		rom fundraising		-558,945			-558,945
Other Revenue	ь	events (not inc \$ of contributions See Part IV, lin Less direct ex	luding reported on line 1c) ne 18 a penses b					
၁	C O=		(loss) from fundraising (events F				
	9a		rom gaming activities ne 19 a					
	Ь		penses b (loss) from gaming activ					
	10a	Gross sales of returns and allo	ınventory, less	vittes				
	.		a	7,023,293				
	Ь		oods sold b (loss) from sales of inve	4,643,091	2,380,202		57,978	2,322,224
	С	Miscellaneous		Business Code	2,300,202		31,310	2,322,224
	11a	ALL OTHER IN		900,004	2,045,517		12,342	2,033,175
	ь	Gain on Termin		900,004	746,090		·	746,090
	c	write off of Coll		900,099	-1,836,888			-1,836,888
	d	All other reven		, -	-2,162,222			-2,162,222
	e	Total. Add lines	ı					. ,
	12			•	-1,207,503 280,840,582	260,024,553	-113,739	3,161,400

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

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 no	ot include amounts reported on lines 6b, b, 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	83,732,886	83,732,886							
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	1,585,756		1,585,756						
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	83,032,100	68,486,782	13,078,137	1,467,181					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	5,406,222	3,557,294	1,752,697	96,231					
9	Other employee benefits	17,322,224	11,605,890	5,407,998	308,336					
10	Payroll taxes	6,076,217	3,949,541	2,017,304	109,372					
11	Fees for services (non-employees)									
а	Management									
b	Legal	41,585	5,822	35,763						
c	Accounting	162,665	6,507	156,158						
d	Lobbying									
e	Professional fundraising See Part IV, line 17	2,072			2,072					
f	Investment management fees	979,480		979,480						
g	Other	9,273,210	7,562,303	1,710,907						
12	Advertising and promotion	240,838	108,377	81,885	50,576					
13	Office expenses									
14	Information technology									
15	Royalties									
16	Occupancy	5,851,907	5,793,388	58,519						
17	Travel	3,692,870	2,954,296	646,253	92,321					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest	9,244,376	9,244,376							
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	15,682,942	14,898,795	784,147						
23	Insurance	2,656,052	1,593,631	1,062,421						
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	SUPPLIES	4,488,420	3,904,925	561,053	22,442					
b	RENTALS AND LEASES	3,350,987	2,546,750	770,727	33,510					
С	REPAIRS AND MAINTENANCE	2,969,521	2,227,141	712,685	29,695					
d	ENTERTAINMENT	2,299,866	2,299,866							
e	LIVING EXPENSES	1,680,968	1,680,968							
f	All other expenses	4,326,374	2,909,132	1,175,102	242,140					
25	Total functional expenses. Add lines 1 through 24f	264,099,538	229,068,670	32,576,992	2,453,876					
26	Joint costs. Check here ► ☐ 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									

Pa	rt X	Balance Sheet					
-					(A)		(B)
	Г				Beginning of year		End of year
	1	Cash—non-interest-bearing			109,915		140,276
	2	Savings and temporary cash investments	•		81,386,398		81,583,720
	3	Pledges and grants receivable, net	•		17,195,123	3	16,245,111
	4	Accounts receivable, net			1,598,758	4	2,419,895
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II		n 4958(f)(1)) and			
		Schedule L				6	
ets	7	Notes and loans receivable, net			8,203,474	7	9,060,084
ssets	8	Inventories for sale or use			819,676	8	1,055,535
⋖	9	Prepaid expenses and deferred charges			5,307,720	9	4,175,413
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	489,072,168			
	ь	Less accumulated depreciation	10b	171,519,126	288,041,432	10c	317,553,042
	11	Investments—publicly traded securities	· · ·		95,020,459	11	102,526,012
	12	Investments—other securities See Part IV, line 11			70,303,915	12	71,964,383
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			5,802,138	15	984,141
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			573,789,008	16	607,707,612
	17	Accounts payable and accrued expenses .			32,152,692	17	34,010,477
	18	Grants payable				18	
	19	Deferred revenue			5,411,038	19	6,332,289
_	20	Tax-exempt bond liabilities	ı		145,379,427	20	141,633,305
es.	21	Escrow or custodial account liability Complete Part IV of Schedu	le D			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	,				
Lia		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	·			23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			61,027,664	25	63,439,310
	26	Total liabilities. Add lines 17 through 25			243,970,821	26	245,415,381
S		Organizations that follow SFAS 117, check here ▶ 🔽 and com	plete	lines 27			
Fund Balance		through 29, and lines 33 and 34.					
lar	27	Unrestricted net assets			233,849,017	27	258,154,663
Ва	28	Temporarily restricted net assets			61,948,698	28	69,858,309
pu	29	Permanently restricted net assets			34,020,472	29	34,279,259
교		Organizations that do not follow SFAS 117, check here ▶ ☐ a	nd cor	nplet e			
9		lines 30 through 34.					
35	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other for	unds		222 212 12=	32	000 000 000
Net	33	Total net assets or fund balances			329,818,187	33	362,292,231
	34	Total liabilities and net assets/fund balances			573,789,008	34	607,707,612

			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 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

JMB No 1545-004

2009

2005

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

ITHACA COLLEGE

Name of the organization

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

Public Charity Status and Public Support

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

Employer identification number

15-0532204

									13-033220				
	rt I			olic Charity Stat						tructions			
he o	organı	zation is	not a private	foundation because	eitis (Forlin	nes 1 throug	gh 11, check	only one box)				
1	Г	A churc	h, conventio	n of churches, or as	sociation of o	churches s e	ection 170(b)	(1)(A)(i).					
2	굣	A schoo	ol described	ın section 170(b)(1)	(A)(ii). (Att	ach Schedu	le E)						
3	Γ	A hospi	tal or a coop	erative hospital serv	vice organiza	ıtıon descrıl	oed in section	170(b)(1)(A	(iii).				
4	Γ		al research l's name, cit	organization operate y, and state	ed in conjunc	tion with a h	nospital desc	rıbed ın secti	on 170(b)(1)	(A)(iii). Ent	er the		
5	Γ	_	•	rated for the benefit	_	or university	y owned or op	erated by a g	jovernmental	unıt describ	ed in		
		section	170(b)(1)(<i>A</i>	(iv). (Complete Pa	rt II)								
6	Г	A federa	al, state, or l	ocal government or	governmenta	ıl unıt descr	ıbed ın sectio	n 170(b)(1)(A)(v).				
7	Γ	describe	ed ın	t normally receives a (Complete Pa		part of its s	support from a	a government	al unit or froi	m the genera	l public		
8	Γ	A comm	nunity trust o	described in section	170(b)(1)(A)(vi) (Com	plete Part II)					
9	Г	An orga	organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross										
		receipts	from activit	ties related to its ex	empt function	ns—subject	to certain ex	ceptions, and	d (2) no more	than 331/3%	6 of		
		ıts supp	ort from gro	ss investment incom	ne and unrela	ited busines	s taxable inc	ome (less se	ction 511 ta	x) from busıı	nesses		
		acquire	d by the orga	anızatıon after June 3	30,1975 Se	e section 5	09(a)(2). (Co	mplete Part I	III)	•			
10	Г	Anorga	nization org	anized and operated	exclusively	to test for p	ublic safety	See section 5 (09(a)(4).				
11	Γ	one or n	nore publicly	anized and operated supported organiza es the type of suppo b Type II	tions describ orting organiz	ed in sectional c	on 509(a)(1)	or section 50 11e through	9(a)(2) See	•	(a)(3).	. Check	
e f g	1	other th section If the or check tl Since A	an foundation 509(a)(2) Ganization r his box ugust 17, 2	x, I certify that the con managers and othe eceived a written de 006, has the organiz	er than one o	r more publ	icly supporte that it is a T	d organizatio ype I, Type I	ns described I or Type III	in section 5	09(a)(1) or	
			g persons? rson who dir	ectly or indirectly co	ntrols, eithe	r alone or to	gether with p	ersons descr	ibed in (ii)		Yes	No	
				overning body of the	•				()	11g(i)	+		
				r of a person describ						11g(ii)	+		
		` '	•	ed entity of a person	` ,		oove?			11g(iii			
h				, . g information about t							<u>′ </u>		
Name of (ii) (described on col supported EIN lines 1 - 9 above you				organızatı col (ı) lıst your gove	Ic the		nn col (i) of your col (i) or anization in organization in organization in organization in col (i) or col (i) or col (ii) or col (iii) organization in organiz		e ıon ın anızed	zed A mou			
				instructions))	Yes	No	Yes	No	Yes	No			
				**									
ot a	ı				İ			İ	İ		1		

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 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,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

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

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

Additional Data

Software ID:

Software Version:

EIN: 15-0532204

Name: ITHACA COLLEGE

0)

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 19,181,034 including grants of \$) (Revenue \$

STUDENT SERVICES STUDENT SUPPORT SERVICES INCLUDING ADMISSIONS, REGISTRAR, ATHLETICS, AND STUDENT CLUBS

THESE SERVICES CONTRIBUTE TO THE STUDENT'S EMOTIONAL AND PHYSICAL WELL-BEING

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(A) Name and Title	(B) Average hours per		tion (che	')	_	T	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
AMY DOONAN CRONIN TRUSTEE	1 00	Х						0	0	0
ARRIEN SCHILTKAMP TRUSTEE	1 00	х						0	0	0
CAROLEEN A FEENEY TRUSTEE	1 00	Х						0	0	0
DAVID AMES TRUSTEE	1 00	Х						0	0	0
DAVID FLEISHER II TRUSTEE	1 00	Х						0	0	0
DAVID STEWART TRUSTEE	1 00	х						0	0	0
DIANE FRANKL STORCK TRUSTEE	1 00	Х						0	0	0
FRANCILLE M FIREBAUGH TRUSTEE	1 00	х						0	0	0
GEORGE PINE TRUSTEE	1 00	Х						0	0	0
JOHN GALLAGHER JR TRUSTEE	1 00	х						0	0	0
JOHN MCCLUNG TRUSTEE	1 00	Х						0	0	0
JOHN FRACCHIA TRUSTEE	1 00	Х						62,838	0	11,780
JUDITH LINDEN TRUSTEE	1 00	х						0	0	0
KEITH WATTERS TRUSTEE	1 00	х						0	0	0
KURT WOLFGRUBER TRUSTEE	1 00	х						0	0	0
LAWRENCE SMITH TRUSTEE	1 00	х						0	0	0
T MICHAEL LONG TRUSTEE	1 00	х						0	0	0
MICHAEL ROGERS TRUSTEE	1 00	х						69,939	0	14,322
MICHAEL SERVENTI TRUSTEE	1 00	Х						0	0	0
RALPH SICILIANO TRUSTEE	1 00	х						0	0	0
KATHLEEN GARNER TRUSTEE	1 00	х						0	0	0
ROBERT KUR TRUSTEE	1 00	х						0	0	0
DAVID GIANNOTTI TRUSTEE	1 00	х						0	0	0
STEPHEN MCCLUSKI TRUSTEE	1 00	Х						0	0	0
ADELAIDE GOMER TRUSTEE	1 00	Х						0	0	0

	Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours		((tion (hat a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other		
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations		
SUSAN PERVI TRUSTEE	1 00	х						0	0	0		
SUSAN SCANLON TRUSTEE	1 00	х						0	0	0		
WALTER SMITH TRUSTEE	1 00	х						0	0	0		
CHRISTOPHER LEE TRUSTEE	1 00	х						0	0	0		
ED RIVERA TRUSTEE	1 00	х						0	0	0		
THOMAS ROCHON PRESIDENT	40 00			х				315,954	0	91,636		
KATHLEEN ROUNTREE PROVOST/VP	40 00			х				207,252	0	26,024		
C WILLIAM SCHWAB CHAIR	1 00			х				0	0	0		
LAWRENCE ALLEVA VICE CHAIR	1 00			х				0	0	0		
NANCY PRINGLE VP COLLEGE COUNSEL	40 00			х				193,847	0	23,759		
CARL SGRECCI VP FINANCE & ADMINISTRATIO	40 00			х				198,341	0	20,994		
ROCHELLE SEMMLER VP INSTITUTIONAL ADVANCEME	40 00			х				184,829	0	31,310		
BRIAN MCAREE VP STUDENT AFFAIRS & CAMPU	40 00			х				140,427	0	42,115		
Eric Maguire VP Enrollment Mgt	40 00			х				84,635	0	12,978		
JEFFREY LIPPITT ASSOC PROFESSOR	40 00					Х		151,651	0	27,213		
Mark Cordano AssOC PROFESSOR	40 00					х		157,133	0	20,466		
Leslie Lewis DEAN	40 00					Х		156,742	0	19,843		
Gwen Seaquist Professor	40 00					х		147,471	0	20,769		
DAVID NEWMAN DIR, HAMMOND HEALTH CTR	40 00					х		143,209	0	23,159		
PEGGY WILLIAMS FORMER PRESIDENT	40 00						х	401,151	0	30,798		

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

<u> </u>											
	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514						
TUITION & FEES	900,099	212,673,125	212,673,125								
RO O M	721,000	31,100,343	31,100,343								
BOARD	722,210	11,134,074	11,134,074								
SALES-EDUCATION DEPART	611,710	3,862,549	3,862,549								
CONFERENCES	611,710	1,254,462	1,254,462								

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
SUPPLIES	4,488,420	3,904,925	561,053	22,442
RENTALS AND LEASES	3,350,987	2,546,750	770,727	33,510
REPAIRS AND MAINTENANCE	2,969,521	2,227,141	712,685	29,695
ENTERTAINMENT	2,299,866	2,299,866		
LIVING EXPENSES	1,680,968	1,680,968		

DLN: 93493105009051

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

If the	organization	answered	"Yes,"	to Form	990, Part I\	/, Line 3,	or Form	990-EZ,	Part VI, I	ine 46 (F	Political C	ampaign	Activities),
then													
_													

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

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

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

Did the filing organization file Form 1120-POL for this year?

	ection 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Comple				•	
	re organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, li ection 501(c)(4), (5), or (6) organizations. Complete Part III	ine 35a	ı (rega	raing	proxy tax)	, tnen
	nme of the organization NACA COLLEGE	Emplo	yer ide	ntıfıca	tion numbe	er
111	ACA COLLEGE	15-05	32204	1		
aı	t I-A Complete if the organization is exempt under section 501(c) or is a	section	on 52	7 org	anizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Pa	rt IV				
2	Political expenditures		F	\$		
3	V olunteer hours			_		
Pai	rt I-B Complete if the organization is exempt under section 501(c)(3).					
1	Enter the amount of any excise tax incurred by the organization under section 4955		!-	\$		
2	Enter the amount of any excise tax incurred by organization managers under section 4955		!	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				☐ Yes	┌ No
4a	Was a correction made?				☐ Yes	☐ No
b	If "Yes," describe in Part IV					
Pai	rt I-C Complete if the organization is exempt under section 501(c) except	secti	on 50	1(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function a	ctivitie	s 🕨	\$		
2	Enter the amount of the filing organization's funds contributed to other organizations for section exempt funtion activities	527	►	\$		
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line	17b	•	.		

State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's 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 -

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,000,000				
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

			1)	(b)	
		Yes	No	A mount	
L	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		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo		
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 similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV	Yes		16,135	
j	Total lines 1c through 1i			16,135	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ļ		
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		-		

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

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	
С	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

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

Also, complete this part for any additional information

Dues, assessments and similar amounts from members

Ident if ier	Ret urn Reference	Explanation
,		MEMBERSHIP DUES PAID TO VARIOUS ORGANIZATIONS THAT LOBBY AS PART OF THEIR ACTIVITIES

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

DLN: 93493105009051

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

erna	Il Revenue Service	► Attach to Fo	orm 990. 🕨 See separate instructions.		Inspection
	me of the organi	zation		Employer identifica	tion number
				15-0532204	
Pa			dvised Funds or Other Similar Fu	unds or Accounts	Complete if the
	organiz	zation answered "Yes" to Form 99	(a) Donor advised funds	(b) Funds and o	theraccounts
_	Total number a	t end of vear	(a) Donor advised funds	(b) i ulius aliu o	ther accounts
:		tributions to (during year)			
}		nts from (during year)			
ļ	Aggregate valu	e at end of year			
j	_		sors in writing that the assets held in don organization's exclusive legal control?	oradvised	┌ Yes ┌ No
i	used only for c		donor advisors in writing that grant funds efit of the donor or donor advisor, or for ar		┌ Yes
Pa	rt III Conse	rvation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form 990, Part IV	, line 7.
<u>·</u>	Preservati Protection Preservati Complete lines	conservation easements held by the or ion of land for public use (e g , recreati i of natural habitat ion of open space s 2a-2d if the organization held a quali he last day of the tax year	on or pleasure) Preservation of an	historically important certified historic struct of a conservation	•
				Held at the	End of the Year
а	Total number o	f conservation easements		2a	2
b	_	restricted by conservation easements	•	2b	101 00
C		servation easements on a certified his	` '	2c	
d	Number of con	servation easements included in (c) a	cquired after 8/17/06	2d	
} 	the taxable yea	servation easements modified, transfe ar	rred, released, extinguished, or terminate ation easement is located 1	d by the organization (during
	Does the organ		g the periodic monitoring, inspection, hand	dling of violations, and	✓ Yes
ı	Staff and volun	teer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents during the year 🕨	
	A mount of exp	enses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during the year 🟲 \$ _	19,500
i		servation easement reported on line 2) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion	✓ Yes
	balance sheet,	-	onservation easements in its revenue and the footnote to the organization's financial nents		
aı			ns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	or Other Similar <i>i</i>	Assets.
la	art, historical t	reasures, or other similar assets held	116, not to report in its revenue stateme for public exhibition, education or researc ancial statements that describes these it	ch in furtherance of pul	
b	historical treas	•	116, to report in its revenue statement a public exhibition, education, or research ii ;		•
	(i) Revenues i	ncluded in Form 990, Part VIII, line 1		► \$	
	(ii) Assets inc	luded in Form 990, Part X			
<u>!</u>	If the organiza	•	orical treasures, or other similar assets fo S 116 relating to these items		
а	Revenues inclu	uded in Form 990, Part VIII, line 1		► \$	

b Assets included in Form 990, Part X

Part	TITL Organizations Maintaining Co	ollections of Art	<u>, His</u>	torical Tre	easi	ures, or O	<u>the</u>	<u>r Similar As</u>	sets	cont	ınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e following th	at a	re a significa	nt u	se of its collec	tion		
а	Public exhibition		d	Loan or	rexc	hange progr	ams				
b	Scholarly research		e	┌ Other							
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIV	ollections and expla	ın hov	v they further	the	organızatıon	's ex	cempt purpose	ın		
5	During the year, did the organization solicit assets to be sold to raise funds rather than			•				nılar	┌ Yes	Г	- No
Par	t IV Escrow and Custodial Arrang					n answere	d "Y	es" to Form 9	990,		
	Part IV, line 9, or reported an ar			•							
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?				ions	or other ass	ets	not	☐ Yes	Г	No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ing table		Г		_			
_						_	_	Ai	nount		
с 	Beginning balance						1c				
d	Additions during the year					F	1d				
e	Distributions during the year					—	1e				
f	Ending balance					L	1f				
2a	Did the organization include an amount on F		e 21?						│ Yes	Г	No
	If "Yes," explain the arrangement in Part XIV			1 1157							
Pa	rt V Endowment Funds. Complete	If the organization (a)Current Year		wered "Yes)Prior Year				T IV, line 10. Three Years Back	(e)Fou	r Year	rs Back
la	Beginning of year balance	111,899,492	(12	164,702,143	+	TWO TCGTS BGCF		Jimee rears back	(C)i ou	i i cai	3 Dack
b	Contributions	2,434,749		661,886			+				-
c	Investment earnings or losses	11,683,003		-48,273,254							
d	Grants or scholarships	1,535,129		1,389,056							
e	Other expenditures for facilities	4,142,860		3,802,227							
_	and programs						_				
f	Administrative expenses	120,339,255		111,899,492							
g	End of year balance	, ,		111,899,492							
2	Provide the estimated percentage of the year	74 000 0	is								
а	Board designated or quasi-endowment 🕨	71 000 % %									
Ь	Permanent endowment - 28 000 % %)									
c	Term endowment ► 1000 % %										
За	Are there endowment funds not in the posse organization by	ssion of the organiza	ation t	that are held	and	administered	for	the	Ye	<u> </u>	No No
	(i) unrelated organizations							3a		_	N o
	(ii) related organizations							3a		1	N o
ь	If "Yes" to 3a(II), are the related organization							3	ь		
1	Describe in Part XIV the intended uses of th	ne organization's end	dowme	ent funds				·		·	
Par	t VI Investments—Land, Building	s, and Equipme	nt. S	ee Form 99	0, P	art X, line	10.	<u> </u>	_		
	Description of investment			(a) Cost or ot basis (investme		(b)Cost or ot basis (other		(c) Accumulated depreciation	(d)	Book	value
La	Land					6,204	,751			6,2	04,751
b	Buildings					332,724	,093	84,388,76	4	248,3	35,329
c	Leasehold improvements					74,379	,214	51,629,79	7	22,7	49,417
d	Equipment					55,556	,536	29,350,85	0	26,2	05,686
е	Other				Ī	20,207	,574	6,149,71	5	14,0	57,859

317,553,042

Part VII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b)Book value		od of valuation f-year market value
Financial derivatives			•
Closely-held equity interests			
Other			
See Additional Data Table			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	71,964,383		
Part VIII Investments—Program Related. Se			
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
(a) Bescription of investment type	(B) Book value	Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, II			
(a) Descri	ption		(b) Book value
Tatal (Caluman (b) about a and Faura 2000 Book V and (B) line	(5.)		
Total. (Column (b) should equal Form 990, Part X, col.(B) line : Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	(b) Amount		
U S GOVT GRANTS REFUNDABLE	8,329,660		
COND ASSET RETIREMENT OBLIG	1,128,470		
INTEREST RATE SWAP AGREEMENTS	12,565,581		
CAPITAL LEASE OBLIGATION	41,415,599		
CATTAL LEASE OBLIGATION	41,413,333		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	63,439,310		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	280,840,582
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	264,099,538
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	16,741,044
4	Net unrealized gains (losses) on investments	4	17,379,315
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,646,315
9	Total adjustments (net) Add lines 4 - 8	9	15,733,000
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	32,474,044
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	226,789,325
2	Amounts 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)		
e	Add lines 2a through 2d	2e	30,661,109
3	Subtract line 2e from line 1	3	196,128,216
4	A mounts 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 979,480		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	84,712,366
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	280,840,582
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	192,668,966
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
С	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	13,281,794
3	Subtract line 2e from line 1	3	179,387,172
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 979,480		
b	Other (Describe in Part XIV) 4b 83,732,886		
c	Add lines 4a and 4b	4c	84,712,366
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	264,099,538
Dai	t XIV Supplemental Information		

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 IV, 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 Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation		
Part II, Line 9	Description of How Organization Reports Conservation Easements	The conservation easements are not reported on the balance sheet or in footnotes to the organization's financial statements. The amounts are considered immaterial		
Part V , Line 4	Description of Intended Use of Endowment Funds	The intended use of the endowment funds is to provide scholarships and grants, and to support the educational programs at Ithaca College		
		PART XI, LINE 8 CHANGE IN THE VALUE OF INTEREST SWAP AGREEMENTS (\$1,305,879) POSTRETIREMENT BENEFITS EXPENSE OTHER THAN NET PERIODIC COST (\$340,436) PART XII, LINE 2D COST OF GOODS SOLD \$12,883,557 CONFERENCE EXPENSES \$398,237 PART XII, LINE 4B FINANCIAL AID NETTED ON FINANCIALS \$83,732,886 PART XIII, LINE 2D COST OF GOODS SOLD \$12,883,557 CONFERENCE EXPENSES \$398,237 PART XIII, LINE 4B FINANCIAL AID NETTED ON FINANCIALS \$83,732,886		

Additional Data

Software ID: Software Version:

EIN: 15-0532204

Name: ITHACA COLLEGE

Form 990, Schedule D, Part VII - II	nvestments— Other Securities
(a) Description of security or cateory	, I

(a) Description of security or cateory (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
ARCHSTONE MKT NEUTRAL STRATEGY	11,557,514	F
BARLOW PARTNERS OFFSHORE	13,597,214	F
COMMONFUND CAPITAL INT PARTNER	1,642,847	F
COMMONFUND CAPITAL PRIVATE EQUITY	556,906	F
C/F Int'l Private Equity Ptners V LP	696,433	F
COMMONFUND INT EQUITY PTRS VI	1,807,378	F
COMMONFUND INT EQUITY PTRS VII	633,551	F
COMMONFUND INT PRIVATE EQUITY	394,363	F
Commonfund Capital Private Equity Partners V	2,980,620	F
Commonfund Capital Private Equity Partners VI	579,784	F
Commonfund Capital Venture Partners VIII	314,311	F
JER EUROPE FD III	459,988	F
JER REAL ESTATE	2,305,961	F
JER Real Estate Qualified Partners IV, L	1,860,697	F
LEXINGTON CAPITAL PARTNERS VIA	4,084,798	F
PERRY PARTNERS INT LP CLASS F	10,650,151	F
REALTY ASSOC FUND VII CORP	2,815,531	F
REALTY ASSOC FUND VIII	3,305,721	F
Realty Associates Fund IX Corp	1,500,000	F
WELLINGTON ARCHIPELAGO HOLDING	6,893,156	F
GMO Special purpose vehicle	1,488	F
Siguler Guff Distressed Fund	3,325,971	F

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

ITHACA COLLEGE

Name of the organization

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public

	15-0532204			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain THE COLLEGE'S NONDISCRIMINATORY POLICY appears IN THE undergraduate CATALOG, AS WELL AS ON THE COLLEGE'S WEBSITE	3	Yes	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
_	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)			
	Does the organization discriminate by race in any way with respect to 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
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		Νo
6a	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990) Does the organization receive any financial aid or assistance from a governmental agency?		Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form	7	Yes	
	aan)	'	1 , 53	ı

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As Filed Data -

DLN: 93493105009051

OMB No 1545-0047

2009

Open to Public **Inspection**

SCHEDULE F (Form 990)

Statement of Activities Outside the United States ► Complete if the organization answered "Yes" to Form 990,

Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury Internal Revenue Service

Totals .

	ne of the organization					Employer ide	ntification number		
IIH	ACA COLLEGE					15-0532204	1		
Pa	General Info			de the United States	s. Complete	e if the organ	nization answered		
1	1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or								
	assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
2	2 For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States								
3	Activites per Region (U	se Schedule F-1	(Form 990) ıf adı	ditional space is needed)					
	(a) Region			(d) Activities conducted in	(e) If activi	ty listed in (d)	(f) Total expenditures		
	(a) Region	(b) Number of offices in the	(c) Number of employees or	region (by type) (i e , fundraising, program services,		am service,	for region		
		region	agents in region	grants to recipients located in		ecific type of			
	e Add'l Data			the region)	service(s	s) in region			
	e Add i Data								

119

1,924,558

Part IV	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete If the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 ▶ ☐ Use Schedule F-1 (Form 990) if additional space is needed.								
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►		
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009	

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

OSE Scriedule	1-1 (101111 330) 11 au	ultional space	is fieeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
GRANT/SCHOLARSHIP	CENTRAL AMERICA AND THE CARIBEAN	1	8,500	ELECTRONICALLY DEP TO STUDENT BILLING ACCOUNT			
GRANT/SCHOLARSHIP	EUROPE	240	1,647,982	ELECTRONICALLY DEP TO STUDENT BILLING ACCOUNT			
GRANT/SCHOLARSHIP	SOUTH AMERICA	15	107,150	ELECTRONICALLY DEP TO STUDENT BILLING ACCOUNT			
GRANT/SCHOLARSHIP	SUB-SAHARAN AFRICA	6	57,883	ELECTRONICALLY DEP TO STUDENT BILLING ACCOUNT			
GRANT/SCHOLARSHIP	EAST ASIAN AND THE PACIFIC	30	201,672	ELECTRONICALLY DEP TO STUDENT BILLING ACCOUNT			
GRANT/SCHOLARSHIP	MIDDLE EAST AND NORTH AFRICA	7	48,402	ELECTRONICALLY DEP TO STUDENT BILLING ACCOUNT			

Identifier	ReturnReference	ın Part I, line 2, and any additional information. Explanation
Procedure for Monitoring Grants		Schedule F, Part I, Line 2 Scholarships given are deposited into
Outside the U S		the student's account to be used for tuition in educational
Outside the 0.5		program The funds expended for travel and attending
		conferences are accounted for when travel reports are submitted
		to Ithaca College
Method Used to Acccount for		Schedule F, Part I, Line 3 Expenditures are reported on an
Expenditures		accrual basis according to GAAP, consistent with the Ithaca
		College method of accounting
		I

Software ID: Software Version:

EIN: 15-0532204 Name: ITHACA COLLEGE

(a) Region	(b) Number of	(c) Number of	(d) Activities conducted	(e) If activity listed in	(f) Total expenditures
	offices in the region	employees or agents in region	in region (by type) (i e , fundraising, program services, grants to recipients located in the	(d) is a program service, describe specific type of service (s) in region	for region
			region)		
EUROPE	1		study abroad program for college students in LONDON	program, including internships in many academic areas and a nine-credit intensive drama course The Ithaca College London Center is run by a director and staff who help the students with their daily personal and academic needs	1,248,976
EUROPE		_	INTERNATIONAL PROGRAMS - study abroad program - college students	International educational program, short-term study abroad in many academic areas	78,850
Central America and the		1	INTERNATIONAL	International educational	123,648
Caribbean			PROGRAMS - study abroad program - college students	program, short-term	123,040
Sub-Saharan Africa			INTERNATIONAL PROGRAMS - study abroad program - college students	International educational program, short-term study abroad in many academic areas	30,688
East Asia and the Pacific			INTERNATIONAL PROGRAMS - study abroad program - college students	International educational program, short-term study abroad in many academic areas	63,496
South Asia		_	INTERNATIONAL PROGRAMS - study abroad program - college students	International educational program, short-term study abroad in many academic areas	11,663
Central America and the Caribbean		4	travel in the southern Caribbean	Class trip	60,272
East Asia and the Pacific		4	Travel in East Asia & Pacific	Attend, speak at academic conferences and conduct research	6,657
East Asia and the Pacific		1	Travel in East Asia & Pacific	Recruitment of international students	14,865
Europe (Including Iceland & Greenland)		33	Travel in Europe	Attend and present papers at academic conferences	111,747
Europe (Including Iceland & Greenland)		1	Travel in Europe	Recruitment of international students	6,805
Middle East and North Africa		5	Travel in the Middle East	Attend, present papers at academic conferences and work on research project	15,293
North America		37	Travel in Canada & Mexico	Attend and present papers at academic conferences	35,306
North America			Travel in Canada	Internships with NBC Winter Olympics	16,000
Russia & the Newly Independent States		2	Travel in Russia	Perform in a concert, attend academic conference and work on research project	1,517
South America		5	Travel in South America	Attend and present papers at academic conferences	10,790
South Asia		2	Travel in South Asia	Attend and present papers at academic conferences	4,576
Sub-Saharan Africa		5	Travel in Sub-Saharan Africa	Attend, present papers at academic conferences and conduct research	18,094
Sub-Saharan Africa		5	Travel ın Sub-Saharan Afrıca	Martin Luther King Scholars Trip	65,315

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Schedule I

(Form 990)

DLN: 93493105009051

OMB No 1545-0047

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Department of the Treasury Attach to Form 990 Internal Revenue Service

Open to Public

lame of the organization						Employer identifica	tion number
THACA COLLEGE						15-0532204	
Part I General Info	rmation on Grar	nts and Assistance				•	
2 Describe in Part IV the	ed to award the grar organization's proce	nts or assistance? edures for monitoring the us	e of grant funds in the	United States			ΓYes Γ
Form 990, Part	IV, line 21 for an	to Governments and by recipient that receive 990) if additional space	d more than \$5,000	. Check this box if n	o one recipient receiv	ed more than \$5,00	0. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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 se		government organizations					
						•	

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. 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
scholarships to attend ithaca college	5567	75,608,861			
graduate assistant scholarship	136	1,027,810			
HIGHER EDUCATION OPPORTUNITY PROGRAM	57	1,512,363			

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
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 STUDENTS must meet the requirements specified in the scholarship program in order to receive the scholarship. The requirements include criteria, such as financial need, obtaining/maintaining the required grade point average, studying in a certain academic discipline, etc. If the scholarship is an ongoing one, the student must continue to meet the scholarship requirements in order to be awarded a scholarship in subsequent years. Financial need, grade point averages and other scholarship criteria are monitored to determine whether the student meets the criteria. There are a limited number of graduate assistantships that are awarded to individuals pursuing a masters degree at Ithaca College. Like scholarships, the student must meet the applicable requirements in order to be awarded a graduate assistantship, such as obtaining/maintaining the required grade point average, studying in a certain academic discipline, etc.
-		

DLN: 93493105009051

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

1111	ACA COLLEGE		15-0532204			
Pa	rt I Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	[ব	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	고				
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc	-		1b	Yes	
2	Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the Compensation committee	nat apply	,			
	Compensation committee Independent compensation consultant	₹	Written employment contract Compensation survey or study			
	Form 990 of other organizations	٠ اح	Approval by the board or compensation committee			
	, Torri 550 or other organizations		Approval by the board of compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A , line ${ t 1a}$ with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a	Yes	
ь	Participate in, or receive payment from, a supplement	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	e applicable amounts for each item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only mu For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of					
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of			7		No
8	Were any amounts reported in Form 990, Part VII, psubject to the initial contract exception described in Part III			8		No
9	If "Yes" to line 8 did the organization also follow the	a rahutt:	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
THOMAS ROCHON	(I) (II)	296,656 0	1,500 0	17,798 0	47,813 0	43,823 0	407,590 0	
KATHLEEN ROUNTREE	(I) (II)	189,252 0	1,500 0	16,500 0	16,794 0	9,230 0	233,276 0	
NANCY PRINGLE	(1) (11)	163,296 0	11,500 0	19,051 0	14,525 0	9,234 0	217,606 0	
CARL SGRECCI	(ı) (ıı)	186,008 0	1,500 0	10,833	16,216 0	4 ,778 0	219,335 0	
ROCHELLE SEMMLER	(1) (11)	172,496 0	1,500 0	10,833	15,470 0	15,840 0	216,139 0	
BRIAN MCAREE	(1) (11)	138,927 0	1,500 0	0	12,431	29,684 0	182,542 0	
JEFFREY LIPPITT	(1) (11)	134,215 0	1,500 0	15,936 0	12,483 0	14,730 0	178,864 0	
Mark Cordano	(1) (11)	143,501 0	1,500 0	12,132 0	12,612 0	7,854 0	177,599 0	
Leslie Lewis	(1) (11)	155,242 0	1,500 0	0	13,562 0	6,281 0	176,585 0	
Gwen Seaquist	(1) (11)	111,014 0	1,500 0	34,957 0	10,095	10,674 0	168,240 0	
DAVID NEWMAN	(ı) (ıı)	141,709 0	1,500 0	0	12,741	10,418 0	166,368 0	
PEGGY WILLIAMS	(ı) (ıı)	151,425 0	198,667 0	51,059 0	13,189 0	17,609 0	431,949 0	

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
	Part I, Line 1a	Ithaca College provides housing and country club membership to its president
		The former president, Peggy Williams, received the following compensation Base compensation of \$151 425, Bonus and Incentive Compensation of \$198,667, Other Compensation of \$51,059, deferred compensation 47,813, and nontaxable benefits of \$43,823

Schedule J (Form 990) 2009

DLN: 93493105009051 OMB No 1545-0047

2009

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Schedule K

(Form 990)

Supplemental Information on Tax Exempt Bonds

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

Name of the organization ITHACA COLLEGE

Employer identification number

15-0532204

	13-0332204													
Pa	rt I Bond Issues							_						
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Da	te Issued	(e) Issu	ue Price	(f) De:	scription of	Purpose	(g) De	feased	Beh)On alf of suer
											Yes	No	Yes	No
A	Dormitory Auth of the State of New York	14-6000293	649905QU3	09-17	7-2009	35	5,080,000	Qualified 5 bond	01(c)(3) no	nhospital		х		Х
В	Tompkins Cty Industrial Dev Agency	16-1214039	890099CQ5	11-10	0-2004	31	.,100,000	Qualified 5 bond	Qualified 501(c)(3) nonhospital ond			х		Х
С	tompkins Cty Industrial Dev Agency	16-1214039	890099CZ5	09-29	9-2005	49	,624,325	qualified 50 bond	qualified 501(c)(3) nonhospital			х		х
D	tompkins Cty Industrial Dev Agency	16-1214039	890099DU5	04-20	6-2007	31	.,340,000	qualified 50 bond	qualified 501(c)(3) nonhospital			х		х
Pa	rt III Proceeds													•
					4	E	В		С	D)		Е	
1	1 Total proceeds of issue			3	5,080,000	3	2,424,139	4	9,624,325	3	3,079,61	4		
2	Gross proceeds in reserve funds													
3	Proceeds in refunding or defeasar	nce escrows												
4	Other unspent proceeds													
5	Issuance costs from proceeds			439,564		755,233		1,022,240		721,642		2		
6	Working capital expenditures from	n proceeds												
7	Capital expenditures from procee	ds		3	1,668,906	31,668,906		5		3:	 2,357,97	2		
8	Year of substantial completion			20	09	20	07	20	05	20	09			
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of	a current refunding is	ssue?	Х			Х		Х		Х			
10	Were the bonds issued as part of an advance refunding issue?				Х		Х	Х			Х			
11					х	Х		Х			X			
12						х		х		Х				
Pai	rt IIII Private Business Use						<u> </u>		<u> </u>					
					A		В		С		D		E	
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No

Χ

Χ

Was the organization a partner in a partnership, or a member of an LLC,

Are there any lease arrangements with respect to the financed property

which owned property financed by tax-exempt bonds?

which may result in private business use?

Χ

Χ

Χ

Χ

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

			A	E	3		С	ı	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		Х		Х					
3b	Are there any research agreements with respect to the financed property which may result in private business use?	х			x		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?	х		х		x					
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 150 %				•		•		
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %									
6	Total of lines 4 and 5		0 150 %								
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	х		Х		х					
D-	Arbitrage										

Part IV Arbitrage

			A		В		С	I	0		E
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		x		x		x	x			
2	Is the bond issue a variable rate issue?		Х	х		Х			Х		
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		х	х		х		х			
ь	Name of provider	N A of Canada	•	ubs ag	•	Bank of Am		of Canada of Canada			
С	Term of hedge	29 660	00000000	29 660	000000000	16 92000000000 30 20000000000					
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х		
ь	Name of provider	NA		NA		NA					
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		x		х		х		х		
6	Did the bond issue qualify for an exception to rebate?		х		Х		Х		Х		

15-0532204

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

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

NonCash Contributions

Internal Revenue Service Name of the organization ITHACA COLLEGE **Employer identification number**

I C.	Types of Property	(a) Check If	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d Method of de reven	etermı	nıng	
1	Art—Works of art	Х	2	-	APPRAISED VALU	 F		
	Art—Historical treasures .			17,132	ATTRAISED VALO	_		
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	26	79,762	FAIR MARKET VAL	UE		
10	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts musical							
25	Other (instruments)	×	2	2				
	Other ► (steel drum)	X	1		FAIR MARKET VAL	U E		-
	I F Stone							
27	Other ► (Memorabilia)	X	1	12,485	Appraised Value			
	organ cover							
	and music		1	022	FAID MADKET VALL			
28	Other ► (folders) books and	X	1	032	FAIR MARKET VAL	JE		
	Other (music scores)	l x	2	7				
	athletic							
	Other ► (<u>equipment</u>)	X	1	1				
29	Number of Forms 8283 received for which the organization compl		- -		29			2
-	Dummer the many did the con-		- h.,h., h., k		1 20 16-14		Yes	No
3Ua	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	d to be used			l
	for exempt purposes for the enti					30a		No
Ь	If "Yes," describe the arrangem	ent in Part 1	II					
	Does the organization have a gif					31	Yes	
3 ∠a	Does the organization hire or us contributions?	e tnira part	ies or related organizations	LO SOIICIT, process, or sell i	non-cash	32a		Νo
b	If "Yes," describe in Part II							
	If the organization did not report	t revenues i	n column (c) for a type of p	roperty for which column (a) is checked.			
	describe in Part II				,			

Page 2

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 Return Reference Explanation

Schedule M (Form 990) 2009

Software ID: **Software Version:**

EIN: 15-0532204

Name: ITHACA COLLEGE

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SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

 $\label{lem:complete} \textbf{Complete to provide information for responses to specific questions on } \\$ Form 990 or to provide any additional information. ► Attach to Form 990.

OMB No 1545-0047 Inspection

DLN: 93493105009051

Name of the organization

ITHACA COLLEGE

Employer identification number

15-0532204

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		Ithaca College's Audit Committee of the Board received the presentation and review of the draft Form 990 by the College Administration and the outside tax accountants. The committee passed a resolution approving the draft Form 990 as presented. A report will be presented to the full board of directors.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		All trustees and senior management complete annual conflict of interest forms. The forms are submitted to the Secretary of the Board and all disclosed conflicts are forwarded to the Chair of the Audit Committee for review

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		a The Board of Trustees sub-committee on compensation annually collects comparability data to be used in establishing presidential compensation. This data is gathered using the assistance of non-interested parties including external consultants and the College's Office of Human Resources. The sub-committee on compensation makes a recommendation to the Executive Committee, which has authority to approve the recommendation. The Executive Committee reports to the full Board the details of the review and compensation b. Human Resources obtains comparability data on compensation which is shared with the President. The data is review ed and the compensation committee is informed of the decisions. The President annually reviews the compensation policies of the College related to senior officers.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The public may contact the Office of the VP of Finance and Administration in order to review the governing documents, conflict of interest policy and financial statements

ldentifier	Return Reference	Explanation	
990, PART XI, LINE 2C	AUDIT COMMITTEE	THE AUDIT COMMITTEE IS RESPONSIBLE FOR THE OVERSIGHT OF THE SELECTION OF THE AUDITORS AND THE CONDUCT OF THE AUDIT THAT FUNCTION HAS NOT CHANGED IN THE PAST YEAR	

ldentifier	Return Reference	Explanation	
		990, Part VI, Section B, Line 14 document retention and destruction policy WHILE Ithaca College DOES NOT HAVE A FORMAL WRITTEN POLICY ABOUT DOCUMENT RETENTION AND DESTRUCTION, IT has guidelines regarding document retention and destruction. These guidelines are under review for codification into policy.	

ldentifier	Return Reference	Explanation
Schedule K, Part I	Line D, column (e) supplemental information	As reflected on the Form 8038 filed with respect to these bonds, in accordance with Regulation section 1 148(h)(ii)(C), the issue price of the bonds has been adjusted upward by \$265,000 from \$31,075,000 to \$31,340,000 to account for the deemed termination value as of the date of issuance of the bonds of a qualified hedge entered into prior to the date of the issuance of the bonds

ldentifier	Return Reference	Explanation
Schedule K, Part II	Line 5, column A supplemental information	issuance costs from proceeds includes \$243,726 to pay the remarketing fee

ldentifier	Return Reference	Explanation
Schedule K, Part	Line 5, column B supplemental information	Issuance Cost from proceeds Includes \$412,183 for bond insurance premium fee

ldentifier	Return Reference	Explanation
Schedule K, Part	Line 7, column B supplemental information	Capital expenditures from proceeds includes \$343,180 for state and issuer administrative fees

ldentifier	Return Reference	Explanation
schedule K, Part II	l '	Issuance Cost from proceeds Includes \$478,336 for bond insurance premium and \$46,874 for the liquidity facility fee

Identifier	Return Reference	Explanation
Schedule K, Part		Capital expenditures from proceeds Includes \$318,980 for bond insurance premium fee

Identifier	Return Reference	Explanation
Schedule K, Part	• • •	Capital expenditures from proceeds Includes \$341,013 for state and issuer administrative fees

ldentifier	Return Reference	Explanation
schedule K, Part IV	Line 3c, column D supplemental information	This bond has two terms of hedge 30.2 years and 1.65 years

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Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93493105009051

OMB No 1545-0172

Form **4562**

Department of the Treasury nternal Revenue Service	•	See separate instruction	s. 🕨 Attach	to your tax retu	rn.	Sequence			
Name(s) shown on return		Business or a	activity to which	this form relate:	s Iden	t if yin	g number		
ITHACA COLLEGE		Form 990 Page 10 15-0532							
	-	Certain Property Un	der Section						
		sted property, comple			ete Part I.		25225		
		for a higher limit for cert				1	250,000		
		ed in service (see instru				2	200.000		
		before reduction in limit	•	uctions) .		3	800,000		
		from line 2 If zero or les	,			4			
		line 4 from line 1 If zero	or less, enter -	D- If married fili	ng	_			
separately, see instru	uctions					5			
. (a)	Description of pr	onerty	(b) Cost	b) Cost (business use					
			only)	(c) Elected	cost	_			
6							4		
		1 20					┦		
7 Listed property Ente				. 7					
		erty Add amounts in col	umn (c), lines 6	and /		8			
9 Tentative deduction						9			
10 Carryover of disallow		·		e instructions)		10			
11 Business income limitation						11			
12 Section 179 expense		·				12			
13 Carryover of disallow				. 13					
Note: Do not use Part Part II Special D		<u>elow for listed proper</u> Allowance and Othe			cludo lieted =	ronort	V)(Securetrustions)		
14 Special depreciation	-					opert'	y) (See instructions)		
tax year (see instruct	·	property (other tilal	otou property	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	To during the	14			
15 Property subject to s	ection 168(f)(1) e	election				15			
16 Other depreciation (ii						16	15,682,941		
		Do not include listed p	property.) (Se	ee instructions.	.)		· · ·		
			ection A						
17 MACRS deductions for	or assets placed i	n service in tax years be	gınnıng before 2	.009		17			
18 If you are electing		•	e during the t	ax year ınto oı					
general asset acco	· · · · · · · · · · · · · · · · · · ·					<u> </u>			
Section B—Ass	sets Placed in	Service During 200	08 Tax Year	Using the Ge	neral Dep	<u>recia</u>	tion System		
	(b) Month and	(c) Basıs for depreciation			n (f) Method				
(a) Classification of property	year placed in	(business/investment	(d) Recovery period	(e) Convention			(g) Depreciation deduction		
property	service	use only—see instructions)	political politi				adadonon		
19a 3-year property		only—see mstructions)							
b 5-year property									
c 7 - year property									
d 10-year property									
e 15-year property						\Box			
f 20-year property									
g 25-year property	1		25 yrs		S/L				
h Residential rental			27 5 yrs	MM	S/L	\rightarrow			
i Nonresidential real property	+		27 5 yrs	M M M M	S/L S/I	+			
			39 yrs	M M	S/L S/L	\rightarrow			
	ion C—Assets Plac	ed in Service During 2009	l 9 Tax Year Usind			ı Svst	em		
20a Class life					S/L				
b 12-year			12 yrs		S/L				
c 40-year			40 yrs	мм	S/L				
Non Book To 1			D = D = - : :			•			
Non-Res Prop Type 1 cou Part IV Summa	<u>unt 0 Non-Res Pr</u> I ry (see Instruc		Kes Prop Total:	s count 0					
			and 20 in calif	an (a) and line 2	1 Entar h	I	<u> </u>		
22 Total. Add amounts fi	,	14 through 17, lines 19 urn Partnerships and S (22	15,682,941		
23 For assets shown abo	•	•	•		<u> </u>	<u> </u>			
	· ·	ion 263A costs .		23					

Part V
Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense,

comp	lete only	24a, 24b, colui	mns (a	a) thro	ugh (c)	of Sec	ction	A, al	ll of .	Sectio	n B, a	nd Se	ction (C if ap	oplicat	ile.
Section A—Depre																
24a Do you have eviden	ce to support	the business/investi	ment us	e claimed	d? ┌ Yes	. □ _{No}			24b lf	"Yes."	s the ev	/ idence	written?	Tye	sГNo)
										,						-
(a) Type of property (list vehicles first)	(b) Date placed II service	(c) Business/ In investment use percentage	(d) Cost or o	rother (husiness/investmen			- 11	(f) (g) Recovery Method/ period Convention			(h) Depreciation/ deduction			(i) Elected section 179 cost		
25Special depreciation allow 50% in a qualified busir	•	lified listed property i	placed in	service (l during the	tax year	and u	sed mo	re tha	in 25						
26 Property used more	•	•	inacci	15.0						20						
Lot roperty asea more	thun 50 70	% %	111033	450			П				\top			\Box		
		%														
	orlassin	% %	C 11C A													
27 Floperty used 50 %	01 1633 111	%	35 USE				П		S/L	-	Т			\Box		
		%							S/L							
		%			L				S/L		_			+		
28 Add amounts in co		_				ne 21,	page	1 .		2	8					
29 Add amounts in co	ılumn (ı), lır							•		•			29			
Complete this section	forvobiolo				mation						r rolat	ad nar	con			
if you provided vehicles to	your employe	es, first answer the q	uestions	in Section	on C to see	e if you n	neet a	n exce	otion t	o comple	ting this	section	for thos	e vehic	les	
30 Total business/investment miles driven during the year (do not include commuting miles)			the	(a)			(b))				(e) (f)		
				Vehicle 1		Vehi	Vehicle 2		Vehicle 3		Vehicle 4		Vehicle 5		Vehicle 6	
31 Total commuting n	niles driver	during the year	F													
32 Total other person			,,, <u> </u>													
·	•		⊢			<u> </u>		+								
33 Total miles driven through 32	· · ·	year Add lines 3	٠. ا													
34 Was the vehicle av	allable for	personal use		Yes	No	Yes	No	Ye	s	No	Yes	No	Yes	No	Yes	No
during off-duty hou	ırs?		.													
35 Was the vehicle us owner or related pe	•	y by a more than	5%													
36 Is another vehicle		or personal use?	` .` -													
		estions for Em	volar	ers W	ho Pro	vide \	/ehi	cles	for	Use b	v The	ir Er	nplov	ees	<u> </u>	<u> </u>
Answer these question 5% owners or related	ns to deterr	nine if you meet a									-				not moi	re tha
37 Do you maintain a employees?	written poli	cy statement tha	t prohil	bits all	personal •	use of	vehic	les, ı	nc lud	ling cor	nmutır	ıg, by y	our.	Y	es	No
38 Do you maintain a employees? See th																
39 Do you treat all us								,, 01 1	, o o i		-					
40 Do you provide mo	re than five	vehicles to your	•			- ormatio	n fron	n you	emp	loyees	- about	the us	e of the	a -		
vehicles, and retai			العامل ما		la damar				•			•	•	\vdash		
Note: If your answ																
Part VI Amortiz		5, 39, 40, 01 41 1	5 165,	40 110	Comple	te seci	.1011 6	101 11	ie co	vereu v	emcie	<u> </u>				
Part VI Amortiz		(b)	<u> </u>			I				(6	.,					
(a)		Date		(c) A mortizable amount			(d) Code section		A morti	-	(f) A mortization this year			an far		
Description of c	osts	amortization							perio							
		begins 								perce	ntage					
42 A mortization of co	sts that be	gins during your 2	2009 ta	ax year	(see ins	truction	ıs)									
42 A months = 1 - 1		ann hafar	000 +-	V 146 - 5							43					
43 A mortization of co	sis that be	gan before your 2	UUY ta	x year		•	•		•	•	43					

44 Total. Add amounts in column (f) See the instructions for where to report . . .

44