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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
CORPORATION OF HAVERFORD COLLEGE

Doing Business As
HAVERFORD COLLEGE

Number and street (or P O box if mail is not delivered to street address) | Room/suite
370 Lancaster Avenue

City or town, state or country, and ZIP + 4
Haverford, PA 190411392

D Employer identification number
23-6002304

E Telephone number
(610)896-1248

G Gross receipts $ 149,266,954

F Name and address of principal officer
The Corporation of Haverford College
370 Lancaster Avenue
Haverford, PA 19041

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) **Are all affiliates included?** ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ www haverford edu

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation 1833 | M State of legal domicile PA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
Higher Education Haverford College is committed to providing a liberal arts education in the broadest sense

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	33
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	31
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	2,007
6	Total number of volunteers (estimate if necessary)	6	1,508
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	567,181
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-312,043

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	17,285,215	27,799,243
	9	Program service revenue (Part VIII, line 2g)	66,204,490	69,613,714
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	48,757,963	19,349,485
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	87,371	38,623
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	132,335,039	116,801,065
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	19,965,895	21,687,247
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	47,762,714	50,372,626
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	63,494	32,975
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶5,449,523		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	35,041,905	36,760,726
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	102,834,008	108,853,574
	19	Revenue less expenses Subtract line 18 from line 12	29,501,031	7,947,491

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	598,489,137	587,177,772
	21	Total liabilities (Part X, line 26)	150,953,800	157,451,113
	22	Net assets or fund balances Subtract line 21 from line 20	447,535,337	429,726,659

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer | Date 2013-05-15

Michael Gavanus Controller and Assistant Treasurer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ▶ ☐	Preparer's taxpayer identification number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4			EIN ▶
			Phone no ▶

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III 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

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

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

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? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured 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 $ 68,881,913 including grants of $ 0) (Revenue $ 53,311,177)

Instruction (undergraduate liberal arts), academic support and research, 1254 student FTE, 148 0 faculty FTE, 307 degrees conferred in 11/12 The majority of research awards are in the natural sciences Federal funds support 27 grants including 8 ARRA grants, PA state funds support 2 grants, and 8 grants are supported by private foundations Financial aid - 594 students received Haverford College grants totaling $20,316,931, 52 students received FSEOG grants totaling $152,577, and 166 students received $602,597 for internships awards

4b (Code) (Expenses $ 12,113,418 including grants of $ 0) (Revenue $ 366,009)

Student services - Dean, Registrar, Counseling, Career Development, Health Sevices, Athletics,Disability Services, Security and miscellaneous services

4c (Code) (Expenses $ 12,936,391 including grants of $ 0) (Revenue $ 15,936,528)

Auxiliary enterprises (dorms, dining center, faculty housing, conference program) The dorms housed 1165 students, 886 were on the board plan The College provided 69 spaces for rent to faculty to foster educational interaction with students

(Code) (Expenses $ 40,000 including grants of $ 40,000) (Revenue $ 0)

Higher Education Grants paid from donor advised funds to other 501(c)(3) charities (5 charities)

4d Other program services (Describe in Schedule O)

(Expenses $ 40,000 including grants of $ 40,000) (Revenue $ 0)

4e **Total program service expenses** ▶$ 93,971,722

Part IV Checklist of Required Schedules

			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 instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	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			
a	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? *If "Yes," 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		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Part I*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II 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, Part 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? *If "Yes," complete Schedule G, Part I*	17	Yes	
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
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? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27	Yes	
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)			
a	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	Yes	
c	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 owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	2,038			
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	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return . . .	2a	2,007			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O* . . .			3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)? . . .			4a		No
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					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? . . .			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible? . . .			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . .			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor? . . .			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . .			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . .			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year . . .	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . .			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . .			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . .			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . .			8		No
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966? . . .			9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person? . . .			9b		No
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders . . .	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . .	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state			13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the aggregate amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year? . . .			14a		No
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.

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	33		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	31		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Did the organization have members or stockholders?		6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	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

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did 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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ AR , AZ , CA , CO , DC , HI , KY , MA , MD , MI , NH , NJ , NY , OH , OK , OR , PA , WA , WI

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 made these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made 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 ▶

Michael Gavanus
370 Lancaster Ave
Haverford, PA 190411392
(610) 896-1248

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

Check if Schedule O contains a response to any question in this Part VII . . . .

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, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
See Additional Data Table										

		(D)	(E)	(F)
1b	Sub-Total			
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	2,557,649	0	574,160

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶66

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
Tod Williams Billie Tsien Architects LLP 222 Central Park South New York, NY 10019	Architect	641,092
W S Cumby Inc 938 Lincoln Avenue Springfield, PA 19064	Construction	12,277,168
Navigator Management Consultant P O Box 183074 LB-14 Columbus, OH 432183074	Software implementaion consultant	530,603
Clark Companies P O Box 427 41155 State Route 10 Delhi, NY 13753	Construction	369,640
Steven Holl Architects 450 W 31st Street No 11 New York, NY 10001	Architects consultants	255,324

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶23

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . 1a	0				
	b	Membership dues 1b	0				
	c	Fundraising events 1c	0				
	d	Related organizations . . . 1d	0				
	e	Government grants (contributions) 1e	1,593,508				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	26,205,735				
	g	Noncash contributions included in lines 1a-1f $ 3,316,679					
	h	**Total.** Add lines 1a-1f . . . . ▶		27,799,243			
Program Service Revenue			Business Code				
	2a	Tuition and fees	611310	52,823,019	52,823,019	0	0
	b	Auxiliary enterprises	900099	15,936,528	14,939,620	572,694	424,214
	c						
	d						
	e						
	f	All other program service revenue		854,167	625,045	0	229,122
	g	**Total.** Add lines 2a–2f . . . . ▶		69,613,714			

			(i) Real / (i) Securities	(ii) Personal / (ii) Other	(A)	(B)	(C)	(D)
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ▶			5,257,740	0	-5,513	5,263,253
	4	Income from investment of tax-exempt bond proceeds . . ▶			4,252	4,252	0	0
	5	Royalties . . . . ▶			0	0	0	0
			(i) Real	(ii) Personal				
	6a	Gross rents	25,981	0				
	b	Less rental expenses	0	0				
	c	Rental income or (loss)	25,981	0				
	d	Net rental income or (loss) . . . . ▶			25,981	0	0	25,981
			(i) Securities	(ii) Other				
	7a	Gross amount from sales of assets other than inventory	28,395,015	16,892,321				
	b	Less cost or other basis and sales expenses	25,044,746	6,155,097				
	c	Gain or (loss)	3,350,269	10,737,224				
	d	Net gain or (loss) . . . . ▶			14,087,493	0	0	14,087,493
	8a	Gross income from fundraising events (not including $ 0 of contributions reported on line 1c) See Part IV, line 18 . . . a						
	b	Less direct expenses . . . b						
	c	Net income or (loss) from fundraising events . . ▶						
	9a	Gross income from gaming activities See Part IV, line 19 . . . a						
	b	Less direct expenses . . . b						
	c	Net income or (loss) from gaming activities . . . ▶						
	10a	Gross sales of inventory, less returns and allowances . a		1,271,434				
	b	Less cost of goods sold . . b		1,266,046				
	c	Net income or (loss) from sales of inventory . . ▶			5,388	0	0	5,388
		Miscellaneous Revenue		Business Code				
	11a	Quaker Library		611310	4,650	4,650	0	0
	b	Summer camp		900099	2,579	2,579	0	0
	c	College Arboretum		900099	25	25	0	0
	d	All other revenue			0	0	0	0
	e	**Total.** Add lines 11a–11d . . . . . . ▶			7,254			
	12	**Total revenue.** See Instructions . . . ▶			116,801,065	68,399,190	567,181	20,035,451

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX . . . . ☐

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	40,000	40,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	21,072,105	21,072,105		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	575,142	575,142		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	2,349,003	1,305,392	622,463	421,148
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	0	0	0
7	Other salaries and wages	35,381,728	26,899,906	6,335,900	2,145,922
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,267,527	2,450,645	588,155	228,727
9	Other employee benefits	6,641,329	4,980,997	1,195,439	464,893
10	Payroll taxes	2,733,039	2,049,779	491,947	191,313
11	Fees for services (non-employees)				
a	Management	0	0	0	0
b	Legal	325,473	0	311,779	13,694
c	Accounting	195,243	0	195,243	0
d	Lobbying	0			0
e	Professional fundraising *See Part IV, line 17* . .	32,975			32,975
f	Investment management fees	1,970,141	0	1,970,141	0
g	Other	6,611,602	4,120,636	2,260,438	230,528
12	Advertising and promotion	97,427	43,558	53,869	0
13	Office expenses	2,603,506	1,503,124	838,376	262,006
14	Information technology	1,069,453	735,464	253,958	80,031
15	Royalties . .	0	0	0	0
16	Occupancy	2,892,888	2,208,681	554,285	129,922
17	Travel	1,906,945	1,319,847	345,550	241,548
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	0	0	0	0
20	Interest	5,147,269	4,310,345	552,370	284,554
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,091,296	6,591,642	329,772	169,882
23	Insurance	242,852	206,424	24,285	12,143
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	Minor equipment	1,338,420	1,045,435	285,765	7,220
b	Study away program expenses	2,111,083	2,111,083	0	0
c	Food Services	1,877,217	1,409,179	373,979	94,059
d	Dues,subscriptions and memeberships	1,259,735	1,152,364	95,203	12,168
e					
f	All other expenses	20,176	7,839,974	-8,246,588	426,790
25	**Total functional expenses.** Add lines 1 through 24f	108,853,574	93,971,722	9,432,329	5,449,523
26	**Joint costs.** 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				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		0	1	0
	2	Savings and temporary cash investments		35,101,529	2	29,850,341
	3	Pledges and grants receivable, net		15,675,863	3	14,203,505
	4	Accounts receivable, net		1,537,328	4	1,133,434
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		799,622	5	768,025
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		0	6	0
	7	Notes and loans receivable, net		0	7	0
	8	Inventories for sale or use		381,144	8	449,608
	9	Prepaid expenses and deferred charges		334,512	9	216,972
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 241,585,718			
	b	Less accumulated depreciation	10b 105,491,883	122,155,911	10c	136,093,835
	11	Investments—publicly traded securities		83,723,892	11	117,903,069
	12	Investments—other securities See Part IV, line 11		320,970,372	12	280,550,548
	13	Investments—program-related See Part IV, line 11		2,070,121	13	1,997,361
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		15,738,843	15	4,011,074
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		598,489,137	16	587,177,772
Liabilities	17	Accounts payable and accrued expenses		4,461,442	17	5,931,863
	18	Grants payable			18	
	19	Deferred revenue		3,029,690	19	3,467,909
	20	Tax-exempt bond liabilities		123,649,549	20	123,461,129
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*		0	21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		0	22	
	23	Secured mortgages and notes payable to unrelated third parties		0	23	
	24	Unsecured notes and loans payable to unrelated third parties		0	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		19,813,119	25	24,590,212
	26	**Total liabilities.** Add lines 17 through 25		150,953,800	26	157,451,113
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		155,853,095	27	140,449,350
	28	Temporarily restricted net assets		121,250,805	28	112,755,261
	29	Permanently restricted net assets		170,431,437	29	176,522,048
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		447,535,337	33	429,726,659
	34	Total liabilities and net assets/fund balances		598,489,137	34	587,177,772

Part XI Reconcilliation of Net Assets

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	116,801,065
2	Total expenses (must equal Part IX, column (A), line 25)	2	108,853,574
3	Revenue less expenses Subtract line 2 from line 1	3	7,947,491
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	447,535,337
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-25,756,169
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	429,726,659

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
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 issued on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b	Yes	

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2 ☑ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ 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 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check 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 **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or 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 III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) 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	**(iii)** Type of organization (described on lines 1- 9 above or IRC section (see instructions))	**(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 U S ?		**(vii)** Amount of support?
			Yes	**No**	**Yes**	**No**	**Yes**	**No**	
Total									

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
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 line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(f)** Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) | **12** |

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f)) | **14** |

15 Public Support Percentage for 2010 Schedule A, Part II, line 14 | **15** |

16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2010.** 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 **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2011.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in IRC 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 in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b 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						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	**(a)** 2007	**(b)** 2008	**(c)** 2009	**(d)** 2010	**(e)** 2011	**(f)** Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	**15**	
16 Public support percentage from 2010 Schedule A, Part III, line 15	**16**	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2011** (line 10c column (f) divided by line 13 column (f))	**17**	
18 Investment income percentage from **2010** Schedule A, Part III, line 17	**18**	

19a **33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2010.** 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 ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

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

Facts And Circumstances Test

Explanation

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1	1
2	Aggregate contributions to (during year)	1,695,000	0
3	Aggregate grants from (during year)	287,128	15,000
4	Aggregate value at end of year	1,435,760	302,478

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☑ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ 105,800

(ii) Assets included in Form 990, Part X ▶ $ 4,449,410

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ 0

b Assets included in Form 990, Part X ▶ $ 0

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☑ Public exhibition
b ☑ Scholarly research
c ☑ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☑ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☑ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	496,352
d Additions during the year	1d	494,713
e Distributions during the year	1e	496,352
f Ending balance	1f	494,713

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☑ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	402,729,669	355,500,298	336,085,820	521,307,851	
b Contributions	8,035,649	6,865,272	5,451,420	10,637,065	
c Investment earnings or losses	510,412	61,484,887	33,178,648	-170,364,959	
d Grants or scholarships	4,057,851	3,708,640	3,402,225	4,977,583	
e Other expenditures for facilities and programs	16,970,936	14,633,057	14,473,951	19,515,424	
f Administrative expenses	2,800,868	2,779,091	1,339,414	1,001,130	
g End of year balance	387,446,075	402,729,669	355,500,298	336,085,820	

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 34 %

b Permanent endowment ▶ 44 %

c Term endowment ▶ 22 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	4,107,987		4,107,987
b Buildings	0	200,476,885	81,468,724	119,008,161
c Leasehold improvements	0	0	0	0
d Equipment	0	22,022,355	17,710,122	4,312,233
e Other	0	14,978,491	6,313,037	8,665,454
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				136,093,835

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) Common Trust & similar funds	108,488,031	F
(B) Hedge Funds	27,946,629	F
(C) Venture capital and Private equity funds	100,114,861	F
(D) Real estate funds	43,786,898	F
(E) Miscellaneous funds	214,129	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	280,550,548	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	0
Interest rate swaption liability	13,790,832
Planned giving liabilities	8,818,521
Government advances for student loans	747,542
Refundable advance	562,920
Asbestos ARO liability	644,971
Accrued post retirement liabilities	25,426
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	24,590,212

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	116,801,065
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	108,853,574
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	7,947,491
4	Net unrealized gains (losses) on investments	4	-26,455,901
5	Donated services and use of facilities	5	0
6	Investment expenses	6	1,970,141
7	Prior period adjustments	7	0
8	Other (Describe in Part XIV)	8	-1,249,345
9	Total adjustments (net) Add lines 4 - 8	9	-25,735,105
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-17,787,614

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	69,627,887
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	0		
b	Donated services and use of facilities	2b	0		
c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIV)	2d	-26,128,528		
e	Add lines **2a** through **2d**			2e	-26,128,528
3	Subtract line **2e** from line **1**			3	95,756,415
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIV)	4b	21,044,650		
c	Add lines **4a** and **4b**			4c	21,044,650
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	116,801,065

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	87,436,572
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIV)	2d	-19,406,861		
e	Add lines **2a** through **2d**			2e	-19,406,861
3	Subtract line **2e** from line **1**			3	106,843,433
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,970,141		
b	Other (Describe in Part XIV)	4b	40,000		
c	Add lines **4a** and **4b**			4c	2,010,141
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	108,853,574

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
SchD_P03_S00_L04	Schedule D, Part III, Line 4	Special collections of art and historical treasures serve to advance scholarship and to further teaching, research and service Special collections range from Quaker collections to College archives to rare manuscripts to fine art assets The Quaker collection consists of manuscripts, as well as numerous photographs, artworks, artifacts, furniture and films The College archives include records, publications and artifacts produced by offices, committees and student groups Rare book and manuscript collections strengths include American and English literature, history and politics Today, the collection of fine art encompasses three areas material in support of the College curricula, material that documents the College's history and material that documents the history of Quakerism
SchD_P04_S00_L01b	Schedule D, Part IV, Line 1b	The College is trustee of the William Maul Measey Trust The College is entitled to 60% of the gross income of the Trust and includes 60% of the Trust assets in its financial statements and Form 990 The remaining 40% of the gross income is distributed to certain secondary schools for student financial aid The 40% of Trust principal at June 30, 2012 was $23,946,000 The 40% of Trust income distributable to the schools is reported in Lines 1c-f The secondary schools that currently receive trust income are George School, Westtown School, Scattergood Friends School and Olney Friends School
SchD_P05_S00_L04	Schedule D, Part V, Line 4	The College spends a prudent amount of its endowment annually to support the educational mission of the College in accordance with donor restrictions and internal designations
SchD_P10_S00_L02	Schedule D, Part X, Line 2	The College evaluated how uncertain tax positions taken or expected to be taken in a tax return should be recognized, measured, presented and disclosed in the financial statements No adjustments to the financial statements were required as a result of the evaluation The College will continue to monitor and evaluate its unrelated business income activity
SchD_P11_S00_L08	Schedule D, Part XI, Line 8	Change in contributions receivable $(1,263,145), Fixed assets retirements $(26,200), Grants paid from donor advised funds $40,000
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	Unrealized losses on investments $(26,455,901), Change in contributions receivable $(1,284,216), Indirect cost recovery $317,743, Bookstore expenditures $1,266,046, Internal Bookstore rent $54,000, Fixed assets retirements $(26,200)
SchD_P12_S00_L04b	Schedule D, Part XII, Line 4b	Financial aid $21,044,650
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	Financial aid $(21,044,650), Indirect cost recovery $317,743, Bookstore expenditures $1,266,046,Internal Bookstore rent $54,000
SchD_P13_S00_L04b	Schedule D, Part XIII, Line 4b	Grants paid from donor advised funds to 501(c)3 organizations $40,000

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SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part 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	Yes	
4	Does the organization maintain the following?			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5	Does the organization discriminate by race in any way with respect to			
a	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
e	Educational policies?	5e		No
f	Use of facilities?	5f		No
g	Athletic programs?	5g		No
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	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	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)

Identifier	Return Reference	Explanation
SchE_P01_S00_L03	Schedule E, Part I, Line 3	Such a policy is published in our catalog and other admissions literature Also, the policy is published in newspapers or on the internet when advertising for employment
SchE_P01_S00_L06	Schedule E, Part I, Line 6	Financial aid or assistance from a governmental agency FWS $115,994, FSEOG $124,079, PELL $759,990, PHEAA-FWS match $16,411, PHEAA- IAG $24,024

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

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

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

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

3 Activites per Region (Use Part V if additional space is needed)

	(a) Region	(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
	Middle East and North Africa			Program Services	Scholarships	53,112
	Sub-Saharan Africa			Program Services	Scholarships	142,302
	South Asia			Program Services	Scholarships	151,482
	Europe (including Iceland and Greenland)			Program Services	Scholarships	86,394
	East Asia and the Pacific			Program Services	Scholarships	189,606
	Europe (including Iceland and Greenland)			Program Services	Study abroad program fees	698,498
	East Asia and the Pacific			Program Services	Study abroad program fees	58,717
	Europe (including Iceland and Greenland)			Fundraising	Five Haverford College employees attended the International Council in London and Frankfurt The primary purpose was to foster greater awareness of Haverford College internationally and promote greater international emphasis in academic and outreach areas of the College	21,981
	Europe (including Iceland and Greenland)			Fundraising	Employee travel to meet with alumni who can help further long-term and mutually enriching relationships	2,854
	Central America and the Caribbean			Investments	Endowment foreign passive investments	41,394,412
	North America (including Canada and Mexico, but not the United States)			Investments	Endowment foreign passive investments	3,227,274
	Europe (including Iceland and Greenland)			Fundraising	Employee travel to meet with alumni who can further long-term and mutually enriching relationships	3,553
3a	Sub-total					
b	Total from continuation sheets to Part I					
c	**Totals** (add lines 3a and 3b)	0	0			46,030,185

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . ▶ ☐
Use Part V if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ ____________

3 Enter total number of other organizations or entities . . . . ▶

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.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
Scholarships to foreign students	Middle East and North Africa	1	53,112	cash payment			FMV
Scholarships to foreign students	Sub-Saharan Africa	3	142,302	cash payment			FMV
Scholarships to foreign students	South Asia	3	151,482	cash payment			FMV
Scholarships to foreign students	Europe (including Iceland and Greenland)	2	86,394	cash payment			FMV
Scholarships to foreign students	East Asia and the Pacific	4	189,606	cash payment			FMV

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*	☑ Yes	☐ No
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)*	☐ Yes	☑ No
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)*	☐ Yes	☑ No
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)*	☐ Yes	☑ No
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	☐ No
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).*	☐ Yes	☑ No

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

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

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SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☑ Mail solicitations
b ☑ Internet and e-mail solicitations
c ☑ Phone solicitations
d ☑ In-person solicitations
e ☑ Solicitation of non-government grants
f ☑ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☑ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(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)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
Plus Delta Partners 6965 El Camino Real Stuite 105-488 Carlsbad, CA 92009	Campaign consultant		No	0	32,975	-32,975
Total . . . . ▶				0	32,975	-32,975

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

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

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 (event type)	(b) Event #2 (event type)	(c) Other Events (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				( )
	11 Net income summary Combine lines 3 and 10 in column (d). ▶				

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ ☐ No	☐ Yes ____ ☐ No	☐ Yes ____ ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				( )
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain

11 Does the organization operate gaming activities with nonmembers? . . . . Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . Yes No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________

c If "Yes," enter name and address

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Complete this part to provide additional information for responses to quuestion on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
SchG_P01_S00_L02b	Schedule G, Part I, Line 2b	Plus Delta Partners provided professional fundraising consulting services for and on behalf of the College They did not engage in any direct solicitations of contributions for and on behalf of the College and therfore have no custody or control on any College contributions

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount 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) Germantown Friends School31 West Coulter Street Philadephia, PA 19144	05-0630018	501(c)3	6,000	0	FMV		General support pursuant to the terms of a donor advised fund agreement
(2) Horace Mann School231 West 245th Street Bronx, NY 10471	13-1740455	501(c)3	25,000	0	FMV		General support pursuant to the terms of a donor advised fund agreement

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 2

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 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) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) Scholarships for Haverford College students	581	20,316,931	0	Cost	
(2) FSEOG grants for Haverford College students	52	152,577	0	Cost	
(3) Internships for Haverford College students	166	602,597	0	Cost	

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
SchI_P01_S00_L02	Schedule I, Part I, Line 2	Haverford College scholarships are based solely on need Haverford does not have any grant aid based on merit Applicants can be asked to file the College Board Profile and the FAFSA If eligible for federal aid, parent and student personal and business taxes must also be provided Supplements for businesses and forms for non-custodial parents may also be required based on circumstances College policy is reviewed in the form of appeals to the Financial Aid Committee made up of the Dean of Admissions, the Dean of the College and the VP of Finance and Administration Haverford scholarships are credited directly to the student's account for tuition, room, board, fees and other billed charges Supplemental Education Opportunity grants (FSEOG) are awarded based on family contribution Eligibility is determined by the FAFSA and the regulations determined by the U S Department of Education that students who receive Pell grants be provided FSEOG funds first Other verification forms may be required if the student is selected including the Verification Statement, parent and student tax returns and non-tax filer statements FSEOG awards are credited directly to the student's account for tuition, room, board and other billed charges FSEOG awards are audited annually by the College's outside auditors in conjuction with the A133 federal funds audit Student internships are awarded through an application and committee review process The internship awards are paid directly to the student This assistance enables the students to engage in unpaid internships in a variety of domestic and international locations Some of the areas of studies include Humanities, Global Citizenship, Science and Entrepreneurship

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2011

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Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☑ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☑ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☐ Independent compensation consultant ☐ Form 990 of other organizations ☑ Written employment contract ☑ Compensation survey or study ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	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 in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(1) Joanne Creighton	(i)	124,616	0	0	0	51,546	176,162	
	(ii)	0	0	0	0	0	0	0
(2) Michael Kiefer	(i)	257,217	0	0	0	42,812	300,029	
	(ii)	0	0	0	0	0	0	0
(3) G Richard Wynn	(i)	244,800	0	0	0	42,907	287,707	0
	(ii)	0	0	0	0	0	0	0
(4) Linda Bell	(i)	198,241	0	0	0	59,644	257,885	0
	(ii)	0	0	0	0	0	0	0
(5) Joseph Spadaro	(i)	177,458	0	0	0	38,076	215,534	0
	(ii)	0	0	0	0	0	0	0
(6) Martha Denney	(i)	144,592	0	0	0	28,657	173,249	0
	(ii)	0	0	0	0	0	0	0
(7) Jess Lord	(i)	132,535	0	0	0	31,863	164,398	0
	(ii)	0	0	0	0	0	0	0
(8) Stephen G Emerson	(i)	393,452	0	14,350	0	125,311	533,113	0
	(ii)	0	0	0	0	0	0	0
(9) Jerry Gollub	(i)	212,549	0	0	0	25,660	238,209	0
	(ii)	0	0	0	0	0	0	0
(10) Michael H Casel	(i)	185,000	0	0	0	38,033	223,033	0
	(ii)	0	0	0	0	0	0	0
(11) Kimberly Benston	(i)	169,650	0	0	0	37,157	206,807	0
	(ii)	0	0	0	0	0	0	0
(12) Curtis Greene	(i)	167,633	0	0	0	27,740	195,373	0
	(ii)	0	0	0	0	0	0	0
(13) Linda Gerstein	(i)	149,906	0	0	0	24,754	174,660	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
SchJ_P01_S00_L01a	Schedule J, Part I, Line 1a	Travel for Companions Joanne Creighton, Interim President, agreed in her employment contract to spousal travel Haverford College will reimburse the Interim President for reasonable and customary travel expenses when her spouse travels with her on official College business Travel expenses are reviewed for business purpose and reimbursed according to an accountable plan Housing Allowance or Residence for Personal Use Joanne Creighton, Interim President and Linda Bell, Provost, reside on Haverford College's campus free of rent Martha Denney, Dean of the College, resides on the College's campus at a subsidized rent Neither travel for companions nor residence for personal use represents taxable compensation to the listed individuals
SchJ_P01_S00_L04	Schedule J, Part I, Line 4	President Emerson has an arrangement with the College, allowable under the IRS Code, that permits him to tax defer more of his earnings than the standard amount he would be allowed to do under the College's 403(b) plan This additional tax deferral was done as a 457(f) Deferred Compensation Agreement

Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased Yes	(g) Defeased No	(h) On Behalf of Issuer Yes	(h) On Behalf of Issuer No	(i) Pool financing Yes	(i) Pool financing No
A	Delaware County Authority	23-1973437	246003LH8	05-08-2008	61,050,987	Cap improvements to College facilities and redemption 2003		X		X		X
B	Delaware County Authority	23-1973437	246003LX3	04-29-2010	44,944,290	New dorm and partial refund 2008 Bonds		X		X		X
C	Delaware County Authority	23-1973437	246003MG9	11-15-2010	45,929,465	Refund 2000 Bonds		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	31,400,945	690,793	715,030	
2	Amount of bonds defeased	0	0	0	
3	Total proceeds of issue	61,050,987	44,944,290	45,929,465	
4	Gross proceeds in reserve funds	0	0	0	
5	Capitalized interest from proceeds	0	1,533,228	0	
6	Proceeds in refunding escrow	0	0	0	
7	Issuance costs from proceeds	651,393	531,618	454,538	
8	Credit enhancement from proceeds	0	0	0	
9	Working capital expenditures from proceeds	0	0	24,927	
10	Capital expenditures from proceeds	6,725,430	12,905,223	0	
11	Other spent proceeds	53,674,163	29,000,000	45,450,000	
12	Other unspent proceeds	0	974,221	0	
13	Year of substantial completion	2009	2012	2011	

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?	X		X		X			
15	Were the bonds issued as part of an advance refunding issue?		X		X		X		
16	Has the final allocation of proceeds been made?	X		X		X			
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X			

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		X		

Part III **Private Business Use** *(Continued)*

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X		X		X		
b	If 'Yes' to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X		X		
d	If 'Yes' to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %		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 %			
6	Total of lines 4 and 5	0 %		0 %		0 %			
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X			

Part IV **Arbitrage**

		A		B		C		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		X		X		
2	Is the bond issue a variable rate issue?	X			X		X		
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	X			X		X		
b	Name of provider	Deutsche Bank							
c	Term of hedge	20							
d	Was the hedge superintegrated?		X						
e	Was a hedge terminated?		X						
4a	Were gross proceeds invested in a GIC?		X		X		X		
b	Name of provider								
c	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X		X		X		
6	Did the bond issue qualify for an exception to rebate?	X			X	X			

Part V **Procedures To Undertake Corrective Action**

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations . . . . ☑ Yes ☐ No

Part VI **Supplemental Information**

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

Identifier	Return Reference	Explanation

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Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2011

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Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1 (a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . ▶ $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1) Michael Keifer Home mortgage		X	500,000	438,570		No		No	Yes	
(2) Joseph Spadaro		X	320,000	305,852		No		No	Yes	
(3) Linda Bell Home renovation mortgage		X	29,757	23,602		No		No	Yes	
Total . . . . ▶ $				768,024						

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of grant or type of assistance
(1) Carol Solomon	Spouse of officer and Faculty member	7,199

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) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Carol Solomon	Spouse of officer	65,685	Employee compensation		No
(2) Jenni Punt	spouse of officer	121,842	Employee compensation		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

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining contribution amounts
1 Art—Works of art	X	4	60,852	FMV
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications	X		22,514	FMV
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	83	3,191,736	FMV
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (Archival records)	X	23	28,072	FMV
26 Other ▶ (Event materials)	X	3	12,764	Cost
27 Other ▶ (Stationery and Gift card)	X	21	741	Cost
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | 29 | 1

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a		No
b If "Yes," describe in Part II			
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II			

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

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Identifier	Return Reference	Explanation
F990_P01_S00_L05	Form 990, Part I, Line 5	The number of employees includes faculty, administration and staff, student and temporary summer employees
F990_P06_S0A_L02	Form 990, Part VI, Section A, Line 2	Howard Lutnick, manager, had a business relationship with the another manager, Elon Spar Seth Bernstein, manager, and Allan R White, manager, serve together on the Board of Directors of another company
F990_P06_S0A_L06	Form 990, Part VI, Section A, Line 6	The Corporation of Haverford College has one class of members who may include any member of the Religious Society of Friends, anyone who has served as President of the College or as a member of the Board of Managers for at least six consecutive years
F990_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	The Corporation of Haverford College ("the Corporation") has one class of members who may include any member of the Religious Society of Friends, anyone who has served as President of the College or as a member of the Board of Managers ("the Board") for at least six consecutive years The Corporation formally elects members of the Board, including those nominated by itself, by the Board and by the Alumni Association The Corporation makes any amendments to the bylaws The Corporation seeks by advice and example to strengthen and enrich Haverford's heritage as a Quaker educational institution The Board has responsibility for all aspects of the operation and management of the College
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	The College's Audit Committee reviewed the Form 990 before it was filed The Form 990 was sent to all Board members before being filed, noting that it was reviewed and approved by the Audit Committee The Form 990 will be available on the College's website
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	Each year a questionnaire is handed out and sent electronically to Board members, officers and key employees The President's office tracks and ensures compliance with completing and submitting the conflict of interest questionnaire
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The President's compensation is determined after an annual review by the Board's Committee on Presidential Compensation and Review The review along with private college executive compensation surveys help determine the President's salary The President reports to the Board relating to the annual process for determining the compensation of other officers (VP Finance and Administration, VP Institutional Advancement, Provost, Dean of the Colleg, Chief Information Officer and Dean of Admissions) The Committee on Presidential Compensation and Review reports on both of these procedures to the Board in executive session
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	The College's financial statements and conflict of interest policy are available to the general public through our website, Guidestar's website and upon request Currently, the College does not publish our governing documents, however, these are available upon request
F990_P11_S00_L05	Form 990, Part XI, Line 5	Net unrealized losses $(26,455,901), Investment expenses $1,970,141, Change in contributions receivable $(1,263,145), Grants paid from donor advised fund $40,000, Fixed asset retirements $(26,200), Miscellaneous adjustment $(21,064)

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
CORPORATION OF HAVERFORD COLLEGE

Employer identification number
23-6002304

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Haverford College Foundation (UK) Limited 19 Norcott Road London N16 7EJ UK	Fundraising	UK	0	0	The Corporation of Haverford College

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization Yes	No

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V **Transactions With Related Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

			Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III or IV				
1	During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	**1a**		
b	Gift, grant, or capital contribution to related organization(s)	**1b**		
c	Gift, grant, or capital contribution from related organization(s)	**1c**		
d	Loans or loan guarantees to or for related organization(s)	**1d**		
e	Loans or loan guarantees by related organization(s)	**1e**		
f	Sale of assets to related organization(s)	**1f**		
g	Purchase of assets from related organization(s)	**1g**		
h	Exchange of assets with related organization(s)	**1h**		
i	Lease of facilities, equipment, or other assets to related organization(s)	**1i**		
j	Lease of facilities, equipment, or other assets from related organization(s)	**1j**		
k	Performance of services or membership or fundraising solicitations for related organization(s)	**1k**		
l	Performance of services or membership or fundraising solicitations by related organization(s)	**1l**		
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	**1m**		
n	Sharing of paid employees with related organization(s)	**1n**		
o	Reimbursement paid to related organization(s) for expenses	**1o**		
p	Reimbursement paid by related organization(s) for expenses	**1p**		
q	Other transfer of cash or property to related organization(s)	**1q**		
r	Other transfer of cash or property from related organization(s)	**1r**		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	**(b)** Transaction type(a-r)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation

Additional Data

Software ID: 11000129
Software Version: v1.00
EIN: 23-6002304
Name: CORPORATION OF HAVERFORD COLLEGE

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

4d. Other program services

(Code) (Expenses $ 40,000 including grants of $ 40,000) (Revenue $ 0)

Higher Education Grants paid from donor advised funds to other 501(c)(3) charities (5 charities)

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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
James L Boyer Board of Managers	2	X						0	0	0
Christopher E Dunne Board of Managers	2	X						0	0	0
Stephen C Curwood Board of Managers	2	X						0	0	0
Jonathan Wood Evans Board of Managers	2	X						0	0	0
James W Friedman Board of Managers	2	X						0	0	0
Michael B Kim Board of Managers	2	X						0	0	0
Catherine P Koshland Board of Managers	2	X						0	0	0
Howard W Lutnick Board of Managers	2	X						0	0	0
Irene E McHenry Board of Managers	2	X						0	0	0
John M Morse Board of Managers	2	X						0	0	0
Christopher K Norton Board of Managers	2	X						0	0	0
Christopher T Gant Board of Managers	2	X						0	0	0
Sheila K Sachs Board of Managers	2	X						0	0	0
Allan Richard White III Board of Managers	2	X						0	0	0
Peter Abramenko Board of Managers	2	X						0	0	0
Steven M Jaharis Board of Managers	2	X						0	0	0
Garry W Jenkins Board of Managers	2	X						0	0	0
Hunter R Rawlings III Board of Managers	2	X						0	0	0
Roger B Kafker Board of Managers	2	X						0	0	0
Jacqueline V Brady Board of Managers	2	X						0	0	0
Dana Shanler Ladden Board of Managers	2	X						0	0	0
Elizabeth Enloe Board of Managers	2	X						0	0	0
Anjan K Chatterjee Board of Managers	2	X						0	0	0
Ann V Satterwaite Board of Managers	2	X						0	0	0
Elon E Spar Board of Managers	2	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Charles G Beever Board of Managers	2	X						0	0	0
Jennifer C Boal Board of Managers	2	X						0	0	0
Joanne Creighton Interim President	60	X		X				124,616	0	51,546
Seth P Bernstein Board of Managers	2	X						0	0	0
William J Marsden Board of Managers	2	X						0	0	0
Paul G Zoidis II Board of Mangers	2	X						0	0	0
Stephen G Emerson President and Faculty	60	X		X				393,452	0	125,311
Timur F Galen Board of Managers	2	X						0	0	0
G Richard Wynn VP for Finance & Administration	60			X				244,800	0	42,907
Linda Bell Provost	60			X				198,241	0	59,644
Jess Lord Dean of Admissions & Financial Aid	60			X				132,535	0	31,863
Michael Kiefer VP of Institutional Advancement	60			X				257,217	0	42,812
Martha Denney Dean of the College	60			X				144,592	0	28,657
Joseph Spadaro Chief Information Officer	60			X				177,458	0	38,076
Michael H Casel Associate VP Finance and Director of Investments	60				X	X		185,000	0	38,033
Kimberly Benston Professor	60					X		169,650	0	37,157
Jerry Gollub Professor	60					X		212,549	0	25,660
Linda Gerstein Professor	60					X		149,906	0	24,754
Curtis Greene Professor	60					X		167,633	0	27,740