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Form 990-EZ

Short Form 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)

2012

OMB No 1545-1150

Department of the Treasury Internal Revenue Service Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

Open to Public Inspection

_			The organization may have to use a copy of this return to satisfy state reporting ret				
_			er year, or tax year beginning July 1, 2012 , 2012, and ending		June 30		
В	Check if ap	oplicable	C Name of organization	D Emp	oloyer ide	entification num	ber
님	Address c	:hange	Dartmouth College Class of 1983		04	4-3391621	
=	Name cha	-	Number and street (or P O box, if mail is not delivered to street address) Room/suite	E Tele	phone nu	ımber	
=	Initial retui Terminate		6068 Blunt Alumni Center 103		78	1-863-8432	
_	Amended		City or town, state or country, and ZIP + 4	F Gro	oup Exer	mption	
	Applicatio	n pending	Hanover, NH 03755	Nu	mber 🕨	82	204
G /	Account	ting Method:		H Check	▶	f the organizati	on is not
1 1	Websit	te:▶ <u>www.</u>	1983.dartmouth.org	require	d to atta	ach Schedule E	3
J T	ах-ехеп	npt status (che	ck only one) — 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	(Form 9	990, 990)-EZ, or 990-Pi	-).
	Check ▶		organization is not a section 509(a)(3) supporting organization or a section 527 organization				
			0. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard)	may be re	quired (see instruction	s). But if
	_		ses to file a return, be sure to file a complete return.				
			b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total as	sets (Part II	i,		
_			w) are \$500,000 or more, file Form 990 instead of Form 990-EZ	• •	<u>► \$</u>		129,949
Р	art I		e, Expenses, and Changes in Net Assets or Fund Balances (see the				
_			the organization used Schedule O to respond to any question in this Par		$\overline{}$	<u></u>	. 🗸
	1		ns, gifts, grants, and similar amounts received		1		23,456
	2	•	ervice revenue including government fees and contracts		2		
	3		p dues and assessments		3		
	4	Investment			4		18
	5a		unt from sale of assets other than inventory		- 1		
	b		or other basis and sales expenses				
	C		ss) from sale of assets other than inventory (Subtract line 5b from line 5a) .		5c		
	6	_	d fundraising events ome from gaming (attach Schedule G if greater than				
<u>o</u>	a	.					
Revenue	ь		me from fundraising events (not including \$ of contribut	ione	┥ ┃		
Š	"		aising events reported on line 1) (attach Schedule G if the	10113			
Œ			h gross income and contributions exceeds \$15,000) 6b				
	C		t expenses from gaming and fundraising events 6c		1 I		
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b and	subtract	1		
	-	line 6c) .			6d		
	7a	Gross sale	s of inventory, less returns and allowances				
	Ь		of goods sold		1 1		
	С		t or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c		
	8		nue (describe in Schedule O)		8		106,475
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		∤ 9		129,949
	10	Grants and	similar amounts paid (list in Schedule O)		10		4,600
	11	Benefits pa	uid to or for members		11		
es	12	oulailos, o	into componential, and comprey to a continuous and a second continuous and a s	J , J	12		
Expenses	13	Profession	al fees and other payments to independent contractors	<u>, Š</u>	13		
ă	14		, rent, utilities, and maintenance	1	14		
Ú	1 .5		iblications, postage, and shipping		15		5,586
	16	Other expe	nses (describe in Schedule O)		16		100,835
	17	Total expe	nses. Add lines 10 through 16	<u> ▶</u>	17		111,021
ţ	18	Excess or	deficit) for the year (Subtract line 17 from line 9)		18		18,928
sse	19		or fund balances at beginning of year (from line 27, column (A)) (must ag				
Net Assets		-	r figure reported on prior year's return)		19		47,914
Ş	20		ges in net assets or fund balances (explain in Schedule O)		20		
_	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	<u>.</u> . ▶	21		66,842

	990-EZ (2012) It Balance Sheets (see the instructions	for Part II)				Page 2
	Check if the organization used Schedule		ny question in this	Part II		🗖
	>		, , , , , , , , , , , , , , , , , , , 	(A) Beginning of year	Ϊ	(B) End of year
22	Cash, savings, and investments		[47,914	22	66,842
23	Land and buildings		[23	
24	Other assets (describe in Schedule O)		[24	
25	Total assets		[47,914	25	66,842
26	Total liabilities (describe in Schedule O)				26	
27	Net assets or fund balances (line 27 of column	n (B) must agree with	n line 21)	47,914	27	66,842
Par	III Statement of Program Service Accom	plishments (see th	e instructions for F	Part III)		Expenses
	Check if the organization used Schedule	O to respond to a	ny question in this	Part III 🗹	(Re	quired for section
Wha	t is the organization's primary exempt purpose?				501	(c)(3) and 501(c)(4)
as m	ribe the organization's program service accompl neasured by expenses. In a clear and concise nons benefited, and other relevant information for e	nanner, describe the	f its three largest pe services provided	rogram services, I, the number of	494	anizations and section 17(a)(1) trusts; optional others.)
28	Distribution of publications and membership materia expenses;	als to approximately 3	50 members includir	ng administrative		
	(Grants \$) If this amount	includes foreign gra	ints, check here .	▶ □	28a	5,586
29	Distribution of funds to Dartmouth College in suppo	rt of its educational p	urposes			
	(Grante \$) If this amount	includes foreign gra	unto obsol boro	► □	20.	
30				<u> P Ll</u>	298	4,600
30	Host 30th year Class Reunion, Mini-Reunions, and M	viscellaneous Other E	xpenses			
	(Grants \$) If this amount	includes foreign gra	ints, check here .	▶ □	30a	100,835
31	Other program services (describe in Schedule O)				24.	
32	Total program service expenses (add lines 28a	includes foreign gra	ints, check here .	· · · > 📙	31a	
Par						111,021
· ai	Check if the organization used Schedule				struc	CIONS IOF Part IV)
	Official in the organization asea confeation		(c) Reportable	(d) Health benefits.	Ť	· · · · <u>· □</u>
	(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	contributions to employed benefit plans, and deferred compensation	- [17	Estimated amount of other compensation
H. Mc	Intyre Gardner					<u> </u>
Co-P	resident	3 Hrs./Wk.	-0-)-[-0-
Andr	e Hunter				T	
Co-P	resident	3 Hrs./Wk	-0-)-	-0-
Jame	s C. Gregg					
<u>Treas</u>	urer	3 Hrs./Wk	-0-).	-0-
Mare	n Christensen]				
<u>Secre</u>	etary	3 Hrs./Wk	-0-)-	-0-
- -						
					┸	
					┸	
		1				
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		1				-

Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
•	detailed description of each activity in Schedule O	33		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O (see instructions)	34		✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	ا م		١,
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35a 35b		-
	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,	100		
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	_	1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a -0-			
	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	30a		V
39	Section 501(c)(7) organizations. Enter:	1 '		
а	Initiation fees and capital contributions included on line 9] '		
	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
_	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		✓
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c			
	reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
41	transaction? If "Yes," complete Form 8886-T	40e		✓
		781-86	3-8432	2
	Lacated at N. 11 Delfm: Tomore Levinston MA	02421		-
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over	$\overline{}$	Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		✓
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		1
43	If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			<u> </u>
43	and enter the amount of tax-exempt interest received or accrued during the tax year		. •	► □ N/A
	and sitter the unionities task exempt interest isosored or desired during the task year		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			
_	completed instead of Form 990-EZ	44a		
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		/
С	Did the organization receive any payments for indoor tanning services during the year?	44c		√
	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		✓
45b	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," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b		

FOIII 550	7-LZ (2012)							ugo
46	Did the organization engage, directly or i	ndirectly in political c	ampaign activities or	hehalf of o	r in annositi	on —	Yes	No
40	to candidates for public office? If "Yes,"	complete Schedule C	, Part I			46		1
Part V		s only					or lin	es
	Check if the organization used Sc	hedule O to respond	I to any question in	this Part VI	<u> </u>	<u></u>		. 🗆
	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Pai		section 501(h) election				Yes	No ✓
48	Is the organization a school as described i	ın section 170(b)(1)(A)(i	•			48	1	Ļ
	Did the organization make any transfers if "Yes," was the related organization a s					49a 49b		├
50	Complete this table for the organization's	s five highest compen	sated employees (ot	her than offi	cers, directo	ors, truste		
	employees) who each received more that	n \$100,000 of comper	nsation from the orga			, enter "N	lone.'	<u> </u>
	(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health contributions benefit plans, compe	to employee and deferred	(e) Estimate other com		
NONE								
				 				
				+		<u> </u>		
				 				
		-						
51	Total number of other employees paid on Complete this table for the organization \$100,000 of compensation from the organization	s five highest compe	ensated independent	contractors	who each	received	more	thar
(a) N	Name and address of each independent contractor page	aid more than \$100,000	(b) Type of ser	vice	(c)	Compensation	on	
NONE								
			-					
					_			
	Total number of other independent contr	_						
	Did the organization complete Schedule nonexempt charitable trusts must attach					► ☑ Yes		No
Under pe	enalties of perjury. I declare that I have examined this sect, and complete. Deplaration of preparer to the that	return, including accompan	ying schedules and statem	ents, and to the	best of my kno			
	Jan C. Enen				9/24/	/3		
Sign Here	Signature of officer James C. Gregg, Treasurer			Dat	е	•	_	
	Type or print name and title							
Paid	Print/Type preparer's name	Preparer's signature	D	ate	Check Self-employ	of PTIN		
Prepa Use C		·		Firm	n's EIN ▶			
	Firm's address ▶			Pho	one no			
May the	e IRS discuss this return with the prepare	er snown above? See i	instructions		🕨	► 🔲 Yes		No

Form **990-EZ** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

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

Dartmouth College Class of 1983 04-3391621 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 described in section 170(b)(1)(A)(i). ☑ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% 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). 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. c Type III-Functionally integrated **d** ☐ Type III–Non-functionally integrated a Type I **b** Type II 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). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and No 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) Provide the following information about the supported organization(s). (iii) Type of organization (iv) Is the organization (i) Name of supported (ii) EIN (v) Did you notify (vi) Is the (vii) Amount of monetary the organization in col (i) of your organization (described on lines 1-9 in col. (i) listed in your organization in col support governing document? (i) organized in the above or IRC section support? (see instructions)) Yes Yes No Yes (A) (B) (C) (D) (E) **Total**

Part							
	(Complete only if you checked the						alify under
Cooti	Part III. If the organization fails to on A. Public Support	o qualify unde	er the tests lis	sted below, p	lease comple	te Part III.)	
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(a) 2010	(d) 2011	(e) 2012	(6) Total
Calen	Gifts, grants, contributions, and	(a) 2008	(b) 2009	(c) 2010	(a) 2011	(e) 2012	(f) Total
•	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.	YES THE SEC		THE REAL PROPERTY.			<u> </u>
	on B. Total Support	(-) 0000	4.1.0000	(-) 0040	(4) 0044	(-) 0040	(0 T. t.)
	dar year (or fiscal year beginning in) Amounts from line 4	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 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. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12	Gross receipts from related activities, etc	. (see instructi	ons)			12	
13	First five years. If the Form 990 is for the	_			•		
04	organization, check this box and stop he			· · · · ·		• • • • •	▶ □
	on C. Computation of Public Suppor			1 00/11		44	
14 15	Public support percentage for 2012 (line Public support percentage from 2011 Sci		•			14	<u>%</u>
16a	331/3% support test—2012. If the organic box and stop here. The organization qua	zation did not	check the box	on line 13, and	d line 14 is 33 ¹	3% or more, c	heck this
b	331/3% support test—2011. If the organ check this box and stop here. The organ	nization did no	t check a box	on line 13 or	16a, and line		
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the "torganization	ets the "facts-	and-circumsta	nces" test, che st. The organiz	eck this box an	id stop here. E	xplain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part IV how the organization in supported organization	tion meets the	facts-and-ci	rcumstances" tances" test. T	test, check th	is box and st	and line op here.
18	Private foundation. If the organization di	id not check a			, or 17b, chec	k this box and	

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

	• •		· · · · · · · · · · · · · · · · · · ·
,	(Complete only	If you checked the b	box on line 9 of Part I or if the organization failed to qualify under Part II.
	If the organizati	on fails to qualify un	der the tests listed below, please complete Part II.)

Secti	on A. Public Support				<u></u>		
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees						<u></u>
	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						
	Add lines 7a and 7b						
8	Public support (Subtract line 7c from		ŀ				
<u> </u>	line 6)					w,	
	on B. Total Support	/ \ 0000	# > 0000	() 0040	4.0044	4 > 0040	<u> </u>
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 .					;	
h	Unrelated business taxable income (less						
D	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	e organization	i's first, secon	d, third, fourth	, or fifth tax ye	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her				<u>.</u>	<u> </u>	▶ □
	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8	• • • • • • • • • • • • • • • • • • • •	•	. ,,,,		15	%
16	Public support percentage from 2011 Sch			<u> </u>	· · · · ·	16	%
	on D. Computation of Investment Inc			1 10	(0)	1.4=1	
17	Investment income percentage for 2012 (I			-		17	<u>%</u>
18	Investment income percentage from 2011					18	<u>%</u>
19a	331/23% support tests—2012. If the organi 17 is not more than 331/23%, check this box						·
	331/3% support tests—2011. If the organiz					-	_
b	line 18 is not more than 331/3%, check this b						'
20	Private foundation. If the organization did	-	_	•			
20	i i vate i validation. Il tile organization dit	iot officer a	20x 011 mile 14,	, Ju, OI 130, C	AND KILLIS DOX	and see module	J. 10113 P

Schedule A (F	Form 990 or 990-EZ) 2012	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See	
	instructions).	
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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

<u>2012</u>

Open to Public Inspection

Name of the organization

Dartmouth College Class of 1983

Employer identification number

04-3391621

Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? 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? 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 Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Records documenting that scholarships and other financial assistance are awarded on a racially 4b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Copies of all material used by the organization or on its behalf to solicit contributions? 4d If you answered "No" to any of the above, please explain. If you need more space, use Part II. See 3 above Does the organization discriminate by race in any way with respect to: 5a 5b Admissions policies? Employment of faculty or administrative staff? . 5c Scholarships or other financial assistance? . 5d Educational policies? 5e Use of facilities? 5f Athletic programs?. 5g Other extracurricular activities? 5h If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? . . . 6a Has the organization's right to such aid ever been revoked or suspended? 6b If you answered "Yes" to either line 6a or line 6b, explain on Part II. 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.

	Form 990 or 990-EZ) (2012) Page:
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)
Schedule I	E, line 3 - Explanation of Nondiscrimination Policy; Dartmouth College Class of 1983 in an alumni group and a subordinate
organizatio	on of Trustees of Dartmouth College (EIN 02-0222111). As part of a group exemption with the Trustees of Dartmouth College
(Group Fili	ng Number 8204) Dartmouth College Class of 1983 is recognized as exempt as a school under IRC Section 509 (a) (1) and
Section 17	0 (b) (A) (iii). Dartmouth College Class of 1983 is an alumni club that supports the Trustees of Dartmouth College through various
activities.	
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Dartmouth College Class of 1983	04-3391621
Form 990 - EZ, Part I, Line 8, Other Revenue:	
Description of Other Revenue: Major Reunion Receipts (\$106,130) and Prepaid Dues for FY14 (\$345)	Total Amount: \$106,475
Form 990 - EZ, Part I, Line 10, Grants and Allocations	
Activity Classification: Scholarships to Dartmouth Students	
Grantee Name: Dartmouth College Amount Given: \$3,600	•••••
Activity Classification: Equipment for Dartmouth Students	•••••
Grantee Name: Dartmouth College Amount Given: \$1,000	•••••
	Total Amount: \$4,600
Form 990 - EZ, Part I, Line 16, Other Expenses:	••••
Description: Major Reunion Expenses (\$99,521); Mini-Reunion Expenses (\$1,152); Bank Fees and Other	er (\$162) Total Amount: \$100,835
Form 990 - EZ, Part III, Primary Exempt Purpose - Enhance Alumni Interest in Dartmouth College	
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