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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)

OMB No. 1545-0047

2012

Open to Public
Inspection

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

A For the 2012 calendar year, or tax year beginning JUL 1, 2012 and ending JUN 30, 2013

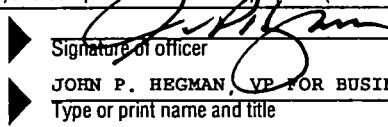
| | | | | |
|--|--|--|---|--|
| <input type="checkbox"/> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization AGNES SCOTT COLLEGE Doing Business As | | D Employer identification number 58-0566116 | |
| | Number and street (or P.O. box if mail is not delivered to street address) 141 EAST COLLEGE AVENUE | | Room/suite | |
| | City, town, or post office, state, and ZIP code DECATUR, GA 30030 | | | |
| | F Name and address of principal officer ELIZABETH KISS 141 EAST COLLEGE AVENUE, DECATUR, GA 30030 | | E Telephone number (404) 471-6308 | |
| | I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () <input type="checkbox"/> (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | G Gross receipts \$ 133,236,838. | |
| | J Website: ► WWW.AGNESSCOTT.EDU | | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ► | | H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) | | |
| L Year of formation: 1889 | | M State of legal domicile: GA | | |

Part I Summary

| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: A PRIVATE LIBERAL ARTS COLLEGE WITH THE MISSION TO EDUCATE WOMEN TO THINK DEEPLY, LIVE HONORABLY | Prior Year | | Current Year | |
|---|--|--------------|--------------|--------------|----|
| | | 3 | 31 | 4 | 31 |
| 2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | 5 | 796 | | |
| 3 Number of voting members of the governing body (Part VI, line 1a) | | 6 | 700 | | |
| 4 Number of independent voting members of the governing body (Part VI, line 1b) | | 7a | 431,173. | | |
| 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) | | 7b | 0. | | |
| 6 Total number of volunteers (estimate if necessary) | | | | | |
| 7a Total unrelated business revenue from Part VIII, column (C), line 12 | | | | | |
| b Net unrelated business taxable income from Form 990-T, line 34 | | | | | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | 6,766,003. | 6,466,087. | | |
| | 9 Program service revenue (Part VIII, line 2g) | 26,866,194. | 28,366,057. | | |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 7,797,469. | 15,997,222. | | |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9a, 10c, and 11e) | 9,669,209. | 9,325,491. | | |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 51,098,875. | 60,154,857. | | |
| | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 16,506,741. | 17,611,632. | | |
| | 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) | 19,861,662. | 20,405,978. | | |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 0. | 0. | | |
| | b Total fundraising expenses (Part IX, column (D), line 25) ► | 2,685,120. | | | |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 25,562,852. | 27,056,111. | | |
| | 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 61,931,255. | 65,073,721. | | |
| Expenses | 19 Revenue less expenses. Subtract line 18 from line 12 | <10,832,380. | <4,918,864. | | |
| | 20 Total assets (Part X, line 16) | 372,861,324. | 379,863,176. | | |
| | 21 Total liabilities (Part X, line 26) | 90,365,106. | 84,120,854. | | |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 282,496,218. | 295,742,322. | | |

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.

| | | | | |
|------------------------------|---|--|------------------|---|
| 2 Sign Here | ►  | Date | 5/5/14 | |
| | ► JOHN P. HEGMAN, VP FOR BUSINESS & FINANCE | | | |
| Type or print name and title | | | | |
| Paid | Print/Type preparer's name CARLYE W. DOOLEY | Preparer's signature CARLYE W. DOOLEY | Date 04/28/14 | Check if self-employed <input type="checkbox"/> PTIN P00292964 |
| Preparer | Firm's name ► WINDHAM BRANNON, PC | Firm's EIN ► 58-1763439 | | |
| Use Only | Firm's address ► 3630 PEACHTREE RD., NE SUITE 600 ATLANTA, GA 30326 | Phone no. 404-898-2000 | | |

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

232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2012)

917 5

Part IV Statement of Program Service Accomplishments

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

X

1. Briefly describe the organization's mission:

FOUNDED IN 1889, AGNES SCOTT COLLEGE IS AN INDEPENDENT LIBERAL ARTS COLLEGE FOR WOMEN WHOSE MISSION IS TO EDUCATE WOMEN TO THINK DEEPLY, LIVE HONORABLY AND ENGAGE THE INTELLECTUAL AND SOCIAL CHALLENGES OF THEIR TIMES.

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 are required to report the amount of grants and allocations to others, the total expenses, an

revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 17,525,406. including grants of \$ 17,525,406.) (Revenue \$ 0.)

STUDENT AID ENCOMPASSES DIRECT FINANCIAL AID PROVIDED BY THE COLLEGE TO
FACILITATE ITS STUDENTS' PURSUIT OF A COLLEGE EDUCATION.

4b (Code _____) (Expenses \$ 12,478,307 including grants of \$ 0.) (Revenue \$ 28,366,057.)
INSTRUCTION IS PROVIDED BY FULL-TIME FACULTY AND PART-TIME FACULTY
MEMBERS REPRESENTING NUMEROUS ACADEMIC DEPARTMENTS.

4c (Code _____) (Expenses \$ 6,406,641. including grants of \$ 0.) (Revenue \$ 0.)
ACADEMIC SUPPORT COMPRISSES INFORMATION TECHNOLOGY SERVICES, REGISTRAR,
ACADEMIC ADVISING, FACULTY SERVICES, LIBRARY, ETC. THESE ADMINISTRATIVE
OFFICES ASSIST THE COLLEGE IN ITS EDUCATIONAL MISSION.

4d Other program services (Describe in Schedule O.)

(Expenses \$ 7,230,852, including grants of \$ 86,226.) (Revenue \$ 8,552,411)

4e Total program service expenses ► 43,641,206.

Part IV Checklist of Required Schedules

1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A.
2. Is the organization required to complete Schedule B, *Schedule of Contributors*?
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
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
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
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
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
8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
9. Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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
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
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, line 10? If "Yes," complete Schedule D, Part VI
 - 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
 - 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
 - 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
 - e. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
 - 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
- 12a. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
- 12b. 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 and XII is optional
13. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a. Did the organization maintain an office, employees, or agents outside of the United States?
 - 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, Parts I and IV
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 United States? If "Yes," complete Schedule F, Parts II and IV
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 United States? If "Yes," complete Schedule F, Parts III and IV
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
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
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
- 20a. Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
 - b. If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|--|-------|----|
| 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 X | |
| 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 X | |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 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 X | |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 | 24a X | |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b X | |
| 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 X | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d X | |
| 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 X | |
| 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 X | |
| 26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 X | |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 X | |
| 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 X | |
| b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b X | |
| 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 direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c X | |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 X | |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 X | |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 X | |
| 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 X | |
| 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 X | |
| 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 X | |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a X | |
| b If "Yes" to line 35a, 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 | |
| 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 X | |
| 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 X | |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | 38 X | |

Form 990 (2012)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 | 152 |
| 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 | X |
| 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 | 796 |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 2b | X |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | X |
| b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | X |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | X |
| 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 | X |
| b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | X |
| 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 as charitable contributions? | 6a | X |
| 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). | 7a | X |
| 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? | 7b | |
| b If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7c | X |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7d | |
| d If "Yes," indicate the number of Forms 8282 filed during the year | 7e | X |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7f | X |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7g | |
| g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7h | |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 8 | |
| 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? | 9a | |
| 9 Sponsoring organizations maintaining donor advised funds. | 9b | |
| a Did the organization make any taxable distributions under section 4966? | | |
| b Did the organization make a distribution to a donor, donor advisor, or related person? | | |
| 10 Section 501(c)(7) organizations. Enter: | 10a | |
| a Initiation fees and capital contributions included on Part VIII, line 12 | 10b | |
| b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | |
| 11 Section 501(c)(12) organizations. Enter: | 11a | |
| a Gross income from members or shareholders | 11b | |
| b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | |
| 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. | 13a | |
| a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. | 13b | |
| b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | 13c | |
| c Enter the amount of reserves on hand | | |
| 14a Did the organization receive any payments for indoor tanning services during the tax year? | 14a | X |
| 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 line 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | 31 | |
| 1b | | 31 | |
| 2 | | | x |
| 3 | | x | |
| 4 | | x | |
| 5 | | x | |
| 6 | | x | |
| 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? | | x |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a | The governing body? | x | |
| b | Each committee with authority to act on behalf of the governing body? | x | |
| 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 | | x |

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

| | Yes | No |
|-----|-----|----|
| 10a | | x |
| b | | |
| 10b | | |
| 11a | x | |
| 12a | x | |
| 12b | x | |
| 12c | x | |
| 13 | x | |
| 14 | x | |
| 15a | x | |
| 15b | x | |
| 16a | | x |
| 16b | | |

Section C. Disclosure

| | |
|----|---|
| 17 | List the states with which a copy of this Form 990 is required to be filed ►GA, NY, CA |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O) |
| 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 during the tax year. |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► LAI CHAN, CONTROLLER - (404) 471-6308 |
| | 141 EAST COLLEGE AVENUE, DECATUR, GA 30030 |

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. Enter 0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

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

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

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below line) | (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 | | | |
| (1) GAY O. ABBOTT TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (2) MARY GAY BANKSTON TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (3) PAMELA J. BEVIER TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (4) ANN GLENDINNING TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (5) ELIZABETH DANIEL HOLDER TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (6) SANDRA THOME JOHNSON TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (7) ELIZABETH RHETT JONES TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (8) MELODY C. JUSTICE TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (9) PHYLLIS E. KOZARSKY TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (10) DENNIS P. LOCKHART TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (11) JAMES E. LOVE III TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (12) JEANNE KAUFMANN MANNING TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (13) PORTIA O. MORRISON TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (14) JESSICA H. OWENS TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (15) SUSAN M. PHILLIPS TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (16) BOLLING P. SPALDING TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |
| (17) BERNARD TAYLOR, SR. TRUSTEE | 2.00 | X | | | | | 0. | 0. | 0. |

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (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 | | |
| (18) CLYDE C. TUGGLE CHAIRPERSON | 2.00 | | X | | | | 0. | 0. | 0. |
| (19) DAVID D. WEITNAUER TRUSTEE | 2.00 | | X | | | | 0. | 0. | 0. |
| (20) ELIZABETH KISS COLLEGE PRESIDENT & TRUSTEE | 40.00 | | X | X | | | 246,090. | 0. | 48,624. |
| (21) LEA ANN HUDSON DIR OF THE OFFICE OF PRESI | 40.00 | | X | X | | | 71,187. | 0. | 11,641. |
| (22) CLAIRE HODGES BURDETT TRUSTEE | 2.00 | | X | | | | 0. | 0. | 0. |
| (23) WESLEY A. FRENCH TRUSTEE | 2.00 | | X | | | | 0. | 0. | 0. |
| (24) MARY LOU CORNWALL HAWKES TRUSTEE | 2.00 | | X | | | | 0. | 0. | 0. |
| (25) STACEY Y. ABRAMS TRUSTEE | 2.00 | | X | | | | 0. | 0. | 0. |
| (26) GAIL SAVAGE GLOVER TRUSTEE | 2.00 | | X | | | | 0. | 0. | 0. |
| 1b Sub-total | | | | | | ► | 317,277. | 0. | 60,265. |
| c Total from continuation sheets to Part VII, Section A | | | | | | ► | 987,500. | 0. | 223,885. |
| d Total (add lines 1b and 1c) | | | | | | ► | 1,304,777. | 0. | 284,150. |

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 ►

9

| | 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 | X |
| 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 | X |
| 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 | X |

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 |
|--|--------------------------------|---------------------|
| ARAMARK SERVICES, INC. 141 EAST COLLEGE AVENUE, DECATUR, GA 30030 | FOOD SERVICE | 2,364,380. |
| J SMITH LANIER & COMPANY 11330 LAKEFIELD DRIVE, DULUTH, GA 30097 | INSURANCE | 540,932. |
| PADGETT SERVICES, LLC 140 MOUNTAIN BROOK DRIVE, CANTON, GA 30115 | HVAC & MECHANICAL MAINTENANCE | 491,932. |
| VALLEYCREST LANDSCAPE GROUP P.O. BOX 404083, ATLANTA, GA 30384 | LANDSCAPE MAINTENANCE | 213,778. |
| BENNET GRAPHICS 125 ROYAL WOODS COURT, TUCKER, GA 30084 | CONSULTANT | 204,804. |

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 ►

8

SEE PART VII, SECTION A CONTINUATION SHEETS
232008
12-10-12

Form 990 (2012)

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

Part VIII Statement of RevenueCheck if Schedule O contains a response to any question in this Part VIII

| | | (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 | 1 a Federated campaigns | 1a | | | |
| | b Membership dues | 1b | | | |
| | c Fundraising events | 1c | | | |
| | d Related organizations | 1d | | | |
| | e Government grants (contributions) | 1e | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f | 6,466,087. | | |
| | g Noncash contributions included in lines 1a-1f \$ | | 986,776. | | |
| | h Total. Add lines 1a-1f | | 6,466,087. | | |
| Program Service Revenue | 2 a TUITION & FEE INCOME | Business Code 611600 | 28,366,057. | 28,366,057. | |
| | b | | | | |
| | c | | | | |
| | d | | | | |
| | e | | | | |
| | f All other program service revenue | | | | |
| | g Total. Add lines 2a-2f | | 28,366,057. | | |
| | 3 Investment income (including dividends, interest, and other similar amounts) | | 4,100,385. | | 4,100,385. |
| | 4 Income from investment of tax-exempt bond proceeds | | | | |
| | 5 Royalties | | | | |
| | 6 a Gross rents | (i) Real 608,636. | (ii) Personal | | |
| | b Less: rental expenses | 234,476. | | | |
| | c Rental income or (loss) | 374,160. | | | |
| | d Net rental income or (loss) | | | | 374,160. |
| | 7 a Gross amount from sales of assets other than inventory | (i) Securities 84,744,342. | (ii) Other | | |
| | b Less: cost or other basis and sales expenses | 72,847,505. | | | |
| | c Gain or (loss) | 11,896,837. | | | |
| | d Net gain or (loss) | | | | 11,896,837. |
| | 8 a Gross income from fundraising events (not including \$ _____ 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 | | | | |
| | 9 a Gross income from gaming activities. See Part IV, line 19 | a | | | |
| | b Less: direct expenses | b | | | |
| | c Net income or (loss) from gaming activities | | | | |
| | 10 a Gross sales of inventory, less returns and allowances | a | | | |
| | b Less: cost of goods sold | b | | | |
| | c Net income or (loss) from sales of inventory | | | | |
| | Miscellaneous Revenue | Business Code | | | |
| | 11 a AUXILIARY ENTERPRISES | 611710 | 8,466,252. | 8,035,079. | 431,173. |
| | b RESEARCH GRANTS/COLLEG | 611710 | 343,288. | 343,288. | |
| | c VENDING & PARKING | 611710 | 50,160. | 50,160. | |
| | d All other revenue | 611710 | 91,631. | 91,631. | |
| | e Total. Add lines 11a-11d | | 8,951,331. | | |
| | 12 Total revenue. See instructions. | | 60,154,857. | 36,886,215. | 431,173. |
| | | | | | 16,371,382. |

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).

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 | 86,226. | 86,226. | | |
| 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 | 17,525,406. | 17,525,406. | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 1,004,821. | 410,223. | 435,080. | 159,518. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 14,695,547. | 10,326,163. | 3,045,188. | 1,324,196. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 833,016. | 577,963. | 189,007. | 66,046. |
| 9 Other employee benefits | 2,643,259. | 1,310,331. | 1,159,077. | 173,851. |
| 10 Payroll taxes | 1,229,335. | 860,703. | 271,680. | 96,952. |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | 93,159. | | 93,159. | |
| c Accounting | 181,410. | | 181,410. | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | 2,323,535. | | 2,323,535. | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) | 5,530,879. | 1,694,257. | 3,448,783. | 387,839. |
| 12 Advertising and promotion | 97,265. | | 97,265. | |
| 13 Office expenses | 2,980,052. | 1,854,617. | 906,089. | 219,346. |
| 14 Information technology | 309,015. | 248,681. | 57,223. | 3,111. |
| 15 Royalties | | | | |
| 16 Occupancy | 155,112. | 87,100. | 50,012. | 18,000. |
| 17 Travel | 795,718. | 692,443. | 42,020. | 61,255. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 233,465. | 131,033. | 96,987. | 5,445. |
| 20 Interest | 2,103,948. | 1,169,798. | 934,150. | |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 5,519,950. | 3,069,098. | 2,450,852. | |
| 23 Insurance | 532,283. | | 532,283. | |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a FACILITY OPERATION & MA | 3,306,408. | 1,886,308. | 1,420,100. | 0. |
| b RETIREES' COSTS | 1,095,432. | 441,354. | 654,078. | 0. |
| c STUDENT SERVICE FEES | 736,011. | 736,011. | | |
| d MEALS & ENTERTAINMENT | 443,159. | 168,169. | 148,586. | 126,404. |
| e All other expenses | 619,310. | 365,322. | 210,831. | 43,157. |
| 25 Total functional expenses. Add lines 1 through 24e | 65,073,721. | 43,641,206. | 18,747,395. | 2,685,120. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. | | | | |
| Check here ► <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) | | | | |

Part X | Balance Sheet

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

| | | (A) Beginning of year | | (B) End of year |
|-----------------------------|---|--------------------------|-----|--------------------|
| Assets | 1 Cash - non-interest-bearing | 12,008,293. | 1 | 12,399,014. |
| | 2 Savings and temporary cash investments | | 2 | |
| | 3 Pledges and grants receivable, net | 3,488,235. | 3 | 3,617,523. |
| | 4 Accounts receivable, net | 524,408. | 4 | 231,591. |
| | 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 1,269,803. | 9 | 1,174,150. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 180,640,541. | | |
| | b Less: accumulated depreciation | 81,343,021. | 10c | 99,297,520. |
| | 11 Investments - publicly traded securities | 72,600,169. | 11 | 79,194,985. |
| | 12 Investments - other securities. See Part IV, line 11 | 170,834,341. | 12 | 176,273,435. |
| | 13 Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| | 15 Other assets. See Part IV, line 11 | 8,252,255. | 15 | 7,674,958. |
| | 16 Total assets. Add lines 1 through 15 (must equal line 34) | 372,861,324. | 16 | 379,863,176. |
| Liabilities | 17 Accounts payable and accrued expenses | 6,420,592. | 17 | 4,902,704. |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | 824,375. | 19 | 891,104. |
| | 20 Tax-exempt bond liabilities | 69,298,584. | 20 | 66,321,787. |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | 1,078,555. | 23 | 1,058,937. |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 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 | 12,743,000. | 25 | 10,946,322. |
| | 26 Total liabilities. Add lines 17 through 25 | 90,365,106. | 26 | 84,120,854. |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | |
| | 27 Unrestricted net assets | 52,379,186. | 27 | 51,043,628. |
| | 28 Temporarily restricted net assets | 154,505,583. | 28 | 168,083,974. |
| | 29 Permanently restricted net assets | 75,611,449. | 29 | 76,614,720. |
| | Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> 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 | 282,496,218. | 33 | 295,742,322. |
| | 34 Total liabilities and net assets/fund balances | 372,861,324. | 34 | 379,863,176. |

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response to any question in this Part XI

| | | |
|----|----|--------------|
| 1 | 1 | 60,154,857. |
| 2 | 2 | 65,073,721. |
| 3 | 3 | <4,918,864.> |
| 4 | 4 | 282,496,218. |
| 5 | 5 | 15,949,229. |
| 6 | 6 | |
| 7 | 7 | <17,200.> |
| 8 | 8 | |
| 9 | 9 | 2,232,940. |
| 10 | 10 | 295,742,323. |

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII

| | Yes | No |
|--|-----|----|
| 1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2a | x |
| 2b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | 2b | x |
| 2c If "Yes" to line 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 | x |
| 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? 3b 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 | 3a | x |
| | | 3b |

Form 990 (2012)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

Employer identification number

AGNES SCOTT COLLEGE

58-0566116

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).

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 - Non-functionally integrated

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?

(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 supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the supported organization(s).

| | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |

LHAR

Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2012

232021
12-04-12

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

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

Section A. Public Support

| Calendar 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 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) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (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. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 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 section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | |
|--|----|---|
| 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) .. | 14 | % |
| 15 Public support percentage from 2011 Schedule A, Part II, line 14 .. | 15 | % |
| 16a 33 1/3% support test - 2012. 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 ► <input type="checkbox"/> | | |
| b 33 1/3% support test - 2011. If the organization did not check a 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 ► <input type="checkbox"/> | | |
| 17a 10% -facts-and-circumstances test - 2012. 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 ► <input type="checkbox"/> | | |
| b 10% -facts-and-circumstances test - 2011. 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 ► <input type="checkbox"/> | | |
| 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 ► <input type="checkbox"/> | | |

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

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ► | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (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) 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 | | | | | | |
| 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 section 501(c)(3) organization, check this box and stop here ►

Section C. Computation of Public Support Percentage

| | | |
|---|----|---|
| 15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2011 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|--|----|---|
| 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2011 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2012. 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 - 2011. 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 ►

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

AGNES SCOTT COLLEGE

Employer identification number
58-0566116

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 | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |
| 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? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? | | <input type="checkbox"/> Yes <input type="checkbox"/> 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). | <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) <input type="checkbox"/> Preservation of an historically important land area |
| | <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure |
| | <input type="checkbox"/> Preservation of open space |
| 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. | |
| a Total number of conservation easements | Held at the End of the Tax Year |
| b Total acreage restricted by conservation easements | 2a |
| c Number of conservation easements on a certified historic structure included in (a) | 2b |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2c |
| 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► | 2d |
| 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? | <input type="checkbox"/> Yes <input type="checkbox"/> 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 section 170(h)(4)(B)(ii)? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9 In Part XIII, 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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items. | ► \$ _____ |
| b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 | ► \$ _____ |
| (ii) Assets included in Form 990, Part X | ► \$ _____ |
| 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 (ASC 958) relating to these items: | ► \$ _____ |
| a Revenues included in Form 990, Part VIII, line 1 | ► \$ _____ |
| b Assets included in Form 990, Part X | ► \$ _____ |

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

3 Using the organization's acquisition, 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 XIII.

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 XIII and complete the following table:

| | Amount |
|----|--------|
| 1c | |
| 1d | |
| 1e | |
| 1f | |

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21?

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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 | 240,857,513. | 259,283,516. | 234,972,872. | 230,611,586. | 307,663,898. |
| b Contributions | 1,441,400. | 2,647,946. | 5,069,868. | 2,008,260. | 2,503,423. |
| c Net investment earnings, gains, and losses | 29,017,058. | <3,247,659. | 37,511,483. | 22,234,207. | <60,690,379. > |
| d Grants or scholarships | 2,346,424. | 8,531,667. | 8,526,991. | 18,544,300. | 17,903,901. |
| e Other expenditures for facilities and programs | 17,968,331. | 9,294,623. | 9,743,716. | 1,336,881. | 961,455. |
| f Administrative expenses | | | | | |
| g End of year balance | 251,001,216. | 240,857,513. | 259,283,516. | 234,972,872. | 230,611,586. |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► 8.55 %

b Permanent endowment ► 64.46 %

c Temporarily restricted endowment ► 26.99 %

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

by:

(i) unrelated organizations

(ii) related organizations

| | Yes | No |
|--------|-----|----|
| 3a(i) | | x |
| 3a(ii) | | x |

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII 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 | 1,725,918. | | | 1,725,918. |
| b Buildings | 145,678,244. | | 54,704,318. | 90,973,926. |
| c Leasehold improvements | 9,460,490. | | 6,351,174. | 3,109,316. |
| d Equipment | 23,158,262. | | 19,872,893. | 3,285,369. |
| e Other | 617,627. | | 414,636. | 202,991. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)) | | | ► | 99,297,520. |

Schedule D (Form 990) 2012

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 | 8,730,287. | END-OF-YEAR MARKET VALUE |
| (3) Other | | |
| (A) COMMINGLED FUNDS | 30,242,405. | END-OF-YEAR MARKET VALUE |
| (B) REAL ESTATE PARTNERSHIPS | 28,221,568. | END-OF-YEAR MARKET VALUE |
| (C) POOLED EQUITY FUNDS | 78,383,454. | END-OF-YEAR MARKET VALUE |
| (D) PRIVATE EQUITY PARTNERSHIPS | 30,695,721. | END-OF-YEAR MARKET VALUE |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| (I) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► | 176,273,435. | |

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 |
|--|----------------|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| (10) | | |
| Total. (Col. (b) must 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 |
|--|----------------|
| (1) | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| Total. (Column (b) must 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) Book value |
|--|----------------|
| (1) Federal income taxes | |
| (2) ACCRUED POSTRETIREMENT BENEFIT | 10,946,322. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| (11) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ► | 10,946,322. |

2. FIN 48 (ASC 740) Footnote. In Part XIII, 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 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

| | | |
|---|----|-------------|
| 1 Total revenue, gains, and other support per audited financial statements | 1 | 57,840,886. |
| 2. Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a Net unrealized gains on investments | 2a | 15,949,229. |
| b Donated services and use of facilities | 2b | |
| c Recoveries of prior year grants | 2c | |
| d Other (Describe in Part XIII.) | 2d | 1,604,954. |
| e Add lines 2a through 2d | 2e | 17,554,183. |
| 3 Subtract line 2e from line 1 | 3 | 40,286,703. |
| 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 | 2,340,735. |
| b Other (Describe in Part XIII.) | 4b | 17,527,419. |
| c Add lines 4a and 4b | 4c | 19,868,154. |
| 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 60,154,857. |

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

| | | |
|--|----|-------------|
| 1 Total expenses and losses per audited financial statements | 1 | 46,559,325. |
| 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a Donated services and use of facilities | 2a | |
| b Prior year adjustments | 2b | |
| c Other losses | 2c | |
| d Other (Describe in Part XIII.) | 2d | 1,334,544. |
| e Add lines 2a through 2d | 2e | 1,334,544. |
| 3 Subtract line 2e from line 1 | 3 | 45,224,781. |
| 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 | 2,323,535. |
| b Other (Describe in Part XIII.) | 4b | 17,525,406. |
| c Add lines 4a and 4b | 4c | 19,848,941. |
| 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 65,073,722. |

Part XIII 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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A: PER THE AUDITED FINANCIAL STATEMENTS, "CONTRIBUTED

COLLECTION ITEMS ARE NOT REFLECTED ON THE FINANCIAL STATEMENTS. PROCEEDS

FROM THE DEACCESSIONS OR INSURANCE RECOVERIES ARE REFLECTED AS INCREASES

IN THE APPROPRIATE NET ASSET CLASSES. DONATIONS OF ARTWORK ARE ACCEPTED

WITH CONSIDERATION TO HOW THEY WILL BENEFIT THE CAMPUS LEARNING

ENVIRONMENT. THE COLLECTION ITEMS ARE SUBJECT TO A POLICY THAT REQUIRES

PROCEEDS FROM THEIR SALES TO BE USED FOR THE ACQUISITION OF NEW COLLECTION

ITEM(S). DURING THE FISCAL YEARS ENDING JUNE 30, 2013 AND JUNE 30, 2012,

Part XII Supplemental Information (continued)

NO SALES OF COLLECTION ITEMS OCCURED AND NO COLLECTION ITEMS WERE GIVEN

AWAY, DAMAGED, DESTROYED, LOST OR OTHERWISE DEACCESSED."

PART III, LINE 4: THE AGNES SCOTT COLLEGE PERMANENT COLLECTION IS A

LIVING, ECLECTIC GATHERING OF ARTWORK THAT ENCOMPASSES A BROAD RANGE OF

HISTORY, MEDIA AND ATTITUDES. COMPLEMENTING THE PERMANENT COLLECTION IS

THE DYNAMIC PROGRAMMING OF THE DALTON GALLERY, WHICH ORGANIZES TEMPORARY

EXHIBITIONS DESIGNED TO PROMOTE AN UNDERSTANDING OF THE ARTS. IT IS

LOCATED AT THE HEART OF THE DANA FINE ARTS BUILDING, A STRUCTURE BUILT IN

1965 AND DESIGNED BY JOHN PORTMAN, WHICH HOUSES THE ART HISTORY AND STUDIO

ART DEPARTMENT. IT ALSO HOUSES THE THEATRE DEPARTMENT.

IN SUPPORT OF THE MISSION OF THE COLLEGE, THE FOCUS OF NEW ACQUISITIONS IS

LARGELY BUT NOT EXCLUSIVELY WORKS BY WOMEN ARTISTS ON PAPER. ARTWORK IS

SELECTED AND DONATIONS ACCEPTED WITH CONSIDERATION TO HOW THEY WILL

BENEFIT THE CAMPUS LEARNING ENVIRONMENT. THE COLLECTION IS ACTIVELY USED

WITHIN THE ARTS CURRICULUM AND ACROSS DISCIPLINES. THE ART DEPARTMENT

OFFERS THREE UNDERGRADUATE MAJORS, INCLUDING STUDIO ART AND ART HISTORY,

TO STUDENTS.

IN ADDITION, STUDENTS WRITE VISUAL ANALYSES OF WORKS AND FIVE TOURS TO THE

PUBLIC. INFORMATIVE WALL TEXT IS RESEARCHED AND WRITTEN BY STUDENTS UNDER

THE GUIDANCE OF FACULTY. WORKS BY AGNES SCOTT STUDENTS ARE EMBRACED INTO

THE OVERALL DISPLAY, INCLUDING A VIBRANT BODY OF SELF PORTRAIT WOODBLOCK

PRINTS THAT ARE SITED IN DORMS AND PUBLIC BUILDINGS. FURTHERMORE, ALONG

WITH A STUDENT SHOW, THE GALLERY PRESENTS TWO EXHIBITS A YEAR WHICH

INCLUDE A ROSTER OF LOCAL, NATIONAL, AND INTERNATIONAL PROFESSIONAL

ARTISTS AND ARE ORGANIZED AROUND AN INCLUSIVE THEME THAT ENGAGES

Part XIII Supplemental Information (continued)

CONTEMPORARY ISSUES, FOCUSING NOT ONLY ON THE WORLD OF ART BUT ALSO ON THE
LARGER GLOBAL CONVERSATION. HAVING SUCH A DYNAMIC TEACHING COLLECTION
BORNE FROM A MISSION OF EDUCATION ENRICHES THE LEARNING ENVIRONMENT AND
CONNECTS THE VIEWER IN A TIMELESS DIALOGUE.

PART V, LINE 4: ENDOWMENT FUNDS ARE USED TO SUPPORT THE GENERAL
OPERATIONS OF THE COLLEGE, TO PROVIDE SCHOLARSHIPS TO THE STUDENTS AND FOR
THE FURTHERANCE OF ACADEMIC PROGRAMS.

PART X, LINE 2: THE COLLEGE IS RECOGNIZED AS AN ORGANIZATION EXEMPT
FROM FEDERAL INCOME TAX UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE
AS AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3), EXCEPT FOR TAXES ON
INCOME FROM ACTIVITIES UNRELATED TO ITS EXEMPT PURPOSE.

THE COLLEGE EVALUATES ITS UNCERTAIN TAX POSITIONS USING THE PROVISIONS OF
FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS
CODIFICATION (ASC) 740 INCOME TAXES. THE COLLEGE FOLLOWS THE CRITERION
THAT AN INDIVIDUAL TAX POSITION HAS TO MEET FOR SOME OR ALL OF THE
BENEFITS OF THAT POSITION TO BE RECOGNIZED IN THE COLLEGE'S FINANCIAL
STATEMENTS. THE COLLEGE DETERMINED THAT THE RELEVANT TAX AUTHORITY WOULD
MORE LIKELY THAN NOT SUSTAIN THE TAX POSITION FOLLOWING AN AUDIT.

THE COLLEGE HAS APPLIED THIS CRITERION TO ALL TAX POSITIONS FOR WHICH THE
STATUTE OF LIMITATIONS REMAINS OPEN. TAX YEARS OPEN TO EXAMINATION BY TAX
AUTHORITIES UNDER THE STATUTE OF LIMITATIONS INCLUDE FISCAL 2010 THROUGH
2013. THE COLLEGE HAS A POLICY TO RECORD INTEREST AND PENALTIES (IF ANY)
RELATED TO INCOME TAX MATTERS IN INCOME TAX EXPENSE. THE COLLEGE HAS
DETERMINED THAT ITS TAX POSITIONS SATISFY THE MORE LIKELY THAN NOT

Part XIII Supplemental Information (continued)

CRITERION AND THAT NO PROVISION FOR INCOME TAXES IS REQUIRED AT JUNE 30, 2013 AND 2012. FOR THE YEARS ENDED JUNE 30, 2013 AND 2012 NO INTEREST AND PENALTIES WERE RECORDED.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

| | |
|---|------------|
| AVERY PROPERTY INCOME | 1,339,840. |
| RENTAL EXPENSE | 234,476. |
| ADJUSTMENTS FOR O/S PLEDGES - PERMANENT DIFFERENCE | 129,287. |
| CHANGE IN SPLIT-INTEREST AGRMS & BENEFICAL INTERESTS IN | |
| PERPETUAL TRUSTS | -98,649. |
| TOTAL TO SCHEDULE D, PART XI, LINE 2D | 1,604,954. |

PART XI, LINE 4B - OTHER ADJUSTMENTS:

| | |
|---------------------------------------|-------------|
| NON-CASH CONTRIBUTIONS | 2,013. |
| STUDENT AID | 17,525,406. |
| TOTAL TO SCHEDULE D, PART XI, LINE 4B | 17,527,419. |

PART XII, LINE 2D - OTHER ADJUSTMENTS:

| | |
|--|------------|
| AVERY PROPERTY EXPENSE | 884,258. |
| RENTAL EXPENSES | 450,286. |
| TOTAL TO SCHEDULE D, PART XII, LINE 2D | 1,334,544. |

PART XII, LINE 4B - OTHER ADJUSTMENTS:

| | |
|-------------|-------------|
| STUDENT AID | 17,525,406. |
|-------------|-------------|

SCHEDULE E
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Schools

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

AGNES SCOTT COLLEGE

Employer identification number

58-0566116

Part I

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 X

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 X

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. 3 X

If you need more space, use Part II

OUR NONDISCRIMINATORY POLICY IS MADE KNOWN TO THE GENERAL

COMMUNITY THROUGH OUR CATALOGS, BROCHURES, ADMISSIONS

APPLICATIONS AND ON OUR WEBSITE.

4 Does the organization maintain the following?

a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a X

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? 4b X

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c X

d Copies of all material used by the organization or on its behalf to solicit contributions? 4d X

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 X

b Admissions policies? 5b X

c Employment of faculty or administrative staff? 5c X

d Scholarships or other financial assistance? 5d X

e Educational policies? 5e X

f Use of facilities? 5f X

g Athletic programs? 5g X

h Other extracurricular activities? 5h X

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 X

b Has the organization's right to such aid ever been revoked or suspended? 6b X

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 X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ.

Schedule E (Form 990 or 990-EZ) (2012)

232061
12-18-12

17470428 759874 81016.2

2012.05080 AGNES SCOTT COLLEGE

81016_21

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.

SCHEDULE E, LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

AGNES SCOTT COLLEGE IS THE RECIPIENT OF THE FOLLOWING FEDERAL AID

PROGRAMS: PELL GRANTS, SUPPLEMENTAL EDUCATION OPPORTUNITY GRANTS, FEDERAL

WORK STUDY GRANTS, NATIONAL INSTITUTE OF HEALTH RESEARCH GRANTS AND

NATIONAL SCIENCE FOUNDATION RESEARCH GRANTS.

Part II Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
 Part III can be duplicated 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 |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| STUDENT SCHOLARSHIPS | 155 | 1,475,308. | 0 | BOOK VALUE | TUITION SCHOLARSHIPS |
| REGULAR GRANTS | 838 | 15,545,685. | 0 | BOOK VALUE | TUITION GRANTS |
| RTC AND SEOG GRANTS | 15 | 25,347. | 0 | BOOK VALUE | STUDY ABROAD GRANTS |
| WORK STUDY | 372 | 479,066. | 0 | BOOK VALUE | WORK STUDY GRANTS |

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

SCHEDULE I, PART I, LINE 2: TO ENSURE THAT THE GRANTS MADE TO INDIVIDUALS

IN THE UNITED STATES, OTHER THAN WORK STUDY GRANTS, ARE USED FOR PROPER

PURPOSES AND ARE NOT OTHERWISE DIVERTED FROM THE INTENDED USE, THE FACULTY

DEPARTMENT THAT HAS BUDGETARY CONTROL OF THE FUNDS SELECTS AND MONITORS THE

RECIPIENTS OF THESE GRANTS. FOR WORK STUDY GRANTS, THE FACULTY OR

ADMINISTRATIVE DEPARTMENT WHERE THE STUDENT'S WORK WAS PERFORMED APPROVES

ALL STUDENT WORK HOURS AND SUBMITS PAPERWORK TO THE PAYROLL OFFICE FOR

PAYMENT TO THE STUDENT.

Part IV. Supplemental Information

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: BALLYKEEL, INC.

(H) PURPOSE OF GRANT OR ASSISTANCE: AGNES SCOTT SOLELY TRANSFERS TO

BALLYKEEL THE FUNDS TO PAY THE ANNUAL LEASE PAYMENT FOR PROPERTY HELD BY

BALLYKEEL, A SUPPORTING ORGANIZATION OF AGNES SCOTT. THE AMOUNT IS

DETERMINED PURSUANT TO A REVIEW OF THE LEASE TERMS.

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, line 23.
► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

AGNES SCOTT COLLEGE

Employer identification number

58-0566116

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

| | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

1b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

| | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

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.

Only section 501(c)(3) and 501(c)(4) organizations 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?

b Any related organization?

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

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

a The organization?

b Any related organization?

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

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

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

Schedule J (Form 990) 2012

232111
12-10-12

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).

Do not list any individuals that are not listed on Form 990, Part VII.

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

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A: THE COLLEGE PROVIDES A RESIDENCE FOR PERSONAL USE TO

THE PRESIDENT AND FIVE OF THE OTHER OFFICERS. THE HOUSING IS EXCLUDED FROM

TAXABLE INCOME UNDER IRS CODE SECTION 119 AND INCLUDED IN COLUMN D IN

SCHEDULE J, PART II.

SCHEDULE K
 (Form 990)
 Department of the Treasury
 Internal Revenue Service

Name of the organization

AGNES SCOTT COLLEGE

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 Part VI.

► Attach to Form 990.

► See separate instructions.

OMB No. 1545-0047
2012
 Open to Public
 Inspection

Name of the organization
 AGNES SCOTT COLLEGE
 Employer identification number
 58-0566116

Part I Bond Issues

| (a) Issuer name | (b) Issuer EIN | (c) CUSIP # | (d) Date issued | (e) Issue price | (f) Description of purpose | (g) Defeased (h) On behalf of issuer | (i) Pooled financing |
|-----------------------------------|----------------|-------------|-----------------|-----------------|----------------------------|--------------------------------------|----------------------|
| PRIVATE COLLEGES AND UNIVERSITIES | | | | | TO REFUND PRIOR ISSUE | | |
| A AUTHORITIES 2004A | 58-1407780 | 74265LRA8 | 07/29/04 | 9,709,094 | 08/17/1993 | x | x |
| PRIVATE COLLEGES AND UNIVERSITIES | | | | | TO REFUND PRIOR ISSUE | | |
| B AUTHORITIES 2004B | 58-1407780 | 74269JAA7 | 07/29/04 | 11,595,000 | 08/17/1993 | x | x |
| PRIVATE COLLEGES AND UNIVERSITIES | | | | | TO REFUND PRIOR ISSUE | | |
| C AUTHORITIES 2009 | 58-1407780 | 74265LWK0 | 07/09/09 | 42,784,759 | 02/02/1999 | x | x |
| PRIVATE COLLEGES AND UNIVERSITIES | | | | | TO REFUND PRIOR ISSUE | | |
| D AUTHORITIES 2011 | 58-1407780 | 742649MA1 | 04/28/11 | 17,830,000 | 02/02/1999 | x | x |

Part II Proceeds

| | A | B | C | D |
|---|------------|-------------|-------------|------------|
| 1 Amount of bonds retired | | | | |
| 2 Amount of bonds legally defeased | | | | |
| 3 Total proceeds of issue | | | | |
| 4 Gross proceeds in reserve funds | | | | |
| 5 Capitalized interest from proceeds | | | | |
| 6 Proceeds in refunding escrows | 9,476,681, | 11,431,145, | 42,217,352, | 17,511,244 |
| 7 Issuance costs from proceeds | 194,182, | 163,855, | 567,407, | 318,756. |
| 8 Credit enhancement from proceeds | | | | |
| 9 Working capital expenditures from proceeds | | | | |
| 10 Capital expenditures from proceeds | | | | |
| 11 Other spent proceeds | 38,231, | | | |
| 12 Other unspent proceeds | | | | |
| 13 Year of substantial completion | 2000 | | | |
| 14 Were the bonds issued as part of a current refunding issue? | Yes | No | Yes | No |
| 15 Were the bonds issued as part of an advance refunding issue? | x | x | x | x |
| 16 Has the final allocation of proceeds been made? | x | x | x | x |
| 17 Does the organization maintain adequate books and records to support the final allocation of proceeds? | x | x | x | x |

Part III Private Business Use

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

| | A | B | C | D |
|--|---------------------------------|--------------------------------|---------------------------------|--------------------------------|
| 3a Are there any management or service contracts that may result in private business use of bond-financed property? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 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? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 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 | ▲ 0.00 | % | 0.00 | % |
| 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 | ▲ 0.00 | % | 0.00 | % |
| 6 Total of lines 4 and 5 | | | | |
| 7 Does the bond issue meet the private security or payment test? | <input type="checkbox"/> | | | |
| 8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued? | <input type="checkbox"/> | | <input type="checkbox"/> | <input type="checkbox"/> |
| b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of | | % | % | % |
| c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2? | | | | |
| 9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Part IV Arbitrage | | | | |
| | A | B | C | D |
| 1 Has the issuer filed Form 8038-T? | Yes <input type="checkbox"/> | No <input type="checkbox"/> | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2 If "No" to line 1, did the following apply? | | | | |
| a Rebate not due yet? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b Exception to rebate? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c No rebate due? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed | | | | |
| 3 Is the bond issue a variable rate issue? | | | | |
| 4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? | | | | |
| b Name of provider | | | | |
| c Term of hedge | | | | |
| d Was the hedge superintegrated? | | | | |
| e Was the hedge terminated? | | | | |

| | A | B | C | D |
|--|----|-----|----|-----|
| Yes | No | Yes | No | Yes |
| 5a Were gross proceeds invested in a guaranteed investment contract (GIC)? | | | | |
| b Name of provider | | | | |
| c Term of GIC | | | | |
| d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? | x | | | |
| 6 Were any gross proceeds invested beyond an available temporary period? | | x | | |
| 7 Has the organization established written procedures to monitor the requirements of section 148? | x | x | x | x |

Part V Procedures To Undertake Corrective Action

| | A | B | C | D |
|--|----|-----|----|-----|
| Yes | No | Yes | No | Yes |
| Has 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? | x | x | x | x |

Part VI Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE K, PART 1, BOND ISSUE:

(A) ISSUER NAME: PRIVATE COLLEGES AND UNIVERSITIES AUTHORITIES 2004A

(F) DESCRIPTION OF PURPOSE: TO REFUND PRIOR ISSUE 08/17/1993

(A) ISSUER NAME: PRIVATE COLLEGES AND UNIVERSITIES AUTHORITIES 2004B

(F) DESCRIPTION OF PURPOSE: TO REFUND PRIOR ISSUE 08/17/1993

(A) ISSUER NAME: PRIVATE COLLEGES AND UNIVERSITIES AUTHORITIES 2009

(F) DESCRIPTION OF PURPOSE: TO REFUND PRIOR ISSUE 02/02/1999

(A) ISSUER NAME: PRIVATE COLLEGES AND UNIVERSITIES AUTHORITIES 2011

(F) DESCRIPTION OF PURPOSE: TO REFUND PRIOR ISSUE 02/02/1999

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

AGNES SCOTT COLLEGE

Employer identification number

58-0566116

Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|--|-------------------------------|---|--|--|
| 1 Art - Works of art | | | | |
| 2 Art - Historical treasures | | | | |
| 3 Art - Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities - Publicly traded | X | 22 | 820,775. | FAIR MARKET VALUE |
| 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 ► (FOOD) | X | 1 | 5,000. | COST |
| 26 Other ► (BOARD MEETING) | X | 2 | 2,646. | COST |
| 27 Other ► (COMMUNITY DAY) | X | 1 | 1,140. | 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 | | |

| | 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? | | X |
| 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? | X | |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | X | |
| b If "Yes," describe in Part II. | | |
| 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | |

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

Schedule M (Form 990) (2012)

232141
12-20-12

17470428 759874 81016.2

2012.05080 AGNES SCOTT COLLEGE

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Part II.

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B: THE COLLEGE DOES HIRE AND USE THIRD PARTIES TO

SELL AND PROCESS NONCASH CONTRIBUTIONS THAT ARE SECURITIES, REAL

ESTATE, OR VEHICLES. FOR SECURITIES, THE COLLEGE USES OUR BROKER TO

SELL SAME DAY AT FAIR MARKET VALUE.

HOWEVER THE COLLEGE DOES NOT HIRE OR USE THIRD PARTIES TO SOLICIT

NONCASH CONTRIBUTIONS. ONLY EMPLOYEES OF THE COLLEGE OR STUDENT

VOLUNTEERS SOLICIT DONATIONS.

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 990-EZ or to provide any additional information.
► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

AGNES SCOTT COLLEGE

Employer identification number
58-0566116

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND ENGAGE THE INTELLECTUAL AND SOCIAL CHALLENGES OF THEIR TIMES.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

AUXILIARY ENTERPRISES, RESEARCH GRANTS, COLLEGE EVENTS AND

MISCELLANEOUS OTHER PROGRAM SERVICES.

EXPENSES \$ 7,230,852. INCLUDING GRANTS OF \$ 86,226. REVENUE \$ 8,552,486

FORM 990, PART VI, SECTION B, LINE 11: THE VICE PRESIDENT OF BUSINESS &

FINANCE PERFORMS A DETAILED REVIEW OF THE FORM 990 BEFORE FILING THE

RETURN. THE PRESIDENT OF THE COLLEGE, THE CHAIR OF THE COLLEGE'S BOARD OF

TRUSTEES, AND THE CHAIR OF THE FINANCE COMMITTEE (STANDING COMMITTEE OF THE

BOARD) WILL RECEIVE A COPY OF THIS RETURN FOR REVIEW BEFORE FILING. THE

OTHER MEMBERS OF THE BOARD WILL RECEIVE A COPY OF THE FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C: ON A YEARLY BASIS, EVERY COLLEGE

OFFICER AND EACH MEMBER OF THE COLLEGE'S BOARD OF TRUSTEES IS REQUIRED TO

SIGN THE POLICY AND DISCLOSE WHETHER THEY HAVE ANY CONFLICTS. THE SECRETARY

OF THE BOARD OF TRUSTEES OVERSEES THE RECEIPT OF THESE POLICIES AND REPORTS

TO THE CHAIRMAN OF THE BOARD OF TRUSTEES IF ANY CONFLICT IS NOTED.

FORM 990, PART VI, SECTION B, LINE 15: THE COMPENSATION OF THE PRESIDENT

OF THE COLLEGE IS REVIEWED AND APPROVED BY THE BOARD OF TRUSTEES. FOR ITS

REVIEW AND DISCUSSION, THE BOARD USES COMPARABLE COMPENSATION INFORMATION.

CONTEMPORANEOUS DOCUMENTATION OF ITS DISCUSSIONS IS RECORDED IN THE MINUTES

OF THE BOARD OF TRUSTEES. THE COMPENSATION FOR ALL KEY EMPLOYEES IS

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
232211
01-04-13

Schedule O (Form 990 or 990-EZ) (2012)

Name of the organization

AGNES SCOTT COLLEGE

Employer identification number

58-0566116

NEGOTIATED BY THE PRESIDENT OF THE COLLEGE AND HUMAN RESOURCES AND IS

APPROVED BY THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION C, LINE 19: THE COLLEGE MAKES ITS ANNUAL

AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AND

APPROVAL OF AN OFFICER. THE COLLEGE DOES NOT MAKE ITS GOVERNING DOCUMENTS

AND CONFLICT OF INTEREST POLICY AVAILABLE TO PUBLIC INSPECTION.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

ADJUSTMENTS FOR O/S PLEDGES - PERMANENT DIFFERENCE 129,287.

RENTAL EXPENSES -215,806.

CHANGE IN SPLIT INTEREST AGREEMENTS -98,652.

POSTRETIREMENT BENEFIT CHANGES 2,420,125.

NON CASH CONTRIBUTIONS -2,014.

TOTAL TO FORM 990, PART XI, LINE 9 2,232,940.

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

Part III Identification of Related Organizations Taxable as a Partnership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to 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 | (i) Section 512(b)(13) controlled entity? |
|--|-------------------------|---|-------------------------------------|--|---------------------------------|--|--------------------------------|---|
| Yes | No | | | | | | | |
| | | | | | | | | |
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Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization 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 or (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- f Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- l Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o Sharing of paid employees with related organization(s)
- p Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

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-s) | (c) Amount involved | (d) Method of determining amount involved |
|-----------------------------------|-------------------------------|------------------------|--|
| (1) BALLYKEEL, INC. | B | 86,226 | CASH CONTRIBUTED |
| (2) AVERY PROPERTIES, INC. | S | 767,670 | CASH TRANSFERRED |
| (3) AVERY PROPERTIES, INC. | D | 2,596,846 | AMOUNT BORROWED |
| (4) | | | |
| (5) | | | |
| (6) | | | |

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to 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

Part VII Supplemental Information

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

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

| | | |
|---|---|---|
| Type or print File by the due date for filing your return. See instructions. | Name of exempt organization or other filer, see instructions AGNES SCOTT COLLEGE | Employer identification number (EIN) or 58-0566116 |
| | Number, street, and room or suite no. If a P.O. box, see instructions. 141 EAST COLLEGE AVENUE | Social security number (SSN) |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. DECATUR, GA 30030 | |

Enter the Return code for the return that this application is for (file a separate application for each return)

0 1

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|--------------------|-------------|
| Form 990 or Form 990-EZ | 01 | | |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

LAI CHAN, CONTROLLER

- The books are in the care of ► 141 EAST COLLEGE AVENUE - DECATUR, GA 30030
Telephone No. ► (404) 471-6308 FAX No. ► _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until MAY 15, 2014

5 For calendar year _____, or other tax year beginning JUL 1, 2012, and ending JUN 30, 2013

6 If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

7 State in detail why you need the extension _____

ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A
COMPLETE AND ACCURATE RETURN

| | | | |
|---|----|----|----|
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 8a | \$ | 0. |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. | 8b | \$ | 0. |
| c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 8c | \$ | 0. |

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ►

Title ► CPA

Date ►

Form 8868 (Rev. 1-2013)

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2012.05080 AGNES SCOTT COLLEGE

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