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DLN: 93493135030142

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)

2010

OMB No 1545-0047

·The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 07-01-2010 and ending 06-30-2011 A For the 2010 D Employer identification number C Name of organization Lafayette College B Check if applicable 24-0795686 Address change Doing Business As Name change E Telephone number Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite (610) 330-5136 730 High St 202 Markle Hall Terminated G Gross receipts \$ 270,581,638 City or town, state or country, and ZIP + 4 Easton, PA 180421779 Amended return Application pending Name and address of principal officer **H(a)** Is this a group return for affiliates? Yes Dr Daniel H Weiss President 730 High St 202 Markle Hall H(b) Are all affiliates included? Easton, PA 180421779 If "No," attach a list (see instructions) H(c) Group exemption number ▶ 501(c) ( ) ◀ (insert no ) Tax-exempt status **▽** 501(c)(3) **┌** ☐ 4947(a)(1) or ☐ 527 **Website: ►** www lafayette edu K Form of organization 
✓ Corporation 
☐ Trust 
☐ Association 
☐ Other ► L Year of formation 1832 M State of legal domicile PA Summary Part I Briefly describe the organization's mission or most significant activities Provision of educational services as an accredited four-year undergraduate college Activities & Governance 2 Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . Number of independent voting members of the governing body (Part VI, line 1b) . 4 30 2,533 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . . 6 4,542 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 1,162,916 **b** Net unrelated business taxable income from Form 990-T, line 34 **7**b 239,527 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 14,985,223 27,250,856 Rayenue Program service revenue (Part VIII, line 2g) . 115,460,202 119,192,411 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 22,558,150 27,504,515 1,335,842 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,293,269 11 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 154,296,844 175,283,624 13 34,794,844 34,400,620 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines Expenses 68,802,760 69,805,827 16a Professional fundraising fees (Part IX, column (A), line 11e) . . 26,371 28,576 Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright \frac{3,409,519}{}$ b **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 64,046,527 70,896,677 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 167,670,502 175,131,700 19 Revenue less expenses Subtract line 18 from line 12 . -13,373,658 151,924 Net Assets or Fund Balances **Beginning of Current End of Year** Year 20 934,713,850 1,014,954,297 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 265,523,172 263,933,495 22 669,190,678 751,020,802 Net assets or fund balances Subtract line 21 from line 20 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2012-05-14 Signature of officer Sign Here MITCHELL L WEIN VP, FINANCE, ADMIN & TREASURER Type or print name and title Print/Type preparer's name Check if self-Preparer's signature Date PTIN

Firm's address 2001 MARKET STREET SUITE 3100

PHILADELPHIA, PA 19103

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

Firm's name FGRANT THORNTON LLP

Paid

**Preparer** 

Use Only

employed 🕨 🛭

Phone no 🕨 (215) 561-

Γ

Fım's EIN

**▽** Yes

LOIIII	Page (2010)
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
EXCI SOC COM STUI THA	SION STATEMENT AS APPROVED 5/28/83 BY THE BOARD OF TRUSTEES IN AN ENVIRONMENT THAT FOSTERS THE FREE HANGE OF IDEAS, LAFAYETTE COLLEGE SEEKS TO NURTURE THE INQUIRING MIND AND TO INTEGRATE INTELLECTUAL, IAL, AND PERSONAL GROWTH THE COLLEGE STRIVES TO DEVELOP STUDENTS' SKILLS OF CRITICAL THINKING, VERBAL IMUNICATION, AND QUANTITATIVE REASONING AND THEIR CAPACITY FOR CREATIVE ENDEAVOR IT ENCOURAGES DENTS TO EXAMINE THE TRADITIONS OF THEIR OWN CULTURE AND THOSE OF OTHERS, TO DEVELOP SYSTEMS OF VALUES TINCLUDE AN UNDERSTANDING OF PERSONAL, SOCIAL, AND PROFESSIONAL RESPONSIBILITY, AND TO REGARD CATION AS AN INDIPENSIBLE, LIFE-LONG PROCESS
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section $501(c)(3)$ and $501(c)(4)$ organizations and section $4947(a)(1)$ trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code ) (Expenses \$ 89,517,284 including grants of \$ 25,000 ) (Revenue \$ 96,175,559 )
	Instruction, Research, Student Services provided for both 2,362 full-time students (Fall 2010 semester) including 2 non-degree candidates and 52 additional part-time students, including 37 non-degree candidates. Also includes site revenues and expenses for the Johns Hopkins University Center for Talented Youth Program Public Service - Greater Easton Development Partnership for Easton Clean and Safe City program. Student Services include Enrollment Management (Admissions a Financial Aid), Registrar, Health and Counseling Centers, Dean of Students, Multicultural Affairs, Cultural Programs, Intramurals/Recreation, Intercollegiate Athletics Religious Programs, Career Services, Student Activities and Student Organizations support. Academic Support includes services such as Libraries (2), Information Technology, Academic Counseling, Course & Curriculum Development and Faculty Recruitment.
4b	(Code ) (Expenses \$ 34,375,620 including grants of \$ 34,375,620 ) (Revenue \$ 0 )
	Undergraduate Scholarships/Grants to Students (1,220 students, including 2 foreign exchange) through the College's Financial Aid Office (\$34,062,127) Prizes, Awards and Fellowships and other awards (\$148,556) to approximately 166 students and net HELP Loan Interest Subsidy Expense (\$164,937) for approximately 224 Borrowers
	(Code ) (Expenses \$ 21,936,150 including grants of \$ 0 ) (Revenue \$ 23,016,852 )
	Auxiliary Services Student Residence - Approximately 2,223 (Fall 2010 semester) resided in the College's Residence Halls, Fraternities/Soronties and Collegeowned off campus residences. Also includes Dining Services (all day students must participate in the Dining program)
	Other program services (Describe in Schedule O )
·u	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses►\$ 145,829,054

art IV	Checklis	st of	Required	Schedules
	CIICCKII			

			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 (see instruction)? 🕏	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 $I^{\bullet}$	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 1	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? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part $IV \bigcirc I$	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b	Yes	
C	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.	11c		No
d	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.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> " <i>Yes</i> ," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	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, Parts II and IV	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, Parts III and IV.	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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 $\textcircled{\textbf{5}}$	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 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		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νo
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		Νo
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 (or a family member thereof) was an officer, director, trustee, or direct or indirect 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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Νo
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Yes	

	·	
Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check if Schedule O contains a response to any question in this Part V	•	.1	
			Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 4,118			
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?	1c	Yes	
а	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?	1		
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
D 1	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
-	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νo
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
•	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		Νo
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).	7-	V	
đ	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
£	contract?	7e 7f		No No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			INO
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	79 7h		
	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L	Section 501(c)(12) organizations. Enter			
	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 )			
<u>≀</u> a	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			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
h	Enter the amount of reserves the organization is required to maintain by the states			
	in which the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand 13c			
la	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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					
1.	Enter the number of veting members of the governing heady at the and of the tay								
1a	Enter the number of voting members of the governing body at the end of the tax year								
b	Enter the number of voting members included in line 1a, above, who are independent								
2	· · · · · · · · · · · · · · · · · · ·								
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	Yes Yes						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4	Yes						
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	165	No					
6	Does the organization have members or stockholders?	6		No					
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No					
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	The governing body?	8a	Yes						
b	Each committee with authority to act on behalf of the governing body?	8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No					
	ection B. Policies (This Section B requests information about policies not required by the Internal								
ке	venue Code.)		Yes	No					
10a	Does the organization have local chapters, branches, or affiliates?	10a	163	No No					
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b							
112	affiliates, and branches to ensure their operations are consistent with those of the organization?	100							
114	mas the organization provided a copy of this Form 990 to an members of its governing body before ming the form?	11a	Yes						
b	Describe in Schedule O the process, if any, used by the organization to review this 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	<b>b</b> Other officers or key employees of the organization								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )								
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No					
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b							
Se	ection C. Disclosure			•					
17	List the States with which a copy of this Form 990 is required to be filed▶PA								
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								

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 PAUL ZIMMERMAN CONTROLLER 730 HIGH ST 202 MARKLE HALL

Easton, PA 18042 (610)330-5137

## <u>Part VIII</u> 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

- 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, if any 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, and 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 neither the organ	nization nor any r	sated any current officer, director, or trustee													
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)					Position (check all that apply)						( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Former Highest compensated employee		ighest compensated imployee		organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations			
See Additional Data Table															

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		_												
	(A) Name and Title	(B) A verage hours		tion ( that a			ıll		( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensatior from related		(F) Estimate amount of compensa		
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		from t rganizati relati organiza	the on and ed	
See A	dditional Data Table													
								$\vdash$						
							+	-						
							+	-			_			
						_		<u> </u>						
								<del> </del>						
								<u> </u>						
1b						•	· ·	<u> </u>						
	Total (add lines th and to)						-	<b>þ</b> -	3,029,774		0	-	702,875	
	Total (add lines 1b and 1c) .								<u> </u>		<u> </u>		702,073	
2	Total number of individuals (incl \$100,000 in reportable compen						ароче	) WIIC	received more tha	п				
										,		Yes	No	
3	Did the organization list any <b>for</b> on line 1a? <i>If</i> "Yes," complete Sci					eye •	mploy •	ee, o	r highest compensa	ated employee	3		No	
4	For any individual listed on line organization and related organiz individual										4	Yes		
5	Did any person listed on line 1a	receive or accri	ıe comr	ensa	ation	fror	manv	unrel	lated organization o	r individual for	•			
	services rendered to the organiz									•	5		No	
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from	highest comper		ndep	ende	ent o	ontra	ctors	that received more	than				
	T = 1 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	/A\								(B)		(C	`	

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
Sodexo Inc Affiliates 6081 Hamilton Blvd ALLENTOWN, PA 18106	Dining Services	6,265,770
Whiting-Turner Contracting Co PO Box 17596 BALTIMORE, MD 21297	Construction	1,477,052
Elliott International 40 West 57th St NEW YORK, NY 10019	Investment Manager	970,460
Allied Building Corp 575 Main St Suite 200 BETHLEHEM, PA 18018	Construction Srvcs	839,491
Archstone Partners 360 Madison Ave 20th Floor NEW YORK, NY 10017	Investment Custodian	807,281
2 Total number of independent contractors (including but not limited to those listed above \$100,000 in compensation from the organization ►62	) who received more than	

Form 9		•					Pag	e <b>9</b>
Part	VIII	Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns	1a					311
graf oun	ь	Membership dues	. 1b					
Contributions, gifts, grants and other similar amounts	С	Fundraising events	<b>1</b> c	35,875				
gĭ ilar	d	Related organizations	. 1d					
ons, sim	e	Government grants (contributions)	<b>1</b> e	3,393,032				
utí Per	f	All other contributions, gifts, grants similar amounts not included above		23,821,949		İ		İ
ıtrik dot	g	Noncash contributions included in li		2,646,892				
COL	h	Total. Add lines 1a-1f			27,250,856			
				Business Code				
Program Service Revenue	2a	TUITION & FEES		900099	94,210,402	94,210,402		
e Fe				900099	22,586,206			
, мс		ATHLETICS/SPORTS NETWORK		900099	1,284,475			
Se	d e	JOHNS HOPKINS CTY SUMMER DINING		900099	628,144 430,646			
ran		All other program service re	venue		·	52,538		
7્ડ	a	Total. Add lines 2a-2f			52,538 119,192,411			
		Investment income (includin			113,132,111			
		and other similar amounts)			12,906,457		692,753	12,213,704
	4	Income from investment of tax-ex	empt bond proceeds		389			389
	5	Royalties			0			
	_		(ı) Real	(II) Personal				
		Gross Rents Less rental	643,467 588,020					
	_	expenses Rental income	55,447					
	_	or (loss)	<u> </u>		55.447			55.447
	d	Net rental income or (loss)	(ı) Securities	(II) O ther	55,447			55,447
	7a	Gross amount	107,426,831	1,600				
		from sales of assets other						
	ь	than inventory Less cost or	92,830,762	0				
		other basis and sales expenses						
	_	Gain or (loss)	14,596,069	1,600				
	d	Net gain or (loss)			14,597,669		404,086	14,193,583
Other Revenue	8a	Gross income from fundraisi (not including \$ 35,875 of contributions reported on See Part IV , line 18	line 1c)					
Jer.		Land describe	a	35,365				
<del>t</del> o		Less direct expenses .  Net income or (loss) from ful		38,162	-2,797			-2,797
			ctivities See Part IV, line 19 . a					
	ь	Less direct expenses .		ь				
		Net income or (loss) from ga			0			
	10a	Gross sales of inventory, les returns and allowances	ss					
			a	2,079,889				
		Less cost of goods sold .		1,841,070				
	С	Net income or (loss) from sa	les of inventory 🟲		238,819		41,077	197,742
	11-	Miscellaneous Revenue		Business Code 900099	551,694			551,694
	TIG	FEES, FINES, AND COST RECOVERY						231,074
	b	STUDENT		517000	230,615			230,615
	,	TELECOMMUNICATIONS MISCELLANEOUS		900099	262,064		25,000	237,064
		All other revenue			,		, -	
		: <b>Total.</b> Add lines 11a–11d			1,044,373			
	12	Total revenue. See Instructi	ons		175,283,624	119,192,411	1,162,916	27,677,441
						Ган	m <b>990</b> (20	101

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

Δ	Section $501(c)(3)$ and $501(c)(4)$ organizations must omplete column (A) but are not required to $\alpha$			D).	
Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	( <b>A</b> ) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations		·		
	in the U.S. See Part IV, line 21	25,000	25,000		
2	Grants and other assistance to individuals in the				
	U S See Part IV, line 22	34,123,620	34,123,620		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	252,000	252,000		
4	Benefits paid to or for members	0	232,000		
5	Compensation of current officers, directors, trustees, and				
-	key employees	2,033,330	95,680	1,735,750	201,900
6	Compensation not included above, to disqualified persons				
	(as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	49,449,631	38,374,520	9,342,587	1,732,524
8	Pension plan contributions (include section 401(k) and section	, ,	, ,		
	403(b) employer contributions)	4,336,464	3,142,223	1,037,883	156,358
9	Other employee benefits	10,320,063	7,477,966	2,469,989	372,108
10	Payroll taxes	3,666,339	2,656,648	877,496	132,195
а	Fees for services (non-employees) Management	0			
ь	Legal	344,043	689	338,846	4,508
c	Accounting	272,927	0	272,927	0
d	Lobbying	120,515	0	120,515	0
e	Professional fundraising services See Part IV, line 17	28,576		120,513	28,576
f	Investment management fees	10,867,907		10,867,907	20,570
g	Other	7,667,205	4,157,049	3,407,365	102,791
12	Advertising and promotion	85,714	40,825	44,889	
13	Office expenses	2,642,670	1,639,079	714,777	288,814
14	Information technology	1,352,293	1,044,706	307,587	·
15	Royalties	0			_
16	Occupancy	2,879,766	791	2,878,975	
17	Travel	4,706,944	4,156,997	379,730	170,217
18	Payments of travel or entertainment expenses for any federal,				
	state, or local public officials	0			
19	Conferences, conventions, and meetings	624,669	429,349	92,207	103,113
20	Interest	7,703,550	7,509,085	194,465	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	13,289,478	12,881,591	407,887	
23	Insurance	800,404	251,360	544,111	4,933
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	AUXILIARY SERVICES	10,333,364	10,333,364	0	0
b	NON-OFFICE SUPPLIES	2,512,013	1,477,531	1,034,482	0
c	MAINT, TAXES, BOND ISSUANCE	1,078,294	267,827	809,863	604
d	RECRUITING EXPENSES	817,209	794,975	22,234	0
e	ALLOC OF INDIRECT OVERHEAD	0	12,965,049	-12,965,049	0
f	All other expenses	2,797,712	1,731,130	955,704	110,878
25	Total functional expenses. Add lines 1 through 24f	175,131,700	145,829,054	25,893,127	3,409,519
26	<b>Joint costs.</b> Check here ▶ ☐ If following				
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising solicitation				

Pa	rt X	Balance Sheet					
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	-		17,820	1	17,145
	2	Savings and temporary cash investments	48,642,980	2	67,189,238		
	3	Pledges and grants receivable, net	11,859,861	3	12,711,354		
	4	Accounts receivable, net			1,204,477	4	1,176,299
	5	Receivables from current and former officers, directors, trustee highest compensated employees Complete Part II of	s, ke	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ , and contributing a sponsoring organizations of section $501(c)(9)$ voluntary emploorganizations (see instructions)	mplo	yers, and			
ste		Schedule L				6	
Assets	7	Notes and loans receivable, net			4,274,572	7	4,466,621
⋖	8	Inventories for sale or use			578,542	8	647,220
	9	Prepaid expenses and deferred charges			3,058,493	9	3,015,773
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	435, 788, 135			
	b	Less accumulated depreciation	10b	182,868,934	258,866,175	<b>10</b> c	252,919,201
	11	Investments—publicly traded securities			186, 169, 458	11	232,212,788
	12	Investments—other securities See Part IV, line 11			411,885,210	12	434,224,980
	13	Investments—program-related See Part IV, line 11		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	8,156,262	15	6,373,678		
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .			934,713,850	16	1,014,954,297
	17	Accounts payable and accrued expenses .			47,713,476	17	44,135,909
	18	Grants payable			2,000,200	18	2,006,913
	19	Deferred revenue			6,944,143	19	6,382,568
	20	Tax-exempt bond liabilities			171,245,904	20	170,788,606
je s	21	Escrow or custodial account liability Complete Part IV of Schedu	ıle D			21	
abilities	22	Payables to current and former officers, directors, trustees, ke employees, highest compensated employees, and disqualified					
Lial		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .	•	134,945	23	89,907
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			37,484,504	25	40,529,592
	26	Total liabilities. Add lines 17 through 25			265,523,172	26	263,933,495
Ş		Organizations that follow SFAS 117, check here ▶ 🔽 and com	plete	lines 27			
Balances		through 29, and lines 33 and 34.					
al ar	27	Unrestricted net assets			211,363,818		238,315,659
ă	28	Temporarily restricted net assets	211,395,935 246,430,925		249,877,464		
Fund	29	·				29	262,827,679
교		Organizations that do not follow SFAS 117, check here ► a	nd co	mplete			
ō	20	lines 30 through 34.				20	
Assets	30	Capital stock or trust principal, or current funds				30	
Š	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other f	unas		660 400 670	32	754 000 000
Net	33	Total net assets or fund balances			669,190,678	33	751,020,802
	34 Total liabilities and net assets/fund balances				934,713,850	34	1,014,954,297

Pal	Check if Schedule O contains a response to any question in this Part XI			. [~			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		175,2	283,62		
2	Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses Subtract line 2 from line 1	3		1	151,92		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		669,1	190,67		
5	Other changes in net assets or fund balances (explain in Schedule O)	5		81,6	578,20		
6	6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6						
Par	The triangle of the triangle of the triangle of the triangle of the triangle of the triangle of the triangle of tr			୮			
1	Accounting method used to prepare the Form 990			Yes	No		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No		
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 is on a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separated basis	ssued					
3a							
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes			

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DLN: 93493135030142

**Employer identification number** 

OMB No 1545-0047

### **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

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.

Inspection

Lafaye	ette Col	llege	E 6 0 6					
Рa	rt I	Reason for Public Charity Status (All organizations must complete this part.) See						
		zation is not a private foundation because it is (For lines 1 through 11, check only one box )	mstructions					
1	Ť	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i)						
2	Ī	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E )						
3	Ė	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).						
4	Ė	A medical research organization operated in conjunction with a hospital described in <b>section 170(b</b> hospital's name, city, and state	)(1)(A)(iii). Enter the					
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governme section 170(b)(1)(A)(iv). (Complete Part II)	ntal unit described in					
6	Γ	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v).</b>						
7	Γ	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II)						
8	Г	A community trust described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II )						
9	Г	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross						
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no n	nore than 331/3% of					
		its support from gross investment income and unrelated business taxable income (less section 51	1 tax) from businesses					
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)						
10	Γ	An organization organized and operated exclusively to test for public safety Seesection 509(a)(4).						
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) the box that describes the type of supporting organization and complete lines 11e through 11h  a Type I  b Type II  c Type III - Functionally integrated						
e	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by one or other than foundation managers and other than one or more publicly supported organizations descr section 509(a)(2)						
f		If the organization received a written determination from the IRS that it is a Type I, Type II or Type check this box	e III supporting organization,					
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?						
		(i) a person who directly or indirectly controls, either alone or together with persons described in (i	· ————					
		and (III) below, the governing body of the the supported organization?	11g(i)					
		(ii) a family member of a person described in (i) above?	11g(ii)					
_		(iii) a 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)					
h		Provide the following information about the supported organization(s)						

(i) Name of supported organization	(ii) EIN			(iv)  Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi)  Is the organization in col (i) organized in the US?	
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

# Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u> </u>	ection A. Public Support		and to quanty t			out complete	
	endar year (or fiscal year beginning						
Care	in)	<b>(a)</b> 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	<b>(e)</b> 2010	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	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)						
6	Public Support. Subtract line 5 from						
Ū	line 4						
S	ection B. Total Support		<u> </u>	<b>I</b> I.			
	endar year (or fiscal year beginning						
	ın) <b>&gt;</b>	<b>(a)</b> 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	<b>(e)</b> 2010	<b>(f)</b> Total
7	A mounts from line 4						
8	Gross income from interest,						
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV )						
11	Total support (Add lines 7						
	through 10)					<u> </u>	
12	Gross receipts from related activiti	es, etc (See inst	ructions )			12	
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı	
	check this box and <b>stop here</b>						<b>►</b>
	-tiC Ct-ti	L'a Carana at B					
<u> </u>	Public Support Percentage for 2010			11 column (f))			
	Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))  14						
15	Public Support Percentage for 2009 Schedule A, Part II, line 14						
16a	33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box						
_	and <b>stop here.</b> The organization qualifies as a publicly supported organization						
b	33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this						
	box and <b>stop here.</b> The organization qualifies as a publicly supported organization  10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14						
1/a							
	is 10% or more, and if the organization made						rt a d
	in Part IV how the organization mee	ts the "racts and	circumstances"	test ine organiz	ration qualifies as	a publicly suppo	
L	organization	_2000 If+b	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	<b>►</b> □
D	<b>10%-facts-and-circumstances test-</b> 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						V
	supported organization	aon meets the 10	acts and circuilis	tances test file	z organizacion qual	mes as a publici	y ▶[¯
18	• • •	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b, check this	box and see	- 1
	Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see						

organization

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 18 19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

33 1/3% support tests-2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

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

**▶**□

Part IV

**Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2010

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DLN: 93493135030142

OMB No 1545-0047

**SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Political Campaign and Lobbying Activities

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

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

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),
then
◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
+ Section FO1(a) (ather than a action FO1(a)(2)) erganizations. Complete Parts I.A. and C. halayy. Do not complete Part I.B.

Sells Sells	ction 501(c) (other than section 5 ction 527 organizations. Complete e organization answered "Yection 501(c)(3) organizations that ction 501(c)(3) organizations that	s," to Form 990, Part IV, Line 4, or have filed Form 5768 (election under have NOT filed Form 5768 (election u s," to Form 990, Part IV, Line 5 (Pr	ts I-A and C below Form 990-EZ, Pa section 501(h)) C nder section 501(	art VI, line 47 (Lobbying A complete Part II-A Do not cor (h)) Complete Part II-B Do n	mplete Part II-B ot complete Part II-A
	me of the organization ayette College			Employer iden	tification number
				24-0795686	
Par	t I-A Complete if the or	ganization is exempt under :	section 501(c	c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign acti	ivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Dar	t T-B Complete if the or	ganization is exempt under	section 501/a	-)(3)	
1		e tax incurred by the organization und			
2	·	e tax incurred by organization manage			P
3	·	ection 4955 tax, did it file Form 472		14333 F	Yes No
4а	Was a correction made?	ection 4933 tax, did it life form 472	o for this year.		Tes   No
ња b	If "Yes," describe in Part IV				) 1es   NO
		ganization is exempt under	section 501(c	c) excent section 501	(c)(3)
1		ended by the filing organization for se			¢
2		rganization's funds contributed to ot			Y
_	exempt funtion activities	rgamzation s rands contributed to ot	ner organizations	► •	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b ►	rt.
4	Did the filing organization file <b>F</b>	Form 1120-POI for this year?			Yes No
5	Enter the names, addresses ar organization made payments f amount of political contribution	nd employer identification number (El For each organization listed, enter the is received that were promptly and d political action committee (PAC) If	e amount paid fro irectly delivered	m the filing organization's f to a separate political orga	to which the filing unds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3	) and fi	led Form 5768	(election
<b>Д</b> В	Check I if the filing organization belongs to a	an affiliated group x A and "limited control" provisions apply			
	Limits on Lobbying E (The term "expenditures" means a			<b>(a)</b> Filing O rganization's Totals	<b>(b)</b> Affiliated Group Totals
<b>1</b> a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)		120,515	
c	Total lobbying expenditures (add lines 1a and 1	b)		120,515	
d	Other exempt purpose expenditures			175,011,185	
е	Total exempt purpose expenditures (add lines 1	c and 1d)		175,131,700	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both		1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
	Not over \$500,000	20% of the amount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000			
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)		250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		0	
i	Subtract line 1 f from line 1 c If zero or less ente	ar - 0 -		0	

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> Total	
2a	Lobbying non-taxable amount			120,699	120,515	241,214	
_b	Lobbying ceiling amount (150% of line 2a, column(e))					361,821	
c	Total lobbying expenditures			120,699	120,515	241,214	
_d	Grassroots non-taxable amount			250,000	250,000	500,000	
e 	Grassroots ceiling amount (150% of line 2d, column (e))					750,000	
f	Grassroots lobbying expenditures			0	0	0	

che	edule C (Form 990 or 990-EZ) 2010				Page <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	IOT fi	led Fo	rm !	5768
		(8	1)		(b)
		Yes	No	A	mount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	rt III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c	)(5), o	r se	ction
			_		Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?		—	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		<u> </u>	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Pai	rt III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".				ction
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

### Part IV Supplemental Information

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

Identifier	Return Reference	Explanation
PART II-A, LINE 1B		A firm was engaged for the direct lobbying of congressmen and
		senators

DLN: 93493135030142

OMB No 1545-0047

**SCHEDULE D** (Form 990)

**Supplemental Financial Statements** ► Complete if the organization answered "Yes," to Form 990,

	I Revenue Service		v, iine 6, 7, 8, 9, 10, 1. orm 990. ► See separa				Inspec	tion
Name of the organization						oyer identific		
	ayette College			-				
Рa	rt I Organi	zations Maintaining Donor A	dvised Funds or	Other Similar F		)795686 or <b>Account</b> s	s. Comple	te if the
		ation answered "Yes" to Form 99			unas (	or Account	or comple	ic ii tiic
			(a) Donor ad	vised funds	(	<b>b)</b> Funds and	other accou	ınts
L	Total number at	end of year						
2	Aggregate cont	ributions to (during year)						
3	Aggregate grant	ts from (during year)						
1	Aggregate value	e at end of year						
5		ation inform all donors and donor advi rganization's property, subject to the			ior advi:	sed	☐ Yes	┌ No
<b>;</b>	used only for ch	ation inform all grantees, donors, and naritable purposes and not for the ben rmissible private benefit					☐ Yes	┌ No
Pai	rt III Conser	rvation Easements. Complete	ıf the organızatıon	answered "Yes" t	o Form	n 990, Part I'	V, line 7.	
L 2	Preservation Protection Preservation Complete lines	onservation easements held by the o on of land for public use (e g , recreati of natural habitat on of open space 2a-2d if the organization held a qual e last day of the tax year	on or pleasure)	Preservation of ar Preservation of a	certified	d historic struc	•	ea
						Held at the	End of the	Year
а	Total number of	f conservation easements			2a			
b	Total acreage r	estricted by conservation easements	;		2b			
c	Number of cons	ervation easements on a certified his	storic structure includ	ed ın (a)	2c			
d	Number of cons	ervation easements included in (c) a	cquired after 8/17/06		2d			
3	Number of cons	ervation easements modified, transfe	erred, released, exting	uished, or terminate	ed by th	e organızatıon	during	
	the taxable yea	r <b>⊩</b>						
1	Number of state	es where property subject to conserva	ation easement is loc:	ated <b>&gt;</b>				
5	Does the organ	ization have a written policy regarding the conservation easements it holds	g the periodic monitor		—— dling of	violations, and	d	┌ No
5	Staff and volunt	teer hours devoted to monitoring, insp	pecting and enforcing	conservation easen	nents du	ırıng the year	<u> </u>	
7	A mount of expe	enses incurred in monitoring, inspecti	ng, and enforcing cons	servation easement	s durıng	the year ► \$		
3		servation easement reported on line 2 and 170(h)(4)(B)(ii)?	2(d) above satisfy the	requirements of sec	tion		┌ Yes	┌ No
•	balance sheet,	scribe how the organization reports c and include, if applicable, the text of t n's accounting for conservation easer	the footnote to the org					
ar		zations Maintaining Collection to the organization answered by			or Oth	ner Similar	Assets.	
La	art, historical tr	ion elected, as permitted under SFAS reasures, or other similar assets held XIV, the text of the footnote to its fir	for public exhibition,	education or resear	ch ın fuı			e,
b	historical treas	ion elected, as permitted under SFAS ures, or other similar assets held for owing amounts relating to these items	public exhibition, educ					
	(i) Revenues in	ncluded in Form 990, Part VIII, line 1				<b>►</b> \$	1	37,800
	(ii) Assets incli	uded ın Form 990, Part X					2,4	
2	If the organizat	ion received or held works of art, hist nts required to be reported under SFA			or financ			
а	Revenues inclu	ded in Form 990, Part VIII, line 1				<b>▶</b> \$		

Assets included in Form 990, Part X

Par	tilli Organizations Maintaining Co	llections of Art	, His	tori	cal Tre	asures, or	Othe	r Similar As	sets (co	ontinued)
3	Using the organization's accession and other items (check all that apply)	r records, check any	of th	ne foll	_	_			ion	
а	Public exhibition		d	<u> </u>	Loan or	exchange pro	grams	5		
b	Scholarly research		e	$\vdash$	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIV	llections and expla	ın hov	w they	further	the organizatio	n's e	xempt purpose II	ı	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								_ Yes	<b>▽</b> No
Par	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	•					ed "Y	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						sets		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	/ıng ta	ble					
								Am	ount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					Γ	Yes	┌ No
ь	If "Yes," explain the arrangement in Part XIV									
Pa	rt V Endowment Funds. Complete	f the organization	ans	were	d "Yes"	to Form 990	), Pa	·		
		(a)Current Year	(b	)Prior	Year	(c)Two Years Ba	ack	( <b>d)</b> Three Years Back	(e)Four \	/ears Back
1a	Beginning of year balance	571,722,078		526	,566,830	674,092	,733			
b	Contributions	12,832,458		2	,968,035	9,312	,825			
С	Investment earnings or losses	96,467,560			,861,818	-124,340	<u> </u>			
d	Grants or scholarships	7,952,953			,142,053	8,848				
е	Other expenditures for facilities and programs	21,701,572			,057,047	21,990				
f	Administrative expenses	1,779,684			,475,505	1,659				
g	End of year balance	649,587,887		571	,722,078	526,566	,830			
2	Provide the estimated percentage of the yea	r end balance held a	ıs							
а	Board designated or quasi-endowment 🕨	22 560 %								
b	Permanent endowment 🕨 40 460 %									
С	Term endowment ► 36 980 %									
3a	Are there endowment funds not in the posses	ssion of the organiza	ation	that a	re held a	ınd admınıster	ed for	the		
	organization by							D- (	Yes	No
	(i) unrelated organizations			•				3a(		No
ь	(ii) related organizations		on S	 Sched	ule R?			Su(1		110
4	Describe in Part XIV the intended uses of th	· · · · · · · · · · · · · · · · · · ·								<u> </u>
Pai	rt VI Investments—Land, Buildings					D, Part X, line	e 10.			
	Description of investment				Cost or oth (investme			(c) Accumulated depreciation	( <b>d)</b> Bo	ok value
1a	Land					4,03	5,752			4,035,752
b	Buildings					317,72		108,241,541	<b>!</b>	9,478,562
С	Leasehold improvements									0
	Equipment					74,25	6,188	61,556,835	1	.2,699,353
e	Other					39.77	6,092		<del>                                     </del>	26,705,534

252,919,201

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value	<b>(c)</b> Method of valuation Cost or end-of-year market value
(1)Financial derivatives		oost or one or your market range
(2)Closely-held equity interests		
(3)Other (A) EQUITY INSTIT MUTUTAL FUNDS	67,209,459	F
(B) EQUITY MUTUAL FUNDS	3,154,780	F
(C) ALTERNATIVE INSTRUMENTS	363,193,627	F <sub>.</sub>
(D) UNITED EDU SUBSCRIBER SAVINGS	281,257	С
(E) INSURANCE POL, L C IS BENEFICI	353,018	С
(F) CO-OP EQUITY INTEREST (E & I)	15,234	С
(G) COMMONWEALTH ANNUITY	17,605	С
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)  Part VIII  Investments—Program Related. See	434,224,980 Form 990 Part V June 1	3
(a) Description of investment type	(b) Book value	(c) Method of valuation
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, lin	e 15.	
(a) Descrip	tion	(b) Book value
		<u> </u>
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5)	
Part X Other Liabilities. See Form 990, Part X		, , , , , , , , , , , , , , , , , , ,
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	310,719	
INT RATE HEDGE/SWAP AGREEMENTS AGENCY FUNDS	11,643,035	
ASSET RETIREMENT OBLIGATION (F	6,041,111	
ANNUITIES PAYABLE	20,508,939	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	40,529,592	

Schedule D (Form 990) 2010  Part XI Reconciliation of C	Change in Net Assets from Fo	www 000 to Financial Statement		Page <b>4</b>
1 Total revenue (Form 990, Part		rm 990 to Financial Statemer	1	175,283,624
<ul><li>Total expenses (Form 990, Pa</li><li>Excess or (deficit) for the year</li></ul>			3	175,131,700
<ul><li>4 Net unrealized gains (losses) of</li><li>5 Donated services and use of fa</li></ul>			<b>4</b> 5	69,917,808
6 Investment expenses			6	8,774,474
<ul><li>7 Prior period adjustments</li><li>8 Other (Describe in Part XIV)</li></ul>			8	2,985,918
<ul><li>9 Total adjustments (net) Add li</li><li>10 Excess or (deficit) for the year</li></ul>	ines 4 - 8 per financial statements  Combine lin	es 3 and 9	9 10	81,678,200 81,830,124
	Revenue per Audited Financia er support per audited financial statem	T	er R	eturn 214,579,488
	ut not on Form 990, Part VIII, line 12	<b>2a</b>   69,917,808		
<b>b</b> Donated services and use of f	facilities	. <b>2b</b> 0		
<b>d</b> Other (Describe in Part XIV)	· · · · · · · · · · · · · · · · · · ·	<b>2d</b> -30,996,174	_	
<ul><li>e Add lines 2a through 2d</li><li>3 Subtract line 2e from line 1 .</li></ul>			2e 3	38,921,634 175,657,854
	90, Part VIII, line 12, but not on line <b>1</b> luded on Form 990, Part VIII, line 7b	1 1		
<ul><li>b Other (Describe in Part XIV)</li><li>c Add lines 4a and 4b</li></ul>		. <b>4b</b> -2,467,252	4c	-374,230
	nd <b>4c.</b> (This should equal Form 990, Pa Expenses per Audited Financia	· · · · · · · · · · · · · · · · · · ·	5 per	175,283,624
Total expenses and losses pe statements			1	132,749,364
2 A mounts included on line 1 but a Donated services and use of f	ut not on Form 990, Part IX, line 25	<b>  2a</b>   0		
<ul><li>b Prior year adjustments</li><li>c Other losses</li></ul>		<b>2b</b> 0		
d Other (Describe in Part XIV)		<b>2d</b> 2,467,252		
<ul><li>e Add lines 2a through 2d</li><li>3 Subtract line 2e from line 1 .</li></ul>			2e 3	2,467,252
	00, Part IX, line 25, but not on line 1: luded on Form 990, Part VIII, line 7b	<b>4a</b> 10,867,496		
<ul><li>b Other (Describe in Part XIV)</li><li>c Add lines 4a and 4b</li></ul>		<b>4b</b> 33,982,092	4c	44,849,588
5 Total expenses Add lines 3 a  Part XIV Supplemental In	nd <b>4c.</b> (This should equal Form 990, P	art I, line 18 )	5	175,131,700
Complete this part to provide the de	escriptions required for Part II, lines 3 B, Part XII, lines 2d and 4b, and Part X			
additional information  Identifier	Return Reference	Explanati		
COLLECTIONS OF ART, HISTORICAL TREASURES, ETC		, A mong the rich resources provided art collection comprised mostly of g	forstu	
MISTORICAL TREASURES, ETC	LINE 4	and other donors The collection inc early twenty-first century American	ludes	eighteenth-through
		prints, and sculpture, vintage photo American sculpture and paintings R	graphs	s, and contemporary
		the strength of the existing collection for the art collection is to document	ns Tl , prese	he mission statement erve for future
		generations, exhibit, and make acce collection to the students, public, ar	nd sch	olars through
		exhibitions, publications, reproducti for research purposes The administ complies with museum-field wide sta	ration	of the art collection
		American Association of Museums, curated exhibitions from the collecti	AAM)	Students have
		artwork is loaned to other institution importance, images of artwork are re	s for e	exhibitions of scholarly
		reproduction in commercial (ex tex scholarly publications (generally at	no cha	arge or nomınal fee )
		Lafayette College's Special Collecti The Lafayette Special Collections a home to approximately 20,000 rare	nd Col	llege Archives are
		cubic feet of manuscripts and archiv	es Tl	he holdings include
		Marquis de Lafayette, rare book coll angling, miniature books, and artists	s' bool	ks, papers of former
		Treasury Secretary William E Simol Robert B Meyner and Congresswom records of the Easton-based Dixie C	an He	len Meyner, the early
		of noted illustrator and artist Howard College Archives serves as the repo	d Ċ haı	ndler Christy The
		Lafayette College, dating back to th	rds m	anagement
		responsibilities for current College includes more than 50,000 photogramecordings, and objects that docume	aphs,	audıo-vısual
ENDOWMENT INVESTMENT GUIDELINES	FORM 990, SCHEDULE D, PART V	The intent of the College's Investmendowment is to provide a predictab	le str	eam of funding for the
		College's programs from the endowr maintain the purchasing power of the Program and Capital Assets expens	e endo	wment assets
		endowment operating distribution in Grants, Prizes and Fellowships (\$7,9	clude	Student Financial Aid
		(\$6,969,200), Research (\$102,200 (\$746,700 - includes Libraries of \$	0), A ca 622,0	ademic Support 00), Intercollegiate
		Athletics (\$184,300), Student Serv Operation and Maintenance of Plant Auxiliary Services) The College als	(\$1,8	27,400, including
		\$10,823,200 of Unrestricted Endov	vment	Income and realized
		expenses reported (\$1,779,700) ardistributions of Annuity Funds princ	ıpal to	fund annuitant
		payments (\$1,733,000) as reported section of the College's Statement cended June 30, 2011 Certain restri	of A cti	vities for the year
		provide that income can be used for expenses and to fund student loans	facilit	ies capital projects
FIN 48 FOOTNOTE	FORM 990, SCHEDULE D, PART X, LINE 2	The College has been granted tax exorganization under Section 501(c)(3 Code, and accordingly, files federal	3) of th	ne Internal Revenue
		Organization Exempt from Income T also files federal tax Form 990-T (E	ax) aı	nnually The College
		Business Income Tax Return) on ne business activities The College est	t inco imate	me of unrelated s an income tax
		liability of \$450,000 for the Form 99 30, 2011, of which \$139,281 has b 2011 The College's federal and sta	een pi	repaid as of June 30,
		ended June 30, 2010 were \$300 A derecognized by the College based	tax po on a "i	osition is recognized or more likely than not"
		threshold This applies to positions taken in a tax return. The College do statements include uncertain tax po	oes no	t believe its financial
RECONCILIATION OF CHANGE IN NET ASSETS	FORM 990, PART XI, LINE 8	CHANGE IN ANNUITIES PAYABLE DISTRIB FROM PRINCIPAL TO FU	EST	IMATE (3,598,000)
		(1,733,030) CHANGE IN MV OF IN AGREEMENTS 1,178,367 PROVIS NON OP PLEDGES REC 2,873,410	NTERE ION F	EST RATE SWAP FOR UNCOLLECTIBLE
		PROPERTY, PLANT & EQUIPMENT ADJUSTMENT FOR EXPERIENCE (	(339	,829) GAIN
		COST 4,605,000 TOTA	L \$2,	985,918
RECONCILIATION OF REVENUE	FORM 990, SCHEDULE D, PART XII	LINE 2D FINANCIAL AID GRANT (34,062,127) ENDOWMENT AGEN ANNUITIES PAYABLE ESTIMATE	CY (5	7,765) CHANGE IN
		FROM PRINCIPAL TO FUND ANNU (1,733,030) CHANGE IN MV OF IN	JITIES NTERE	S PAYABLE EST RATE SWAP
		AGREEMENTS 1,178,367 PROVIS NON OP PLEDGES REC 2,873,410	GAIN	N ADJUSTMENT FOR
		EXPERIENCE OF EARLY RETIREM LOSS ON DISPOSAL OF PP&E (33 ADJUSTMENT 137,800	9,829	) GIFTS IN KIND
		(\$30,996,174) ======== LI REVENUES TO EXTENT EXPENDE	NE 4B D (38	B FUNDRAISING ,162) RENTAL
		REVENUES TO EXTENT EXPENDE STORE (COGS) REVENUES TO EX (1,841,070) TOTAL LIN	TENT	EXPENDED
RECONCILIATION OF EXPENSES	FORM 990, SCHEDULE D, PART	(1,841,070) TOTAL LIN ========= LINE 2D FUNDRAISING REVENU		
	XIII	38,162 RENTAL REVENUES TO EXCOLLEGE STORE (COGS) TO EXT	KTENT ENT E	EXPENDED 588,020 XPENDED 1,841,070
		4B FINANCIAL AID GRANTS TO SENDOWMENT AGENCY 57,765 GI	STUD	ENTS 34,062,127
		(137,800) TOTAL LINE		

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As Filed Data -

DLN: 93493135030142

## **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

Name of the organization Lafayette College

**SCHEDULE E** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

**Employer identification number** 

	24-0795686			
Pai	rt I		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 If you need more space use Part II	3		
	picase explain 11 you need more space use 1 are 11	_ <b>3</b>	Yes	
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	<b>4</b> c	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 Part II			
5	Does the organization discriminate by race in any way with respect to			
	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
е	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		No
	2. you districted 1.65 to diff of the above, piease explain 11 you need more space, use I dit 11	_		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	- 6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b		No
	If you answered "Yes" to either line 6a or line 6b, explain on Part II			
7	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	_	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	of Nev From 73-30, 1373-2 C. B. 307, covering facial holidiscrimination of 11 No., explain on Part II	7	Yes	

### Part II Supplemental Information

Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions)

ldentifier	Return Reference	Explanation
Racial Nondiscriminatory Policy	Form 990, Schedule E, Part I, Line 3	Via Website http://catalog.lafayette.edu (see Non-discrimination Policy Statement). Also on Website, see separate Diversity and Inclusiveness Statement
Financial Aid from a Governmental Agency	Form 990, Schedule E, Part I, Line 6a	Federal grants Federal Pell Grant Program Federal Supplemental Educational Opportunity Grants (SEOG) Federal Work-Study Program National Science and Mathematics Access to Retain Talent/SMART Grants/ACG Program National Science and Mathematics Access to Retain Talent/SMART Grants Federal Direct Loan Programs (Stafford & PLUS Programs) Federal Perkins Loan Program National Endow ment for the Arts Commonw ealth of Pennsylvania Institutional Assistance Grant (IAG) PHEAA State Grants to Students Pa Work-Study Redevelopment Assistance Capital Program (RACP) Pa Council of the Arts PCLB Underage Drinking Research Nazareth Boro Waste Water

Schedule E (Form 990 or 990-EZ) 2010

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As Filed Data -

DLN: 93493135030142

OMB No 1545-0047

Open to Public **Inspection** 

No

### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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

Statement of Activities Outside the United States

► Attach to Form 990. ► See separate instructions.

Name of the organization Lafayette College

**Employer identification number** 

24-0795686

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

For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award ✓ Yes

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

<b>3</b> Activites per Region (Use Par	t V ıf addıtıonal s	pace is needed	)		
<b>(a)</b> Region	<b>(b)</b> Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
Europe (Including Iceland and Greenland)	0	2	Program Services	INSTRUCTION 45504	197,687
Europe (Including Iceland and Greenland)	0	1	Program Services	INSTRUCTION 45508	420,506
Europe (Including Iceland and Greenland)	0	1	Program Services	INSTRUCTION 45511	495,371
Europe (Including Iceland and Greenland)	0	2	Program Services	INSTRUCTION 28210	139,604
Europe (Including Iceland and Greenland)	0	2	Program Services	INSTRUCTION 28211	75,330
Europe (Including Iceland and Greenland)	0	2	Program Services	INSTRUCTION 28213	100,592
Europe (Including Iceland and Greenland)	0	2	Program Services	INSTRUCTION 28219	70,845
East Asia and the Pacific	0	2	Program Services	INSTRUCTION 28223	104,704
Sub-Saharan Africa	0	2	Program Services	INSTRUCTION 28225	138,906
Sub-Saharan Africa	0	2	Program Services	INSTRUCTION 28230	28,266
South America	0	2	Program Services	INSTRUCTION 28231	126,260
Middle East and North Africa	0	2	Program Services	INSTRUCTION 28232	98,196
Europe (Including Iceland and Greenland)	0	1	Fundraising		3,000
Central America and the Caribbean			Investments		184,926,457
Europe (Including Iceland and Greenland)			Investments		16,324,607
North America			Investments		51,600,259
South Asia			Investments		15,609,198
3a Sub-total b Total from continuation sheets to Part I	0	23			270,459,788
c Totals (add lines 3a and 3b)	0	23			270,459,788
For Privacy Act and Paperwork Reduction	n Act Notice, see	the Instructions	for Form 990. Cat	No 50082W Schedu	le F (Form 990) 2010

Part	Part IV, l	ine 15, for any					plete if the organiza received more thai		
	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	<b>(f)</b> 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 nur tax-exempt by	mber of recipie the IRS, or fo	nt organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2010

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 Part V if additional space is needed.

USE Part V II	Ose Part V II 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	( <b>f</b> ) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	
STUDENTS STUDY ABROAD	Europe/Iceland/Greenland	11			206,700	ACCT CREDIT	FMV	
STUDENTS STUDY ABROAD	East Asia/Pacific	2			30,200	ACCT CREDIT	FMV	
STUDENTS STUDY ABROAD	Cent A merica/Caribbean	1			15,100	ACCT CREDIT	FMV	
							ula E (Earma 000) 2010	

## Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)</i>	<u> </u>	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	<b>▽</b>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	굣	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	<b>▽</b>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	া	Yes	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	굣	No

Schedule F (Form 990) 2010

Schedule F (Form 990) 2010

Page **5** 

Part V Supplemental Information
Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

ldentifier	Return Reference	Explanation
FORM 990, SCHEDULE F, PART 1 LINE 1		The College considers the awarding of financial aid (primarily grants (scholarships), loans and work-study) to its students (including non-resident alien students) to be a U.S. Based activity. The Financial Aid Office maintains records to 1) substantiate the amount of the grants and other financial aid awarded, 2) document each grantee's eligibility for the grant and other financial aid sources and 3) document the selection criteria used to award the grant and other financial aid.

ldentifier	Return Reference	Explanation
MONITORING THE USE OF GRANT FUNDS OUTSIDE THE US	FORM 990, SCHEDULE F, PART I, LINE 2	The College recruits, admits and enrolls top qualified students from all parts of the world and all Lafayette students are both encouraged and eligible to participate in numerous affiliated study-abroad (off- campus) programs for a semester, academic year and the January/May Interim Sessions Students, who are approved to participate in these programs, are billed by Lafayette for Tuition, any related Room and Board fees and other related program charges. The student's grant and other financial aid for that term, interim or academic year are credited to the student's Lafayette College account to cover the educational related charges/expenses. It is possible that the total financial aid could exceed the billed expenses resulting in a credit balance and the possibility of the student receiving a refund check. If appropriate, the College will issue the refund check to the student in order to cover any related educational expenses that the College had not billed. The Office of Financial Aid maintains an itemized breakdown of the cost of attendance used to determine and award financial aid for all students (domestic and/or international.) Awards are based on the standard approved charges for the College in any given academic year as well as other eligibility criteria (enrollment, academic standing, housing status, etc.) Any costs for study abroad opportunities that may exceed Lafayette's cost of attendance must be covered by the student and family. Students are encouraged to consult with the Office of Financial Aid and Study Abroad as they evaluate their options.

Schedule F (Form 990) 2010

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SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

As Filed Data -

DLN: 93493135030142

**Supplemental Information Regarding Fundraising or Gaming Activities** 

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-F7 ► See separate instructions

OMB No 1545-0047

Open to Public

Internal Revenue Service		to Form 990 or Form 99	Inspection				
Name of the organization Lafayette College		Employer ide					
Larayette Correge				24-0795686			
Part I Fundraising Act	tivities. Complete	e if the organiza	ntion answered "Yes"	to Form 990, Part IV	, line 17.		
1 Indicate whether the organ	nization raised funds	through any of the	e following activities Ch	eck all that apply			
a Mail solicitations	n-government grants						
<b>b</b> V Internet and e-mail solicitations			f Solicitation of government grants				
c Phone solicitations	q	g   ✓ Special fundraising events					
d 🔽 In-person solicitations	5	_					
<ul> <li>Did the organization have a or key employees listed in</li> <li>If "Yes," list the ten highes to be compensated at leas</li> </ul>	Form 990, Part VII) st paid individuals or	or entity in connections	ection with professional ers) pursuant to agreem	fundraising services? ents under which the fur			
(i) Name and address of Individual or entity (fundraiser)	(ii) Activity	(iii) DId fundraiser have custody or control of contributions? Yes No	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization		
WASHBURN MCGOLDRICK	INITIATIVE PLAN	No	0	28,576	-28,576		
Total		🗲	0	28,576	-28,576		
3 List all states in which the licensing	organization is regis	tered or licensed	to solicit funds or has be	een notified it is exempt	from registration or		

			(a) Event #1  FALL MC GOLF (event type)	(b) Event #2  SPR MC GOLF (event type)	(c) Other Events  0 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1	Gross receipts	39,410	31,830	(**************************************	71,240
	2	Less Charitable	23,470			35,875
	3	Gross income (line 1 minus line 2)	15,940	19,425		35,365
Expenses	4	Cash prizes				
	5	Non-cash prizes	4,147	2,666		6,813
	6	Rent/facility costs	10,544	8,274		18,818
<u>യ്</u> മ്	7	Food and beverages	3,780	6,231		10,011
Direct	8	Entertainment				
	9	Other direct expenses .	445	2,075		2,520
	10	Direct expense summary Add lir	nes 4 through 9 in column	(d)	🛌	38,162
	11	Net income summary Combine I	ines 3 and 10 in column (d	1)	•	-2,797
Par	t III	<b>Gaming.</b> Complete if the o \$15,000 on Form 990-EZ, li		Yes" to Form 990, Par	t IV, line 19, or rep	orted more than
Revenue			(a) Bingo	( <b>b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
မှ မွ	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
_		Volunteer labor	┌ Yes%	┌ Yes %	┌ Yes%	•
	6	Volunteer labor			┌ No	_
	7	Direct expense summary Add line	S 2 through 5 in column (c	Г No		
	7		S 2 through 5 in column (c	Г No		
9	<b>7</b> <b>8</b>	Direct expense summary Add line  Net gaming income summary Comer the state(s) in which the organize	S 2 through 5 in column (conbine lines 1 and 7 in column ation operates gaming act	No I)		
	<b>7</b> <b>8</b> Entrist	Direct expense summary Add line	S 2 through 5 in column (continue lines 1 and 7 in column ation operates gaming actes gaming actes gaming actes gaming actes in each	mn (d)		

Does the organization operate ga	aming activities with nonmembe	rs?		
Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity				
formed to administer charitable	gamıng <sup>,</sup>	· · · · · · · · · · · · · · · · · · ·		
Indicate the percentage of gami	ng activity operated in			
The organization's facility		13a		
An outside facility				
Provide the name and address o records	the person who prepares the or	ganızatıon's gamıng/specıal events books and		
Name 🟲				
Address ►				
=		om the organization receives gaming		
		Yes No		
		ganızatıon ► \$ and the		
amount of gaming revenue retair				
If "Yes," enter name and addres	5			
Name 🟲				
Address 🟲				
Gaming manager information				
Name 🟲				
Gaming manager compensation	<b>▶</b> \$			
	<b>.</b>			
Description of services provided				
Director/officer	Employee	Independent contractor		
Mandatory distributions				
Is the organization required und	er state law to make charitable o	distributions from the gaming proceeds to		
retain the state gaming license?		····· Fyes F No		
Enter the amount of distributions	required under state law distrib	outed to other exempt organizations or spent		
ın the organization's own exemp		<u> </u>		
rt IV Complete this part to instructions.)	orovide additional informatio	on for responses to question on Schedule G (see		
Identifier	ReturnReference	Explanation		
ORM 990, Schedule G, Part I, Line		NONE- AS AN ACCREDITED, LICENSED INSTITUTION OF HIGHER EDUCATION, THE COLLEGE BELEIVES IT IS GENERALLY EXEMPT FROM THE REGISTRATION PROVISIONS THAT REQUIRE ORGANIZATIONS		
		SOLICITING FUNDS FOR CHARITABLE PURPOSES TO REGISTER		

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Schedule I (Form 990)

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

DLN: 93493135030142 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Lafavette College

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

Inspection Employer identification number 24-0795686

Part I General Inform	nation on Grants	and Assistance					
<ul><li>Does the organization main the selection criteria used</li><li>Describe in Part IV the organization</li></ul>	I to award the grants o	orassistance?			ity for the grants or ass	istance, and	Г Yes
Form 990, Part I	V, line 21 for any r	Governments and ecipient that received ded	more than \$5,000.	Check this box if n	o one recipient recei	ved more than \$5,00	
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) GREATER EASTON DEVELOPMENT158-B NORTHAMPTON ST EASTON,PA 18042	23-2660344	501(c)(3)	25,000				
2 Enter total number of sect 3 Enter total number of othe							1 0

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>b)</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
(1) UNDERGRADUATE SCHOLARSHIP GRANTS	1220		34,062,127	FMV	CREDIT STUDENT ACCT
(2) HELP INTEREST SUBSIDY - PAID DIRECT BY COLLEGE	224		164,937	FMV	COLLEGE PAYS TO BANK
(3) ACADEMIC PRIZES, AWARDS, FELLO WSHIPS, INTERSHIPS	166	148,556		FMV	

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

Identifier	Return Reference	Explanation
MONITORING OF GRANTS USED IN U S	FORM 990, SCHEDULE I, PART I, LINE 2	The College awards scholarships, need-based grants, student loans and fellowships to students based on a committee and/or individual review of student aid applications. Relevant criteria include academic and/or other achievement and financial need (as supported by income tax return detail). For certain student and /or parent loans, a credit check of the student and/or parent(s) is also performed. Fellowships are awarded based on a review by the applicable academic department. The College calculates a cost of attendance that includes both the education costs billed by the College (such as Tuition, Fees, Room and Board) and educational costs not billed by the College (such as Books, Travel and Other Incidentals). Based on the student's cost of attendance and the Financial Aid Office's determination of eligibility, the student's financial aid award for the academic year is determined. This award may include scholarships/grants, loans and student employment. For scholarships/grants and student loans, that aid is credited to the student's account and is applied to billed charges. Student employment wages are paid through payroll. For the HELP Loan program interest subsidy, the College pays that expense directly to the lending bank. If a student's account has a credit balance after all applicable College charges and financial aid is posted, the College will issue a refund check to the student. If a student has a credit balance for the Fall Semester, the student may choose instead to carry that credit balance forward for application to either Interim Session or Spring semester charges. Normally, credit balance refund checks are made payable to the student. The credit balance refund check may be made payable to the parent or guardian if the credit balance resulted from applying a Parent Federal Plus Loan to the student's account. It is assumed by the College that credit balance refunds are used to pay for educational costs that were included as part of the student's cost of attendance calculation but not billed by the

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DLN: 93493135030142

**Employer identification number** 

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Lafavette College

Name of the organization

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	<u> </u>		24-0795686			
Pa	art I Questions Regarding Compensation					
			_		Yes	No
1a	Check the appropriate box(es) if the organization provided an 990, Part VII, Section A, line 1a Complete Part III to provi					
	First-class or charter travel	Housing allowance or residence for	personal use			
	▼ Travel for companions	Payments for business use of perso	nal residence			
	▼ Tax idemnification and gross-up payments	Health or social club dues or initiat	on fees			
	Discretionary spending account	Personal services (e g , maid, chau	ffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization of all the expenses described above.			1b		No
2	Did the organization require substantiation prior to reimburs officers, directors, trustees, and the CEO/Executive Directo			2	Yes	
3	Indicate which, if any, of the following the organization uses organization's CEO/Executive Director Check all that apply	·	2			
		Written employment contract				
	·	Compensation survey or study				
	Form 990 of other organizations	Approval by the board or compensa	tion committee			
4	During the year, did any person listed in Form 990, Part VII or a related organization	, Section A , line 1a with respect to t	he filing organization			
а	Receive a severance payment or change-of-control payment	t from the organization or a related o	rganization?	4a		No
b	Participate in, or receive payment from, a supplemental nonc	qualified retirement plan?		4b	Yes	
c	Participate in, or receive payment from, an equity-based con			4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the	· ·	n Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must comp	lete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line 1a, compensation contingent on the revenues of		ny			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes." to line 5a or 5b. describe in Part III		Ì			

payments not described in lines 5 and 6? If "Yes," describe in Part III

compensation contingent on the net earnings of

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

The organization?

ın Part III

Any related organization?

section 53 4958-6(c)?

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

For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe 6a

6b

7

8

Νo

Νo

Νo

Νo

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is 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	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) DANIEL H WEISS	(I) (II)	412,819 0	5,000 0	30,087 0	23,275 0	127,900 0	599,081 0	C C
(2) MITCHELL L WEIN	(I) (II)	262,769 0	15,000 0	4,025 0	23,275 0	22,997 0	328,066 0	C
(3) WENDY L HILL	(I) (II)	244,619 0	5,000 0	4,033	23,275 0	44,094 0	321,021	C
(4) JAMES W DICKER	(I) (II)	191,863 0	2,500 0	42,167 0	18,900 0	22,872 0	278,302 0	C
(5) LESLIE F MUHLFELDER	(ı) (ıı)	210,730 0	10,000	2,397 0	20,701	22,543 0	266,371 0	C
(6) ROBERT J MASSA	(I) (II)	211,267 0	2,500 0	2,783 0	20,150 0	16,322 0	253,022	C
(7) JAMES F KRIVOSKI	(I) (II)	169,000 0	2,000	2,353 0	16,226 0	40,103 0	229,682	C
(8) PAUL H ZIMMERMAN	(I) (II)	150,809 0	10,000	21,721 0	14,820 0	21,162	218,512	C
(9) FRANCIS B O'HANLON	(I) (II)	199,219 0	1,000	5,899 0	19,314 0	22,370 0	247,802	C
(10) BRUCE A MURPHY	(I) (II)	184,863 0	0	3,531 0	17,846 0	22,397	228,637 0	C
(11) WILLIAM M CRAIN	(I) (II)	175,456 0	0	8,835 0	17,595 0	23,295	225,181	C
(12) JOHN KINCAID	(I) (II)	178,679 0	0	1,901 0	17,380 0	18,571 0	216,531	C
(13) JEFFREY E GOLDSTEIN	(I) (II)	161,856 0	5,000	_	15,770 0	22,504	206,221	C
( 14 )								
( 15 )								
(16)								

## 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

_	T	
Ident if ier	Return Reference	Explanation
COMPENSATION INFORMATION	PART I	Part I, Line 1a Travel for Companions - By employment contract, in the event that the College requests President Weiss' spouse to accompany him on College-related business, her reasonable expenses will be paid by the College. While not an employee of the College, the President's spouse serves an important role at both Board and other College functions, including for example, accompanying the President for off-campus fundraising activities. For such fundraising activities, the President's spouse is assigned duties to carry out on behalf of the College in advance of such event. For calendar 2010, such estimated expenses were included as nontaxable benefits in this return. Part I, Line 1a Tax Indemnification - During calendar year 2010, James Dicker (Vice President Development and College Relations) received additional reported contract compensation of \$31,995, including Tax Equalization Payments totaling \$12,350. A separate 2010 payment of \$3,344 for Tax Equalization of calendar 2009 compensation is also included as reportable compensation. Part I, Line 1a - Housing Allowance or Residence for Personal Use - As part of their employment contracts and for the convenience of the College, a College-owned residence was provided to Officers Daniel Weiss (President), Wendy Hill (Provost), James Krivoski (acting as both Vice President for Student Affairs and Assistant to the President) and Shirley Ramirez (Vice President for Institutional Planning and Community Engagement) during calendar 2010. This housing is located on College property and provided in conjunction with these officers' duties. The values of the housing provided and included as nontaxable benefits in this return are Weiss (\$47,287, excluding housekeeper), Hill (20,391), Krivoski (\$24,687) and Ramirez (\$9,596 - for four months). It is the Board's policy that the President resides in the President's House (\$15 College Ave.). The President determines if the duties of the other Officers require each Officer to reside in a College-provided facility. Part I, Lin

Schedule J (Form 990) 2010

Schedule K (Form 990)

**Supplemental Information on Tax Exempt Bonds** 

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

OMB No 1545-0047

2010

DLN: 93493135030142

Open to Public Inspection

Internal Revenue Service
Name of the organization
Lafayette College

Department of the Treasury

Part I Bond Issues

Employer identification number 24-0795686

_	Dona 100aco												
	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	<b>(f)</b> D	escription of Purpose	<b>(g)</b> D€	efeased	Beł	half of		) Pool ancing
		<u> </u>				<u> </u>		Yes	Issuer	Yes	No		
A	Northampton City GPA Rev Bonds Ser 2010	23-3007498	66353LAY3	04-30-2010	26,689,800	REFUNDS	ER OF 2000, VAR CAP F	'R	Х		х		Х
В	NORTHAMPTON CTY GPA COL REF & REV SER 2008	23-3007498	66353LAX5	08-21-2008	98,638,389	RETIRE 97	7,04,04 2ND,NOTES,		Х		х		х
С	NORTHAMPTON CTY GPA VAR REV SER OF 2006	23-3007498	66353LAG2	09-14-2006		RENOV/CO	O NSTRUCTIO N/RELO CA	ATE	Х		х		х
D	NORTHAMPTON CTY GPA VAR REV REF SER 2003	23-3007498	66353LAA5	04-02-2003	1 10 190 000	REFUND SI 07/01/03	ER OF 1993 ON		х		х		х
_		<u> </u>	<b></b>						<u> </u>			<b></b> '	1
	OTTALL Droppeds										<u> </u>	<u> </u>	
	art II Proceeds				A		В					D	
1	Amount of bonds retired					0	500,000			0.000			0
	A mount of bonds legally defe	eased				0	0			-/			0
3	Total proceeds of issue				2	26,690,197	98,649,998		15,31	2,344		10,	,190,000
	Gross proceeds in reserve fu	unds				<del></del>	, ,	,					, ,

2	A mount of bonds legally defeased		0		0		0		(
3	Total proceeds of issue		26,690,197		98,649,998		15,312,344		10,190,00
4	Gross proceeds in reserve funds		0		0		0		(
5	Capitalized interest from proceeds		0		0		108,121		(
6	Proceeds in refunding escrow		0		0		0		(
7	Issuance costs from proceeds		0		0		0		(
8	Credit enhancement from proceeds		0		0		0		(
9	Working capital expenditures from proceeds		0		696		10,709		(
10	Capital expenditures from proceeds		0		5,983,857		15,193,514		(
11	O ther spent proceeds		22,290,000		92,335,000		0		10,190,00
12	O ther unspent proceeds		4,400,197		330,445		0		(
13	Year of substantial completion	20	12	20	12	20	07	20	003
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	×		x			Х		х
15	Were the bonds issued as part of an advance refunding issue?		Х		Х		Х	Х	
16	Has the final allocation of proceeds been made?		Х		Х	Х		Х	
17	Does the organization maintain adequate books and records to support the final	Х		х		Х		х	

allocation of proceeds?

Part III Private Business Use

		/	4	l	В		С		)
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		Х		Х		Х		
2	Are there any lease arrangements that may result in private business use of bond- financed property?		×		×		×		

Par	t III Private Business Use (Continued)								•
			Α		В		С		D
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		х	Х			х		
b	Are there any research agreements that may result in private business use of bond- financed property?		х		х		×		
С	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					
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %		1 000 %		0 %		0 %
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %		0 %		0 %		0 %
6	Total of lines 4 and 5		0 %		1 000 %		0 %		0 %
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	Х		Х		Х			
			-		•				

	post-issuance compliance of its tax-exempt bond liabilities?		^		^	^			
Par	t IV Arbitrage								
		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		x		х		х		х
2	Is the bond issue a variable rate issue?	Х			Х	Х		Х	
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?		х		Х		Х		×
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was a hedge terminated?								
4a	Were gross proceeds invested in a GIC?		Х		Х		Х		Х
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		Х		Х		х		х
6	Did the bond issue qualify for an exception to rebate?		Х		Х		Х		Х

# Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation
Schedule K, Part I, Line 1		Series 2010 is one integrated structure as reported on IRS Form 8038. It is comprised of two sub-components, Series 2010 A & Series 2010 B. Series 2010 A was issued for the purpose of a May 2010 refunding. Series 2010 A had proceeds of \$22,290,000 and is structured as variable rate debt. Series 2010 B, which was issued simultaneously with Series 2010 A and, as mentioned previously, is integrated with Series 2010 A, had total proceeds of \$4,399,860. The Series 2010 B component is structured as fixed rate debt and was issued to fund various capital projects.
Schedule K, Part III, Line 3		The College contracts with Sodexo Dining Services, a for-profit corporate entity, for the management of the dining operations on campus. The current contract is structured such that the preponderance of fees is based on a per capita charge, and the contract has a one-year term. A small portion of the proceeds of the Series 2008 Bonds were used to renovate one of the seven dining venues on campus, but given its nature and term, the College, with the advice of counsel, believes the contract with Sodexo is a Qualified Management Contract and not subject to private use
Schedule K, Part IV, Line 3		The College has three (3) interest rate hedging contracts in place. These contracts were entered into to mitigate the College's interest rate risk inherent with variable rate structured debt. Each requires the College to pay a fixed rate in return for a variable rate that is expected to approximate the interest rate payable on the College's debt in typical markets. None of the three interest rate hedging agreements are structured as "qualified" hedges on the records of the issuing authority of any of the College's bonds, which is the Northampton County General Purpose Authority. As such, none of the interest rate hedges are integrated for tax purposes with a particular debt issuance of the College. UBS is the counterparty on each of the interest rate hedges and they have scheduled expiration dates of 2023, 2030, and 2034.

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DLN: 93493135030142

### Schedule L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

## **Transactions with Interested Persons**

► 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.

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

2010

Open to Public Inspection

Name of the organization Lafayette College										tion numb	er
Part I Excess Benefit Trai		one (s	action 501/	c)(3) =	and section 501	(c)(4)		4-07956			
										ine 40b	
1 (a) Name of disq	Excess Benefit Transactions (section Complete if the organization answered "Yes"  (a) Name of disqualified person  Enter the amount of tax imposed on the organization answered and the organization a				<b>(b)</b> Desc	ription	of trans	action		Cor	(c) rected?
										Yes	No
								year unde	r • \$		
3 Enter the amount of tax, If any	, on line	e 2, abo	ve, reımburse	d by th	ie organization .			•	<b>*</b> \$		
Part II Loans to and/or I	From	Intere	sted Perso	ons.							
Complete if the organiz	zation a T	nswere	d "Yes" on Fo	rm 990	), Part IV, line 26	, or For	m 990-			a T	
(a) Name of interested person and		oan to om the	(c)0 rigir	nal		(e)		(f) Appro	ved	(g)Writ	
purpose	organı	ızatıon?	principal an		(d)Balance due	default?		lt? by board or committee?		agreeme	entz
	То	From				Yes	No	Yes	No	Yes	No
	+										
	<u> </u>										
Total		· ·		► \$	Dorcons						
Complete if the orga						, line	27.				
(a) Name of interested pers			<b>b)</b> Relationship	p betwe	een interested per ganization			nount of g	rant or ty	pe of assi	stance
						-					
						+					

## Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	<b>(b)</b> Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing o organization's revenues?	
	organization			Yes	No
(1) SAMUEL R CHAPIN	OFFICER BOA MERRILL LYNCH	61,957	ISSUANCE/REMKTG OF BONDS		No
(2) ANGEL L MENDEZ	KEY EMPL CISCO SYSTEMS	210,704	COLLEGE SUPPLIER		No
(3) S Kent Rockwell	Principal - Prograss	74,750	COLLEGE SUPPLIER		No

#### Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
Interested Party Transacations		Samuel R Chapin - Trustee Chapin is an officer of Bank of America (BOA) Merrill Lynch The College utilized BOA Merrill Lynch for the remarketing of its bonds and paid \$61,957 for this service Angel L Mendez - Trustee Mendez is a key employee of Cisco Systems, which is a supplier to the College During the year, no payments were made to Cisco However, payments totaling \$210,704 were made to Cisco's partners and suppliers S Kent Rockwell - Trustee Rockwell is a principal owner of Prograss, a supplier to the College During the year, a payment of \$74,750 was made to Prograss

Schedule L (Form 990 or 990-EZ) 2010

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DLN: 93493135030142

OMB No 1545-0047

Open to Public Inspection

**SCHEDULE M** (Form 990)

Department of the Treasury

Internal Revenue Service

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

**NonCash Contributions** 

Name of the organization

Employer identification number

_а і а у	ette College				24-0795686			
Pa	rt I Types of Property				21 0733000			
		(a) Check if applicable	<b>(b)</b> Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	Method of determining amounts		contribut	tion
1	Art—Works of art	Х	3	<del>-</del>	APPRAISAL			
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications	Х		22,339	APPRAISAL			
5	Clothing and household							
good								
	Cars and other vehicles .							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded Securities—Closely held stock	X	53	2,635,926	HIGH/LOW OF DA	ILY MV	<u> </u>	
11	Securities—Partnership, LLC, or trust interests .							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory	Х	1	100	APPRAISAL			
	Drugs and medical supplies							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts .  EVENTS &  SILENT							
25	Other►( <u>AUCTIONS</u> ) LAMP	X	10	10,013	PAID RECEIPT			
26	Other►( <u>POSTS</u> )	Х	1	57,393	PAID RECEIPT			
27	Other►( <u>QUILT</u> )	Х	1	946	PAID RECEIPT			
	GOOD,							
28	SERVICES, Other►(ADV)	Х	7	62,175	PAID RECEIPT			
29	Number of Forms 8283 received by				20			0
	for which the organization complete	d Form 8	3283, Part IV, Donee Ackn	owledgement	29			0
							Yes	No
30a	During the year, did the organizatio							
	must hold for at least three years fr			on, and which is not require	d to be used			
	for exempt purposes for the entire I					30a		No
b	If "Yes," describe the arrangement	ın Part I	II					
31	Does the organization have a gift a					31	Yes	
5∠a	Does the organization hire or use the contributions?	ıra partı	ies or related organizations		non-cash	32a	Yes	
b	If "Yes," describe in Part II							
33	If the organization did not report re	venues i	n column (c) for a type of p	roperty for which column (a	ı) ıs 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.

Identifier	Return Reference	Explanation
Schedule M, Line 32a		To the extent that the College receives donations of securities, its investment broker/manager is tasked with selling those securities

Schedule M (Form 990) 2010

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As Filed Data -

DLN: 93493135030142

OMB No 1545-0047

2010

Open to Public
Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Supplemental Information to Form 990 or 990-EZ

► Attach to Form 990 or 990-EZ.

Name of the organization
Lafayette College

24-0795686

Identifier	Return Reference	Explanation
OFFICER/DIRECTOR/TRUSTEE RELATIONSHIPS	Form 990, Part VI, Section A, Line 2	Trustees Kamine and Fisher have a business relationship Trustee Cox and Officer Muhlfelder have a business relationship

ldentifier	Return Reference	Explanation
Management Company Details	Form 990, Part VI, Section A, Line 3	The College contracts with Sodexo Dining Services to manage its academic year dining, summer dining and campus catering operations. The 2010-11 expenses incurred for the student-related program are included as part of Auxiliary Services expenses (Form 990, Part IX, Line 24b). For calendar year 2010, the College paid a total of \$6,265,770 to Sodexo for these services as disclosed in Form 990, Part VII, Section B.

ldentifier	Return Reference	Explanation
ı ü	Form 990, Part VI, Section A, Line 4	There was one amendment to the Statutes (Section 46H) approved during the 2010-11 tax year as summarized below. A Faculty member was added to the Committee on Audit

ldentifier	Return Reference	Explanation
Form 990 Review Process	Form 990, Part VI, Section B, Line 11A	The Form 990 return is prepared by the College's Administration and forwarded to the College's outside tax advisor for review and input into electronic media. The College will discuss the return and make revisions prior to printing of a first draft return for review and comment by the Committee on Audit. The Committee on Audit reviews this first draft return, recommends changes and such changes are then incorporated into a revised draft return. This revised draft return is reviewed again by the Committee on Audit to ensure the Committee on Audit's requested changes were made. The Administration will then distribute the revised draft return to the full Board of Trustees with a request for review and comment. If any questions are received from a Board member and the return is revised as a result, the Administration will advise the full Board of the change before filing of the final return.

ldentifier	Return Reference	Explanation
Monitoring and Compliance with Conflict of Interest Policy	Form 990, Part VI, Section B, Line 12C	The Conflict of Interest Policy for Trustees, Board Associates, Officers of Administration and Other Key Employees of Lafayette College was approved by the College's Board of Trustees on October 27, 1979 This policy is mailed to all applicable individuals annually for their review and disclosure of both any exceptions to the policy and any affiliations that the policy requires disclosure for All disclosure required under this policy must be directed in writing to the Secretary of the Board of Trustees who shall be responsible for the administration of this policy. Matters under this policy concerning Trustees shall be initially reported to the Chairperson of the Board for appropriate action. Matters concerning staff will be referred initially to the President. Information disclosed to the Secretary (or Chairperson or President) will be held in confidence except when the best interest if the institution is served by disclosing the information to the Board in Executive Session.

Identifier	Return Reference	Explanation
Records Retention Policy	Form 990, Part VI, Section B, Line 14	The Controller's Office has a written records retention policy that is posted and available for staff review. This policy is consistent with IRS record retention guidelines. Other campus offices may also have their own office policy for retention, consistent with guidelines established for outside regulatory agencies and the office's needs. There is no formal overall campus-wide records retention policy.

ldentifier	Return Reference	Explanation
Process for Determining Compensation of CEO and Officers of Administration	VI, Section B,	For the CEO, the Board Chair obtains relevant data for comparable institutions by surveys and other available resources. There is also an annual performance evaluation. For Officers of Administration (Vice-Presidents), the President reviews national data from organizations such as CUPA (College and University Personnel Administration). There is a performance evaluation that includes input from applicable. Trustees with whom the Officer works closely. There is also benchmarking against the salaries of comparable institutions.

ldentifier	Return Reference	Explanation
Document Availability to Public	Form 990, Part VI, Section C, Line 19	The College's audited financial statements for fiscal years 2010-2011, 2009-2010, 2008-2009 and 2007-2008 are available on the College's website. The College does not make its governing documents and conflict of interest policy available to the public on its website. Requests for copies of Forms 990 and 990T are provided promptly upon request in either hard-copy or electronic form and the College does not charge for either copying or mailing costs. After the filing of the Form 990 return for the same tax year, the College will provide either an electronic or hard-copy version directly to Guidestar so they are available to Guidestar for uploading to the Guidestar website. Each of the last three years Form 990 returns are included on the Guidestar website. The College also cooperates with third-party organizations such as Guidestar to the extent possible if they have more detailed questions about our return. The College's financial statements (and limited operating statistics) are also available on two additional websites. 1) The Municipal Securities Rulemaking Board's Electronic Municipal Market Access (EMMA) website http://emma.msrb.org. The College is required to file with EMMA per our 15c2-12 requirements associated with some of its tax-exempt debt. 2) Digital Assurance Certification (DAC)'s website. http://www.dacbond.com/. The College utilizes DAC as a method of getting our documents to EMMA but DAC also posts these documents to their own website where it is publically accessible free of charge. Users are asked to register on this site. The College's status as an organization exempt from Federal taxes dates back to December 1942. Upon request, the College's exempt status.

ldentifier	Return Reference	Explanation
DONOR ADVISED FUNDS	Form 990, Part IV, Line 6	The College is not a sponsoring organization as described in Section 170(c)

ldentifier	Return Reference	Explanation					
Change in Net Assets	· ·	NET UNREALIZED GAINS (LOSSES ON INVESTMENTS) 69,917,808 INVESTMENT EXPENSES 8,774,474 CHANGE IN ANNUITIES PAY ABLE ESTIMATE (3,598,000) DISTRIB FROM PRINCIPAL TO FUND ANNUTTIES PAY ABLE (1,733,030) CHANGE IN MV OF INTEREST RATE SWAP AGREEMENTS 1,178,367 PROVISION FOR UNCOLLECTIBLE NON OP PLEDGES REC 2,873,410 DISPOSAL OF PROPERTY, PLANT & EQUIPMENT (339,829) GAIN ADJUSTMENT FOR EXPERIENCE OF EARLY RETIREMENT COST 4,605,000					

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

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) Average hours	Posi t	tion ( that a	che	')			(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former				
STEPHEN D PRYOR TRUSTEE	5 0	Х						0	0	0	
J B REILLY TRUSTEE	2 0	Х						0	0	0	
S KENT ROCKWELL TRUSTEE	2 0	Х						0	0	0	
DAVID M ROTH EXECUTIVE COMMITTEE	3 0	Х						0	0	0	
ALMA R SCOTT-BUCZAK TRUSTEE	2 0	Х						0	0	0	
ROBERT E SELL TRUSTEE	2 0	Х						0	0	0	
J PETER SIMON EXECUTIVE COMMITTEE	3 0	Х						0	0	0	
SYLVIA DANIELS WEAVER TRUSTEE	2 0	Х						0	0	0	
DANIEL H WEISS PRESIDENT & TRUSTEE	65 0	Х		х				447,906	0	151,175	
MITCHELL L WEIN VP, FINANCE, ADMIN & TREASURER	65 0			х				281,794	0	46,272	
WENDY L HILL PROVOST	75 0			х				253,652	0	67,369	
JAMES W DICKER VP, DEV & COLLEGE RELATIONS	55 0			х				236,530	0	41,772	
LESLIE F MUHLFELDER GEN COUNSEL/VP HR	55 0			x				223,127	0	43,244	
ROBERT J MASSA VP COMMUNICATIONS	60 0			х				216,550	0	36,472	
JAMES F KRIVOSKI VP STUDENT AFFAIRS	60 0			X				173,353	0	56,329	
SHIRLEY M RAMIREZ VP, INST PLANNING & COMM ENG	55 0			×				87,002	0	27,218	
PAUL H ZIMMERMAN ASSOC VP FIN, ADMIN & CONTROLL	50 0				×			182,530	0	35,982	
FRANCIS B O'HANLON HEAD MENS BASKETBALL COACH	55 0					х		206,118	0	41,684	
BRUCE A MURPHY KIRBY PROFESSOR	45 0					Х		188,394	0	40,243	
WILLIAM M CRAIN SIMON PROFESSOR	45 0					х		184,291	0	40,890	
JOHN KINCAID MEYNER PROFESSOR	45 0					Х		180,580	0	35,951	
JEFFREY E GOLDSTEIN DIR OF MEDICAL SVCS, PHYSICIAN	50 0					×		167,947	0	38,274	

Software ID: Software Version:

**EIN:** 24-0795686

Name: Lafayette 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) A verage hours per week	(C) Position (check all that apply)						( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other compensation
		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
EDWARD W AHART CHAIR	5 0	Х						0	0	0
CARL G ANDERSON JR TRUSTEE	2 0	Х						0	0	0
MARY STENGEL AUSTIN TRUSTEE	2 0	Х						0	0	0
MARGARET G AXELROD TRUSTEE	2 0	Х						0	0	0
SUSAN B CARRAS EXECUTIVE COMMITTEE	3 0	Х						0	0	0
SAMUEL R CHAPIN TRUSTEE	2 0	Х						0	0	0
JOSEPH T COX TRUSTEE	2 0	Х						0	0	0
JEFFREY P FEATHER TRUSTEE	2 0	Х						0	0	0
JAMES R FISHER TRUSTEE	2 0	Х						0	0	0
BRENT D GLASS TRUSTEE	2 0	Х						0	0	0
ALAN R GRIFFITH TRUSTEE	2 0	Х						0	0	0
RICHARD A GROSSMAN TRUSTEE	2 0	X						0	0	0
MARTHA A HEINZE TRUSTEE	2 0	Х						0	0	0
GEORGE M JENKINS JR EXECUTIVE COMMITTEE	3 0	Х						0	0	0
HAROLD N KAMINE EXECUTIVE COMMITTEE	3 0	Х						0	0	0
JEFFERSON W KIRBY TRUSTEE	2 0	Х						0	0	0
NANCY J KUENSTNER TRUSTEE	5 0	Х						0	0	0
BARBARA LEVY EXECUTIVE COMMITTEE	3 0	Х						0	0	0
Judson C Linville Trustee	2 0	Х						0	0	0
ELISABETH H MACDONALD EXECUTIVE COMMITTEE	3 0	Х						0	0	0
BRUCE MAGGIN EXECUTIVE COMMITTEE	3 0	Х						0	0	0
PAUL F MCCURDY TRUSTEE	2 0	Х						0	0	0
ANGEL L MENDEZ EXECUTIVE COMMITTEE	3 0	Х						0	0	0
DONALD E MOREL JR TRUSTEE	2 0	Х						0	0	0
MICHAEL E MOSKOW TRUSTEE	2 0	Х						0	0	0