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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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the 2		2013, and ending	05-31-2014			
	eck if ap	Siena College			D Emplo	yer ident	tification number
_	Iress cha	Doing Business As			14-1	338498	
Naı	me chan	e					
Init	ial returr	Number and street (or P O box if mail is not delivered to	street address) Ro	om/suite	E Teleph	one numb	er
Ter	mınated	Route 9 Suite			(518)	783-23	300
☐ Am	ended re	urn City or town, state or province, country, and ZIP or foreig Loudonville, NY 12211	n postal code		(=== /		
☐ App	olication	ending			G Gross i	eceipts \$	153,780,534
		F Name and address of principal officer		H(a)	s this a group	return f	or
		paul stec route 9			subordinates?		┌ Yes ┌ No
		loudonville, NY 12211		H(b) /	Are all subord	ınates	┌ Yes ┌ No
		atation Gray Van Gray Van Gray Van Gray			ncluded?	- 1 - 4 /	· · · · · · · · · · · · · · · · ·
<u>I</u> 1a	x-exemp	status	(a)(1) or 527		ir "No," attacr	ialist (see instructions)
J W	ebsite:	www.siena.edu		H(c)	Group exempt	ion num	ber ►
K Forr	n of orga	nization 🔽 Corporation 🦳 Trust 🦳 Association 🦳 Other 🕨		L Year	of formation 19)37 M S	state of legal domicile NY
Pa	rt I	Summary					
		efly describe the organization's mission or most signific	ant activities				
	<u> </u>	EASE SEE SCHEDULE O					
ည်	-						
至							
Governance	2 C	eck this box দ if the organization discontinued its ope	erations or dispo	sed of more th	nan 25% of its	net ass	ets
						1 - 1	
Activities &	l	ımber of votıng members of the governing body (Part VI,				3	33
ĕ	l	ımber of ındependent votıng members of the governıng b tal number of ındıvıduals employed ın calendar year 201				5	32
Cţi.	l	tal number of individuals employed in calendar year 201				6	2,598
đ	l	tal unrelated business revenue from Part VIII, column (7a	326,695
		et unrelated business taxable income from Form 990-T,				7b	89,466
					Prior Year	1 75 1	Current Year
	8	Contributions and grants (Part VIII, line 1h)		💳	8,730,	734	12,698,491
≘	9	Program service revenue (Part VIII, line 2g)		—	124,374,		128,732,776
Revenue	10	stment income (Part VIII, column (A), lines 3, 4, and 7d)			5,513,5		7,516,035
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9	c, 10c, and 11e)	770,	182	199,673
	12	Total revenue—add lines 8 through 11 (must equal Part), line	139,389,	201	149,146,975
	13	12)			39,628,		45,482,107
	14	Benefits paid to or for members (Part IX, column (A), lin	·		33,020,	0	45,402,107
	15	Salaries, other compensation, employee benefits (Part I	•			-	
\$		5-10)	, , , , , ,		60,115,	372	61,936,252
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 1	.1e)	· ·		0	0
ਡੋ	b	Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 2,639,12$		_			
	17	Other expenses (Part IX, column (A), lines 11a-11d, 1:			36,860,		37,604,458
	18	Total expenses Add lines 13–17 (must equal Part IX, c		· ·	136,605,		145,022,817
	19	Revenue less expenses Subtract line 18 from line 12			2,784,		4,124,158
Net Assets or Fund Balances				веді	nning of Curre Year	int	End of Year
55 el	20	Total assets (Part X, line 16)			295,412,	921	295,968,430
정말	21	Total liabilities (Part X, line 26)			94,780,	446	81,983,910
	22	Net assets or fund balances Subtract line 21 from line 2	20		200,632,	475	213,984,520
Pai	t II	Signature Block					
my kı	nowledg	ies of perjury, I declare that I have examined this return e and belief, it is true, correct, and complete Declaration any knowledge					
		*****			2015-04-08		
Sign		Signature of officer			Date		
Here		PAUL STEC vice president					
		Type or print name and title					

Preparer's signature

Firm's address > 515 Broadway 4th Floor

Albany, NY 122072974

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

Print/Type preparer's name

Firm's name 🕨 KPMG LLP

Koen Vredeveld

Paid

Preparer

Use Only

Date 2015-04-08 Check If self-employed

Phone no (518) 783-2300

Firm's EIN 🕨

✓ Yes ☐ No

PTIN P00743270

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
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^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \blacksquare	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		 Yes	.) No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 414		163	140
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
a	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			
•	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	Yes	
3	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
3	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
)	If "Yes," enter the name of the foreign country 🏴 UK			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
3	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
•	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	, , , , , , , , , , , , , , , , , , , ,	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
)	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
ı	If "Yes," indicate the number of Forms 8282 filed during the year			143
	74 1 1 1 1 1 1 1 1 1			
:	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N c
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
3	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
•	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
.	Note. See the instructions for additional information the organization must report on Schedule O			
	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			
	Enter the amount of reserves on hand	 		_
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14h	1	

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

		Yes	No
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	•		
Enter the number of voting members included in line 1a, above, who are independent			
Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		N o
Did the organization become aware during the year of a significant diversion of the organization's assets?	5		N o
	6		No
Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7a		No
Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,	7b		No
Did the organization contemporaneously document the meetings held or written actions undertaken during the			
	8a	Yes	
	8b	Yes	
Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			No.
		ie Cod	
etter bir ettere (Time Section Brequeste innormation about poincies not required by the Internal No		Yes	No
Did the construction have been been broaden as of the base?	$\overline{}$		
Did the organization have local chapters, branches, or amiliates?	10a		No
Did the organization have local chapters, branches, or affiliates?	10a 10b		No
	10b	Yes	No
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		No
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If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes	
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If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	
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If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a	Yes Yes Yes Yes	No
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No
	Enter the number of voting members included in line 1a, above, who are independent	Enter the number of voting members included in line 1a, above, who are independent	Enter the number of voting members included in line 1a, above, who are independent

Own website Another's website Vupon request 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►PAUL STEC SIENA COLLEGE LOUDONVILLE, NY 12211 (578) 783-2300

Form 990	(2013	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

(A) Name and Title		(A) Name and Title A verage hours per week (list any hours for related				oox, an c	heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	c	(F) Estima mount of compens from t ganizati	other ation he
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			C	relate organiza	
											-		
											-		
1b	Sub-Total		· ·					* *					
c d	Total from continuation sheet Total (add lines 1b and 1c) .			` .	٠.	٠.		-	2,573,307	()		490,484
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	ho received more th	an	•		
												Yes	No No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highest compen	sated employee	3	Yes	
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1 services rendered to the organ									or individual for	5	165	No
	ection B. Independent Co	ntractors											
1	Complete this table for your fix	/e highest comp											
	compensation from the organiz	zation Report co	ompens	ation	τort	tne c	aienda	ırye	ar enging with or wi	thin the organization (B)	n's t	ax year (C	<u> </u>

SODEXO, 515 LOUDON RD LOUDONVILLE NY 12211 FOOD SERVICES 8 ST PETERS HOSPITAL, 315 S MANNING BLVD ALBANY NY 12208 HEALTH SERVICES) sation
ST PETERS HOSPITAL, 315 S MANNING BLVD ALBANY NY 12208 HEALTH SERVICES	,245,072
	358,396
KPMG, 515 Broadway ALBANY NY 12207 Auditing Tax	200,635
Creative Communications Assoc, 16 Sage Estate ALBANY NY 12208 Web Site Consulting	222,616
Joseph Kujawski, 314 Trinacria Ct SCHENECTADY NY 12303 Scientific Consultin	219,129

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

Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f g
Program Service Revenue and	b c d e f g 3
venue	3 4 5 6 6 6 b c d d 7 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Other Re	b c 92
	11a

		f Revenue ule O contains a respo	onse or note to any li	ne in this Part VIII (A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue
					exempt function revenue	business revenue	excluded from tax under sections 512-514
1a	Federated cam	paigns 1a	·				
ь	Membership du	es 11	·				
С	Fundraising eve	ents 1 0	176,737				
d	Related organiz	rations 10					
e	Government grant	s (contributions) 16	3,528,578				
f	All other contribution	ons, gifts, grants, and 1 1 ot included above	8,993,176				
g		ons included in lines	1,407,360		i		
h	1a-1f \$ Total. Add lines	: 1a-1f		12,698,491			
	Total: Add lille:		· · · •	,			
3-	TUTTION FEEC		Business Code	22 222 557	02 200 667		
2a	TUITION FEES			92,208,667	92,208,667		
b	LABORATORY FEES	_		30,272,033	30,272,033		
C		_		1,219,877	1,219,877		
d	STUDENT ACTIVITY			718,750	718,750		
e	OTHER STUDENT F			910,102	910,102		
f	All other progra	am service revenue		3,403,347	3,403,347		
g	Total. Add lines	s 2a – 2f		128,732,776			
3	and other simil	ome (including divide ar amounts) stment of tax-exempt bond		1,490,467		44,851	1,445,61
5			· · · · · · · · · · · · · · · · · · ·	0			
	Royalties :	(ı) Real	(II) Personal				
6a	Gross rents	95,542	(,				
ь	Less rental	178,525					
c	expenses Rental income	-82,983	0				
d	or (loss)	me or (loss)	<u> </u>	-82,983			-82,98
"	Tractical med	(ı) Securities	(II) O ther	,			,
7a	Gross amount from sales of assets other	10,272,215	(, 2 32.				
ь	than inventory Less cost or other basis and	4,246,647					
c	sales expenses Gain or (loss)	6,025,568					
d	Net gain or (los	s)		6,025,568			6,025,56
8a	Gross income f events (not inc \$ 176	_					
L	1000 4	noncos L	132,092				
b c		penses t (loss) from fundraising		812			
9a		rom gaming activities		V12			
	See Part IV, lin						
ь	Less direct ex	penses Ł					
С	Net income or ((loss) from gaming act	ivities	0			
10a	Gross sales of				Ţ		
	returns and allo	owances . a	102,787				
ь	Less cost of a	oods sold b	77,107				
		(loss) from sales of inv		25,680		25,680	
	Miscellaneous	s Revenue	Business Code				
11a	ADVERTISING	S REV	541800	256,164		256,164	
ь							
С							
d	All other reven	ue					
e	Total. Add lines	s 11a-11d	🕨	256,164			
12	Total revenue.	See Instructions .		149,146,975	128,732,776	326,695	7,388,20

Form 990 (2013) Page **10** 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 or note to any line in this Part IX (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 44,205,951 44,205,951 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 1,276,156 1,276,156 Benefits paid to or for members Compensation of current officers, directors, trustees, and 1,087,269 604,169 252,415 230,685 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 44,225,285 36,904,520 5,892,704 1,428,061 Pension plan accruals and contributions (include section 401(k) 3,560,355 2,947,180 482,842 and 403(b) employer contributions) 130.333 9,766,150 8,084,195 Other employee benefits 1,324,448 357,507 10 3,297,193 2,729,340 447,153 120,700 11 Fees for services (non-employees) 326,420 326,420 Management 87,738 87,738 Legal 219,357 219,357 413 413 Lobbying Professional fundraising services See Part IV, line 17 0 Investment management fees 114,101 114,101 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 2,256,288 188,035 56,828 Schedule O) 2.011.425 Advertising and promotion . . 145,873 77,457 68,211 12 205 13 Office expenses . . . 0 152,200 14 Information technology . 152,200 15 0 Royalties . 2,190,885 2,190,885 16 Occupancy **17** 2,086,740 1,951,887 75,218 59,635 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 0 19 Conferences, conventions, and meetings . 20 Interest 2,510,572 2,510,572 Payments to affiliates 21 O 7,117,417 22 Depreciation, depletion, and amortization . 7,117,417 23 838,664 165,748 672,916 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 ENTERTAINMENT 33,137 135,468 640,637 472,032 PERIODICALS 264,191 263,499 692 C FOOD 7,103,559 7,103,559 d SUPPLIES 4,408,559 3,598,944 832,859 -23,244 e All other expenses 7,140,844 5,858,910 1,139,678 142,256 Total functional expenses. Add lines 1 through 24e 25 145,022,817 130,073,846 12,309,845 2,639,126 Joint costs. Complete this line only if the organization 26

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check

here ► [if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

1 Cash—non-interest-bearing 11,830,424 1 6,194,006 2 Savings and temporary cash investments 11,830,424 1 6,194,006 3 Pledges and grants receivable, net 5,980,000 3 9,401,116 4 Accounts receivable, net 3,372,572 4 3,194,200 5 Leans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule 0 5 0 6 Leans and other receivables from other disqualified persons (as defined under section 4958(f)(11), persons described in section 4958(f)(21), bend contributing employees and sparsoring organizations of section 5015(f)(3) voluntary employees' beneficiary organizations (see instructions) 20 (g)(3)	Par	't X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			. .
2 Savings and temporary cash investments						
3 Pledges and grants receivable, net		1	Cash-non-interest-bearing	11,830,424	1	6,184,065
4 Accounts receivable, net 3,194,500		2	Savings and temporary cash investments	108,614	2	92,975
100 100		3	Pledges and grants receivable, net	8,568,939	3	9,401,116
### Part I of Schedule L. Loans and other receivables from other disqualified persons (as defined under section 4958(r)(31), persons described in section 4958(r)(3)(8), and contributing employers and sponsoring organizations of section 511c(9) voluntary employers beneficiary organizations (see instructions) Complete Part II of Schedule L		4	Accounts receivable, net	3,572,672	4	3,194,520
1		5	employees, and highest compensated employees Complete Part II of	0	-	0
9 10 10 10 10 10 10 10	s	6	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		5	
9 10 10 10 10 10 10 10	ě					
9 10 10 10 10 10 10 10	8	7	Notes and loans receivable, net	2,908,331	7	2,724,702
10s		8	Inventories for sale or use	0	8	0
Complete Part VI of Schedule D 10a 211,001,777 118,023,590 10c 121,770,314 11 171,073,314 11 171,073,314 171,073,314 172,073,314		9	Prepaid expenses and deferred charges	5,453,871	9	3,760,203
11 Investments—publicly traded securities 37,270,781 11 36,892,048 12 Investments—other securities See Part IV, line 11 102,597,772 12 109,525,288 13 Investments—program-related See Part IV, line 11 0 13 0 14 Intangible assets 0 14 0 15 Other assets See Part IV, line 11 4,577,927 15 2,423,198 16 Total assets. Add lines 1 through 15 (must equal line 34) 295,412,921 16 295,688,430 17 Accounts payable and accrued expenses 12,750,532 17 12,175,423 18 Grants payable 0 18 0 0 18 0 19 Deferred revenue 3,799,588 19 3,074,207 20 Tax-exempt bond liabilities 3,799,588 19 3,074,207 21 Escrow or custodial account liability Complete Part IV of Schedule D 0 21 0 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 0 22 0 23 Secured mortpages and notes payable to unrelated third parties 0 23 0 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities inclincluding federal income tax, payables to related third parties 0 24 0 26 Total liabilities. Add lines 17 through 25 94,780,446 26 81,983,910 27 Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34 28 Temporanily restricted net assets 124,401,392 27 125,011,597 29 Permanently restricted net assets 8,190,794 28 9,419,717 29 Permanently restricted net assets 124,401,392 27 125,011,597 30 Capital stock or trust principal, or current funds 124,401,392 27 125,011,597 31 Padd-in or capit		10a				
100,505,208 100,505,208		ь	Less accumulated depreciation 10b 89,831,463	118,523,590	10 c	121,770,314
13 Investments—program-related See Part IV, line 11 0 13 0 0 14 10 0 15 15 0 0 14 0 0 15 0 0 14 0 0 0 15 0 0 15 0 0 15 0 0 15 0 0 16 0 0 16 0 0 16 0 0 16 0 0 16 0 0 0 16 0 0 0 0 0 0 0 0 0		11	Investments—publicly traded securities	37,270,781	11	36,892,049
14		12	Investments—other securities See Part IV, line 11	102,597,772	12	109,525,288
15 Other assets See Part IV, line 11 4,577,927 15 2,423,198 16 Total assets. Add lines 1 through 15 (must equal line 34) 295,412,921 16 295,988,430 17 Accounts payable and accrued expenses 12,790,532 17 12,157,423 18 Grants payable 0 18 0 0 18 0 19 Deferred revenue 3,799,588 19 3,074,207 20 Tax-exempt bond liabilities 54,392,342 20 41,964,844 21 Escrow or custodial account liability Complete Part IV of Schedule D 0 21 0 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 0 22 0 23 Secured mortgages and notes payable to unrelated third parties 0 24 0 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties 0 24, 80, 40, 40 26 Total liabilities. Add lines 17 through 25 94,780,448 26 81,983,910 27 Unrestricted net assets 124,401,392 27 125,011,597 28 Temporarily restricted net assets 81,90,794 28 9,419,717 29 Permanently restricted net assets 80,004,289 29 79,553,206 29 79,553,206 79,553,206 20 Capital stock or trust principal, or current funds 30 10 30 Capital stock or trust principal, or current funds 31 8 8 8 8 9 9 9 9 9 9		13	Investments—program-related See Part IV, line 11	0	13	0
16 Total assets. Add lines 1 through 15 (must equal line 34) 295,412,921 16 295,968,430 17		14	Intangible assets	0	14	0
17		15	Other assets See Part IV, line 11	4,577,927	15	2,423,198
18 Grants payable 0 18 0 0 18 0 0 19 Deferred revenue 3,799,588 19 3,074,207 20 Tax-exempt bond liabilities 54,392,342 20 41,964,844 21 Escrow or custodial account liability Complete Part IV of Schedule D 0 21 0 0 22 0 0 0 0 0 0		16	Total assets. Add lines 1 through 15 (must equal line 34)	295,412,921	16	295,968,430
19 Deferred revenue 3,799,588 19 3,074,207		17	Accounts payable and accrued expenses	12,750,532	17	12,157,423
Tax-exempt bond liabilities		18	Grants payable	0	18	0
Secured mortgages and loans payable to unrelated third parties Description		19	Deferred revenue	3,799,588	19	3,074,207
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		20	Tax-exempt bond liabilities	54,392,342	20	41,964,844
24 Unsecured notes and loans payable to unrelated third parties	Ø	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
24 Unsecured notes and loans payable to unrelated third parties	ilitie	22				
24 Unsecured notes and loans payable to unrelated third parties	æ		persons Complete Part II of Schedule L	0	22	0
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		23	Secured mortgages and notes payable to unrelated third parties	0	23	0
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties	0	24	0
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete Part X of Schedule			
Organizations that follow SFAS 117 (ASC 958), check here F and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets				· ' '		
lines 27 through 29, and lines 33 and 34.		26		94,780,446	26	81,983,910
30 Capital stock or trust principal, or current funds	ce s					
30 Capital stock or trust principal, or current funds	an	27	Unrestricted net assets	124,401,392	27	125,011,597
30 Capital stock or trust principal, or current funds	<u>е</u>	28	Temporarily restricted net assets	8,190,794	28	9,419,717
30 Capital stock or trust principal, or current funds	돧	29	Permanently restricted net assets	68,040,289	29	79,553,206
30 Capital stock or trust principal, or current funds	r Fui		•			
31 Paid-in or capital surplus, or land, building or equipment fund	0	30	•		30	
33 Total net assets or fund balances	Şet	31	Paid-in or capital surplus, or land, building or equipment fund		31	
33 Total net assets or fund balances	AS	32	Retained earnings, endowment, accumulated income, or other funds		32	
34 Total liabilities and net assets/fund balances	ಹ	33	Total net assets or fund balances	200,632,475	33	213,984,520
	2	34	Total liabilities and net assets/fund balances	295,412,921	34	295,968,430

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				দ
1	Total revenue (must equal Part VIII, column (A), line 12)	1		149 1	.46,975
2	Total expenses (must equal Part IX, column (A), line 25)	2)22,817
3	Revenue less expenses Subtract line 2 from line 1	3			.24,158
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			32,475
5	Net unrealized gains (losses) on investments	5			068,791
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1	.59,096
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		213,9	84,520
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	۱		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	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?	e	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: Software Version:

EIN: 14-1338498 **Name:** Siena College

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

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers, ependent Coi	Direct ntracto	ors, ors	Tru	ste	es, k	(ey	Employees, High	nest	
(A) Name and Title	(B) Average hours per week (list any hours for related	(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		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-1136/	2/10/9/11/13C)	related organizations
Ronald E Bjorklund	1 0					_				
TRUSTEE	0 0	Х								
J David Brown	1 0	x								
TRUSTEE Daniel Din Cahill	0 0	<u> </u>								
TRUSTEE	0 0	X								
Robert F Campbell	3 0	×								
TRUSTEE Judy Capano Michaelson	5 0									
TRUSTEE	0 0	×								
Br F Edward Coughlin ofm	5 0	х								
TRUSTEE	0 0									
Robert M Curley	5 0	×								
TRUSTEE Susan Law Dake	5 0									
TRUSTEE	0 0	Х								
Virginia L Darrow	1 0	х								
TRUSTEE Howard S Foote	0 0	<u> </u>								
	20 0	×								
TRUSTEE Sharı Golub-Schillinger	0 0									
TRUSTEE	0 0	X								
Sr Violet T Grennan	4 0	×								
TRUSTEE Robert L Guido	0 0									
TRUSTEE	0 0	X								
Rev Kenneth R Himes OFM	2 0	<u> </u>								
TRUSTEE	0 0	Х								
Pamela McCarthy	3 0	×								
TRUSTEE Robert J McCormick	9 0									
TRUSTEE	0 0	X								
John MacMahon	2 0									
TRUSTEE	0 0	Х								
Very Rev Kevın J Mullen OFM	3 0	x		х						
TRUSTEE/PRESIDENT John F Murray	0 0									
TRUSTEE	0 0	X								
John J Nigro	2 0	×								
TRUSTEE	0 0	^_								
Very Rev John F O Connor OFM	1 0	x								
TRUSTEE Kenneth M Raymond Jr	3 0									
TRUSTEE	0 0	Х								
Mark S Rose	3 0	×								
TRUSTEE Pow James P Souther OFM	0 0	<u> </u>	<u> </u>							
Rev James P Scullion OFM	1 0	×								
TRUSTEE David M Stack	0 0	-								
TRUSTEE	0 0	Х								

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount more than one box, unless hours per compensation compensation of other person is both an officer week (list from the from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employs O∰ | [0] Former Individual trustee or director organizations Institutional Trustee related below organizations employee dotted line) t compensated ee Christine L Standish 4 0 Χ TRUSTEE 0 0 Nımmı M Trapasso MD 1 0 Х 0 0 Sonya S VanBortel 4 0 Χ 0 0 Benjamın Velazquez Jr 10 Χ TRUSTEE 0 0 Dennis L Winger 1 0 Χ **TRUSTEE** 0 0 Thomas Baldwin 10 Χ TRUSTEE 0 0 Douglas Hickey 1 0 Χ 0 0 LINDA RICHARDSON 40 0 Χ 196,422 27,466 VICE PRESIDENT 0 0 PAUL STEC 40 0 195,001 Χ 0 54,737 VICE PRESIDENT 0 0 DAVID SMITH 40 0 Χ 186,324 71,334 VP DEVELOPMENT & EXTERNAL 0 0 MARYELLEN GILROY 40 0 Χ 148,855 21,998 VICE PRESIDENT 0 0 **EDWARD JONES** 40 0 Χ 140,620 33,800 VP ENROLLMENT MANAGEMENT 0 0 ALLAN WEATHERWAX 40 0 Χ 153,445 36,778 DEAN SCIENCE 0.0 JOHN D'ARGENIO 40 0 Х 133,819 22,347 VP & ATHLETIC DIRECTOR 0 0 FREDERICK DECASPERIS 40 0 Χ 126,400 28,150 INTERIM DEAN, BUSINESS 0 0 JAMES PATSOS 40 0 Х 274,894 23,486 HEAD COACH BASKETBALL 0 0 MARK BERMAN 40 0 147,310 Χ 34,906 0 0 ALOYSIA JACQUES 40 0 Χ 144,469 7,023 HEAD COACH BASKETBALL 0 0 JAMES HARRISON 40 0 141,555 Х 61,876 **PROFESSOR** 0 0 JAMES NOLAN 40 0 Χ 138,462 27,495 **PROFESSOR** 0 0 MICHAEL BUONAGURO 40 0 300,261 11,413 FORMER HEAD COACH BASKETBALL 0 0 JEFFREY MELLO 40 0 Х 145,470 27,675

0 0

FORMER DEAN BUSINESS

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493103004155

OMP No 1545 004

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

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

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

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of	fthe	organization
Gena Col	leae	

Employer identification number

14-1338498

S) Nan suppo ganiz	check to Since A following (i) A per and (III) (ii) A for a	this box August 17, 2 ag persons? erson who di) below, the amily memb 35% contro	received a written de 1006, has the organi rectly or indirectly of governing body of the er of a person describled entity of a person ginformation about (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	zation accep ontrols, eith e supported bed in (i) abo n described	oted any gifuer alone or organization (i) or (ii) ed organization in ted in erning	t or contributi together with on? above?	on from any persons de notify zation if your	of the	the ion in anized	11g(i) 11g(ii) 11g(iii)	Yes	No No No nount of etary port	
g h	uppo	check to Since A following (i) A per and (iii) A for (iii) A for Provide the of the following the following for the foll	this box August 17, 2 ag persons? erson who di) below, the amily memb 35% contro	rectly or indirectly or governing body of the er of a person describled entity of a person g information about (iii) Type of organization (described on lines 1- 9 above or IRC section (see	zation acception to accept the supported the supported the supported (iv) Is to organizati col (i) listo your gove docume	oted any git ner alone or organization ove? In (I) or (II) ed organization the ion in ted in erning	t or contribution? above? tion(s) (v) Did you the organion col (i) o suppor	on from any persons de notify zation if your t?	(vi) Is to organizate col (i) organizate un the U	the ion in anized S ?	11g(i) 11g(ii) 11g(iii)	Yes	No No No No	
g h	uppo	check to Since A following (i) A per and (iii) A for (iii) A for Provide the of the following the following for the foll	this box August 17, 2 ag persons? erson who di) below, the amily memb 35% contro	rectly or indirectly or governing body of the er of a person describled entity of a person g information about	zation acception trois, eith e supported bed in (i) about the supported the supported (iv) Is to organizati	oted any gifur alone or organization ove? In (i) or (ii) ed organization in	tor contribution? above? tion(s) (v) Did you the organic	on from any persons de persons de persons i notify zation	of the escribed in (ii) (vi) Is to organizati	the ion in	11g(i) 11g(ii) 11g(iii)	Yes	No No No No	
g		check to Since A following (i) A per and (iii) A fa (iii) A fa (iii) A fa	this box August 17, 2 ag persons? erson who di) below, the amily memb 35% contro	rectly or indirectly or governing body of th er of a person descri lled entity of a perso	zation accep ontrols, eith e supported bed in (i) abo n described	oted any git ier alone or organizatio ove? in (i) or (ii)	t or contributi together with on? above?	on from any	of the		11g(i) 11g(ii)	Yes	No No	
		check to Since A following (i) A per and (iii) A fa	this box August 17, 2 ag persons? erson who di) below, the amily memb	006, has the organi rectly or indirectly c governing body of th er of a person descri	zation accep ontrols, eith e supported bed in (i) abo	oted any git ier alone or organizatio ove?	t or contributi together with on?	on from any	of the		11g(i) 11g(ii)	Yes	No No	
		check t Since A followin (i) A pe and (iii	chis box August 17, 2 Ig persons? erson who di) below, the	.006, has the organi rectly or indirectly c governing body of th	zation accep ontrols, eith e supported	oted any git ier alone or organizatio	t or contributi	on from any	of the		11g(i)	Yes	No No	
		check t Since A followin (i) A pe	this box August 17, 2 ag persons? erson who di	:006, has the organi	zation accep	oted any git ier alone or	t or contributi	on from any	of the				No	
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		check t	this box							III suļ	pporting	organı	zation,	
		If the o												
е	Γ	other th	nan foundatı ı 509(a)(2)	on managers and oth	ner than one		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 certify 509(a)(2)							
LI	ı	one or the box	more publicl that descri	y supported organized y supported organized bes the type of supp b Type II c	ations descr orting organ	nbed in sec ization and	tion 509(a)(1 complete line) or section s 11e th <u>ro</u> i	509(a)(2) So ugh 11h	ee sect	ion 509(a)(3).	Check	
.0 .1	<u> </u>	_	_	ganized and operated ganized and operated						n carry	out the	nurno	ses of	
	_		· · ·	ianization after June	•			•	•					
			_	oss investment inco						tax) fro	om busın	esses		
		·=		ities related to its ex	· <u>-</u> '	-								
9	Γ	_		at normally receives					•		•	-	ss	
8	Г			n 170(b)(1)(A)(vi). described in section			mplete Part II	:)						
7	Ė	An orga	anization tha	at normally receives	a substantia	al part of its				rom the	e general	public	3	
6	Г			local government or	•	tal unit des	crıbed ın sect i	on 170(b)(1)(A)(v).					
	·	_	•	A)(iv). (Complete P	_		,	'	J					
5	Г			ty, and state erated for the benefit	t of a college	or univers	ıtv owned or o	perated by	a government	tal unit	describ	ed in		
	Γ			n organization operat	ed in conjun	iction with a	a hospital des	cribed in se	ection 170(b)(1)(A)(iii). Ente	r the		
4	_	-		perative hospital se	=									
3 4				· ·			dule E)							

instructions

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 (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 8,696,661 6,813,109 17,156,881 8,730,734 12,698,491 54,095,876 include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 8,696,661 6,813,109 17,156,881 8,730,734 12,698,491 54,095,876 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 6,949,792 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 47,146,084 from line 4 Section B. Total Support Calendar year (or fiscal year (d) 2012 (a) 2009 **(b)** 2010 (c) 2011 (e) 2013 (f) Total beginning in) 🟲 17,156,881 8,730,734 Amounts from line 4 8,696,661 6,813,109 12,698,491 54,095,876 Gross income from interest, dividends, payments received on securities loans, rents, royalties 2,221,189 2,037,707 2,239,421 1,800,175 1,586,009 9,884,501 and income from similar sources Net income from unrelated business activities, whether or 89,466 89,466 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 64,069,843 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 73 586 % Public support percentage for 2012 Schedule A, Part II, line 14 15 0 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ►V and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. 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 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 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

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

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

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction				
Facts And Circumstances Test						
Retu	ırn Reference	Explanation				
		Schodulo A / Form 000 o	000 E7) 201			

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493103004155

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III				
	me of the organization na College			Employ	er iden	tification number
	-			14-13		
Par	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a sectio	n 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	cal campaign act	ivities in Part IV		
2	Political expenditures				-	\$
3	Volunteer hours					
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).		
1		e tax incurred by the organization und			Þ	\$
2	Enter the amount of any excise	e tax incurred by organization manag	ers under sectio	n 4955	.	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?			☐ Yes ☐ No
4a	Was a correction made?	·	·			☐ Yes ☐ No
b	If "Yes," describe in Part IV					
Par		ganization is exempt under	section 501(c), except secti	on 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exem	ot function activities	F	\$
2	Enter the amount of the filing o	rganization's funds contributed to ot	her organization:	s for section 527	-	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	.	¢
4	Did the filing organization file F	Form 1120-POL for this year?				→
5	organization made payments f amount of political contribution	nd employer identification number (E: For each organization listed, enter the ns received that were promptly and d political action committee (PAC) If	e amount paid fro irectly delivered	om the filing organizato a separate politic	ation's f :al orga	unds Also enter the nization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid filing organizat funds If none, en	on's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0 -

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pä	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l .)		(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl					
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess ov			excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					

e Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

	filed Form 5768 (election under section 501(h)).	1 .	`		
or e	each "Yes" response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying rivity.		1) 	(b)	
ctiv			No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo		
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?		Νo		
f	Grants to other organizations for lobbying purposes?		Νo		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	O ther activities?	Yes		41	
j	Total Add lines 1c through 1i	'		41	
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912	'			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No		

			Yes	No
L	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Tayable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
SCHEDULE C, PART II-B, QUESTION 1B AND 1G	THE COLLEGE, THE COLLEGE'S PRESIDENT (FATHER KEVIN MULLEN) AND THE ASSOCIATE VICE PRESIDENT FOR ACADEMIC AFFAIRS - RISK MANAGEMENT AND COMPLIANCE ARE REGISTERED LOBBYISTS IN NEW YORK STATE SIENA COLLEGE IS REGISTERED AS A LOBBYIST IN NEW YORK STATE IN THE UNLIKELY EVENT OF INCIDENTAL CONTACT WITH ELECTED OR OTHER GOVERNMENT OFFICIALS NO EMPLOYEE-RELATED EXPENSE HAS BEEN INCURRED IN RELATION TO LOBBYING ACTIVITY SINCE THE COLLEGE DID NOT ACTIVELY LOBBY DURING THE FISCAL PERIOD FATHER KEVIN MULLEN, IN ACCORDANCE WITH THE HOLY NAME PROVINCE ORDER OF FRIARS MINOR (OFM), TAKES A VOW OF POVERTY AND DOES NOT DIRECTLY RECEIVE A SALARY
SCHEDULE C, PART II-B, QUESTION 1I	SIENA COLLEGE HAS AN INSTITUTIONAL MEMBERSHIP TO THE ALBANY-COLONIE REGIONAL CHAMBER OF COMMERCE THE INVOICE FOR THIS MEMBERSHIP STATED THAT 7% OF THE MEMBERSHIP INVESTMENT IS ALLOCABLE FOR LOBBYING EXPENDITURES

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Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

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DLN: 93493103004155

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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. ► Information about Schedule D (Form 990) Open to Public

mal Re	venue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .			Inspe	ctio	1
	of the organi	zation		Employ	er identificat	tion numl	er	
iena (College			14-13:	38498			
art		izations Maintaining Donor Adv				Compl	ete i	f the
	organiz	zation answered "Yes" to Form 990	·	1 (1)				
_	otal number a	t and af year	(a) Donor advised funds	(B)	Funds and o	tneracco	ounts	
		cributions to (during year)						
		nts from (during year)						
		e at end of year						
		ration inform all donors and donor advisor	ors in writing that the assets held in dor	nor advise				
fı	unds are the o	rganization's property, subject to the or	ganızatıon's exclusive legal control?		-	☐ Yes	Γ	No
u	sed only for c	ration inform all grantees, donors, and do haritable purposes and not for the benef ermissible private benefit?	_		urpose	┌ Yes	Г	No
		rvation Easements. Complete if	the organization answered "Yes" t	to Form 9	990, Part IV	, line 7.		
Р Г	Preservation	conservation easements held by the orgain of land for public use (e g , recreation of natural habitat	<u> </u>		•		ì	
Γ	– Preservatio	on of open space						
		2a through 2d if the organization held a ne last day of the tax year	qualified conservation contribution in	the form of	fa conservat	ion		
·		To fast day of the tax year			Held at the	End of th	e Ye	ar
Т	otal number o	f conservation easements		2a				
Т	otal acreage i	restricted by conservation easements		2b				
Ν	lumber of cons	servation easements on a certified histo	rıc structure ıncluded ın (a)	2c				
		servation easements included in (c) acq ure listed in the National Register	uired after 8/17/06, and not on a	2d				
		servation easements modified, transferr	ed, released, extinguished, or terminate	ed by the c	organization o	during		
Ν	lumber of stat	es where property subject to conservati	on easement is located ►					
С	oes the organ	nization have a written policy regarding t the conservation easements it holds?		dling of vi	olations, and	┌ Yes	Г	No
S	taff and volun •	teer hours devoted to monitoring, inspec	cting, and enforcing conservation easei	ments duri	ng the year			
	mount of expe	enses incurred in monitoring, inspecting	, and enforcing conservation easement	s during th	ne year			
С	oes each con	servation easement reported on line 2(c 0(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 170(h)(4)(B)(ı)	┌ Yes	Г	No
b	alance sheet,	escribe how the organization reports cor and include, if applicable, the text of the n's accounting for conservation easeme	e footnote to the organization's financia					
t:		izations Maintaining Collection ete if the organization answered "Y		or Othe	r Similar <i>I</i>	Assets.		
W	orks of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse e, in Part XIII, the text of the footnote t	ts held for public exhibition, education,	or researc	h in furthera			
I	f the organizat orks of art, hi	tion elected, as permitted under SFAS 1 storical treasures, or other similar asse e the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statement	t and balance		blic	
(i) _{Revenues II}	ncluded in Form 990, Part VIII, line 1			► \$			
(ii) Assets incl	luded in Form 990, Part X			- \$		26,6	583
Ι	f the organizat	tion received or held works of art, histori nts required to be reported under SFAS						
	_	ided in Form 990, Part VIII, line 1			- \$			
					· +			
Α	sseis include	ed in Form 990, Part X			F ≯			

Part	Organizations Maintaining Control	llections of Art,	, Histo	orical T	reasi	ures, or Ot	her:	Similar Ass	sets (cont	tınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, che	ck any of	the fol	llowing that a	re a sı	gnıficant use	of its	
а	▼ Public exhibition		d	┌ Loan	orexo	change progra	ms			
b	Scholarly research		e	▽ Othe	er Tea	ching				
c	▼ Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	ın how t	they furth	er the	organızatıon'	s exer	mpt purpose ır	ı	
5	During the year, did the organization solicit								- ,, r	.
Par	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to the							<u> </u>	,	✓ No
	Part IV, line 9, or reported an ar					answered				
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ian or other interme	diary fo	or contrib	utions	or other asse	ets no	Г	Yes	✓ No
b	If "Yes," explain the arrangement in Part XI.	I and complete the	followir	ng table						
_						<u> </u>	.	Am	ount	
c C	Beginning balance						1c			
d	Additions during the year					<u> </u>	Ld			
e f	Distributions during the year					<u> </u>	le 1f			
	Ending balance	orm aan Dort V I	. ว 1 ว			<u></u>	<u> </u>	г	Yes 「	
2a L	Did the organization include an amount on Fe								res	NO
	If "Yes," explain the arrangement in Part XI.									<u>'</u>
Par	t V Endowment Funds. Complete	(a)Current year		or year		FORM 990, Two years back			(e)Four yea	ars back
1a	Beginning of year balance	113,334,275		102,675,632		102,249,008		88,097,451		,792,336
b	Contributions	5,649,860		2,727,849	9	10,324,054		1,644,370	1,	,390,917
c	Net investment earnings, gains, and losses	14,225,953		14,295,552	+	-7,096,740		1,632,346	9,	,412,978
d	Grants or scholarships	2,109,687		2,017,780	0					
e	Other expenditures for facilities and programs	6,698,271		4,346,978	8	2,800,690		3,818,159	4,	,824,009
f	Administrative expenses	124 402 120	-	112 224 27	-	102 675 622		07.556.000		772 222
_	End of year balance	124,402,130		113,334,275	l .	102,675,632		87,556,008		,772,222
2	Provide the estimated percentage of the cur	·	e (line	1g, colun	nn (a))	held as				
а	Board designated or quasi-endowment	28 480 %								
Ь	Permanent endowment - 63 950 %									
C	Temporarily restricted endowment ► 75 The percentages in lines 2a, 2b, and 2c sho	70 % uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiza	ation th	at are he	ld and	admınıstered	for th	e		
	organization by								-	No
	(i) unrelated organizations				•			3a(i		No_
ь	(ii) related organizations			 hedule R?			•	3a(i		No_
4	Describe in Part XIII the intended uses of the	· ·			•					
Par					n ans	wered 'Yes'	to Fo	rm 990, Pa	rt IV, line	
	11a. See Form 990, Part X, line	10.			1				T	
	Description of property			(a) Cost or pasis (inves		(b) Cost or oth basis (other)		c) Accumulated depreciation	(d) Book	c value
1a L	and					11,992,0	007		11,9	992,007
b E	Buildings		. [157,603,	560	59,785,647	97,	817,913
							1			
c L	easehold improvements		·							
d E	Equipment					38,685,2		30,045,816	8,0	639,388
d E	·		· -	(5)	400	3,321,0		30,045,816 0	3,3	.639,388 .321,006 .770,314

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	nplete if the organization a	answered 'Yes' to For	m 990, Part IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of va	
(1)Financial derivatives	15,476,477	F	market value
(2)Closely-held equity interests	, ,		
(3)Other (A)US PRIVATE EQUITY	11,200,158	F	
		F	
(B) FOREIGN PRIVATE EQUITY	21,649,753		
(C) ABSOLUTE RETURN FUNDS	22,123,997	F	
(D) SMALL CAP EQUITY	2,502,063	F	
(E) VENTURE CAPITAL	13,180,011	F	
(F) OTHER	3,888,665	F	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	109,525,288		
Part VIII Investments—Program Related. Co		4	orm 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of va	luation
	(2) Book value	Cost or end-of-year	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX Other Assets. Complete if the organization		<u>I</u> , Part IV , line 11d See F	Form 990, Part X, line 15
(a) Descri			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)		
Part X Other Liabilities. Complete if the orga			ine 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value		
1 (a) Description of Hability Federal Income taxes	(B) Book value		
ANNUITIES PAYABLE	1,024,446		
POSTRETIREMENT BENEFITS	17,079,679		
FEDERAL STUDENT LOAN FUNDS	3,158,440		
ASSET RETIREMENT OBLIGATION	3,524,871		
-			
Tabel (Column (h) surface of 5 and 5			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	24,787,436		

	LVE Benedikting of Benedicting and Audit 1811 1116 11 116 11 116 11		rage I
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue the organization answered 'Yes' to Form 990, Part IV, line 12a.	per i	Leturn Complete if
1	Total revenue, gains, and other support per audited financial statements	1	158,761,771
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants	1	
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	9,227,885
3	Subtract line 2e from line 1	3	149,533,886
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4c	-386,911
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	149,146,975
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s pe	Return. Complete
	ıf the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	145,409,728
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities	_	
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII) 2d 386,911		
e	Add lines 2a through 2d	2e	386,911
3	Subtract line 2e from line 1	3	145,022,817
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)............. 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	145,022,817
Part	XIII Supplemental Information		
_			

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

Return Reference	Explanation
Part III, Question 4	DESCRIPTION OF ART COLLECTION SIENA'S FINE ART COLLECTIONS ENCOMPASS A BROAD RANGE OF PERIODS AND STYLES, WITH FINE PAINTINGS, WORKS ON PAPER, SCULPTURE, AND ARTIFACTS ORIGINAL WORKS FROM HISTORIC AND CONTEMPORARY ARTISTS ARE DISPLAYED THROUGHOUT THE CAMPUS AMONG THESE ARE SEVERAL PIECES OF THE HUDSON RIVER SCHOOL, QUALITY 19TH CENTURY COPIES OF RENAISSANCE RELIGIOUS PAINTINGS, AND A DIVERSE BODY OF WORK RECENTLY ACQUIRED FROM LOCAL CONTEMPORARY ARTISTS
Part V, Question 4	DESCRIPTION OF ENDOWMENT FUNDS ENDOWED FUNDS ARE INTENDED PRIMARILY TO PROVIDE FOR SCHOLARSHIPS FOR STUDENT STUDY OTHER ENDOWED FUNDS ARE MAINTAINED FOR SUPPORT IN ACADEMIC PROGRAMS, BUILDINGS, AND ATHLETICS
Part X	UNCERTAIN TAX POSITIONS THE COLLEGE HAS BEEN GRANTED TAX-EXEMPT STATUS AS A NONPROFIT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS GENERALLY EXEMPT FROM FEDERAL AND STATE INCOME TAXES UNDER SECTION 501(A) OF THE CODE AND APPLICABLE STATE LAWS THE COLLEGE BELIEVES IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS RECONCILIATION OF REVENUE AND EXPENSES PART XI, Line 4b Fundraising expenses 131,279 athletic cost of goods sold 77,107 Gross Rentals expenditures 178,525 TOTAL 386,911
Part XII, Line 2d	RECONCILIATION OF REVENUE AND EXPENSES Actuarial Adjustment & Provision for Uncoll Pledges 525,928 Loss on extinguishment of L/T debt (366,834) TOTAL 159,094
Part XII, line 2d	RECONCILIATION OF REVENUE AND EXPENSES Fundraising expenses 131,279 athletic cost of goods sold 77,107 Gross Rentals expenditures 178,525 TOTAL 386,911

•	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury

Schools

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

▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number

Siena College 14-1338498 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes 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? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? <u>5g</u> Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? Νo 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

Yes

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

Return Reference	Explanation
SCHEDULE E, LINE 3	Siena College is committed to maintaining a community environment that fosters respect for the dignity and worth of each individual. Siena College expects all members of the community to demonstrate respect for themselves and others. In a college community, it is critical that respect encompass diversity, differences of opinion, and sensitivity to these differences. The dignity of the individual should never be violated in any way, and the college community views with seriousness offenses against any person. Particularly intolerable, in view of the College's commitment to respect the dignity of the individual, are acts of discrimination and discriminatory-based harassment, which are offenses directed against persons because of their race, religion, ethnicity, national origin, gender, age, sexual orientation, gender identity, marital status, veteran status, disability, predisposing genetic characteristics, domestic violence victim status or other basis identified in federal or state law. Discrimination and discriminatory-based harassment are unethical and unprofessional, and they are incompatible with Siena's commitment to diversity, educational equity, and the Franciscan tradition. Any form of such behavior toward any member of the Siena community (students, staff, faculty, or administrators) will be subject to strong disciplinary action. The College will also address to the extent practicable any reported behavior in violation of this policy that is directed towards any member of the Siena community by nonmembers, including contractors, alumni, visitors, and any others identified as non-employees or non-students of the College. The College publicizes its racially non-discriminatory policy on its website.
SCHEDULE E, LINE 6A	THE COLLEGE RECEIVES GRANTS FROM VARIOUS FEDERAL AND STATE AGENCIES

Schedule E (Form 990 or 990-EZ) 2013

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SCHEDULE F (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

Siena College										
nena conege				14-1338498						
Part I General Information "Yes" to Form 990, Par			e United States. Co	mplete if the organiza	ation answered					
1 For grantmakers. Does the o	rganızatıon ma	ııntaın records	to substantiate the a	mount of its grants an	d					
other assistance, the grantee	es' eligibility fo	r the grants or	assistance, and the s	election criteria used						
to award the grants or assista	to award the grants or assistance?									
2 For grantmakers. Describe in assistance outside the United		ganızatıon's pr	ocedures for monitorii	ng the use of its grant	s and other					
3 Activites per Region (The follow	ing Part I, line 3	table can be du	plicated if additional spa	ce is needed)						
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in	(e) If activity listed in (d) is	(f) Total expenditures					
	offices in the region	employees, agents, and independent contractors in region	region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	a program service, describe specific type of service(s) in region	for and investments in region					
(1) See Add'l Data										
(2)										
(3)										
(4)										
(5)										
3a Sub-total					10,196,323					
b Total from continuation sheets to Part I										
c Totals (add lines 3a and 3b)					10,196,323					

			ived more than \$5,0					
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
			ted above that are re or counsel has pro					
3 Enter total nu	mber of other or	ganızatıons or en	tities					

Schedule F (Form 990) 2013

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)		
(1) GRANTS FOR EDUCATION	Europe (Including Iceland and Greenland)	20	645,387						
(2) GRANTS FOR EDUCATION	North America	6	194,510	OTHER					
(3) GRANTS FOR EDUCATION	South America	14	240,216	OTHER					
(4) GRANTS FOR EDUCATION	Mıddle East and North Afrıca	1	36,000	other					
(5) GRANTS FOR EDUCATION	Sub-Saharan Afrıca	4	107,250	OTHER					
(6) GRANTS FOR EDUCATION	East Asia and the Pacific	3	52,793	OTHER					
(7)									
(8)									
(9)									
(10)									
(11)						- 			
(12)									
(13)									
(14)									
(15)	+								
(16)						<u> </u>			
(17)	-					 [
(18)	'-					 [
						Schod	ule F (Form 990) 2013		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? <i>If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	▽	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	ত	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	F	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	~	Yes	Г	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	F	Yes	Γ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	굣	Νo

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page **5**

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
Schedule F, Part I, line 2	THE COLLEGE PROVIDES PAYMENT OF THE GRANTS TO THE STUDENT AS A CREDIT TO THE STUDENTS' REC EVABLE ACCOUNT, THE GRANTS ARE NOT DIRECTLY PAID TO THE STUDENTS FOR THE GRANT TO BE AVA ILABLE TO THE STUDENT, THE COLLEGE MONITORS THE STUDENTS ENROLLMENT, BASED ON THE FOREIGN SCHOOLS RECORDS, AND THE STUDENT MUST BE ENROLLED AND ACTIVE FOR THE TIME PERIOD THE GRANT IS OFFERED IF THE STUDENT LEAVES THE PROGRAM EARLY, THE GRANT IS NOT REFUNDED TO THE STUDENT AND THE STUDENT'S ACCOUNT IS RATABLY ADJUSTED TO REFLECT THE INCOMPLETE PERIOD

Additional Data

Software ID: Software Version:

EIN: 14-1338498

Name: Siena College

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) A ctivities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Program Services	Service Trip	2,081
South America			Program Services	Service Trip	14,130
Central America and the Caribbean			Program Services	Service Trip	6,456

Form 990 Schedule F I	Part I - Activit	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Investments		8,897,500
Europe (Including Iceland and Greenland)			Program Services	SCHOLARSHIPS	645,387
North America			Program Services	SCHOLARSHIPS	194,510

Form 990 Schedule F	Part I - Activi	<u>ties Outside T</u>	he United States	_		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region	
South America			Program Services	SCHOLARSHIPS	240,216	
Middle East and North Africa			Program Services	SCHOLARSHIPS	36,000	
Sub-Saharan Africa			Program Services	SCHOLARSHIPS	107,250	

Form 990 Schedule F	orm 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region							
East Asia and the Pacific			Program Services	SCHOLARSHIPS	52,793							

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DLN: 93493103004155

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** Siena College 14-1338498 Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants Phone solicitations g | Special fundraising events In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Γ Yes Γ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Dıd (iv) Gross receipts (v) A mount paid to (vi) A mount paid to ındıvıdual fundraiser have from activity (or retained by) (or retained by) or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No 10 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contributi			
		3 1 3	(a) Event #1 Golf Tournament (event type)	(b) Event #2 Festa Vino (event type)	(c) O ther events 6 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	79,909	75,996	152,924	308,829
Revenue	2	Less Contributions	49,909	37,246	89,582	176,737
<u>~</u>	3	Gross income (line 1 minus line 2)	30,000	38,750	63,342	132,092
	4	Cash prizes				
မွာ	5	Noncash prizes	113			113
Expenses	6	Rent/facility costs	22,085		58,513	80,598
ă	7	Food and beverages .	1,200	2,550	23,728	27,478
Direct	8	Entertainment				
ā	9	Other direct expenses .	3,529	10,532	9,030	23,091
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		(131,280)
	11	Net income summary Subtract lii	ne 10 from line 3, column	(d)	•	812
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		'Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue	1	Gross revenue	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		Cash prizes				
Expenses	3	Non-cash prizes				
Direct Ex	4	Rent/facility costs				
ᇫ	5	Other direct expenses				
	6	Volunteer labor	Г Yes <u>%</u> Г No	│ Yes	│ Yes	
		Direct expense summary Add lines				
9 a b	Ist	er the state(s) in which the organizathe organization licensed to operate	gaming activities in each	of these states?		
10a b		re any of the organization's gaming l Yes," explain	icenses revoked, suspen	ded or terminated during	the tax year?]

		1
Does	s the organization operate gaming activit	ties with nonmembers?
12	Is the organization a grantor, beneficia	ry or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming	g?
13	Indicate the percentage of gaming acti	vity operated in
а	The organization's facility	
b	An outside facility	
14	Enter the name and address of the pers	son who prepares the organization's gaming/special events books and records
	_	
	Name 🟲	
	Address ►	
15a	Does the organization have a contract	with a third party from whom the organization receives gaming
	revenue?	
b	If "Yes," enter the amount of gaming re	evenue received by the organization 🟲 \$ and the
	amount of gaming revenue retained by	the third party 🕨 \$
C	If "Yes," enter name and address of the	e third party
	Name ▶	
	Address ▶	
16	Gaming manager information	
	Name ▶	
	Gaming manager compensation 🟲 \$	
	_	
	Description of services provided	
	Director/officer	Employee Independent contractor
17	Mandatory distributions	Employee I Independent contractor
1/ a	•	e law to make charitable distributions from the gaming proceeds to
u	· ·	· · · · · · · · · · · · · · · · · · ·
Ь	• •	red under state law distributed to other exempt organizations or spent
,	in the organization's own exempt activ	· · · · · · · · · · · · · · · · · · ·
Pai		on. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and
	Part III, lines 9, 9b, 10b, 15	b, 15c, 16, and 17b, as applicable. Also complete this part to provide any
	additional information (see	instructions).
	Return Reference	Explanation

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Schedule I

(Form 990)

DLN: 93493103004155

OMB No 1545-0047

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

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

Open to Public **Inspection**

► Attach to Form 990 Department of the Treasury Internal Revenue Service ► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization

Employer identification number

Siena College						14-1338498	
Part I General Information	on Grants and	Assistance				•	
 Does the organization maintain re the selection criteria used to awa Describe in Part IV the organization 	rd the grants or as: on's procedures fo	sistance? r monitoring the use o	f grant funds in the Unite	d States			✓ Yes ✓ N
Part II Grants and Other Ass Form 990, Part IV, line							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grar or assistance
2 Enter total number of section 501		=					

• • •	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		mber of pients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance				
			J. 1.1.1. J. 1.1.1		, , , , , , , , , , , , , , , , , , , ,					
(1) SCHOLARSHIPS		2905	44,205,951							
Part IV Supplemental Info	ormation. Pr	ovide the infoi	rmation required in P	art I, line 2, Part III,	column (b), and any other	additional information.				
Return Reference E	xplanation									
Schedule I, Part I, line 2	THE COLLEGE PROVIDES PAYMENT OF THE GRANTS TO THE STUDENT AS A CREDIT TO THE STUDENTS' RECEIVABLE ACCOUNT, THE									

ADJUSTED TO REFLECT THE INCOMPLETE PERIOD

GRANTS ARE NOT DIRECTLY PAID TO THE STUDENTS FOR THE GRANT TO BE AVAILABLE TO THE STUDENT, THE COLLEGE MONITORS THE STUDENTS ENROLLMENT AND THE STUDENT MUST BE ENROLLED AND ACTIVE FOR THE TIME PERIOD THE GRANT IS OFFERED IF THE STUDENT LEAVES THE PROGRAM EARLY, THE GRANT IS NOT REFUNDED TO THE STUDENT AND THE STUDENT'S ACCOUNT IS RATABLY

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DLN: 93493103004155

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Siena College

Employer identification number

14-1338498

Pa	rt I Questions Regarding Compensation		1			
					Yes	No
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to p					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organi reimbursement or provision of all of the expenses descri			1b	Yes	
2	Did the organization require substantiation prior to reimi			_		
	directors, trustees, officers, including the CEO/Executiv	re D	riector, regarding the items checked in line 1a.	2	Yes	
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that a used by a related organization to establish compensatio	ppl	y Do not check any boxes for methods			
	Compensation committee	Г	Written employment contract			
	Independent compensation consultant	Г	Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payer	men	nt?	4a	Yes	
b	Participate in, or receive payment from, a supplemental	non	qualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based	d co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provid	e th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must o	omr	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the revenues of					
а	The organization?			5a		No
ь	Any related organization?			5b		No
_	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the net earnings of	2 1 a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," desc			7		No
8	Were any amounts reported in Form 990, Part VII, paid	ora	occured pursuant to a contract that was			
	subject to the initial contract exception described in Re					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the resection 53 $4958-6(c)$?	outt	able presumption procedure described in Regulations	9		

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)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation			
See Additional Data Table							

Schedule J (Form 990) 2013

Part III Supplemental Information

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

riss complete this part for any ac	50 complete this part for any additional information						
Return Reference	Explanation						
PART I, LINES 1A AND 1B	CERTAIN OFFICERS MAY UTILIZE FIRST CLASS TRAVEL WHEN COACH ACCOMODATIONS ARE UNAVAILABLE OR IN THE CASE OF EXTENUATING CIRCUMSTANCES SUCH AS DEMANDING FLIGHT SCHEDULES, EXTENDED FLIGHT TIMES OR BY GIVING PRIOR WRITTEN AUTHORIZATION FOR FIRST CLASS OR BUSINESS TRAVEL THE TRAVELER PROVIDED THE COLLEGE WITH APPROPRIATE SUBSTANTIATION FOR THE EXPENSE INCURRED COUNTRY CLUB DUES WERE PROVIDED TO THE PRESIDENT AND THE VP OF DEVELOPMENT AND EXTERNAL AFFAIRS TO INCREASE THE COLLEGE'S PRESENCE IN THE COMMUNITY AND AMONG BUSINESS LEADERS ANY PERSONAL USE OF THE COUNTRY CLUB DUES ARE INCLUDED IN THE LISTED PERSONS FORM W-2						
PART I, LINE 3	THE COLLEGE PRESIDENT (A FRANCISCAN FRIAR), IN ACCORDANCE WITH THE HOLY NAME PROVINCE ORDER OF FRIARS MINOR (OFM), TAKES A VOW OF POVERTY AND DOES NOT DIRECTLY RECEIVE A SALARY PAYMENTS TO THE ORDER ARE MADE IN LIEU OF THE PRESIDENT'S SALARY, WHICH IS DETERMINED BY THE TRUSTEES TRUSTEES ESTABLISH THE IN LIEU OF PAYMENT THROUGH THE USE OF COMPARABLE SALARY DATA FOR SIMILARLY-SITUATED COLLEGES						
PART I, LINE 4A	THE FORMER HEAD COACH OF BASKETBALL MICHAEL BUOANAGURO RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$207,374						

Schedule J (Form 990) 2013

Software ID: Software Version:

EIN: 14-1338498
Name: Siena College

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees										
(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred compensation	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form		
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ		
LINDA RICHARDSON VICE PRESIDENT	(I) (II)	194,197		2,225	19,672	7,794	223,888			
PAUL STEC VICE PRESIDENT	(I) (II)	194,235 0	0 0		19,916 0	34,821 0	249,738 0	0		
DAVID SMITH VP DEVELOPMENT & EXTERNAL	(I) (II)	177,867		8,457	18,273	53,061	257,658			
MARYELLEN GILROY VICE PRESIDENT	(I) (II)	148,579		276	15,028	6,970	170,853			
EDWARD JONES VP ENROLLMENT MANAGEMENT	(I) (II)	140,449		171	14,538	19,262	174,420			
ALLAN WEATHERWAX DEAN SCIENCE	(I) (II)	153,250		195	15,836	20,942	190,223			
JOHN D'ARGENIO VP & ATHLETIC DIRECTOR	(I) (II)	133,582		237	13,581	8,766	156,166			
FREDERICK DECASPERIS INTERIM DEAN, BUSINESS	(I) (II)	126,153		247	13,060	15,090	154,550			
MICHAEL BUONAGURO FORMER HEAD COACH BASKETBALL	(I) (II)	297,603		2,658	7,760	3,653	311,674			
JAMES PATSOS HEAD COACH BASKETBALL	(I) (II)	266,568		8,326	13,457	10,029	298,380			
MARK BERMAN CIO	(I) (II)	146,779		531	15,325	19,581	182,216			
JEFFREY MELLO FORMER DEAN BUSINESS	(I) (II)	145,225		245	13,626	14,049	173,145			
ALOYSIA JACQUES HEAD COACH BASKETBALL	(I) (II)			9,073		7,023	151,492			
JAMES HARRISON PROFESSOR	(I) (II)	140,834		721	9,663	52,213	203,431			
JAMES NOLAN PROFESSOR	(I) (II)	137,799		663	13,349	14,146	165,957			

DLN: 93493103004155

2013

OMB No 1545-0047

Schedule K (Form 990)

Supplemental Information on Tax Exempt Bonds ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

> explanations, and any additional information in Part VI. ► Attach to Form 990. ► See separate instructions.

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Internal Revenue Service Name of the organization

Department of the Treasury

Employer identification number

	e of the organization									Em	Employer identification number						
Siei	na College	14	14-1338498														
P	art I Bond Issues																
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	f) Descriptio	n of purpose	(g) D	efeased	beh	On alf of uer		Pool ncing		
										Yes	No	Yes	No	Yes	No		
A	DORMITORY AUTHORITY STATE OF NY	14-6000293	14983QD48	05-04-2006	27,94		FINANCE CONSTRUCTION RENOVATION				×		×		x		
В	DORMITORY AUTHORITY STATE OF NY	14-6000293	649905YX1	12-11-2009	20,66	50,808		STRUCTION DENCE HAI			х		х		Х		
Pa	rt III Proceeds					'				•			<u> </u>		<u>' </u>		
				A		E	3		С		D						
1	A mount of bonds retired					5,488,	745		1,149,372								
2	A mount of bonds legally defea	ised					0										
3	Total proceeds of issue					27,942,	,152		20,660,808								
4	Gross proceeds in reserve fun						0		0								
5	Capitalized interest from proc						0		0								
6	Proceeds in refunding escrows						0		0								
7	Issuance costs from proceeds	5				667,	,065		665,808								
8	Credit enhancement from proc	ceeds				364,	,000										
9	Working capital expenditures	from proceeds					0 0										
10	Capital expenditures from pro	ceeds				26,911,	.087 19,995,000										
11	Other spent proceeds						0		0								
12	Other unspent proceeds						0		0								
13	Year of substantial completion	า			20	06		20	10			•					
					Yes	No		Yes	No	Yes	<u> </u>	lo	Yes	\perp	No		
14	Were the bonds issued as part	t of a current refund	ing issue?		X				Х								
15	Were the bonds issued as part	t of an advance refu	ndıng ıssue?			Х			Х								
16	Has the final allocation of prod		Х			Х											
17	Does the organization maintai allocation of proceeds?	·	ort the final	Х	x x												
Pa	rt IIII Private Business U	Jse															
						A L No			B No	V	C		V	D	No		
ì					Yes	No		Yes	No	Yes		lo	Yes	-	No		

property financed by tax-exempt bonds?

financed property?

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Χ

Χ

Part III Private Business Use (Continued)

المناا	Filvate Busiliess Ose (Continued)									
1			4	<u> </u>	В		С	C)	
1		Yes	No	Yes	No	Yes	No	Yes	No	
3a	Are there any management or service contracts that may result in private business use of bond-financed property?	Х		х						
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?		х		x					
С	Are there any research agreements that may result in private business use of bond-financed property?		Х		x					
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?									
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		0 %	0 %						
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %	0 %						
6	Total of lines 4 and 5		0 %		0 %					
7	Does the bond issue meet the private security or payment test?		X		Х					
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		х		х					
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		0 %		0 %					
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		х		×					
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?	Х		x						

Part IV Arbitrage

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the Issuer filed Form 8038-T?		X		×				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?		Х		Х				
b	Exception to rebate?		Х		Х				
С	No rebate due?	×		Х					
	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?		Х		Х				
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		×		x				
b	Name of provider	0		0					
С	Term of hedge								
d	Was the hedge superintegrated?								
е	e Was the hedge terminated?								
		-					Sc	hedule K (Forn	n 990) 2013

Part IV Arbitrage (Continued

		Α	Α		В		С		
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		X				
b	Name of provider	0	0						
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		Х				
7	Has the organization established written procedures to monitor the requirements of section 148?		x		×				
		•	•	•		•	•	•	

Part V Procedures To Undertake Corrective Action

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?

Α		В		С		D			
Yes	No	Yes	No	Yes	No	Yes	No		
	X		x						

REBATE CALCULATIONS ARE PERFORMED AT THE END OF THE PROJECT FOR WHICH THE DEBT WAS ISSUED EVALUATIONS REGARDING
PART IV, LINE 2C ARBITRAGE/REBATE WERE PERFORMED IN 2004, 2006, & 2010 FOR THE IDA LOAN, DASNY SERIES 2006 AND DASNY SERIES 2009
RESPECTIVELY

DLN: 93493103004155

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of th Siena College		anızatıon							E	Employ	er ide	nt if icat i	on nu	mbei	r		
						•		(3) and section			organı	zatıoı		y).	- 405		
								90, Part IV, line	2								
1 (a) [Name	of disqual	ified	person	(en disqualified		(c) Desc	ription	of tra	nsacti	on			ected?
						perso	n and orgar	112ation							Yes		No
									L								
									L								
2 Entert	he a	mount of ta	x inc	curred by	org	ganızatıon r	managers o	r dısqualıfıed pe	rs	ons during t	he year	r unde	rsecti	on			
4958													F \$				
3 Entert	he a	mount of ta	ıx, ıf	any, on l	ne	2, above, re	eımbursed l	by the organizat	101	n			>	\$			
			•			, ,		, ,									
Part II	Loa	ans to ar	nd/d	or Fron	ı I	ntereste	d Person	ıs.									
								n 990-EZ, Part \		lıne 38a, or	Form 9	90, P	art IV,	line 26	, or if t	the	
	orga	anızatıon re	port	ed an am	oui	nt on Form	990, Part X	<u>, line 5, 6, or 22</u>	<u>-</u>								
(a) Name o	of	(b)		(c)		(d) Loan		(e)Original	((f) Balance	(g) In		(h)) Writ	
ınterested	1	Relations	hıp	Purpose	of			principal		due	defaul	t?	Appro	oved	agı	reem	ent?
person		with		loan	organization?			amount	amount				by	•			
		organızat	юп										board or				
														nittee?			
						То	From				Yes	No	Yes	No		es	No
							1		t				1	+			1
	_								╁		1		+		_		
	\dashv			-					╁				+	_			
	\dashv								╀				+	_	_		
	_								╄				1				
									L								
Total				▶ \$;					()						
Part III	Gra	nts or A	ssis	tance	3eı	nefitting	Interest	ed Persons.									
	Con	nplete if t	he o	rganıza	tıoı	n answere	d "Yes" o	n Form 990, P	ar	t IV, line 2	27.						
(a) Name	of in	terested	(b)) Relation	ısh	ıp between	(c) A mo	unt of assistanc	e	(d) Type	ofass	ıstand	:e (e) Purp	ose of	ass	stance
pe	erson		Inte	erested p	ers	on and the											
				orgar	ııza	tion											
(1)			famı	ly memb	ero	of trustee		1,00	0	scholarshi)						
(2)			famı	ly memb	ero	of trustee		7,00	0 (scholarshi)						
									_	_							
										_							
							1			_							
							1			_							
							1			_							
			L							_							

Business Transactions Complete if the organiza	_		e 28a, 28b, or 28c.			
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organizatio revenues?		
				Yes	No	
(1) ROSE KIERNAN	SEE PART V BELOW	314,676	INSURANCE COMMISSIONS		No	

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
Part IV, Business Transactions with	Siena College pays insurance premiums to Rose and Kiernan A College trustee is the president of
Int Persons	Rose and Kiernan

Schedule L (Form 990 or 990-EZ) 2013

DLN: 93493103004155

2013

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

lame of the	organization
Siena College	

Employer identification number

14-1338498

	rt 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	Method of o		_	nts
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional interests			20 411	EN4)/			
	Books and publications Clothing and household	X		28,411	FIMIV			
3	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
	Securities—Publicly traded .	X	56	1,067,030	average price			
	Securities—Closely held stock .							
	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other►(Х	24	33,155	FMV			
	ARY ART WORK)							
MAR	Other►(KETING SERVICES)	X	1	250,000				
SCH	Other►(OOL OF SCIENCE COMPUTING IPMENT)	X		5,000	IF M V			
	Other►(1EN'S TENNIS T-SHIRTS)	Х	1	322	FMV			
	Other (X	1	177	FMV			
100	CKEY CLUB TEAM TRAVEL MEAL) Other►(X	26	16,480	fmy			
	CELLANEOUS ITEMS SARAZEN F TOURNAMENT)	^	20	10,400	iiiiv			
MIS	Other ► (CELLAENOUS ITEMS GOLF EVENT)	Х	24	6,745				
SEN	Other▶(IOR CLASS PARTY GIFT BASKET)	X	1	40	fmv			
	Number of Forms 8283 received by th for which the organization completed F				9			
							Yes	No
30a	During the year, did the organization i	eceive by	contribution any property r	eported in Part I, lines 1	through 28, that			
	ıt must hold for at least three years fr			, and which is not required	l to be used			
	for exempt purposes for the entire hol	ding period	?			30a		No
b	If "Yes," describe the arrangement in	Part II						
31	Does the organization have a gift acc	eptance po	licy that requires the revie	w of any non-standard co	ntributions?	31	Yes	
32a	Does the organization hire or use thire contributions?	d parties or	related organizations to s	olicit, process, or sell nor	ncash	32a	Yes	
b	If "Yes," describe in Part II					J20	163	
	If the organization did not report an a	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			

Supplemental Information. 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.

Return Reference	Explanation
PART I, COLUMN B	THE NUMBER OF CONTRIBUTORS IS REPORTED IN PART I, COLUMN (B)
, ,	SECURITIES RECEIVED AS CONTRIBUTIONS ARE LIQUIDATED THROUGH A BROKER UPON RECEIPT

Schedule M (Form 990) (2013)

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As Filed Data -

DLN: 93493103004155

OMB No 1545-0047

2013

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SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
Siena College

14-1338498

Return Reference	Explanation
FORM 990, PART I, LINE 1 AND PART III, LINE 1	SIENA COLLEGE IS A LEARNING COMMUNITY ADVANCING THE IDEALS OF A LIBERAL ARTS EDUCATION, ROOTED IN ITS IDENTITY AS A FRANCISCAN AND CATHOLIC INSTITUTION AS A LEARNING COMMUNITY, SIENA IS COMMITTED TO A STUDENT-CENTERED EDUCATION EMPHASIZING DYNAMIC FACULTY-STUDENT INTERACTION THROUGH A BLENDING OF LIBERAL ARTS AND PROFESSIONAL EDUCATION, SIENA COLLEGE PROVIDES EXPERIENCES AND COURSES OF STUDY INSTILLING THE VALUES AND KNOWLEDGE TO LEAD A COMPASSIONATE, REFLECTIVE, AND PRODUCTIVE LIFE OF SERVICE AND LEADERSHIP AS A LIBERAL ARTS COLLEGE, SIENA FOSTERS THE RIGOROUS INTELLECTUAL DEVELOPMENT OF ITS STUDENTS THROUGH A HEALTHY EXCHANGE OF IDEAS BOTH INSIDE AND OUTSIDE THE CLASSROOM IT PROVIDES OPPORTUNITIES TO DEVELOP CRITICAL AND CREATIVE THINKING, TO MAKE REASONED AND INFORMED JUDGMENTS, TO APPRECIATE CULTURAL DIVERSITY, TO DEEPEN AESTHETIC SENSIBILITY AND TO ENHANCE WRITTEN AND ORAL COMMUNICATION SKILLS IT DEVELOPS IN EACH INDIVIDUAL AN APPRECIATION FOR THE RICHIESS OF EXPLORING KNOWLEDGE FROM A VARIETY OF PERSPECTIVES AND DISCIPLINES AS A FRANCISCAN COMMUNITY, SIENA STRIVES TO EMBODY THE VISION AND VALUES OF ST FRANCIS OF ASSIS FAITH IN A PERSONAL AND PROVIDENT GOD, REVERENCE FOR ALL CREATION, AFFIRMATION OF THE UNIQUE WORTH OF EACH PERSON, DELIGHT IN DIVERSITY, APPRECIATION FOR BEAUTY, SERVICE WITH THE POOR AND MARGINALIZED, A COMMUNITY WHERE MEMBERS WORK TOGETHER IN FRIENDSHIP AND RESPECT, AND COMMITMENT TO BUILDING A WORLD THAT IS MORE JUST, PEACEABLE, AND HUMANE AS A CATHOLIC COLLEGE, SIENA SEEKS TO ADVANCE NOT ONLY THE INTELLECTUAL GROWTH OF ITS STUDENTS, BUT THER SPIRITUAL, RELIGIOUS AND ETHICAL FORMATION AS WELL TO THIS END, SIENA IS COMPOSED OF AND IN DIALOGUE WITH PEOPLE FROM DIFFERENT RELIGIOUS AND CULTURAL TRADITIONS, FOSTERS A CRITICAL APPRECIATION OF THE CATHOLIC INTELLECTUAL HERITAGE IN CONVERSATION WITH CONTEMPORARY EXPERIENCE, PROVIDES AMPLE OPPORTUNITIES FOR WORSHIP AND SERVICE, EXPLORES THE MORAL DIMENSIONS OF DECISION-MAKING IN BUSINESS AND THE PROFESSIONS, AND AFFIRMS THE DIGNITY OF THE INDIVIDU

Return Reference	Explanation
FORM 990, PART III - PROGRAM SERVICE, LINE 4A	SIENA COLLEGE IS A COEDUCATIONAL, INDEPENDENT, LIBERAL ARTS COLLEGE WITH A FRANCISCAN AND CATHOLIC TRADITION FOUNDED IN 1937 BY SEVEN FRANCISCAN FRIARS, IT IS LOCATED IN LOUDONVILLE, NEW YORK, A SUBURBAN COMMUNITY JUST OUTSIDE THE STATE'S CAPITAL SIENA IS REGISTERED BY THE BOARD OF REGENTS OF THE UNIVERSITY OF THE STATE OF NEW YORK ALL PROGRAMS ARE ACCREDITED BY THE MIDDLE STATES COMMISSION ON HIGHER EDUCATION, AND THE SCHOOL OF BUSINESS IS ACCREDITED BY THE ASSOCIATION TO ADVANCE COLLEGIATE SCHOOLS OF BUSINESS IN ADDITION, THE CHEMISTRY PROGRAM IS CERTIFIED BY THE AMERICAN CHEMICAL SOCIETY, THE SOCIAL WORK PROGRAM IS CERTIFIED BY THE COUNCIL ON SOCIAL WORK EDUCATION, AND THE EDUCATION PROGRAMS ARE ACCREDITED BY THE NATIONAL COUNCIL FOR THE ACCREDITATION OF TEACHER EDUCATION SIENA'S 3069 UNDERGRADUATES ENROLL IN ONE OF THREE SCHOOLS - LIBERAL ARTS, SCIENCE, AND BUSINESS - AND MAY CHOOSE TO PURSUE STUDY FROM A TOTAL OF 24 DEPARTMENTS WITH 28 MAJORS, 56 MINORS AND CERTIFICATE PROGRAMS, AND PROFESSIONAL CURRICULA IN SECONDARY EDUCATION, PRE-LAW, AND SOCIAL WORK 53 GRADUATES HAVE ENROLLED IN THE MASTERS IN ACCOUNTING PROGRAM ON AVERAGE, 150 STUDENTS STUDY ABROAD IN A GIVEN YEAR NINETY-FIVE PERCENT OF SIENA STUDENTS ENTER GRADUATE SCHOOL OR FIND EMPLOYMENT IMMEDIATELY FOLLOWING GRADUATION ADMISSION TO THE COLLEGE IS COMPETITIVE OF THE 765 INCOMING MEMBERS OF THE CLASS OF 2017, 24 2 PERCENT GRADUATED IN THE TOP TEN PERCENT OF THEIR HIGH SCHOOL CLASS AND THEIR AVERAGE SAT SCORE WAS 1104 SIENA'S FRESHMAN RETENTION RATE FOR THE CLASS ENTERING IN THE FALL OF 2013 WAS 88 7 PERCENT

Return Reference	Explanation
FORM 990, PART VI, SECTION B, QUESTION 11A AND B	MANAGEMENT WORKS TOGETHER WITH ITS TAX PROFESSIONALS TO GATHER THE REQUIRED INFORMATION NECESSARY TO PREPARE A DRAFT OF THE FORM 990 ONCE A DRAFT IS COMPLETED, IT IS THEN REVIEWED WITH THE AUDIT COMMITTEE AND THE TAX PROFESSIONALS ONCE THE REVIEW IS COMPLETED AND EDITS ARE MADE, A COMPLETE COPY OF THE COLLEGE'S FINAL FORM 990 (INCLUDING ALL REQUIRED SCHEDULES), AS ULTIMATELY FILED WITH THE IRS, IS DISTRIBUTED TO THE FULL BOARD BEFORE ITS FILING WITH THE IRS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, QUESTION 12C	ALL OFFICERS, TRUSTEES, AND KEY EMPLOYEES ASSUME RESPONSIBILITY FOR CONSIDERING POSSIBLE CONFLICTS OF INTEREST THAT ARISE DURING SERVICE WITH THE COLLEGE TO HELP TRUSTEES IDENTIFY POSSIBLE CONFLICTS OF INTEREST, THE COLLEGE HAS DEVELOPED A DISCLOSURE FORM THAT ALL TRUSTEES MUST COMPLETE AND UPDATE AT LEAST ANNUALLY DURING THE COURSE OF THEIR SERVICE, OFFICERS, TRUSTEES, AND KEY EMPLOYEES, IF APPLICABLE, MUST ALSO DISCLOSE ANY CONFLICT OF INTEREST AS SOON AS THEY BECOME AWARE OF THE CONFLICT THE GENERAL COUNSEL REVIEWS THE DISCLOSURES AND WILL DISCLOSE ANY REPORTED CONFLICTS OF INTEREST TO THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES THE AUDIT COMMITTEE MAY CONSIDER WHETHER ADVICE FROM COUNSEL OR OTHER INDEPENDENT ADVISORS IS NECESSARY IN PARTICULAR INSTANCES WHERE A CONFLICT EXISTS FORM 990, PART VI, SECTION B, QUESTION 13 The Whistleblow er Policy was adopted in June 2014 in accordance with New York Nonprofit Revitalization Act of 2013

Return Reference	Explanation
FORM 990, PART VI, SECTION B, QUESTION 15A	THE COLLEGE PRESIDENT (A FRANCISCAN FRIAR), IN ACCORDANCE WITH THE HOLY NAME PROVINCE ORDER OF FRIARS MINOR (OFM), TAKES A VOW OF POVERTY AND DOES NOT DIRECTLY RECEIVE A SALARY PAYMENTS TO THE ORDER ARE MADE IN LIEU OF THE PRESIDENT'S SALARY THE BOARD OF TRUSTEES PERFORMS A REVIEW AND APPROVES AT REGULAR INTERVALS THE PERFORMANCE AND COMPENSATION OF THE PRESIDENT THE BOARD UTILIZES INDEPENDENT EXTERNAL STANDARDS SUCH AS THE COLLEGE AND UNIVERSITY PERSONNEL ASSOCIATION, LOCAL MARKET DATA AND INTERNAL EQUITY, FOR THE REVIEW OF THE PRESIDENT'S COMPENSATION AGREEMENT AND THE GATHERING OF COMPARABILITY DATA IN DETERMINING THE REASONABLENESS OF COMPENSATION AND COMPLIANCE WITH THE PROCEDURES DESCRIBED IN TREASURY REGULATION SECTION 53 4958-6

Return Reference	Explanation							
FORM 990, PART VI, SECTION B, QUESTION 15B	THE BOARD OF TRUSTEES AND THE PRESIDENT PERFORM A REVIEW AND APPROVAL AT REGULAR INTERVALS OF THE PERFORMANCE AND COMPENSATION OF THE OFFICERS, AND WHERE APPROPRIATE, OTHER SENIOR MANAGEMENT OF THE COLLEGE. THE BOARD AND PRESIDENT UTILIZE INDEPENDENT EXTERNAL STANDARDS SUCH AS THE COLLEGE AND UNIVERSITY PERSONNEL ASSOCIATION, LOCAL MARKET DATA AND INTERNAL EQUITY, FOR THE REVIEW OF COMPENSATION AGREEMENTS AND THE GATHERING OF COMPARABILITY DATA IN DETERMINING THE REASONABLENESS OF COMPENSATION AND COMPLIANCE WITH THE PROCEDURES DESCRIBED IN TREASURY REGULATION SECTION 53 4958-6							

Return Reference	Explanation						
FORM 990, PART VI SECTION C, QUESTION 18	THE COLLEGE FOLLOWS THE IRS' GUIDELINES FOR PUBLIC DISCLOSURE. A COPY OF THE FORM 990 AND FORM 990-T IS MADE AVAILABLE TO THE PUBLIC BY REQUEST THROUGH THE FINANCE AND ADMINISTRATION OFFICE. THE FORM 990 IS ALSO AVAILABLE ON THE GUIDESTAR WEBSITE.						

Return Reference	Explanation
FORM 990, PART VI, SECTION C, QUESTION 19	THE COLLEGE DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC

Return Reference	Explanation					
FORM 990, Part XI, Line 9	PART XI, LINE 9 Actuarial Adjustment & Provision for Uncoll Pledges 525,928 Loss on extinguishment of L/T debt (366,834) ROUNDING 2 TOTAL (159,096)					

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**SCHEDULE R**

(Form 990)

Department of the Treasury

Internal Revenue Service

Siena College

Name of the organization

Related Organizations and Unrelated Partnerships

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

► Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Employer identification number

DLN: 93493103004155

Open to Public Inspection

				14-13384	198			
t I Identification of Disregarded Entities Com	olete if the organization	n answered "Yes" o	n Form 990, P	art IV, line 33.				
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	D	(f) irect controlling entity		
II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	nizations Complete if g the tax year.	the organization a	nswered "Yes'	' on Form 990, P	art IV,	line 34 because i	t had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code se	ction (e) Public charity (if section 501	status (c)(3))	(f) Direct controlling entity	(g) Section 512 (13) contro entity?	
							Yes	No
								T
								$oxed{oxed}$
aperwork Reduction Act Notice, see the Instructions for Form 9	90.	Cat No 501	35Y			Schedule R (For	m 990) 2	2013

Part III Identification of Related because it had one or more	related organizations trea	ated as a partin	tnership	during the	e tax ye	ar.	I alls	wereu re	:S 011	FOITH	990, Part	10, 11	11e 34	ł
(a) Name, address, and EIN of related organization		(b) Primary activity		entity	Predom Income(re unrela excluded tax un sections	ninant Shorelated, total ted, d from ander 5 512-	(f) are of income	(g) Share of end-of-year assets		ortionate	(i) Code V-UB: amount in bo 20 of Schedule K- (Form 1065	Gene x man part	j) eral or aging tner?	(k) Percentag ownership
					514)				Yes	No		Yes	No	
Part IV Identification of Related Inne 34 because it had one or									wered	l d "Yes	on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domici (state or fo country	le oreign	Direct	(d) controlling entity	(e) Type of ent (C corp, S co or trust)		(f) nare of total income	Share	(g) of end-c year assets	of- Perce owne	ntage		(i) Section 512 (b)(13) controlled entity?
(A) Campa Danastras Inc.	Doubel	NY		C (`-II	C C		10 500		274.20	100.0	.00.0/		Yes No
(1) Spring Properties Inc 515 Loudon Road Loudonville, NY 12211 14-1706494	Rental	NY		Siena C	ollege	C Corp		18,500		274,28	86 100 0	00 %		⁄es
(2) CHAIRTABLE REMAINDER TRUST (3)	INVESTING	NY		NA									,	res .
(3) CHARITABLE REMAINDER TRUST (4)	INVESTING	NY		NA									,	res

Part V	Transactions With Related Organizations Complete if the organization a	answered "Yes" on Form	i 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				Ye	s No	,			
1 During	the tax year, did the orgranization engage in any of the following transactions with one or m	ore related organizations li	sted 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 Gıft,										
d Loans or loan guarantees to or for related organization(s)										
e Loar	ns or loan guarantees by related organization(s)			10	e Ye	es .				
f Divid	dends from related organization(s)			11	F					
g Sale	of assets to related organization(s)			19)	No	,_			
h Purc	hase of assets from related organization(s)			11	1	No	,			
i Exch										
j Leas	e of facilities, equipment, or other assets to related organization(s)			1:	i 📗	No	,			
k Leas	se of facilities, equipment, or other assets from related organization(s)			11	(No	,_			
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 Sharı	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
o Shar	ring of paid employees with related organization(s)			10	•	No	,			
p Reim	nbursement paid to related organization(s) for expenses			1	,	No	,			
q Reim	nbursement paid by related organization(s) for expenses			10	1	No	,			
r Othe	er transfer of cash or property to related organization(s)			1	r Ye	s	_			
s Othe	er transfer of cash or property from related organization(s)			1:	Ye	s	_			
ī							_			
2 If the	e answer to any of the above is "Yes," see the instructions for information on who must com						_			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amoun	t invol	ved				
(1) Spring Pr	roperties Inc (due to Siena)	D	106,915							
(2) Spring Pr	roperties Inc (due from Siena)	Е	245,681							
							_			
		i .	I .							

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

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

revenue) that was not a related organization. See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
]	
												\Box	
	•												

Schedule R (Form 990) 2013

Page **5**

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation						
PART IV, LINE 3	THE CHARITABLE REMAINDER UNITRUSTS LISTED ON LINE 3 OF PART IV HAVE THE FOLLOWING LEGAL DOMICILES 1 - IL 1 - FL 1 - NY						

Schedule R (Form 990) 2013