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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

2009 OMB No 1545-0047

2009

Inspection calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010 A For the 2009 D Employer identification number B Check if applicable CORPORATION OF HAVERFORD COLLEGE use IRS Address change 23-6002304 label or Doing Business As E Telephone number print or Name change HAVÉRFORD COLLEGE type. See Specific (610) 896-1248 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-**G** Gross receipts \$ 206,091,332 Terminated tions. City or town, state or country, and ZIP + 4 Haverford, PA 190411392 Amended return Application pending Name and address of principal officer Is this a group return for Stephen G Emerson President affiliates? 370 Lancaster Avenue Haverford, PA 190411392 Γ Yes Γ No H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status **✓** 501(c) (3) **◄** (insert no) **✓** 4947(a)(1) or **✓** 527 Group exemption number 🕨 **Website: ►** www haverford edu M State of legal domicile PA L Year of formation 1833 Summary Briefly describe the organization's mission or most significant activities Higher Education Haverford College is committed to providing a liberal arts education in the broadest sense Activities & Governance Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) $\,$. $\,$. 31 1,943 Total number of employees (Part V. line 2a) . . . Total number of volunteers (estimate if necessary) . 1,619 799,674 Total gross unrelated business revenue from Part VIII, column (C), line 12 . Net unrelated business taxable income from Form 990-T, line 34 $\,$. **Prior Year Current Year** 14,458,844 8 Contributions and grants (Part VIII, line 1h) . 14,106,232 Program service revenue (Part VIII, line 2g) . 61,221,888 63,187,282 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . -132,735,939 9,803,225 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 66,479 99,509 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 -57,341,340 87,548,860 15,408,909 17,591,742 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 15 48.656.352 45.993.168 **Expenses** 16a Professional fundraising fees (Part IX, column (A), line 11e) . . 57,666 85,014 Ь Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright \frac{4,361,687}{}$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . 31,892,664 29,718,616 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 96,015,591 93,388,540 -5,839,680 19 Revenue less expenses Subtract line 18 from line 12 . -153.356.931 t Assets or | nd Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 511,669,463 543,898,843 Total liabilities (Part X, line 26) . . 129,013,002 147,881,034 22 382,656,461 396,017,809 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Date

May the IRS discuss this return with the preparer shown above? (see instructions) .

Preparer's

Use Only

Sign

Here

Paid

Signature of officer

Preparer's signature

Firm's name (or yours

address, and ZIP + 4

if self-employed),

Type or print name and title

Kathı Ruffın Controller and Assıstant Treasurer

Check if

empolyed 🕨 🔽

2011-05-09

EIN ▶

Preparer's identifying number

┌ Yes ┌ No

Form **990** (2009)

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Haverford College is committed to providing a liberal arts education in the broadest sense. This education, based on a rich academic curriculum at its core, is distinguished by a commitment to excellence and a concern for individual growth. Haverford has chosen to remain small and to foster close student/faculty relationships to achieve these objectives. The College's rigorous academic program is flexible in form and content to meet the needs of individual students, and rests on the assumption that the able students who come here will use their capacities fully. Haverford's faculty is noted for its strength in both scholarship and teaching, and its members expect to transmit to students their enthusiasm and high standards. The faculty members are teaching at an undergraduate college of arts and sciences by choice and they expect to learn, as well as to teach, in this close relationship with undergraduates.

	Total program service	a avnancac i t	82,587,702			
	(Expenses \$	•	luding grants of \$) (Revenue \$	0)
4d	Other program service	ces (Describe in Sch	edule O) See also A d	ditional Data for De	escription	
	Student Services Program services	s Dean Registrar, Couns	eling, Career Development	, Health Services, Athle	tics, Disability Services, Security ar	nd other miscellaneous
4c	(Code) (Expenses \$	10,898,525 includii	ng grants of \$	0) (Revenue \$	297,611)
			s, dining center, faculty hou culty to foster educational		am) The dorms housed 1158 studes	ents, 883 were on the board
4b	(Code) (Expenses \$	<i>,</i> ,	ng grants of \$	0) (Revenue\$	14,518,474)
4d	Higher Education Instruc majority of the research a supports the balance Fin	tion (undergraduate libera awards are in the natural ancial aid grants 546 stu	il arts) academic support 8 sciences Federal funds sup	k research, 1283 studer port 25 grants including students) received Hav	nt FTE, 143 1 faculty FTE, 291 deg g 8 ARRA funded grants, 10 by priv erford College grant aid totalling \$	grees conferred in 09/10 The rate foundations The College
	(Code) (Expenses \$	59,249,381 includii	ng grants of \$	17,551,742) (Revenue \$	48,401,889)
4		d 501(c)(4) organiza	ions and section 494	7(a)(1) trusts are r	est program services by expequired to report the amount ice reported	
	If "Yes," describe thes	se changes on Sched	ule O			
3	Did the organization c services?	ease conducting, or	make significant chang	ges in how it conduct		Yes 🗸 No
	If "Yes," describe thes	se new services on S	chedule O			
2	the prior Form 990 or	, •	ant program services	during the year whi		Yes 🔽 No

Dart TV	Checklis	t of De	auired	Schadula	
allutv	CHECKIIS	LUIKE	uuneu	Scheuule	318

			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		No
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	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
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 12A No			
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		No
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? If "Yes," complete Schedule G, Part I	17	Yes	
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

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	Yes	
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		Νο
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		Νο
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	Yes	
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	Yes	
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	Yes	
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		Νο
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νο
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? <i>If</i> "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?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Complia

			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		163	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 1,994 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	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	
3a	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	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	If "Yes," enter the name of the foreign country ►_ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	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		No
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f _		No
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	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?			No
9	Sponsoring organizations maintaining donor advised funds.	8		Νο
	Did the organization make any taxable distributions under section 4966?	9a		No
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	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			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	, war	· .		

Haverford, PA 190411392

(610) 896-1248

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			
	Con 711 Coverning Body and Hanagement		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 31	_		
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	Yes	
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		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
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		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal			110
	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
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	
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	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	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed AK, AZ, CA, CO, DC, KY, MA, MD, NY, OH, OK, OR, PA, SC, WA, WI	ME,M	I,NH,	NJ,
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 of which website. Another's website.			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of t G Richard Wynn 370 Lancaster Ave	he orga	inizatioi	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	(C) Position (check all that apply)				I		(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
See add'l data										

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 60

			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> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	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		Νo

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
Dechert LLC P O Box 7247-6643 Philadelphia, PA 191706643	Legal	203,626
Charles A Higgins & Sons Inc PO Box 647 Media, PA 19063	Construction	195,903
Metropolitan Fire Protection 460 Parkway Broomall, PA 19008	Fire Protection	174,428
PriceWaterhouseCoopers LLP P O Box 7247-8001 Philadelphia, PA 191708001	Auditing	168,456
Joe Civitella Inc 724 Lorraine Ave Ardmore, PA 19003	Construction	149,700
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►18	who received more than	

Part \	4444	Statement o	r kevenue					
					(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	paigns 1a	0				
ᅙ	ь	Membership du	es 1b	0				
ಕ್	c	Fundraising eve	ents 1c					
Contributions, gifts, grants and other similar amounts		_						
	d		ations 1d					
	e	Government grants	s (contributions) 1e	3,189,782				
	f		ons, gifts, grants, and 1f	11,269,062	į	į		
	_	similar amounts no						
	g	Noncash contri	butions included in 35,923					
들		lines 1a-1f \$ _	. 1 - 1 -	b	14,458,844			
ပ္က	h	rotal. Add lines	s 1a-1f		11,130,011			
<u>a</u>				Business Code				
Ę	2a	Tuition and fees		611,310	48,401,889	48,401,889	0	О
Program Serwce Revenue	ь	Auxiliary enterprise	es	900,099	14,518,474	13,098,114	507,670	912,690
	c		_	,	. ,	, ,	,	, , , , , , , , , , , , , , , , , , ,
	l .							
	d							
Ξ	e	-						
ંુાજ	f	All other progra	am service revenue		266,919	179,461	0	87,458
Δ	g	Total. Add lines	s 2a-2f		63,187,282			
	3		ome (including dividen					
		and other simila	aramounts)	-	4,416,789	0	292,004	4,124,785
	4	Income from inves	tment of tax-exempt bond	proceeds 🕨	0	0	0	0
	5	Royalties		🟲	0	0	0	0
			(ı) Real	(II) Personal				
	6a	Gross Rents	25,981	0				
	ь	Less rental	0	0				
	c	expenses Rental income	25,981	0				
	`	or (loss)	·		25.004			25.004
	d	Net rental inco	me or (loss)		25,981	0	0	25,981
	7a	Gross amount from sales of assets other	(i) Securities 99,810,176	(II) O ther 22,854,180				
	ь	than inventory Less cost or other basis and sales expenses	96,237,975	21,039,945				
	l c	Gain or (loss)	3,572,201	1,814,235				
	d	Net gain or (los	s)		5,386,436	0	0	5,386,436
A.	8a		rom fundraising					
Other Revenue		\$	0 reported on line 1c)	0				
<u>ē</u>	ь	Less directex	penses b	n				
ర్	c		loss) from fundraising	events 🕨	0	0	0	О
	9a		rom gaming activities					
		See Part IV, lin		0				
	ь	Less directex	penses b	0				
	l c		' (loss) from gamıng actı	vities	0	o	0	0
	10a	Gross sales of returns and allo	ınventory, less					
	.		a	1,307,388				
	Ь		oods sold b	1,264,552	42.000		_	42.006
	С		loss) from sales of inve		42,836	0	0	42,836
		Miscellaneous	s Kevenue	Business Code				
	11a	Student events		900,099	25,950	25,950	0	0
	ь	Q uaker Lıbrary	ıncome	900,099	4,742	4,742	0	0
	С							
	d	All other reven	ue		0	0	0	0
	e	Total. Add lines			20.665			
	12	Total revenue.	See Instructions .	▶	30,692			.,
	1				87,548,860	61,710,156	799,674	10,580,186

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

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		·		<u> </u>			
2	Grants and other assistance to individuals in the	40,000	40,000					
	U.S. See Part IV, line 22	16,967,708	16,967,708					
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	584,034	584,034					
4	Benefits paid to or for members	0	0					
5	Compensation of current officers, directors, trustees, and key employees	1,689,999	898,593	380,432	410,974			
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	32,897,572	25,253,665	6,007,343	1,636,564			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,125,097	2,375,074	562,517	187,506			
9	Other employee benefits	5,795,611	4,404,664	1,043,210	347,737			
10	Payroll taxes	2,484,889	1,888,516	447,280	149,093			
11	Fees for services (non-employees)							
а	Management	0	0	0	0			
b	Legal	237,711	13,023	220,236	4,452			
c	Accounting	153,456	10,900	142,556	0			
d	Lobbying	0	0	0	0			
e	Professional fundraising See Part IV, line 17	85,014			85,014			
f	Investment management fees	1,027,422	0	1,027,422	0			
g	Other	4,362,171	2,760,666	1,431,451	170,054			
12	Advertising and promotion	112,904	82,968	29,924	12			
13	Office expenses	1,631,340	883,603	567,217	180,520			
14	Information technology	687,808	468,718	175,369	43,721			
15	Royalties	0	0	0	0			
16	Occupancy	3,333,041	2,600,371	579,707	152,963			
17	Travel	1,623,170	1,331,354	91,116	200,700			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0			
19	Conferences, conventions, and meetings	0	0	0	0			
20	Interest	2,754,728	2,199,486	366,460	188,782			
21	Payments to affiliates	0	0	0	0			
22	Depreciation, depletion, and amortization	6,802,577	6,351,651	297,611	153,315			
23 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)	414,937	352,697	41,493	20,747			
а	Study away program expenses	1,693,034	1,693,034	0	0			
a b	Food Services	1,633,096	1,307,411	273,885	51,800			
c	Minor equipment, auto	1,300,518	971,455	323,002	6,061			
d	Dues, subscriptions, memberships	1,209,215	1,132,427	66,886	9,902			
e	Reallocate Facilities and Security	0	7,274,196	-7,635,966	361,770			
f	All other expenses	741,488	741,488	0	0			
25	Total functional expenses. Add lines 1 through 24f	93,388,540	82,587,702	6,439,151	4,361,687			
26	Joint costs. Check here F 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) Beginning of year		(B) End of year			
-	1	Cash—non-interest-bearing			Degining of year	1	O Clid Of year			
	2	Savings and temporary cash investments	22,365,307	2	21.653.515					
	3	Pledges and grants receivable, net	8,807,505	3	7,073,491					
	4	· · · · · · · · · · · · · · · · · · ·	ints receivable, net							
	5	,	ounts receivable, net							
		highest compensated employees Complete Part II of	3, KEY	employees, and						
		Schedule L			489,502	5	473,287			
	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			0	6	0			
ssets	7	Notes and loans receivable, net			0	7	0			
88	8	Inventories for sale or use			371,602	8	376,716			
۲	9	Prepaid expenses and deferred charges			1,928,608	9	565,289			
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	215,452,158						
	ь	Less accumulated depreciation	10b	92,806,727	125,479,965	10c	122,645,431			
	11	Investments—publicly traded securities			75,713,687	11	96,385,379			
	12	Investments—other securities See Part IV, line 11	268,479,330	12	272,935,927					
	13	Investments—program-related See Part IV, line 11	2,377,415	13	2,265,336					
	14	Intangible assets	0	14	0					
	15	Other assets See Part IV, line 11	4,481,880	15	18,577,968					
	16	Total assets. Add lines 1 through 15 (must equal line 34) $$.	511,669,463	16	543,898,843					
	17	Accounts payable and accrued expenses .			4,111,769	17	4,416,572			
	18	Grants payable			0	18				
	19	Deferred revenue			2,622,580	19	2,619,686			
	20	Tax-exempt bond liabilities	•		103,445,059	20	117,962,900			
ès	21	Escrow or custodial account liability Complete Part IV of Schedu	le D		0	21	0			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified							
ä		persons Complete Part II of Schedule L			0	22	0			
	23	Secured mortgages and notes payable to unrelated third parties	s .		0	23	0			
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0			
	25	Other liabilities Complete Part X of Schedule D			18,833,594	25	22,881,876			
	26	Total liabilities. Add lines 17 through 25			129,013,002	26	147,881,034			
بې		Organizations that follow SFAS 117, check here \blacktriangleright $\boxed{\checkmark}$ and comp	plet e l	lines 27						
Fund Balance		through 29, and lines 33 and 34.								
ılar	27	Unrestricted net assets			147,746,567	27	149,218,524			
ă	28	Temporarily restricted net assets		86,914,166		91,400,363				
pui	29	Permanently restricted net assets			147,995,728	29	155,398,922			
7		Organizations that do not follow SFAS 117, check here ► a	nd con	nplet e						
ō	20	lines 30 through 34. Capital stock or trust principal, or current funds				30				
Assets	30 31	Paid-in or capital surplus, or land, building or equipment fund				31				
55	32	Retained earnings, endowment, accumulated income, or other fi				32				
	33	Total net assets or fund balances	unus		382,656,461	33	396,017,809			
Net										
i	34	Total liabilities and net assets/fund balances			511,669,463	34	543,898,843			

			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)

Employer identification number

SCHEDULE A Public

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

CORP	ORATIO	N OF HAVERFORD COLLE	GE				,			
							6002304			
	rt I				ons must complete		See instri	uctions		
The	organı	zation is not a privat	e foundation becaus	e it is (For lines 1 th	rough 11, check only	y one box)				
1	Г	A church, conventi	on of churches, or as	sociation of churche	s section 170(b)(1)	(A)(i).				
2	✓	A school described	I in section 170(b)(1)(A)(ii). (Attach Sch	redule E)					
3	Γ	A hospital or a coo	perative hospital ser	vice organization de	scribed in section 17	0(b)(1)(A)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state								
5	Γ	-		=	rsity owned or opera	ted by a gover	nmental u	nıt describe	_ ed in	
	_		A)(iv). (Complete Pa							
6			<u> </u>	-	escribed in section 1		•			
7		described in	at normally receives A)(vi) (Complete Pa	·	ıts support from a go	vernmental ur	nit or from	the general	public	
8	Γ	A community trust	described in section	170(b)(1)(A)(vi) (Complete Part II)					
9	Γ	An organization tha	at normally receives	(1) more than 331/3	% of its support from	n contributions	, members	ship fees, a	nd gros	SS
					ject to certain excep					
		its support from gro	oss investment incor	ne and unrelated bus	iness taxable incom	e (less section	n 511 tax)	from busin	esses	
		acquired by the org	anızatıon after June	30, 1975 See sect i e	on 509(a)(2). (Comp	lete Part III)				
10	Г				or public safety See)(4).			
11	Γ	one or more publicl	y supported organiza	itions described in s orting organization a	penefit of, to perform ection 509(a)(1) or s nd complete lines 11 III - Functionally in	ection 509(a) e through 11h	(2) See s e		a)(3).	Check
e	Γ			_	ontrolled directly or i publicly supported oi			•		
f			received a written de	termination from the	IRS that it is a Type	I, Type II or	Type III s	upporting o	rganız	ation,
g		Since August 17, 2 following persons?	2006, has the organi	zatıon accepted any	gıft or contrıbutıon fr	om any of the				
		(i) a person who di	rectly or indirectly co	ontrols, either alone	or together with pers	ons described	ın (II)		Yes	No
		and (III) below, the	governing body of th	e the supported orga	nızatıon?			11g(i)		
		(ii) a family membe	er of a person describ	oed in (i) above?				11g(ii)		
		(iii) a 35% control	led entity of a persor	n described in (i) or (ıı) above?			11g(iii)		
h		Provide the following	ng information about	the supported organ	zation(s)					
			(iii)	(iv)						

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga in the U	on in anized	(vii) A mount of support?
		ınstructions))	Yes	No	Yes	No	Yes	No	
Total									

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.	֥ <i>)</i>		
	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 been	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

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OMB No 1545-0047

Open to Public

Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Employer identification number Name of the organization CORPORATION OF HAVERFORD COLLEGE 23-6002304 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 1 0 0 Aggregate contributions to (during year) 125,000 3 Aggregate grants from (during year) 15,000 Aggregate value at end of year 19,796 302,478 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located -__ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ __ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

44,229

(ii) Assets included in Form 990, Part X

4,331,335

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

0

Assets included in Form 990, Part X For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2009

'ali	TITLE Organizations Maintaining Co	diections of Art	, HIS	toricai	ireas	sures, or c	<u>Jtne</u>	er Similar As	ssets	(con	<u>tinued)</u>
3	Using the organization's accession and othe items (check all that apply)	r records, check any	ofth	e followi	ng that	are a signific	ant ι	use of its collec	tion		
а	Public exhibition		d	┌ Lo	an or ex	change prog	rams	5			
b	Scholarly research		e	┌ ot	her						
c	✓ Preservation for future generations										
4	Provide a description of the organization's c Part XIV	ollections and expla	ın how	v they fur	ther the	e organizatio	n's e	xempt purpose	ın		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							nılar	┌ Ye:	s [√ No
Pai	t IV Escrow and Custodial Arrang					on answere	ed "Y	es" to Form	990,		,
	Part IV, line 9, or reported an ar										
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					s or other as	sets	not	✓ Ye	. [_ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng table		Г		1 -			
_								A 1	mount		
C _ı	Beginning balance					-	1c				28,924
d	Additions during the year						1d				4,048
e	Distributions during the year					-	1e				8,923
f	Ending balance						1f				4,049
2a	Did the organization include an amount on F		21?						Г Ye:	\$ ·	✓ No
	If "Yes," explain the arrangement in Part XIV			1 11	137 11 1 .	000		1.71/ 1 40			
Рα	rt V Endowment Funds. Complete	If the organization (a)Current Year		Merea Prior Yea				rt IV, IINE IU. I)Three Years Back		ur Yez	ırs Back
la	Beginning of year balance	336,085,820		521,307		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		.,	(5). 5		
b	Contributions	5,451,420		10,637	7,065						
c	Investment earnings or losses	33,178,648		-170,364	1,959						
d	Grants or scholarships	3,402,225		4,97	7,583						
e	Other expenditures for facilities and programs	14,473,951		19,51	5,424						
f	Administrative expenses	1,339,414		1,00	1,130						
g	End of year balance	355,500,298		336,08	5,820						
2	Provide the estimated percentage of the yea	r end balance held a	is								
а	Board designated or quasi-endowment 🕨	39 %									
ь	Permanent endowment F 61 %										
c	Term endowment ► 0 %										
3a	Are there endowment funds not in the posse	ssion of the organiza	ation t	hat are l	neld and	l administere	d for	the			
	organization by							_	-	-	No
	(i) unrelated organizations						•	3a	(i) (ii)	-	No No
ь	(ii) related organizations						•		ь	十	
1	Describe in Part XIV the intended uses of the	•					•				
Pai	rt VI Investments—Land, Building					Part X, line	10.				
	Description of investment			(a) Cost basis (inv	or other estment)	(b)Cost or o		(c) Accumulated depreciation	i (d)	Book	value
La	Land				C	4,48	1,255			4,	481,255
	Buildings				C	· ·			9		766,232
	Leasehold improvements				C	 	0		0		0
d	Equipment				C	19,84	6,961	14,953,92	21	4,	893,040
	Other				(0 15,21			_		504,904

122,645,431

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	(c) Method of valuation Cost or end-of-year market value
Financial derivatives	0	Cost of end-of-year market value
Closely-held equity interests	0	
Other Common trust and sımılar funds	105 470 915	_
Common trust and similar lunds	105,470,815	F
Hedge funds	34,995,772	F
Venture capital and private equity funds	117,916,994	F
Deal actate finds	14.222.054	_
Real estate funds	14,223,054	F
Miscellaneous	329,292	F
Tabal (Caluma (h) abauld aqual Farm 000, Part V, cal (P) line 12.)	• 272.025.027	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIIII Investments—Program Related. Se	272,935,927 272,935,927 29 272,935,927 272	
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Student loans receivable	949,555	
Employee mortgages	1,315,781	C
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	2,265,336	
Part IX Other Assets. See Form 990, Part X, II		
(a) Descri	ption	(b) Book value
Funds held in trust by others		2,731,581
Bond proceeds held by trustee Accrued income receivable		15,415,460 429,927
O ther		1,000
		,
Total. (Column (b) should equal Form 990, Part X, col.(B) line	15.)	18,577,968
Part X Other Liabilities. See Form 990, Part X		10,5,7,7,900
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
Interest rate swaption liability	11,914,674	
Planned giving liabilities	8,826,810	
Advances from US Government	747,542	
Refundable advance Asbestos ARO liability	614,882 598,791	
Accrued postretirement liability	179,177	
·		
Table (Colons (I) to the 15 cost of		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	22,881,876	

Par	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	87,548,860
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	93,388,540
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-5,839,680
4	Net unrealized gains (losses) on investments	4	20,138,658
5	Donated services and use of facilities	5	
6	Investment expenses	6	1,027,422
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,965,05
9	Total adjustments (net) Add lines 4 - 8	9	19,201,029
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	13,361,349
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		
1	Total revenue, gains, and other support per audited financial statements	1	90,488,372
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments	8	
Ь	Donated services and use of facilities	-	
С	Recoveries of prior year grants	0	
d	Other (Describe in Part XIV)	7	
e	Add lines 2a through 2d	2e	19,814,40
3	Subtract line 2e from line 1	3	70,673,97:
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	0	
b	Other (Describe in Part XIV) 4b 16,874,88	9	
c	Add lines 4a and 4b	4c	16,874,889
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	87,548,860
Part	XIIII Reconciliation of Expenses per Audited Financial Statements With Expens	es per Re	turn
1	Total expenses and losses per audited financial statements	1	77,127,023
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	\ -	
a	Donated services and use of facilities		
ь	Prior year adjustments	 	
c	Other losses	 	
d	Other (Describe in Part XIV) 2d -15,194,09	95	
e	Add lines 2a through 2d		-15,194,09
3	Subtract line 2e from line 1	3	92,321,118
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 1,027,42	22	
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	1,067,422
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	. 5	93.388.540

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, 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
SchD_P03_S00_L04	Schedule D, Part III, Line 4	Special collections of art and historical treasures serve to advance scholarship and to further teaching, research and service. Special collections range from Quaker collections to college archives to rare manuscripts to fine art assets. The Quaker collection consists of manuscripts, as well as numerous photographs, artworks, artifacts, furniture and films. The College archives include records, publications and artifacts produced by offices, committees, and student groups. Rare books and manuscript collections strengths include American and English literature, history and politics. Today, the collection of fine art encompasses three areas. material in support of the College curricula, material that documents the College's history and material that documents the history of Quakerism.
SchD_P04_S00_L01b	Schedule D, Part IV, Line 1b	The College is trustee of the William Maul Measey Trust The College is entitled to 60% of the gross income of the Trust and includes 60% of the Trust assets in its financial statements and Form 990. The remaining 40% of the gross income is distributed to certain secondary schools for student financial aid. The 40% of Trust principal at June 30, 2010 was \$18,471,375. The 40% of Trust income distributable to the schools is reported in Lines 1c-f. The secondary schools that currently receive trust income are George School, Westtown School, Scattergood Friends School, and Olney Friends School
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The College spends a prudent amount of its endowment annually to support the educational mission of the College in accordance with donor restrictions and internal designations
SchD_P10_S00_L00	Schedule D, Part X	The College evaluated how uncertain tax positions taken or expected to be taken in a tax return should be recognized, measured, presented and disclosed in the financial statments No adjustments to the financial statement were required as a result of the evaluation. The College will continue to monitor and evaluate its unrelated business income activity.
SchD_P11_S00_L08	Schedule D, Part XI, Line 8	Change in contributions receivable \$(1,786,050), Loss on bond refinancing \$(219,000), Grants paid from donor advised fund \$40,000, Rounding \$(1)
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Change in contributions receivable \$(1,786,050), Indirect cost recovery \$362,242, Bookstore expensitures \$1,264,552, Loss on bond refinancing \$(219,000), Bookstore internal rent \$54,000, Rounding \$(1)
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Financial aid \$16,874,889
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	Financial aid \$(16,874,889), Indirect cost recovery \$362,242, Bookstore expenditures \$1,264,552, Bookstore internal rent \$54,000
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	Grants paid from donor advised fund \$40,000 to outside organizations

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization CORPORATION OF HAVERFORD COLLEGE

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

23-6002304 YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? 2 Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain 3 Yes Such a policy is published in our catalog and other admissions literature. Also, the policy is published in newspapers or on the internet when advertising for employment Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b Yes Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990) Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? 5c Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990) 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes h Has the organization's right to such aid ever been revoked or suspended? 6b Νo If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) 🎜 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form 7 Yes 990)

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DLN: 93493129018161

OMB No 1545-0047

SCHEDULE F (Form 990)

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

Statement of Activities Outside the United States

► Attach to Form 990. ► See separate instructions.

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

Name of the organization CORPORATION OF HAVERFORD COLLEGE **Employer identification number**

23-6002304

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

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?	Yes	Γ	No

For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

3 Activites per Region (U:	se Schedule F-1	(Form 990) if add	ditional space is needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South Asia	0	0	Program Services	Scholarships	184,601
Europe (including Iceland and Greenland)	0	0	Program Services	Scholarships	143,441
Sub-Saharan Africa	0	0	Program Services	Scholarships	77,379
East Asia and the Pacific	0	0	Program Services	Scholarships	79,789
South America	0	0	Program Services	Scholarships	45,187
Middle East and North Africa	0	0	Program Services	Scholarships	53,637
Europe (including Iceland and Greenland)	0	0	Program Services	Study abroad program fees	484,406
Central America and the Caribbean	0	0	Program Services	Study abroad program fees	5,025
Europe (including Iceland and Greenland)	0	0	Fundraising	Five Haverford employees attended the International Council in Paris The primary purpose was to foster greater awareness of Haverford College internationally and promote greater international emphasis in academic and outreach areas of the College	17,947
East Asia and the Pacific	0	0	Fundraising	Employee travel to meet with alumni, current parents and heads of schools for our Admissions office	15,330
South Asia	0	0	Fundraising	Employee travel meet with alums who can help further long-term and mutually-enriching relationships	5,042
Central America and the Caribbean	0		Unrelated Trade or Business	Endowment foreign passive investments	0
Totals ▶	0	0			1,111,784
For Privacy Act and Paperwork R	eduction Act Notic	e, see the Instruc	tions for Form 990.	Cat No 50082W Sche	edule F (Form 990) 2009

Part IV	, line 15, for an	sistance to Orgar y recipient who recensional	eived more than \$5	es Outside the Ur ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more that	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
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.

OSC SCIICAGIC	i I (Torini 220) ii dd	didonal space	is necucu.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Scholarships to foreign students	South Asia	4	184,601	Cash payment	0		FMV
Scholarships for foreign students	Sub-Saharan Africa	2	77,379	Cash payment	0		FMV
Scholarships to foreign students	Europe (including Iceland and Greenland)	3	143,441	Cash payment	0		FMV
Scholarships to foreign students	East Asia and the Pacific	2	79,789	Cash payment	0		FMV
Scholarships to foreign students	South America	1	45,187	Cash payment	0		FMV
Scholarships to foreign students	Mıddle East and North Afrıca	1	53,637	Cash payment	0		FMV
							<u> </u>
-							1
							1
							-
							1

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009		Page 4
Part IV Supplemental Complete this p		ired in Part I, line 2, and any additional information.
Identifier	ReturnReference	Explanation
SchF_P01_S00_L02	Schedule F, Part I, Line 2	The procedures to monitor College scholarships (grant aid) awarded to nonresident aliens are the same procedures as scholarships awarded to citizens from the United States Haverford College scholarships are based solely on need Haverford does not have any grant based on merit Applicants can be asked to file the College Board Profile and the FAFSA If eligible for federal aid, parent and student personal and business taxes must also be provided Supplements for businesses and forms for non-custodial parents may also be required based on circumstances College policy is reviewed in the form of appeals to the Financial Aid Committee made up of the Dean of Admissions, the Dean of the College and the VP of Finance and Administration Haverford scholarships are credited directly to the student's account for tuition, fees, room and board, and other billed charges

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DLN: 93493129018161

SCHEDULE G (Form 990 or 990-EZ) **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

Department of the Treasury

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Inspection

quired to com	plete the	s pa	urt. owing activities Che	23-6002304 o Form 990, Part IV,	tification number
mplete if the o	plete the	s pa	urt. owing activities Che	o Form 990, Part IV,	line 17.
quired to com	plete the	s pa	urt. owing activities Che		line 17.
l funds through a	•		_	ck all that apply	
	e	굣			
			Solicitation of non-	government grants	
	т	~	Solicitation of gove	ernment grants	
	g	\vdash	Special fundraising	g events	
(iii) fundrais custo conti	Did er have dy or	0-EZ	I filers are not requir	(v) A mount paid to (or retained by) fundraiser listed in	
	1	-		col (i)	organization
Tes	No		0	85,014	-85,014
			0	85,014	-85,014
	uals or entity uals or entities the organization (iii) fundrais custo conti	art VII) or entity in connection and also or entities (fundraise the organization Form 99 (iii) Did fundraiser have custody or control of contributions? Yes No No	art VII) or entity in connection uals or entities (fundraisers) p he organization Form 990-EZ (iii) Did fundraiser have custody or control of contributions? Yes No No	art VII) or entity in connection with professional funds or entities (fundraisers) pursuant to agreeme the organization. Form 990-EZ filers are not required in the organization of the or	fundraiser have

AK,AL,AR,AZ,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,LA,MA,MD,ME,MI,MN,MO,MT,NC,ND,NH,NJ,NM,NY,OH,OK,OR,PA,RI,SD,TN,UT,VA,WA,WI,WV

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form					report	ted
			(a) Event #1	(b) Event #2	(c) O ther Events (total number)	(d) To	otal Eve ol (a) th ol (c))	
Revenue	1 2 3	Gross receipts Less Charitable contributions Gross income (line 1 minus line 2)	(event type)		(total number)			
	4	Cash prizes						
Ses	5 6	Non-cash prizes				+		
Expenses	7	Food and beverages						
Direct B	8	Entertainment						
ឨ	9	Other direct expenses .				<u> </u>		
	10 11	Direct expense summary Add line Net income summary Combine lii			. 			
Par	t III		ganızatıon answered		irt IV, line 19, or repo	rted mo	re thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add co	otal gam I (a) th ol (c))	
	1 (Gross revenue						
Ses	2 (Cash prizes				<u> </u>		
Expenses	s 1	Non-cash prizes				<u> </u>		
Direct E	4 F	Rent/facility costs						
<u></u>	5 (Other direct expenses						
	6 \	Volunteer labor	∀es	│	Г Yes			
		Direct expense summary Add lines			.			
	8	Net gaming income summary Com	bine lines 1, column d, a	ind line 7	<u> . .</u>		Yes	No
9 a	Is th	er the state(s) in which the organiza ne organization licensed to operate				· 9a		
b		lo," Explain				_		
10a b		e any of the organization's gaming l es," Explain	ıcenses revoked, suspe	nded or terminated during	the tax year?	10a	3	
11		s the organization operate gaming a					.	
12		ne organization a grantor, beneficia ied to administer charitable gaming				. .,		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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DLN: 93493129018161 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule I

(Form 990)

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. ► Attach to Form 990

Open to Public **Inspection** Employer identification number

CORPORATION OF HAVERFO						23-6002304	
1 Does the organization mathematical the selection criteria use	d to award the grants (tantiate the amount of th					√ Yes
Part II Grants and Ot Form 990, Part	her Assistance to IV, line 21 for any r	Governments and recipient that received (0) if additional space	Organizations in I more than \$5,000.	the United States Check this box if n	o one recipient rece	ived more than \$5,0	00. 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
Horace Mann School231 West 246th Street Rıverdale, NY 10471	131740455	501(c)3	25,000	0	FM∨		General support pursuant to the terms of a donor advised fund agreement
2 Enter total number of sec	tion 501(c)(3) and go	vernment organizations .)

Enter total number of other organizations

Ident if ier

Return Reference

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 for Haverford College students	533	16,102,613	0	Cost	
FSEOG grants for Haverford College students	64	188,242	0	Cost	
Internships for Haverford College Students	136	676,853	o	Cost	

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

Explanation

	KOTAIII KOTOTOTO	
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Haverford College scholarships are based solely on need. Haverford does not have any grant aid based on merit. Applicants can be asked to file the College Board Profile and the FAFSA. If eligible for federal aid, parent and student personal and business taxes must also be provided. Supplements for businesses and forms for non-custodial parents may also be required based on circumstances. College policy is reviewed in the form of appeals to the Financial Aid Committee made up of the Dean of Admissions, the Dean of the College, and the VP of Finance and Administration. Haverford scholarships are credited directly to the student's account for tuition, fees, room and board, and other billed charges. Supplemental Education. Opportunity grants are awarded based on the family contribution. Eligibility is determined by the FAFSA and the regulations determined by the U.S. Department of Education that students who receive Pell Grants be provided FSEOG funds first. Other verification forms may be required if the student is selected including the Verification Statement, parent and student tax returns and non-tax filer statements. FSEOG awards are credited directly to the students' account for tuition, fees, room and board, and other billed charges. FSEOG awards are audited annually by the College's outside auditors in conjunction with the A 133 federal funds audit. Student internships are awarded through an application and review process. The internship awards are paid directly to the student. This assistance enables the students to engage in unpaid internships in a variety of domestic and international locations. Some of the areas of studies include Humanities, Global Citizenship and Entrepreneurship.

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DLN: 93493129018161

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

CORPORATION OF HAVERFORD COLLEGE 23-6002304 Questions Regarding Compensation Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Yes Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee ✓ Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? **4**a Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Yes Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

compensation contingent on the revenues of The organization?

Any related organization?

If "Yes," to line 5a or 5b, describe in Part III

For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any

The organization?

Any related organization?

If "Yes," to line 6a or 6b, describe in Part III

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

Schedule J (Form 990) 2009

Cat No 50053T

5a

5b

6Ь

7

8

Νo

Νo

Νo

Νo

Νo

Νo

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

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

Note. The sum of columns (B)(1)-(111) 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-MIS	SC 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	
Stephen G Emerson	(I) (II)	371,000 0	0 0	14,070 0	0	81,446 0	466,516 0		
Mıchael Kıefer	(ı) (ıı)	246,568 0	0 0	0	0	41,728 0	288,296 0		
G Rıchard Wynn	(ı) (ıı)	236,758 0	0	0	0	40,613 0	277,371 0		
Lında Bell	(ı) (ıı)	197,126 0	0	0	0	50,249 0	247,375 0	(
Greg Kannerstein	(ı) (ıı)	160,433 0	0	0	0	32,473 0	192,906 0	(
Jess Lord	(ı) (ıı)	128,700 0	0 0	0	0	0	128,700 0		
Kımberly Benston	(ı) (ıı)	169,100 0	0	0	0	35,602 0	204,702	(
Curtis Greene	(ı) (ıı)	164,600 0	0	0	0	37,029 0	201,629	(
Jerry Gollub	(ı) (ıı)	148,807 0	0 0	0	0	22,618 0	171,425 0		
Lında Gerstein	(ı) (ıı)	147,500 0	0	0	0	24,706 0	172,206 0		
Martha Denney	(ı) (ıı)	59,038 0	0 0	0	0	15,199 0	74,237 0		
Ashok Gangadean	(ı) (ıı)	143,400 0	0 0	0	0	33,664 0	177,064 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 Reference	Explanation
	Part I, Line 1a	TRAVEL FOR COMPANIONS Stephen Emerson, President, agreed in his employment contract to spousal travel Haverford College will reimburse Stephen Emerson for reasonable and customary travel expenses when his spouse travels with him on official College business. Travel expenses are reviewed for business purpose and reimbursed according to an accountable plan. Stephen Emerson's spouse is a professor at Haverford College HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE. Stephen Emerson, President, resides on Haverford College campus free of rent. Linda Bell, Provost, resides on Haverford College campus free of rent. Neither travel for companions nor residence for personal use represents taxable compensation to the listed individuals.
		President Stephen Emerson has an arrangement with the College, allowable under the IRS Code, that permits him to tax defer more of his earnings than the standard amount he would be allowed to do under the College's 403(b) plan. This additional tax deferral was done as a 457(f) Deferred Compensation Agreement.

Schedule J (Form 990) 2009

DLN: 93493129018161

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 0 (Form 990).

► Attach to Form 990. ► See separate instructions.

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number

23-6002304

Pa	art I Bond Issues													
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date	Issued	(e) Issue	Price	(f) Des	(f) Description of Purpose		(g) De	feased	Beh	On alf of uer
											Yes	No	Yes	No
A	Delaware County Authority	23-1973437	246003LH8	05-08-	2008	61,0	000,000		ımprovements to College ıtıes and redemption 2003 and 4 Bonds			×		x
В	Delaware County Authority	23-1973437	246003LX3	04-29-	2010	44,9	144 JUN 1	New dorm aı Bonds	nd partial re	fund 2008		х		х
Pa	rt III Proceeds	•				_				_				
					4	+	В		С	D	ı		E	
1	Total proceeds of issue			6	1,000,000) 4	4,944,29	90						
_2	Gross proceeds in reserve funds				(α							
3	Proceeds in refunding or defeasan	nce escrows		0			α							
4	4 Other unspent proceeds				() 1	15,415,460							
5	5 Issuance costs from proceeds				651,393	3	594,243							
6	6 Working capital expenditures from proceeds				(0						
7	7 Capital expenditures from proceeds				6,798,560)		0						
8	Year of substantial completion			2009		2012						•		
				Yes	No	Yes	No	Yes	No	Yes	No	Ye	s	No
9	Were the bonds issued as part of	a current refunding is	sue?	Х		X								
10	Were the bonds issued as part of	an advance refunding	ıssue?		Х		Х							
11	Has the final allocation of proceed	ds been made?		Х		Х								
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?			Х		Х								
Par	t III Private Business Use													
					A 	B		+		D V		1	<u>E</u>	
1	Was the organization a partner in which owned property financed by		ember of an LLC,	Yes	No X	Yes	No X	Yes	No	Yes	No	Ye	5	No
2					х		Х							
For F	Privacy Act and Paperwork Reduction A	ct Notice, see the Inst	ructions for Form 990			Cat No 50)193E	<u> </u>			Schedule	K (Form	990) 20	09

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

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

Part IV Arbitrage

	Albidage										
		Α			В	С		D		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?		х		х						
2	Is the bond issue a variable rate issue?	Х			Х						
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?	x			х						
b	Name of provider	UBS									
С	Term of hedge		2								
4a	Were gross proceeds invested in a GIC?		Х		Х						
b	Name of provider										
С	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		×		х						
6	Did the bond issue qualify for an exception to rebate?	х		х							
				<u> </u>					Schedul	e K /Form 991	1) 2009

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DLN: 93493129018161

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

Transactions with Interested Persons

► Complete if the organization answered

Name of the organization

Employer identification number

								8-60023			
Part I Excess Benefit Train Complete if the organization										40h	
			1 01110111	11 5 5 6 , 1					i aic v , iiiic		rrected?
1 (a) Name of disq	ualified	person			(b) Desc	rıptı	on of transa	ction		Yes	No
										 	1
										-	
3 Enter the amount of the summer	ad an #1				diagnalified name		dumma tha u		_		
2 Enter the amount of tax impos section 4958		_		-				earunde •	r • \$		
3 Enter the amount of tax, If any									· ¢		
3 Linter the amount of tax, if any	, 011 11116	: Z, abov	ve, remibuls	eu by tii	e organization .	•			→		
Part III Loans to and/or	From	Intere	sted Pers	ons.							
Complete if the organi	zation a	nswered	"Yes" on Fo	orm 990	, Part IV, line 26,	or F	orm 990-E	Z, Part V	', lıne 38a		
	(b) Lo	an to				Ι,	- > 7	(f)		(-3)4(44-	
(a) Name of interested person and	or fro	m the	(c) 0 rigi	ınal	(d)Balance due		e) In efault?	e) In Approved fault? by board or		(g)Written agreement?	
purpose	organız	ation?	principal a	mount	(d)Balance due	"	aldult.	commit		agreemen	
	То	From				Ye	s No	Yes	No	Yes	No
Mıchael Keıfer											
Home mortgage		Х	5	00,000	473,287		No		Νo	Yes	
								ļ			
Γotal				► \$	473,287						
Part IIII Grants or Assistai											
Complete if the orga	nızatıc				•		e 27.				
(a) Name of interested pers	on	(1	•	•	en interested per	son	(c)A m	ount of g	rant or type	ofassist	ance
			and	a tne org	ganızatıon						
Part IV Business Transact	tions 1	[nvolv	ing Intore	seted I	Parcanc						
Part IV Business Transact Complete if the organization						lın	e 28a 28l	n or 28	C		
complete if the orga	mzacic		Relationship		iiii 550, i dic 14	,	C 200, 201	3, 01 20	· · · · · · · · · · · · · · · · · · ·	(e) Sh	arıng of
		, ,	een interest		(c) A mount of			_		organi	zation's
(a) Name of Interested perso	n	1	rson and the		transaction		(d) Descr	iption of	transactior	reve	nues?
		0	rganızatıon							Yes	No
Jennıfer Punt		+	ofofficer		116,4	15	Employee c	ompensa	ition		Νο
Carol Solomon		Souse	of officer		66,0	00	Employee c	ompensa	ition		Νo
CapGen Financial Group LP			Ludwig, Boa	ard	1,714,1		Investment		ership		Νο
		lof Man	agers, is a				(capital call)			1

director of CapGen

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 CORPORATION OF HAVERFORD COLLEGE

Employer identification number

					23-6002304			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	Method of d rever	letermining)	
1	Art—Works of art	X	13	34,211	FMV			
2	Art—Historical treasures .			,				
3	Art—Fractional interests							
4	Books and publications	Х		158	Input at \$1			
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	90	591,790	FMV			
10	Securities—Closely held stock $. $							
11	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18		X	2		Subject Matter Exp	ert		
19	Food inventory	X	3	741	Cost			
20	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
25	Quaker Other ► (materials)	×	22	22	Input at \$1			
	Electric low							
	speed							
26	Other ► (<u>vehicle</u>)	X	1	8,500	FMV			
27	O ther ▶()							
28	·							
29	Number of Forms 8283 received for which the organization compl				29			0
	ior willer the organization compr	eteu i oiiii c	3283, Fait IV, Dollee Ackii	iowieagement		Ye	<u> </u>	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I. lines	1-28 that it		+	
	must hold for at least three year							
	for exempt purposes for the entire					30a		No
Į.	If "Yes," describe the arrangeme					304	+	
31	Does the organization have a gif			review of any non-standard	contributions?	31 Ye	s	
32a	Does the organization hire or us	e third part	ies or related organizations	to solicit, process, or sell	non-cash			
	contributions?					32a	\perp	No
33	 If "Yes," describe in Part II If the organization did not report describe in Part II 	revenuesı	n column (c) for a type of p	roperty for which column (a) is checked,			

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: 23-6002304

Name: CORPORATION OF HAVERFORD COLLEGE

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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Information to Form 990**

OMB No 1545-0047

DLN: 93493129018161

2009

Open to Public Inspection

Name of the organization

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

23-6002304

Employer identification number

ldentifier	Return Reference	Explanation
F990_P01_S00_L05	' '	The number of empolyees includes regular faculty, administration and staff, student and temporary summer employees

ldentifier	Return Reference	Explanation
F990_P06_S0A_L02		How ard Lutnick, manager, had a business relationship with the following managers. Elon Spar, Law rence Tint, Stephen Curw ood and Catherine Koshland. Catherine Koshland's business relationship ended December 2009.

ldentifier	Return Reference	Explanation
F990_P06_S0A_L06		The Corporation of Haverford College has one class of members who may include any member of the Religious Society of Friends, anyone who has served as President of the College or as a member of the Board of Managers for at least six consecutive years

ldentifier	Return Reference	Explanation
F990_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	The Corporation of Haverford College ("the Corporation") has one class of members who may include any member of the Religious Society of Friends, anyone who has served as President of the College or as a member of the Board of Managers ("the Board") for at least six consecutive years. The Corporation formally elects members of the Board, including those nominated by it, by the Board and by the Alumni Association. The Corporation makes any amendments to the bylaws. The Corporation seeks by advice and example to strengthen and enrich Haverford's heritage as a Quaker educational institution. The Board has responsibility for all aspects of the operation and management of the College.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11	i '	The College's Audit Committee review ed the Form 990 before it was filed. The Form 990 was sent to all Board members before being filed, noting that it was reviewed and approved by the Audit Committee. The Form 990 will be available on the College's website.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c		Each year a questionnaire is handed out and sent electronically to Board members, officers and key employees. The President's office tracks and ensures compliance with completing and submitting the conflict of interest questionnaire.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The President's compensation is determined after an annual review by the Board's Committee on Presidential Compensation and Review. The review along with private college executive compensation surveys help determine the President's salary. The President reports to the Board relating to the annual process for determining the compensation of other officers (VP Finance and Administration, VP Institutional Advancement, Provost, Dean of the College and Dean of Admissions). The Committee on Presidential Compensation and Review reports on both of these procedures to the Board in executive session.

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19		The College's financial statements and conflict of interest policy are available to the general public through our wiebsite, Guidestar's wiebsite and upon request. Currently, the College does not publish our governing documents, however these are available upon request.

ldentifier	Return Reference	Explanation
SchG_P01_S00_L02b	Schedule G, Part I, Line 2b	Grenzebach Glier & Associates, Inc provides professional fundraising consulting services for and on behalf of the College It does not engage in any direct solicitations of contributions for and on behalf of the College and therefore has no custody or control on any College contributions

ldentifier	Return Reference	Explanation
SchK_P02_S00_L05		lssuance costs of \$651,393 paid from the 2008 Bond proceeds consisted of Costs of issuance \$322,856, Underwriter's discount \$132,980, Liquidity fee (1 yr in advance) \$185,557

Additional Data

Software ID: Software Version:

EIN: 23-6002304

Name: CORPORATION OF HAVERFORD COLLEGE

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

4d. Other prograi	m services				
(Code) (Expenses \$	40,000	ıncludıng grants of \$	40,000) (Revenue \$	0)
Higher Education	Grants paid from donor advise	d funds to oth	er 501(c)(3) charities (2 ch	narities)	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Kej emplojee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Charles G Beever Board of Managers	2	х						О	0	0
Jennifer C Boal Board of Managers	2	Х						0	0	0
James L Boyer Board of Managers	2	х						0	0	0
Christopher E Dunne Board of Managers	2	Х						0	0	0
Martha Brown Bryans Board of Managers	2	Х						0	0	0
Stephen C Curwood Board of Managers	2	x						0	0	0
Jonathan Wood Evans Board of Managers	2	Х						0	0	0
James W Friedman Board of Managers	2	X						0	0	0
Michael B Kim Board of Managers	2	X						0	0	0
Catherine P Koshland Board of Managers	2	X						0	0	0
Eugene A Ludwig Board of Managers	2	Х						0	0	0
Howard W Lutnick Board of Managers	2	Х						0	0	0
Irene E McHenry Board of Managers	2	Х						0	0	0
John M Morse Board of Managers	2	Х						0	0	0
Christopher K Norton Board of Managers	2	Х						0	0	0
Carlos A Rodriguez Vidal Board of Managers	2	Х						0	0	0
Christopher T Grant Board of Managers	2	Х						0	0	0
Sheila K Sachs Board of Managers	2	Х						0	0	0
Lawrence G Tınt Board of Managers	2	Х						0	0	0
Allan Richard White III Board of Managers	2	Х						0	0	0
Peter A bramenko Board of Managers	2	Х						0	0	0
Steven M Jaharıs Board of Managers	2	Х						0	0	0
Garry W Jenkins Board of Managers	2	Х						0	0	0
Hunter R Rawlings III Board of Managers	2	Х						0	0	0
Roger B Kafker Board of Managers	2	×						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(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
Jacqueline V Brady Board of Managers	2	×						О	0	0
Harold E Jordan Board of Managers	2	х						0	0	0
Dana Shanler Ladden Board of Managers	2	Х						0	0	0
Elizabeth Enloe Board of Managers	2	Х						0	0	0
Anjan K Chatterjee Board of Managers	2	х						0	0	0
Ann V Satterwaite Board of Managers	2	х						0	0	0
Elon E Spar Board of Managers	2	х						0	0	0
Stephen G Emerson President and Board of Managers	60	х		х				385,070	0	81,446
G Richard Wynn VP for Finance & Administration	60			х				236,758	0	40,613
Lında Bell Provost	60			х				197,126	0	50,248
Jess Lord Dean of Admissions & Financial Aid	60			x				128,700	0	30,430
Michael Kiefer VP of Institutional Advancement	60			х				246,568	0	41,725
Martha Denney Dean of the College	60			х				59,038	0	15,199
Kımberly Benston Professor	60					Х		169,100	0	35,602
Jerry Gollub Professor	60					Х		148,807	0	22,619
Ashok Gangadean Professor	60					х		143,400	0	33,664
Linda Gerstein Professor	60					х		147,500	0	24,706
Curtis Greene Professor	60					х		164,600	0	37,029
Greg Kannerstein Dean of the College	60						х	160,433	0	32,473

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
Study away program expenses	1,693,034	1,693,034	0	0
Food Services	1,633,096	1,307,411	273,885	51,800
Minor equipment, auto	1,300,518	971,455	323,002	6,061
Dues, subscriptions, memberships	1,209,215	1,132,427	66,886	9,902
Reallocate Facilities and Security	0	7,274,196	-7,635,966	361,770