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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

2009

OMB No 1545-0047

Open to Public Inspection

A F-		2000		101 2000 06 20 201			Inspection
			car, or tax year beginning 07 C Name of organization	-01-2009 and ending 06-30-201	U	D Employer ider	ntification number
_	ck if ap ress cha	oplicable Please use IRS	RANDOLPH COLLEGE			54-0505941	
_	ne char	label or	Doing Business As			E Telephone nui	
_		type. See				(434) 947-8	000
_	al retur minated	Instruc-	Number and street (or P O t 2500 RIVERMONT AVENUE	oox if mail is not delivered to street addre	ess) Room/suite	G Gross receipts \$	
_	ended r		City or town, state or country	v. and ZIP + 4			
-		pending	LYNCHBURG, VA 24503				
AP F	ilcution			l office an			
			ame and address of principa E KLEIN	ronicer		ıs a group return ites?	for
			RIVERMONT AVENUE				
		LTINC	HBURG,VA 24503		1 ' '	ll affiliates include	
Ta	r-exem	pt status 🔽 501(c) (3) 4 (insert no)	(a)(1) or		o," attach a list ip exemption nun	(see instructions) nber ┡
w	ebsit e	: ► www randolph	ncollege edu				
Forn	n of org	janization 🔽 Corpora	ation Trust Association	Other F	L Year of fo	rmation 1891 M	State of legal domicile VA
Pa	rt I	Summary			•	•	
		•	he organization's mission o		COMPLETE	ACCOUNTION)	
?		INSTRUCTION ((LIBERAL ARTS HIGHER E	DUCATION) - SEE PAGE 2 FOR	COMPLETED	DESCRIPTION)	
	2	Check this box 🕨	f the organization disco	ntinued its operations or disposed	of more than	25% of its net as	ssets
	3	Number of voting	members of the governing	body (Part VI, line 1a)		3	2
	4	Number of indepe	endent voting members of th	e governing body (Part VI, line 1	b)	. 4	2
	5	Total number of e	employees (Part V, line 2a)			5	76
	6	Total number of v	olunteers (estimate if nece	ssary)		6	
	7a	Total gross unrel	ated business revenue from	Part VIII, column (C), line 12		7a	1,27
	ь	Net unrelated bus	siness taxable income from	Form 990-T, line 34		7b	-5,10
					Pric	or Year	Current Year
	8	Contributions ar	nd grants (Part VIII, line 11	1)		7,973,177	9,590,515
ļ	9 Program service revenue (Part VIII, line 2g)					22,937,601	18,566,347
į	10	J	,	lines 3, 4, and 7d)		-3,510,833	2,813,443
	11			5, 6d, 8c, 9c, 10c, and 11e)		2,020,000	
	12		add lines 8 through 11 (mus	e			
						27,399,945	30,970,305
	13	Grants and sımı	lar amounts paid (Part IX, c	olumn (A), lines 1-3)		8,443,770	7,096,640
	14	Benefits paid to	or for members (Part IX, co	lumn (A), line 4)			C
os.	15		compensation, employee be	nefits (Part IX, column (A), lines	5 –	E21 12E	E04 00E
20 20 20 20 20 20 20 20 20 20 20 20 20 2	16a	10) Professional fun	ndraising fees (Part IX, colu	mn (A), line 11e)		521,125	594,085
Φ Σ	ь		penses (Part IX, column (D), line				
Ш	17			11a-11d, 11f-24f)		24,921,865	24,896,640
	18	Total expenses	Add lines 13-17 (must eq	ual Part IX, column (A), line 25)		33,886,760	32,587,365
	19	Revenue less ex	xpenses Subtract line 18 fr	om line 12		-6,486,815	-1,617,060
Fund Balances					_	g of Current Year	End of Year
4	20	Total assets (Da	art V line 16)			191,659,576	202,201,945
	21					35,206,620	· · · · · · · · · · · · · · · · · · ·
Š	22						34,285,544
	t II	Signature B		21 from line 20		156,452,956	167,916,401
· C	. 11	_		nined this return, including accompanying	schedules and s	tatements, and to th	e hest of my knowledge
				on of preparer (other than officer) is base			
ign		*****			2011-	-05-12	
ere	•	Signature of office	cer		Date		
		CHRISTOPHER L	BURNLEY TREASURER/VP OF FIN	IANCE			
		Type or print nai	me and title				
_		Preparer's			Check If	Preparer's identify	ring number
aid		signature Ryan	n McEntire	1	self- empolyed 🕨 🦵	(see instructions)	
	rer's	Firm's name (or you	ırs 🛦 Brown Edwards & Compan		. / 1		
•	Only	If self-employed), address, and ZIP +	-	,		EIN Þ	
2C (i auuress, and ZIP + 4	4 PO Box 10189				
3 C (_	,				Phone no 🕨 (43	4) 948-9000

Cat No 11282Y

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

SEE DETAILED DESCRIPTION OF ORGANIZATION'S PRIMARY MISSION PROVIDED ON SCHEDULE O

2	•		ant program services during the year		Yes ✓ No
	If "Yes," describe	these new services on S	chedule O		
3	-	on cease conducting, or i	make significant changes in how it c		Yes V No
	If "Yes," describe	these changes on Sched	ule O		
4	Section 501(c)(3)	and 501(c)(4) organizat	es for each of the organization's thre cions and section 4947(a)(1) trusts and revenue, if any, for each program	are required to report the amou	
4a	(Code) (Expenses \$	26,530,762 including grants of \$	7,096,640) (Revenue \$	19,247,186)
	INSTRUCTION 484 F	FULL-TIME UNDERGRADUATE	AND GRADUATE STUDENTS AND 16 PART-TI	ME STUDENTS (BASED ON FALL 2009 E	NROLLMENT)
	-				
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	-				
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4d	Other program se	ervices (Describe in Sch	nedule O)		
	(Expenses \$	ınc	luding grants of \$) (Revenue \$)
4e	Total program se	rvice expenses►\$	26,530,762		

art TV	Check	list of	Require	d Sche	dulac
	CHECK	MISL OI	REUUIIE	u stile	uules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II.	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
Ь	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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V State	ements Regarding (Other IRS Filings	and Tax Compliance
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			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
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	
l a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ▶UK See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
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		
a	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		
,	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		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	Yes	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	Yes	
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

2500 RIVERMONT AVENUE LYNCHBURG, VA 24503

(434) 947-8115

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

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 29			
ь	Enter the number of voting members that are independent 1b 29			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
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	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
ке	venue Code.)		Yes	No
100	Does the organization have local chapters, branches, or affiliates?	10a	res	No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	104		110
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ► VA			
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 Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ie orga	nızatıor	n ►
	Christopher L Burnley			

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)						(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►7						
			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," complete 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 individual	4	Yes				
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services						

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

rendered to the organization? If "Yes," complete Schedule I for such person

(A) Name and business address	(B) Description of services	(C) Compensation
COLEMAN-ADAMS CONSTRUCTION PO box 368 FOREST, VA 24551	CONSTRUCTION	2,212,377
Aramark 2500 rivermont ave lynchburg, VA 24503	DINING & CATERING	1,408,803
SecuRITAS SECURITY SERVICES USA INC PO Box 403412 AtLANTA, GA 303843412	Security	413,704
Mcguire woods llp 901 E Cary st riCHMOND, VA 23219	Legal	284,742
RCM&D 555 FAIRMONT AVE BALTIMORE, MD 21286	INSURANCE	248,300
2 Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►9) who received more than	

5

Page 8

182,595

Νo

Form 9	•	<u> </u>						Page 9
Part \	/III	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$	1a	Federated cam	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b					
S, g	c	Fundraising eve	ents 1c					
∄ੂ≅	d	Related organiz	zations 1d					
ž,	e	Government grant	s (contributions) 1e	177,616	ļ	ļ		
afio er s	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	9,412,899				
^듩	g	4	butions included in					
ind in	h	IIIIes ra-ri \$ _	10,354 s 1a-1f	▶	9,590,515			
<u> </u>	⊢"	Total. Add filles	5 1a-11	• •	3,330,313			
Program Serwce Revenue	2a	TUITION AND FEES	5	Business Code 611,710	13,582,263	13,582,263		
	Ь	AUXILIARY SERVIC		611,710	4,022,009	4,022,009		
	c	OTHER		611,710	946,515	946,515		
¥.	d	BOOKSHOP COMM	ISSIONS	451,211	15,560	14,290	1,270	
ૐ ⊆	e				· ·		<u> </u>	
in in	f	All other progra	am service revenue					
Š	g	Total Add lines	s 2a-2f		18,566,347			
	3		ome (including dividence		20,000,0			
		and other simil	aramounts)	▶ [2,131,334			2,131,334
	4	Income from inves	stment of tax-exempt bond p	roceeds				
	5	Royalties		· · · · •				
	6a	Gross Rents	(ı) Real	(II) Personal				
	ь	Less rental						
	_c	expenses Rental income						
	d	or (loss)	me or (loss)					
	<u> </u>	Traction and the or	(i) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory Less cost or	682,109					
	b	other basis and sales expenses						
	c	Gain or (loss)	682,109					
	d	Net gain or (los	s)	▶	682,109	682,109		
d١	8a	Gross income f events (not inc	_					
Other Revenue		\$of contributions	s reported on line 1c)					
<u> </u>	ь	Loss director	penses b					
₹	c		(loss) from fundraising e	vents 🕨				
	9a		rom gaming activities ne 19					
	b c		penses b	ıtıes▶				
	10a	Gross sales of returns and allo						
	b		oods sold b					
	С		(loss) from sales of inve					
	11-	Miscellaneou	s Revenue	Business Code				
	11a b							
	C							
	d	All other reven						
			s 11a-11d					
	12	Total revenue.	See Instructions	. •	30,970,305	19,247,186	1,270	2,131,334

	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).								
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21								
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	6,935,430	6,935,430						
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	161,210							
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees	594,085		594,085					
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								
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)								
9	Other employee benefits								
10	Payroll taxes								
11	Fees for services (non-employees)								
а	Management								
b	Legal								
c	Accounting								
d	Lobbying								
e	Professional fundraising See Part IV, line 17								
f	Investment management fees								
g	Other								
12	Advertising and promotion								
13	Office expenses								
14	Information technology								
15	Royalties								
16	Occupancy								
17	Travel								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings								
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization								
23	Insurance								
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)								
а	INSTRUCTION	8,380,916	8,380,916						
b	INSTITUTIO NAL SUPPORT	5,462,518		4,255,670	1,206,848				
С	STUDENT SERVICES	4,744,737	4,744,737						
d	AUXILIARY SERVICES	3,775,672	3,775,672						
e	ACADEMIC SUPPORT	2,532,797	2,532,797						
f	All other expenses								
25	Total functional expenses. Add lines 1 through 24f	32,587,365	26,530,762	4,849,755	1,206,848				
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in								
	column (B) joint costs from a combined educational								

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,470,831	1	4,387,931
	2	Savings and temporary cash investments			4,363,331	2	1,756,094
	3	Pledges and grants receivable, net	7,047,851	3	7,249,247		
	4	Accounts receivable, net			688,181	4	426,008
	5	Receivables from current and former officers, directors, trustees highest compensated employees. Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		n 4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net			1,795,099	7	1,859,158
8	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	76,684,527			
	ь	Less accumulated depreciation	10b	38,184,009	39,380,154	10c	38,500,518
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11	136,432,582	12	147,524,329		
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	481,547	15	498,660		
	16	Total assets. Add lines 1 through 15 (must equal line 34) .	191,659,576	16	202,201,945		
	17	Accounts payable and accrued expenses .			1,478,983	17	1,698,274
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities	25,382,610	20	24,591,831		
<u> </u>	21	Escrow or custodial account liability Complete Part IV of Schedul	leD.			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
===		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties	403,632	23	316,042		
	24	Unsecured notes and loans payable to unrelated third parties		928,294	24	884,409	
	25	Other liabilities Complete Part X of Schedule D		7,013,101	25	6,794,988	
	26	Total liabilities. Add lines 17 through 25	35,206,620	26	34,285,544		
-S		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	olet e l	ines 27			_
Fund Balance		through 29, and lines 33 and 34.					
<u>ā</u>	27	Unrestricted net assets			47,386,506	H	48,775,228
ũ	28	Temporarily restricted net assets	34,557,299	\vdash	39,778,466		
Ξ	29	Permanently restricted net assets		74,509,151	29	79,362,707	
교		Organizations that do not follow SFAS 117, check here ► ar	nd con	ıplet e			
10		lines 30 through 34.				_	
Assets	30	Capital stock or trust principal, or current funds				30	
SS	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	ınas		150 450 050	32	167.046.404
Net	33	Total labelitate and not proceed found belonged.			156,452,956	\vdash	167,916,401
	34	Total liabilities and net assets/fund balances	191,659,576	34	202,201,945		

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

B NO 1343-004

2009

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

RANDOLPH COLLEGE

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

Public Charity Status and Public Support

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

Employer identification number

54-0505941

Pa	rt I	Reas	on for Pul	olic Charity Stat	us (All orga	anızatıons ı	must comple		t.) See inst				
The	organı	zatıon ıs	not a private	e foundation because	ıtıs (Forlır	nes 1 throug	h 11, check d	nly one box)				
1	Γ	A churc	h, conventio	on of churches, or as:	sociation of c	hurches se	ction 170(b)(1)(A)(i).					
2	✓	A scho	ol described	ın section 170(b)(1)	(A)(ii). (Atta	ach Schedul	e E)						
3	Γ	A hosp	tal or a coop	perative hospital serv	vice organiza	tıon descrıb	ed in section	170(b)(1)(A	۱)(iii).				
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). hospital's name, city, and state									(A)(iii). Ente	er the		
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)											
6	<u> </u>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
7	ı	describ	ed ın	t normally receives a A)(vi) (Complete Pa		part of its si	upport from a	government	al unit or from	n the genera	l public		
8	Γ	A comn	nunity trust	described in section	170(b)(1)(A)(vi) (Comp	olete Part II)						
9	Γ	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross											
		receipt	s from activi	ties related to its ex	empt function	ns—subject 1	to certain exc	eptions, and	l (2) no more	than 331/3%	ν of		
		ıts supp	oort from gro	ss investment incom	ne and unrela	ted busines:	s taxable inco	ome (less se	ctıon 511 tax	() from busir	iesses		
		acquire	d by the org	anızatıon after June 3	30,1975 Se	e sect ion 50	9(a)(2). (Cor	nplete Part I	II)				
10	Γ	Anorga	An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
11	Γ	one or i	more publicly	anized and operated y supported organiza pes the type of suppo b Type II	tions describ orting organiz	ed in sectio ation and co	n 509(a)(1) c	or section 50 11e through	9(a)(2) See	section 509			
е	Γ	other th section	nan foundatio 509(a)(2)	x, I certify that the o	er than one o	r more publi	cly supported	l organizatio	ns described	ın section 5	09(a)(1) or		
f		If the o		eceived a written de	termination f	rom the IRS	that it is a Ty	/pe I, Type I	I or Type III	supporting	organization,		
g		Sınce A followin	ugust 17, 2 g persons?	006, has the organiz				·			, 		
				ectly or indirectly co	•	•		ersons descr	ibed in (II)	44-(2)	Yes No		
				joverning body of the			ion?			11g(i)			
		• •	•	r of a person describ	• • •		3			11g(ii)			
				ed entity of a person						11g(iii)	<u>'1 1 </u>		
h		Provide	the followin	g information about t	ne supported	organizatio	n(s)						
(i) Name suppo organiz		e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your govel docume	on in ed in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organization col (i) orga in the U	on in inized	(vii) A mount of support?		
				instructions))	Yes	No	Yes	No	Yes	No			
Tota	ı												

ınstructions

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

▶□

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

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

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

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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.

Name of the organization **Employer identification number** RANDOLPH COLLEGE 54-0505941 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 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 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
- Number of conservation easements on a certified historic structure included in (a)
- 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

9,500

(ii) Assets included in Form 990, Part X

2,865,705

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

2b

2c

Cat No 52283D Schedule D (Form 990) 2009

Par	444 Organizations Maintaining Co	ollections of Art	, His	torical T	reas	ures, or Ot	the	r Similar Ass	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	y of th	e following	that a	re a sıgnıfıcaı	nt u	se of its collecti	on	
а	Public exhibition		d	✓ Loar	orexo	:hange progra	ams			
Ь	Scholarly research		e	▽ Othe	er INS	TRUCTION				
c	✓ Preservation for future generations									
4	Provide a description of the organization's c Part XIV	ollections and expla	ın how	v they furth	ner the	organization'	s ex	empt purpose ır		
5	During the year, did the organization solicit assets to be sold to raise funds rather than			•					Yes	√ No
Par	t IV Escrow and Custodial Arrang					n answered	I "Y	es" to Form 99	90,	
	Part IV, line 9, or reported an ar									
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other interme	diary	for contrib	utions	or other asse	ets r	not 	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng table						
								A me	ount	
c	Beginning balance					[:	1c			
d	Additions during the year					[:	1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?			_			Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\									·
	rt V Endowment Funds. Complete		n ans	wered "Y	es" to	Form 990,	Par	t IV, line 10.		
		(a)Current Year	(b)Prior Year		Two Years Back	(d)	Three Years Back	(e) Four Y	ears Back
la	Beginning of year balance	123,757,448		152,927,0						
b	Contributions	6,603,095		4,043,3						
C	Investment earnings or losses	16,477,067		-20,674,0						
d	Grants or scholarships	3,389,368		3,561,8						
e	Other expenditures for facilities and programs	6,324,277		7,588,0	045					
f	Administrative expenses	2,160,000		1,389,0	000					
g	End of year balance	134,963,965		123,757,4	148					
2	Provide the estimated percentage of the yea	r end balance held a	as							
а	Board designated or quasi-endowment	25.000 %								
ь	Permanent endowment > 75.000 %									
c										
3a	Term endowment ► Are there endowment funds not in the posse	ssion of the organiza	ation t	hat are he	ld and	administered	for	the		
	organization by								Yes	No
	(i) unrelated organizations							3a(i)	Νo
	(ii) related organizations							3a(ii)	No
	If "Yes" to 3a(II), are the related organization				? .		•	3b		
1	Describe in Part XIV the intended uses of the				000 5	art V line 1	1.0			
2611	t VI Investments—Land, Building	s, and Equipme	nt. 5						Π	
	Description of investment			(a) Cost o basis (inve		(b)Cost or oth basis (other		(c) Accumulated depreciation	(d) Bo	ok value
La	Land					498,	504			498,504
b	Buildings					52,203,	595	20,678,506	3	1,525,089
c	Leasehold improvements									
d	Equipment					20,201,	076	17,184,470		3,016,606
e	Other					3,781,	352	321,033		3,460,319

38,500,518

Part VIII 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	<u>a</u>
Financial derivatives		oost of one of your market variation	
Closely-held equity interests			
Other EQUITIES	48,005,117		F
LQ0111L3	40,003,117		<u>'</u>
ALTERNATIVE INVESTMENTS	51,032,149		F
BONDS	36,059,581		F
CACH AND CACH FOUNDALENTS	0.644.404		_
CASH AND CASH EQUIVALENTS	9,644,491		F
REAL ESTATE	287,063		F
FUNDS HELD IN TRUST BY OTHERS	2,495,928		F
			·
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	147,524,329	2	
Part VIII Investments—Program Related. See		3. (c) Method of valuation	
(a) Description of investment type	(b) Book value	Cost or end-of-year market value	e
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, lin	l		
(a) Descrip		(b) Book valu	е
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes	,-,		
ACCRUED INTEREST PAYABLE	188,371		
STUDENT DEPOSITS AND OTHER DEFERRED			
POST-RETIREMENT HEALTHCARE BENEFIT	885,781		
OBLIGATION	540,993		
U S GOVERNMENT GRANTS REFUNDABLE	629,190		
TRUST AND ANNUITY OBLIGATIONS	2,989,630		
Asset Retirement O bligation (asbestos abatement)	1,561,023		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	6,794,988		

للنكول	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	113	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	30,970,305
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	32,587,365
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,617,060
4	Net unrealized gains (losses) on investments	4	12,559,952
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	520,553
9	Total adjustments (net) Add lines 4 - 8	9	13,080,505
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	11,463,445
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	36,954,170
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	13,080,505
3	Subtract line 2e from line 1	3	23,873,665
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		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	7,096,640
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	30,970,305
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	25,490,725
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	25,490,725
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b 7,096,640		
c	Add lines 4a and 4b	4c	7,096,640
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	32,587,365
	t 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 X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

additional information		
Ident if ier	Ret urn Reference	Explanation
Part III, Line 4		THE COLLEGE HAS AN EXTENSIVE ART COLLECTION WHICH IS MAINTAINED IN A SEPARATE BUILDING UNDER CURATORIAL CARE AND IS USED FOR INSTRUCTION, PUBLIC EXHIBITION, SCHOLARLY RESEARCH, AND OTHER ACTIVITIES RELATED TO THE COLLEGE'S EDUCATIONAL MISSION, AND ALSO FOR LOAN AND EXCHANGE PROGRAMS
Part V, Line 4	Description of Intended Use of Endowment Funds	THE COLLEGE HAS ADOPTED INVESTMENT AND SPENDING POLICIES FOR ENDOWMENT ASSETS THAT ATTEMPT TO PROVIDE A PREDICTABLE STREAM OF FUNDING TO PROGRAMS SUPPORTED BY ITS ENDOWMENT WHILE SEEKING TO MAINTAIN THE PURCHASING POWER OF THE ENDOWMENT ASSETS INCLUDE THOSE OF DONOR-RESTRICTED FUNDS AND BOARD-DESIGNATED FUNDS
Part X	Description of Uncertain Tax Positions Under FIN 48	The Internal Revenue Service has ruled that the College qualifies under Section 501(C)(3) of the Internal Revenue Code, and , therefore, is not generally subject to income taxes under present tax laws Management believes that any income tax liability resulting from unrelated business income for the years ended June 30, 2010 and 2009 would not have a significant impact on the Colleges results of activities. The federal Form 990s of the College for the fiscal years 2009, 2008, and 2007 are subject to examination by the Internal Revenue Service, generally for three years after they are filed
Part XI, Line 8 - Other Adjustments		GAIN ON FUNDS HELD IN TRUST BY OTHERS 164578 Loss on Asset Retirement Obligation -74334 GAIN ON DISPOSAL OF LAND, BUILDINGS, AND EQUIPMENT 844312 WRITE-OFF OF DEFERRED LOAN COSTS DUE TO REFINANCING -104940 INTEREST RATE SWAP LIABILITY -309063
Part XII, Line 2d - Other Adjustments		GAIN ON FUNDS HELD IN TRUST BY OTHERS 164578 LOSS ON ASSET RETIREMENT OBLIGATION -74334 GAIN ON DISPOSAL OF LAND, BUILDINGS, AND EQUIPMENT 844312 WRITE-OFF OF DEFERRED LOAN COSTS DUE TO REFINANCING -104940 INTEREST RATE SWAP LIABILITY -309063
Part XII, Line 4b - Other Adjustments		STUDENT SCHOLARSHIPS/FINANCIAL AID 7096640
Part XIII, Line 4b - Other Adjustments		STUDENT SCHOLARSHIPS/FINANCIAL AID 7096640

Employer identification number

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

RANDOLPH COLLEGE

Name of the organization

Schools

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2009

Open to Public

	54-0505941			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No,"			
	please explain THE COLLEGE PUBLISHES ITS NONDICRIMINATORY POLICY IN ALL ADMISSIONS MATERIALS TO PROSPECTIVE STUDENTS AND ON ITS WEB SITE	3	Yes	
4	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
Ь	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Schedule O (Form 990)	-		
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		Νo
b	Admissions policies?	5b		Νo
С	Employment of faculty or administrative staff?	5c		Νo
d	Scholarships or other financial assistance?	5d		Νo
е	Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		No
6a	If you answered "Yes" to any of the above, please explain If you need more space, use Schedule O (Form 990) Does the organization receive any financial aid or assistance from a governmental agency?		Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Schedule O (Form 990) # Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Schedule O (Form	7	Yes	
	990)	1		'

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As Filed Data -

DLN: 93493136020321

OMB No 1545-0047

2009

SCHEDULE F (Form 990)

Department of the Treasury

Statement of Activities Outside the United States

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

Open to Public **Inspection**

Internal Revenue Service Name of the organization RANDOLPH COLLEGE

Employer identification number

54-0505941 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award 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) (d) Activities conducted in (e) If activity listed in (d) (f) Total expenditures (a) Region (b) Number of (c) Number of region (by type) (ie, is a program service, for region fundraising, program services, offices in the employees or agents in region grants to recipients located in describe specific type of region service(s) in region the region) READING, ENGLAND 3 PROGRAM SERVICES INSTRUCTION 358,660

Totals

358,660

Part IV	Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000										
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.

(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)
Financial Aid	europe	9	138,720	Internal transfer to apply financial aid to student's accounts receivable			
Financial Aid	East Asia and the Pacific	2	22,490	internal transfer to apply financial aid to student's accounts receivable			
							<u> </u>
		1				1	1

Schedule F (Form 990) 2009

Identifier	ReturnReference	in Part I, line 2, and any additional information. Explanation
	+	

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Schedule I

(Form 990)

DLN: 93493136020321 OMB No 1545-0047

Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Department of the Treasury

Open to Public

Internal Revenue Service				Inspection			
Name of the organization						Employer identifica	tion number
RANDOLPH COLLEGE						54-0505941	
Part I General Infor	mation on Grants	and Assistance				•	
Does the organization m the selection criteria useDescribe in Part IV the	ed to award the grants	or assistance?					√ Yes
Form 990, Part	IV, line 21 for any r	recipient that receive	d more than \$5,000	. Check this box if n	Complete if the org	ed more than \$5,00	0. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance

Grants and Other Assistance to Organizations,

Enter total number of section 501(c)(3) and government organizations

Part III	Grants and Other Assistance to Individuals in the United States.	Complete if the organization	answered "Yes"	' to Form 990,	Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.				

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPS TO STUDENTS	524	7,096,640		FMV	
See Additional Data Table					

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

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 THE COLLEGE MAINTAINS RECORDS TO ENSURE STUDENT FINANCIAL AID IS AWARDED TO ELIGIBLE STUDENTS BASED ON FEDERAL REGULATIONS OR DONOR RESTRICTIONS
O ther Information		THE COLLEGE AWARDS GRANTS TO STUDENTS BASED ON CRITERIA SET FORTH IN THE INDIVIDUAL SCHOLARSHIPS "NEED BASED" GRANTS ARE AWARDED BASED ON INFORMATION OBTAINED FROM THE FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA)

DLN: 93493136020321

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

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

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

Compensation Information

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

RAN	randolph college				
		54-0505941			
Pa	Part I Questions Regarding Compensation				_
				Yes	Νo
1a	a Check the appropriate box(es) if the organization provided any of the following to or for a person 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regard				
		r personal use			
	▼ Travel for companions	onal residence			
	Tax idemnification and gross-up payments Health or social club dues or initial				
	Discretionary spending account Personal services (e.g., maid, cha	uffeur, chef)			
b	b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding reimbursement orprovision of all the expenses described above? If "No," complete Part III to		1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred to officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in I	•	2	Yes	
3	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	ne			
	✓ Independent compensation consultant ✓ Compensation survey or study				
	Form 990 of other organizations Approval by the board or compens	ation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to or a related organization	the filing organization			
а	1 /		4a		Νo
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b		Νo
c	c 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	ın Part III			
	Only $501(c)(3)$ and $501(c)(4)$ organizations only must complete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue compensation contingent on the revenues of	any			
а	a The organization?		5a		Νo
b	b Any related organization?		5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue compensation contingent on the net earnings of	any			
а	a The organization?		6a		Νo
b	b Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any n payments not described in lines 5 and 6? If "Yes," describe in Part III	on-fixed	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," in Part III		8		No
۵	If "Vac" to line 8, did the organization also follow the rebuttable presumption presedure describ	and in Populations			

section 53 4958-6(c)?

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

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

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

		, ,,,,,,,,,	, ,	, ,					
(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	ıncentive reportable		benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
John E Klein	(I) (II)	300,000 0	0 0	6,938 0	0 0	31,601 0	338,539 0	370,091 0	
chrISTOPHER L BURNLEY	(ı) (ıı)	128,026 0	0 0	0		30,825 0	158,851 0	151,462 0	
DENNIS STEVENS	(1) (11)	130,776 0	0 0	0		30,543 0	161,319 0	0	
KATHLEEN BOWMAN	(I) (II)	119,994 0	0	0		8,362 0	128,356 0	0	
							C-11-	-l- 1 (F 000) 2000	

Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
	Part I, Line 4a	KATHLEEN BOWMAN RECEIVED DEFERRED COMPENSATION OF \$119,994

Schedule J (Form 990) 2009

Schedule K

Supplemental Information on Tax Exempt Bonds

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

OMB No 1545-0047

DLN: 93493136020321

Open to Public **Inspection**

Internal Revenue Service Name of the organization RANDOLPH COLLEGE

Bond Issues

Department of the Treasury

(Form 990)

Employer identification number

54-0505941

	(a) Issuer Name	(b) Issuer EIN (c) CUSIP #		(d) Date	Issued	(e) Issue	e Price	(f) Des	cription of P	urpose	(g) Defeased		(h) O n Behalf of Issuer	
											Yes	No	Yes	No
A	IDA THE CITY OF LYNCHBURG SERIES 2010	54-1225193		01-28-	2010	7,	542,691	REFUNDED ISSUANCE	PRIOR BO	ND		х		х
В	EDA OF AMHERST COUNTY SERIES 2010	83-0477842		01-28-	2010	5,	681,360	refinance ar	ticipation n	ote		х		Х
c	IDA THE CITY OF LYNCHBURG SERIES 2003	54-1225193	55123pat7	06-05-2003		16,	470,000	refunded PRIOR BOND ISSUANCE				Х		Х
Pa	rt III Proceeds													
				A			3		С)		E	
1					7,542,691		5,681,360	0 1	6,470,000					
	2 Gross proceeds in reserve funds													
	3 Proceeds in refunding or defeasance escrows													
	4 Other unspent proceeds													
	5 Issuance costs from proceeds				92,691		81,360	0						
	6 Working capital expenditures from proceeds													
7	Capital expenditures from proceed	<u> </u>												
8	Year of substantial completion			201		20			03					
	Were the bonds issued as part of a		-	Yes	No	Yes X	No	Yes	No	Yes	No	Ye	s	No
9			-	^		^		 				+		
10	Were the bonds issued as part of a		issue?		Х		Х		Х					
11	Has the final allocation of proceed	Is been made?		Х		Х		Х						
12	Does the organization maintain ad the final allocation of proceeds?		cords to support	Х		Х		×						
Pa	rt IIII Private Business Use			ı		<u> </u>			1					
					A I N-	Yes	No No		No	Yes	No	Ye	E	No
1	Was the organization a partner in a which owned property financed by		ember of an LLC,	Yes	No X	ies	X	Yes	X	165	140	1 6:	•	140
2	Are there any lease arrangements which may result in private busine	with respect to the f	inanced property		х		х		Х					
For	Privacy Act and Paperwork Reduction Ac	ct Notice, see the Instr	uctions for Form 990.			Cat No 5	0193E				Schedule	K (Form	990) 20	09

Schedule K (Form 990) 2009

Part III Private Business Use (Continued)

	•		A	E	3		С	[)		E
		Yes	No								
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		х		Х		Х				
3b	Are there any research agreements with respect to the financed property which may result in private business use?		Х		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?	Х		х		x					
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government										
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										
6	Total of lines 4 and 5										
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		х		х					
Dar	+ TV Arbitrage			•		•	•		•		•

			A	В			С	l	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		x					
2	Is the bond issue a variable rate issue?	Х		Х			Х				
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		x		х		х				
ь	Name of provider										
С	Term of hedge										
4a	Were gross proceeds invested in a GIC?		Х		Х		Х				
ь	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		х		х				
6	Did the bond issue qualify for an exception to rebate?	х		х		х					
				-		•	-		Schodul	e K (Form 990	1) 2009

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DLN: 93493136020321

OMB No 1545-0047

Open to Public

Schedule L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

► Complete if the organization answered "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.

Transactions with Interested Persons

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

Inspection

Name of the organization RANDOLPH COLLEGE							En	nployer id	lent if icat io	n numbe	r
TOWN DOLL IT COLLEGE							54	-050594	11		
Part I Excess Benefit Trai										4.01	
Complete if the organizat				990, P	'art IV , line 25a c	or 251	o, or Form s	990-EZ, I	art V, line		rrected?
1 (a) Name of disq	ualıfıed	perso	n		(b) Desc	rıptıo	n of transa	ction		Yes	No
										1	1
			L_								
2 Enter the amount of tax impos section 4958		ne orga			disqualified pers			_	¢		
3 Enter the amount of tax, If any		-							ф ——		
5 Enter the amount of tax, if any	, 011 11110	2, 45	ove, remiburse	u by th	c organization :				Ψ		
Part II Loans to and/or I											
Complete if the organiz	zation a I	nswer	ed "Yes" on For T	rm 990	, Part IV, line 26	, or Fo	orm 990-E		, line 38a		
		an to				(e	:) In	(f) Approv	ed	(g) Writte	n
(a) Name of interested person and	or fro	m the	(c)Origin		(d)Balance due	•	ault?	by board		greemen	
purpose			4	nount				committ	ee?		
	То	From				Yes	No	Yes	No	Yes	No
Total			>	▶ \$							
Part IIII Grants or Assistar											
Complete if the orga	nızatıc						<u> 27.</u>				
(a) Name of interested pers	on		(b) Relationship	betwe	en interested per ganization	son	(c)A m	ount of gr	ant or type	ofassis	tance
			una	the org	gamzation						
Part IV Business Transact	ions I	nvol	ving Interes	sted F	Persons.		20 201	20			
Complete If the orga	nizatio				rm 990, Part IV	, iine	e 28a, 28i	o, or 280	;. 	(-) Ch	
) Relationship ween interester		(c) A mount of					organi	arıng of zatıon's
(a) Name of interested person		1	erson and the		transaction		(d) Descr	iption of t	ransaction		nues?
			organization							Yes	No
MARC A SCHEWEL		FORM	1ER TRUSTEE		5,598,5		NVESTME				Νo
							RUSTEE A OCAL BO				
							SUNTRUST				
							VHICH THI NVESTME				
							30,2010 F				
							1EMBER IS				
							OSITION NPUT, AU				
							ONTROL		•		
							SPECTS (SANK'S RE				
							HE COLLE		OTITE WATIL		

OMB No 1545-0047

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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 RANDOLPH COLLEGE

Employer identification number

54-0505941

D-	rt I Types of Property				34-0303341			
Г	Types of Property	(a)	(b)	(c)	(d)			
		Check If	Number of Contributions	Revenues reported on Form 990, Part VIII, line 1g	Method of de	etermı	nıng	
1	Art—Works of art	Х	1		opinion of experts			
	Art—Historical treasures .			3,300	opinion of experts			
	Art—Fractional interests							
4								
	Clothing and household							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	20	280,854	cost or selling price			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Q ualified conservation contribution—O ther							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxıdermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts				_			
	Other ► (horses)	X	3	120,000	opinion of experts			
	O ther ▶()							
	Other ►()							
28	Other ► ()							
29	Number of Forms 8283 received for which the organization compl				29		l I	3
20-	During the year did the erganiza	. t. o. n. o. o. u.	a hu aantrihiitian anu nrana	why reported in Dout I. lines	1 20 +6-+ -+		Yes	No
300	During the year, did the organiza							
	must hold for at least three year				a to be used	_		NI -
_	for exempt purposes for the entire					30a		No
31	 If "Yes," describe the arrangement Does the organization have a gif 			eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use contributions?	e third part	ies or related organizations	to solicit, process, or sell i	non-cash	32a	Yes	
Ŀ	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			

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.

Ident if ier	Ret urn Reference	Explanation
Third Party Use		AS OF JUNE 30, 2010, THE COLLEGE HAS THREE PAINTINGS HELD FOR SALE UNDER AN ARRANGEMENT WITH CHRISTIE'S AUCTION HOUSE IN ADDITION, THE COLLEGE INFREQUENTLY RECEIVES JEWELRY AS PART OF AN ESTATE GIFT IN SUCH ISOLATED CIRCUMSTANCES, THE COLLEGE HAS UTILIZED A LOCAL JEWELRY COMPANY OR AN AUCTIONEER TO SELL THESE ITEMS

Schedule M (Form 990) 2009

Software ID: **Software Version:**

EIN: 54-0505941

Name: RANDOLPH COLLEGE

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SCHEDULE 0 (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

DLN: 93493136020321

Name of the organization RANDOLPH COLLEGE

Inspection **Employer identification number**

54-0505941

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		THE FORM 990 WAS REVIEWED BY THE DIRECTOR OF FINANCE, CONTROLLER, V P FOR FINANCE AND ADMINISTRATION, AND COLLEGE PRESIDENT ALSO, THE FORM 990 WAS PROVIDED TO THE COLLEGE'S BOARD OF TRUSTEES FOR ITS REVIEW AND QUESTIONS AT THE MAY 2011 BOARD MEETING

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c		BOARD MEMBERS AND OFFICERS REVIEW, COMPLETE, AND SIGN CONFLICT OF INTEREST FORMS ANNUALLY THE SECRETARY OF THE BOARD MAINTAINS THESE DOCUMENTS VOTING MEMBERS OF THE BOARD RECUSE THEMSELVES FROM A VOTE IF A POTENTIAL CONFLICT OF INTEREST EXISTS IN A MATTER IF THERE IS A QUESTION ABOUT THE EXISTENCE OF A CONFLICT OF INTEREST, THE BY LAWS (ARTICLE 1, SECTION 8D) PROVIDE STANDARDS AND PROCEDURES FOR RESOLVING THE QUESTION IN ADDITION, ALL SENIOR STAFF MEMBERS, THE DIRECTOR OF FINANCE, AND THE CONTROLLER ARE REQUIRED TO REVIEW, COMPLETE, AND SIGN CONFLICT OF INTEREST FORMS ANNUALLY THE SECRETARY OF THE BOARD ALSO MAINTAINS THESE DOCUMENTS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		PROCESS FOR DETERMINING COMPENSATION OF OFFICERS/KEY EMPLOYEES FOR ALL MEMBERS OF THE COLLEGE'S SENIOR STAFF AND THE PRESIDENT'S DIRECT REPORTS, THE DIRECTOR OF HUMAN RESOURCES PROVIDES COMPARATIVE COMPENSATION DATA FROM THE COLLEGE AND UNIVERSITY PROFESSIONAL ASSOCIATION (CUPA) TO THE PRESIDENT THE PRESIDENT SHARES THIS INFORMATION WITH THE CHAIR OF THE BOARD OF TRUSTEES AND THE COMPENSATION COMMITTEE, AS NEEDED THIS INFORMATION IS REVIEWED DURING THE PERFORMANCE ASSESSMENT PROCESS TO DETERMINE SUCH EMPLOYEE'S COMPENSATION THE COLLEGE'S BOARD OF TRUSTEES (THE "BOARD") HIRED MERCER HUMAN RESOURCES CONSULTING ("MERCER") IN 2007 TO ASSIST IN DETERMINING THE REASONABLENESS OF THE INITIAL COMPENSATION FOR THE COLLEGE PRESIDENT USING APPROPRIATE PEER GROUP AND COMPARATIVE MARKET DATA, MERCER ISSUED AN OPINION AFFIRMING THE REASONABLENESS OF THE COMPENSATION PACKAGE THE ANALYSIS WAS COMPREHENSIVE, UTILIZING MANY SOURCES, INCLUDING THE FORM 990 OF OTHER INSTITUTIONS DURING THE SPRING OF 2009, THE PRESIDENT OF THE BOARD APPOINTED AN AD HOC COMPENSATION COMMITTEE, COMPRISING FOUR BOARD MEMBERS, INCLUDING THE PRESIDENT OF THE BOARD THIS COMMITTEE RECOMMENDS ANY COMPENSATION ADJUSTMENTS TO THE EXECUTIVE COMMITTEE OF THE BOARD AND THE RATIONALE THEREIN, AND ANY SUCH COMPENSATION ADJUSTMENTS ARE THEN APPROVED BY THE FULL BOARD THE COLLEGE HAS NOW AMENDED ITS BYLAWS TO ADD THE COMPENSATION COMMITTEE AS A PERMANENT STANDING COMMITTEE OF THE BOARD THE PRESIDENT ALSO HAS A WRITTEN EMPLOYMENT CONTRACT WHICH INCLUDES THE NECESSARY COMPENSATION PROVISIONS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE COLLEGE IS A PRIVATE INSTITUTION AND DOES NOT REGULARLY MAKE ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC

ldentifier	Return Reference	Explanation
FORM 990, PART III, LINE 1	DESCRIPTION OF ORGANIZATION MISSION	SINCE ITS FOUNDING IN 1891 AS RANDOLPH-MACON WOMAN'S COLLEGE, RANDOLPH COLLEGE HAS OFFERED STUDENTS A RIGOROUS EDUCATION IN THE LIBERAL ARTS AND SCIENCES IN KEEPING WITH THE COLLEGE MOTTO, VITA ABUNDANTIOR, INTEGRATED LIVING AND LEARNING PROVIDE A FOUDATION FOR MEANINGFUL LIVES CHARACTERIZED BY A LIFELONG JOY IN LEARNING Randolph College encourages each student to set and meet high personal goals Campus life is grounded in the Honor System, which fosters individual integrity and mutual trust As students from diverse backgrounds study and live together, they are expected to respect the rights and dignity of others, to be open to cultural differences, and to exercise personal and social responsibility. They are encouraged to develop confidence and to participate fully in a community in which women and men work together and treat one another as equals. THROUGH EXCELLENCE IN TEACHING, ADVISING, AND SCHOLARSHIP, THE FACULTY PROVIDES THE CHALLENGES REQUISITE TO THE INTELLECTUAL DEVELOPMENT OF EACH STUDENT WITH FACULTY SUPPORT, THE UNDERGRADUATE STUDENTS DESIGN INDIVIDUALIZED AND COHERENT PROGRAMS OF STUDY THAT COMBINE ACADEMIC AND CO-CURRICULAR COMPONENTS. WHILE EACH STUDENT'S EDUCATIONAL PLAN IS UNIQUE, ALL PROGRAMS OF STUDY FOSTER THESE CAPACITIES TO THINK CRITICALLY, TO WRITE AND SPEAK WITH CLARITY AND ACCURACY, TO EMPLOY QUANTITATIVE REASONING, TO USE TECHNOLOGY EFFECTIVELY AND ETHICALLY, TO CULTIVATE AN AESTHETIC SENSIBILITY, TO UNDERSTAND KEY DIMENSIONS OF THE HERITAGE OF MORE THAN ONE SOCIETY, TO APPROACH PROBLEMS WITH CREATIVITY AND IMAGINATION, TO WORK BOTH INDEPENDANTLY AND COLLABORATIVELY, AND TO RECOGNIZE THE POWER AND LIMITATIONS OF KNOWLEDGE THE GRADUATE STUDENTS PURSUE MORE NARROWLY FOCUSED PROGRAMS OF RIGOROUS STUDY DESIGNED TO ADD SPECIALIZED KNOWLEDGE TO THEIR UNDERGRADUATE EDUCATION THE GRADUATE ETUCENTS PURSUE MORE NARROWLY FOCUSED PROGRAMS OF RIGOROUS STUDY DESIGNED TO ADD SPECIALIZED KNOWLEDGE TO THEIR UNDERGRADUATE EDUCATION THE GRADUATE STUDENTS PURSUE MORE NARROWLY FOCUSED PROGRAMS OF RIGOROU

ldentifier	Return Reference	Explanation
FORM 990, PART V, QUESTIONS 7G AND 7H	CONTRIBUTIONS	THE COLLEGE DID NOT RECEIVE CONTRIBUTIONS OF QUALIFIED INTELLECTUAL PROPERTY DURING THE TAX YEAR THEREFORE, THERE WAS NO FORM 8899 REQUIRED ADDITIONALLY, THE COLLEGE DID NOT RECEIVE ANY CONTRIBUTION OF PROPERTY THAT WOULD REQUIRE THE COLLEGE TO FILE FORM 1098-C

ldentifier	Return Reference	Explanation		
FORM 990, PART VIII, LINES 7A TO 7D	GAIN ON SALE OF SECURITIES	DETAIL AVAILABLE UPON REQUEST		

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

DLN: 93493136020321

OMB No 1545-0047

. Inspection

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Schedule R (Form 990) 2009

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

RANDOLPH COLLEGE

Name of the organization

Employer identification number

				54-0505941	
Part I Identification of Disregarded Entities (Complete	ıf the organızatıon ar	nswered "Yes" on	Form 990, Part I	V, line 33.)	
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
INVESTMENT PROPERTIES OF LYNCHBURG LLC 2500 RIVERMONT AVENUE LYNCHBURG, VA 24503 54-1900543	commercial real estate	VA	21,600	582,519	N/A
Part II Identification of Related Tax-Exempt Organizat or more related tax-exempt organizations during the	i ons (Complete if the tax year.)	e organızatıon ans	wered "Yes" on	Form 990, Part IV	, line 34 because it had one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
alumnae association of randolph-macon woman's college					
2500 rivermont avenue lynchburg, VA 24503 54-0350944	alumnae connections	VA	501(c)(3)	11a-Type 1	N/A

Cat No 50135Y

(a) (b	(b) Primary activity	more related organizations treated (c) Legal (d) Output O		(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		(h) Disproprtionat allocations?		te Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		(j Gener mana partr	al or Iging
								Yes	No			Yes	No
				s a Corporation of treated as a corpo				nswer	ed "Y	es" on F	orm 990, P	art IV,	
	cause it had one t		ciacca organización.				(f))	Ī	(a)	(h)		
(a) Name, address, and EIN o	f related organization	(b) Primary ad	ctivity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	Share of incor	f total	Sh end-	(g) nare of -of-year issets	(h) Percentag ownership		
									1				
									1				

s c h	edule R (Form 990) 2009			Pag	ge 3					
Pa	Transactions With Related Organizations (Complete If the organization answered "Yes" on Form 990, Part IV	, line 34, 35, or 36.)								
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No					
1 [Ouring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-	IV?								
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No					
ь	Gift, grant, or capital contribution to other organization(s)		1b		No					
c	Gift, grant, or capital contribution from other organization(s)		1c		No					
d	Loans or loan guarantees to or for other organization(s)		1d		No					
е	e Loans or loan guarantees by other organization(s)									
f	Sale of assets to other organization(s)		1f		No					
g	Purchase of assets from other organization(s)		1g		No					
h	Exchange of assets		1h		No					
i	Lease of facilities, equipment, or other assets to other organization(s)		1i		No					
j	Lease of facilities, equipment, or other assets from other organization(s)		1j		No					
k	Performance of services or membership or fundraising solicitations for other organization(s)		1k		No					
ı	Performance of services or membership or fundraising solicitations by other organization(s)		11		No					
n	Sharing of facilities, equipment, mailing lists, or other assets		1m	Yes						
n	Sharing of paid employees		1n	Yes						
o	Reimbursement paid to other organization for expenses		10	Yes						
р	Reimbursement paid by other organization for expenses		1 p	Yes						
q	O ther transfer of cash or property to other organization(s)		1q		No					
r	O ther transfer of cash or property from other organization(s)		1r	Yes						
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relations	nips and transaction threshold	ds							
	(a)	(b) Transaction		c)						
	Name of other organization	type(a-r)	Amount	involve	d					
(1) /	Numnae association of randolph-macon woman's college	M		4.	7 1 4 2					

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1) Alumnae association of randolph-macon woman's college	М	47,142
(2) Alumnae association of randolph-macon woman's college	N	147,204
(3) alumnae association of randolph-macon woman's college	0	336,677
(4) alumnae association of randolph-macon woman's college	Р	5,158
(5) alumnae association of randolph-macon woman's college	R	31,025
(6)		

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity Legal domicile (state or foreign partners section 501(c)(3) organizations?		(e) (f) Share of Disproprtice end-of-year allocation assets			rtionate (g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)		h) eral d lagin tner?		
			Yes	No		Yes	No		Yes	N
									+-	╁
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Software ID: Software Version:

EIN: 54-0505941

Name: RANDOLPH COLLEGE

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		tion (hat a	che)		1	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations		
Lee Sanford Ainslie Trustee	2 00	Х						О	0	0		
Katharine Stark Caldwell TRUstee	2 00	Х						0	0	0		
Karen E Campbell TRUstee	2 00	x						0	0	0		
Mary Laurie Johnson Cece trustee	2 00	Х						0	0	0		
Peter H Dean trustee	2 00	×						0	0	0		
Rebecca R Dixon trustee	2 00	Х						0	0	0		
Rebecca Dunn trustee	2 00	x						0	0	0		
Julie Huston Ellis trustee	2 00	Х						0	0	0		
Susan Braselton Fant trustee	2 00	×						0	0	0		
C Thomas Faulders III trustee	2 00	Х						0	0	0		
Carolyn B Featheringill trustee	2 00	×						0	0	0		
Susan L Genovese trustee	2 00	Х						0	0	0		
Donald M Giles trustee	2 00	Х						0	0	0		
Lucy Williams Hooper TRUSTEE	2 00	Х						0	0	0		
Roderick P Hoover Jr trustee	2 00	Х						0	0	0		
Elizabeth A Maffey trustee	2 00	Х						0	0	0		
marıan phillips mancını trustee	2 00	Х						0	0	0		
Barbara n mccarthy trustee	2 00	Х						0	0	0		
Charles W Pryor Jr Trustee	2 00	Х						0	0	0		
Mary Michels Scovanner trustee	2 00	Х						0	0	0		
mary gray shockey trustee	2 00	Х						0	0	0		
Caroline A Stephens trustee	2 00	Х						0	0	0		
Lynn Hume Stuart trustee	2 00	Х						0	0	0		
John R Torell IV trustee	2 00	Х						0	0	0		
alison keller townsend trustee	2 00	Х						0	0	0		

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

(A) Name and Title	(B) (C) A verage 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
Anne W Tucker Trustee	2 00	Х						0	0	0
Gail Waller Trustee	2 00	Х						0	0	0
Eugenia Livings Welburn Trustee	2 00	Х						0	0	0
Marietta Edmunds Zakas TRUSTEE	2 00	Х						0	0	0
John E Klein College President	40 00			х	х	Х		306,938	0	31,601
chrISTOPHER L BURNLEY tREASURER/VP OF FINANCE	40 00			х		х		128,026	0	30,825
jean h stewart director of advancement services	40 00					Х		102,300	0	21,282
DENNIS STEVENS vp acad affairs/dean of the college	40 00					Х		130,776	0	30,543
sarah I swager vp student affairs/dean of students	40 00					х		107,085	0	22,087
dIXIE N SAKOLOSKY SECRETARY	40 00			х				85,225	0	18,616
VICTOR GOSNELL CHIEF TECHNOLOGY OFFICER	40 00					х		105,272	0	19,279
KATHLEEN BOWMAN FORMER PRESIDENT	0 00						х	119,994	0	8,362

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
INSTRUCTION	8,380,916	8,380,916		
INSTITUTIONAL SUPPORT	5,462,518		4,255,670	1,206,848
STUDENT SERVICES	4,744,737	4,744,737		
AUXILIARY SERVICES	3,775,672	3,775,672		
ACADEMIC SUPPORT	2,532,797	2,532,797		