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 $\mathsf{Form} 990$

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

Open to Public Inspection

	or the 2013 call eck if applicable	C Name of organization	ning 07-01-2013 , 2013, and e	ending 06-30	0-2014	D Emplo	yer ident	ification number
	dress change	BABSON COLLEGE				04-2:	103544	
	me change	Doing Business As						
	tial return rminated	Number and street (or P O box 231 FOREST ST	ıf maıl ıs not delivered to street addre	ss) Room/sui	te		one numbe	
_	nended return	BABSON PARK, MA 024570310	country, and ZIP or foreign postal code	2				
i JAF	plication penaling	F Name and address of p	orincipal officer		U(a)			326,780,121
		KERRY HEALEY 231 FOREST STREET	officipal officer		H(a)	Is this a group subordinates?		or ┌Yes
		BABSON PARK, MA 024	57		H(b)	Are all subord	nates	┌Yes ┌ No
I Ta	x-exempt status	▼ 501(c)(3)	◀ (insert no)	527			ı a lıst (s	see instructions)
J W	ebsite: ► WV	W BABSON EDU			H(c)	Group exempt	ion numl	oer ►
		Corporation Trust Associa	ation Other 🕨	'	L Yea	ar of formation 19	19 M S	tate of legal domicile MA
Pa	rt I Sum	mary						
Governance	ACTION THINK (MANAG STUDEN APPREC LEARNI	NS THAT RESULT IN GENUIN CREATIVELY AND ACROSS I E RISK, THE ABILITY TO EN NTS UNDERSTAND THAT LE, CIATION OF INSTITUTIONS NG CONTINUOUSLY AND TA	THEIR CAREERS, WE PREPA NE ACCOMPLISHMENT OUR DISCIPLINARY BOUNDARIES ERGIZE OTHERS TOWARD A ADERSHIP REQUIRES BOTH , SOCIETIES, CULTURES, AN AKING RESPONSIBILITY FOR ENTERPRISES AS WELL AS E	INNOVAT: S WE CULT GOAL, AN TECHNICA ID THE SEL R THEIR CA	IVE CU IVATE D THE L KNO' F THE AREERS	RRICULA CHA THE WILLING COURAGE TO WLEDGE AND Y WELCOME T OUR STUDEI	LLENGE NESS TO ACT RE A SOPH HE CHA	STUDENTS TO D TAKE AND SPONSIBLY OUR ISTICATED LLENGE OF
Activities &	2 Check ti	his box দ if the organization	discontinued its operations or	disposed o	f more t	than 25% of its	net ass	ets
₹ V	3 Number	of voting members of the gove	erning body (Part VI, line 1a)				3	38
		·	rs of the governing body (Part				4	31
	1		ın calendar year 2013 (Part V ıf necessary)				6	2,247
			n Part VIII, column (C), line 12				7a	2,501 894,678
			e from Form 990-T, line 34 .				7b	111,208
						Prior Year		Current Year
a)	1		, line 1h)			11,275,		20,810,199
Revenue			, line 2g) mn (A), lines 3, 4, and 7d) .			188,299, 8,284,		196,225,857 9,429,009
Æ	1	· · · · · · · · · · · · · · · · · · ·	A), lines 5, 6d, 8c, 9c, 10c, an			2,515,		2,632,752
	12 Total	revenue—add lines 8 through	11 (must equal Part VIII, colu	mn (A), line	:			
					_	210,375,		229,097,817
	1		art IX, column (A), lines 1–3) rt IX, column (A), line 4)...		-	32,996,	0	36,030,117
SQ.		es, other compensation, empl	oyee benefits (Part IX, column			95,661,	1	102,354,314
Expenses	1		X, column (A), line 11e) .				0	0
ŝ	b Total fu	ındraısıng expenses (Part IX, column	(D), line 25) ► 4,174,955					
ш), lines 11a-11d, 11f-24e) .			70,147,	921	75,466,065
	1		must equal Part IX, column (A)			198,805,		213,850,496
	19 Reven	ue less expenses Subtract lu	ne 18 from line 12		$\overline{}$	11,569, jinning of Curre		15,247,321
Net Assets or Fand Balances					Deg	Year	""	End of Year
3.45 8.45 1.45						497,548,	639	576,615,266
E E					•	151,965,		185,067,181
		ssets or fund balances Subtra nature Block	ct line 21 from line 20			345,582,	744	391,548,085
Unde			examined this return, including complete Declaration of prepai					
my ki prepa	Signa e	nowledge ature of officer HERINE CRAVEN CHIEF ADMINISTRA	TIVE OFFICER			2015-05-04 Date		
my ki prepa	Signa E KATH Type	nowledge ature of officer HERINE CRAVEN CHIEF ADMINISTRA e or print name and title		1-	ata.	Date	Latie	
Sign	e KATH	nowledge ature of officer HERINE CRAVEN CHIEF ADMINISTRA	TIVE OFFICER Preparer's signature	D	ate	Date Check If self-employed	PTIN P013905	
Sign Here	Signa KATH Type	nowledge ature of officer HERINE CRAVEN CHIEF ADMINISTRA e or print name and title Print/Type preparer's name	Preparer's signature	D	ate	Date Check If	P013905	
Sign Here Paid	Signa E KATH Type	nowledge ature of officer HERINE CRAVEN CHIEF ADMINISTRA e or print name and title Print/Type preparer's name ERIN COUTURE	Preparer's signature ECOOPERS ILP	D	ate	Date Check If self-employed	P013905 3-4008324	

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

✓ Yes 厂 No

Par	t III	Statement of Program Check if Schedule O contains			ш	
1	Briefl	ly describe the organization's m	ission			
		OLLEGE EDUCATES MEN AND				
PREF	PARET	THEM, IDENTIFY OPPORTUNI	TIES AND INITIAT	E ACTIONS THAT RE	SULT IN GENUINE ACCOMPL	ISHMENT
2		ne organization undertake any s rior Form 990 or 990-EZ? .			which were not listed on	┌ Yes ┌ No
	If"Ye	es," describe these new service	s on Schedule O			
3	servi	ne organization cease conductir		nt changes in how it co	nducts, any program	┌ Yes ┌ No
	If "Y e	es," describe these changes on	Schedule O			
4	exper	ribe the organization's program nses Section 501(c)(3) and 50 otal expenses, and revenue, if a	1(c)(4) organization	s are required to report	,	•
4a	(Code	e) (Expenses	\$ 184,413,668	ıncludıng grants of \$	36,030,117) (Revenue \$	196,217,881)
	WORI UNDE THRO	ON COLLEGE ENROLLS APPROXIMATELY LDWIDE THE COLLEGE OFFERS EDUC, ERGRADUATE PROGRAM THE COLLEGE DUGH THE F W OLIN GRADUATE SCHOO COMPANIES REACH THEIR STRATEGIO	ATION IN BUSINESS AND ALSO GRANTS MASTER (DL OF BUSINESS AT BABS	LIBERAL ARTS, AND IT GRAM OF BUSINESS ADMINISTRAT	NTS THE BACHELOR OF SCIENCE DEGR ION DEGREES AND CUSTOM MASTER (REE THROUGH ITS OF SCIENCE DEGREES
4b	(Code	e) (Expenses	\$	including grants of \$) (Revenue \$)
4 c	(Code	e) (Expenses	\$	including grants of \$) (Revenue \$)
4d		er program services (Describe i	n Schedule O) including grants o	ıf \$) (Revenue \$)
		·			/ (Nevenue 4	,
<u>4e</u>	ıota	al program service expenses 🕨	184,413,668	i e		

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	110
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^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 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	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.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	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
	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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
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? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
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? <i>If "Yes," complete Schedule G, Part II</i>	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	Yes	
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	Yes	
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
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νο
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		Νo
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	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? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "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	

Ċ	Statements Regarding Other 1RS Fillings 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 400		103	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?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	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	
la	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		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	_		
	Described the commence has been assured as a second	5c		<u> </u>
	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
D	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).			
а	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	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
0	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		No
F	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νc
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	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	111111111111111111111111111111111111111	
)	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	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			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
=	Enter the amount of reserves on hand	Į I		
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Cheat of Cahadula O contains a vacanance or note to any line in this Dart VI									
Check if Schedule O contains a response or note to any line in this Part VI			•		•		•	•	. *

	ection A. Governing body and management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	38			
	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					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	31			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management coi			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	rior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the oi	rganız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?		elect or appoint one or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?	l by) ı	nembers, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written active year by the following		ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not			eveni	ue Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	tivitie	s of such chapters,	10a 10b	Yes	
b		tivitie on's e	s of such chapters, xempt purposes?	10b	Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing 	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it	tivitie on's e s gov • •	s of such chapters, xempt purposes? erning body before filing 	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov orm 9	s of such chapters, xempt purposes? erning body before filing	10b		No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form?	tivitie on's e s gov form 9	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with	tivitie on's e s gov form 9	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	tivitie on's e s gov Form S ly inte	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revi	tivitie on's e s gov form 9 ly inte the p	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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?	tivitie on's e s gov form 9 ly inte the p	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Fold 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the	tivitie on's e s gov form 9 ily inte the p iew ar	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	tivitie on's e s gov form 9 ily inte the p iew ar	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	tivitie on's e s gov form 9 ly inte the p lew arie deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to 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 rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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 of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in the organization in the organization invest in the organization in the organization in the organization invest in the organization in the or	tivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this FD id 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organic participation in joint venture arrangements under applicable federal tax law, and take	tivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of it the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	tivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes	No No

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.
 - ✓ Own website ✓ Another's website ✓ Upon 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
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►RICHARD BOWMAN NICHOLS BUILDINGBABSON COLLEGE
 BABSON PARK, MA 024570301 (781) 239-5298

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 Tıtle	(B) A verage hours per week (list any hours	more t perso	tion (han d n is l	ne l both	oox, an d	officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)		(F) Estima mount o compens	ted fother ation he
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-M15C)		rganizati relate organiza	ed l
											-		
											+		
											+		
											+		
											+		
											_		
1b c	Sub-Total	s to Part VII, S	· · · ection A	٠.				*					
d	Total (add lines 1b and 1c) .	· · · ·						Þ	6,079,380		0		794,975
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received more th	nan			
												Yes	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	N o
	action R Indonesiant Co	ntractors											
1	Complete this table for your five	/e highest comp											
	compensation from the organiz	zation Report co	mpens	atıon	fort	he d	calend	arye	ar ending with or wi	thin the organization	n's t	tax year (C	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CONNELLY PARTNERS LLC 46 WALTHAM STREET BOSTON MA 02118	ADVERTISING	2,723,999
SASAKI ASSOCIATES INC 64 PLEASANT STRRET WATERTOWN MA 02472	CONSULTING/DESIGN	1,173,738
CANON BUSINESS SOLUTIONS INC 15004 COLLECTIONS CENTER DRIVE CHICAGO IL 60693	PRINTING	776,794
ROYALL & COMPANY 1920 EAST PARHAM ROAD RICHMOND VA 232282206	STUDENT RECRUITING	750,380
BIGELOW & FLEMING LLC 14 NORFOLK AVENUE SOUTH EASTON MA 02375	CONSTRUCTION	665,718

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶92

Part V	4 1	Statement o		neo ornata ta anno t	no in this Daw Mill			
		CHECK IT SCHED	ule O contains a respo	ilse or note to any li	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
v &	1a	Federated cam	paigns 1a					
Grants	ь	Membership du	ies 1b					
ē Ģ	С	Fundraising ev	ents 1 0	63,300				
Giffts, I iilar An	d	Related organiz	zations 1d					
imil	e	Government grant	s (contributions) 1e	681,451				
tion er S	f	All other contribution	ons, gifts, grants, and 1f	20,065,448				
Contributions, Gifts, Grants and Other Similar Amounts	g		ons included in lines	2,078,890				
Cont	h	Total. Add lines	s 1 a - 1 f		20,810,199			
				Business Code				
i)Lie	2a	TUITION & FEES		900099	148,037,608	148,037,608		
Æ	Ь	ROOM & BOARD		900099	23,973,265	23,973,265		
M C e	c	ED/NON-ED PROG	_	900099	23,831,416	23,831,416		
ð.	d	OTHER ED PROG/A	AUX ACT	721000	383,568		383,568	
ran	e f	All other progra	am service revenue					
Program Serwice Revenue	g		s 2a-2f		196,225,857			
	3		ome (including dividen				074.547	
	4		ar amounts)		2,224,668		274,547	1,950,121
	5	Royalties .		proceeds -				
			(ı) Real	(II) Personal				
	6a	Gross rents Less rental	2,613,801					
		expenses Rental income	2,613,801					
	، ا	or (loss)		<u> </u>	2,613,801			2,613,801
	d	Net rental income or (loss) (i) Securities		(II) O ther	2,013,001			2,013,001
	7a	Gross amount from sales of assets other than inventory	104,857,336	. ,				
	b	Less cost or other basis and	97,652,995					
	С	sales expenses Gaın or (loss)	7,204,341					
	d	Net gain or (los	ss)		7,204,341		236,563	6,967,778
une	8a	Gross income f events (not inc \$						
Other Revenue		of contributions See Part IV, lir	s reported on line 1c) ne 18 a	41,650				
the	ь	Less direct ex	penses b	·				
0	C		(loss) from fundraising	events 🛌	26,927			26,927
	9a		rom gaming activities ne 19					
	_		a	6,610				
	b c		penses b (loss) from gaming act	11,555	-7,976	-7,976		
		Gross sales of returns and allo	inventory, less owances .					
	ь	Less costofa	a oods sold b					
	l		(loss) from sales of inv	entory 🛌				
		Miscellaneou	s Revenue	Business Code				
	11a		_					
	Ь							
	c d	All other reven	ue					
	e		s 11a-11d	▶				
	12	Total revenue.	See Instructions .		220 007 047	105 024 212	904 679	11 EEO 623
				•	229,097,817	195,834,313	894,678	11,558,627

Form 990 (2013) 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) (C) 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 21 331,978 331,978 Grants and other assistance to individuals in the United States See Part IV, line 22 35,698,139 35,698,139 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 5,378,710 1,003,404 3,751,204 624,102 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) . . . 915,223 801,503 113,720 Other salaries and wages 75,416,856 65,670,656 7,701,264 2,044,936 Pension plan accruals and contributions (include section 401(k) 5,629,986 4,902,417 574,911 152,658 and 403(b) employer contributions) 9,889,137 8,610,655 1,010,353 Other employee benefits 268,129 10 5,124,402 4,462,170 523,283 138,949 11 Fees for services (non-employees) Management 445,782 445,782 Legal 318,051 318,051 Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) Advertising and promotion . . 5,046,102 12 4,379,292 631,917 34,893 13 Office expenses 6,175,064 4,721,553 1,260,639 192,872 8,841,147 8,200,935 583,065 14 Information technology . . 57,147 15 Royalties . 5,768,216 78,242 24,246 16 Occupancy 5,665,728 **17** 6,504,166 4,843,199 1,490,052 170,915 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . . . 2,090,829 1,998,525 76,527 15,777 20 4,708,506 4,708,506 Payments to affiliates 21 9,993,655 22 Depreciation, depletion, and amortization . 9,836,923 114,633 42,099 23 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 FOOD & BEVERAGE SERVICE 8,013,845 8,013,810 35 OTHER EXPENSES 7,247,632 2,535,435 4,709,382 2,815 PROFESSIONAL CONSULTING 5,396,968 4,164,570 826,981 405,417 d ROOM, CONF & ADMIN 3,034,193 3,034,193 e All other expenses 1,881,909 830,077 1,051,832 Total functional expenses. Add lines 1 through 24e 25 213,850,496 184,413,668 25,261,873 4,174,955 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 Repining of year Repining of year	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				(A)		
3 Pledges and grants receivable, net 30,535,000 3 20,538,400 4 7,505,119 5 5 10,505,100		1	Cash-non-interest-bearing	48,017,531	1	35,254,049
4		2	Savings and temporary cash investments		2	
Solution and other receivables from current and former officers, directors, trustees, key Schedule 1. Solution Sol		3	Pledges and grants receivable, net	30,535,030	3	29,538,449
### Proposes and highest compensated employees. Complete Part II 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 employees and sponsoring organizations of section 501(r)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L. 10		4	Accounts receivable, net	6,261,134	4	7,208,119
10 Loans and other receivables from other disqualified persons (as defined under section 4958 (f)(1)), persons described in section 4958 (c)(3)(8), and contributing employers and significant specified in section 501 (c)(9) voluntary employees beneficiary organizations of section 501 (c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L		5	employees, and highest compensated employees Complete Part II of		5	
10a	ts	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		_	
10a	S.	_		2 222 522		4.050.077
9	AS		·	3,680,528		4,308,677
10s				4.540.000	-	1,000,100
Complete Part VI of Schedule D 10a 348,017,563 10c 137,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 11 179,227,786 12 179,227,786 13 179,227,278 13 179,227,278 13 179,227,278 13 179,227,278 13 179,227,278 13 179,227,		-		4,519,602	9	4,998,129
11 Investments—publicly traded securities 183,655,051 11 240,981,843 12 240,981,843 12 1nvestments—other securities See Part IV, line 11 91,864,917 12 89,032,792 13 Investments—program-related See Part IV, line 11 13 14 1ntangible assets 14 15 Other assets See Part IV, line 11 2,640,339 15 28,015,422 16 Total assets. Add lines 1 through 15 (must equal line 34) 497,548,639 16 576,615,268 18 Grants payable and accrued expenses 16,278,152 17 20,080,864 18 Grants payable 18 Grants payable 18 Grants payable 18 16,278,152 17 20,080,864 19 Deferred revenue 10,825,227 19 11,812,730 10,825,227 19 11,812,730 10,825,227 19 11,812,730 10,825,227 19 11,812,730 10,825,227 19 11,812,730 10,825,227 19 11,812,730 10,825,227 10 10,82		10a	Complete Part VI of Schedule D 348,017,563			
12 Investments—other securities See Part IV, line 11 91.864.917 12 89.032.782 13 Investments—program-related See Part IV, line 11 13 14 14 Intangible assets 14 14 15 Other assets See Part IV, line 11 2.640.339 15 28.015.422 16 Total assets Add lines 1 through 15 (must equal line 34) 497.548.639 16 576.615.268 17 Accounts payable and accrued expenses 16.278.152 17 20.080.864 18 Grants payable 18 18 18 19 Deferred revenue 10.825.227 19 11.812.730 10 Tax—exempt bond liabilities 68.061.227 20 99.405.781 12 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 22 23 Secured mortgages and notes payable to unrelated third parties 39.198.663 23 36.395.000 24 Unsecured notes and loans payable to unrelated third parties 39.198.663 23 36.395.000 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities (including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities including federal income tax, payables to related third parties, and other liabilities and time time time time time time time time						
13 1. 13 1. 13 1. 14 1. 13 1. 14 1. 1. 14 1. 1. 1.		11	•			
14		12	Investments—other securities See Part IV, line 11	91,864,917	12	89,032,792
15		13	, ,		13	
Total assets. Add lines 1 through 15 (must equal line 34) 497,548,639 16 576,615,268		14			14	
17		15		2,640,339	15	28,015,422
18 Grants payable 18 10,825,227 19 11,812,730 20 Tax-exempt bond liabilities 68,051,227 20 99,405,761 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 39,198,663 23 36,395,000 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties and other liabilities not included on lines 17-24 Complete Part X of Schedule 17,612,626 25 17,372,826 26 Total liabilities, Add lines 17 through 25 151,965,895 26 185,067,181 27 Unrestricted net assets 144,344,420 27 163,609,705 28 Temporarily restricted net assets 101,901,919 28 116,416,261 29 Permanently restricted net assets 101,901,919 28 116,416,261 29 Permanently restricted net assets 101,901,919 28 116,416,261 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 345,582,744 33 391,548,085 30 Total net assets or fund balances 345,582,744 33 391,548,085 31 Paid-in earsets or fund balances 345,582,744 33 391,548,085 32 Paid-in earsets or fund balances 345,582,744 33 391,548,085 33 Total net assets or fund balances 345,582,744 33 391,548,085 34 Paid-in earsets or fund balances 345,582,744 33 391,548,085 35 Paid-in earsets or fund balances 345,582,744 33 391,548,085 35 Paid-in earsets or fund balances 345,582,744 33 391,548,085 36 Paid-in earsets or fund balances 345,582,744 34 345,582,744 34 345,582,74		16			16	576,615,266
19 Deferred revenue 10,825,227 19 11,812,730		17	Accounts payable and accrued expenses	16,278,152	17	20,080,864
Tax-exempt bond liabilities		18	Grants payable		18	
21 Escrow or custodial account liability Complete Part IV of Schedule D		19		10,825,227	19	11,812,730
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	68,051,227	20	99,405,761
Unsecured notes and loans payable to unrelated third parties		21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Unsecured notes and loans payable to unrelated third parties	ilitie	22				
Unsecured notes and loans payable to unrelated third parties	<u>ge</u>		persons Complete Part II of Schedule L		22	
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	39,198,663	23	36,395,000
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		24	
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. 27 Unrestricted net assets		26		151,965,895	26	185,067,181
30 Capital stock or trust principal, or current funds	S)					
30 Capital stock or trust principal, or current funds	ě	27		144 344 420	27	163 609 705
30 Capital stock or trust principal, or current funds	<u>छ</u>					
30 Capital stock or trust principal, or current funds						
30 Capital stock or trust principal, or current funds	ŭ	2.5	,	35,555,465	23	111,022,110
30 Capital stock or trust principal, or current funds	<u>. </u>		•			
33 Total net assets or fund balances	0	30	•		30	
33 Total net assets or fund balances	Ř	31			31	
33 Total net assets or fund balances	AS:	32			32	
34 Total liabilities and net assets/fund balances	늍	33	Total net assets or fund balances	345,582,744	33	391,548,085
	Z	34	Total liabilities and net assets/fund balances	497,548,639	34	576,615,266

Dat	t XI Reconcilliation of Net Assets			<u>'</u>	age ==
FGI	Check if Schedule O contains a response or note to any line in this Part XI		•		ন
1	Total revenue (must equal Part VIII, column (A), line 12)	1		229.0	97,817
2	Total expenses (must equal Part IX, column (A), line 25)				
•	Devenue less synances Cubbrach line 2 from line 1	2		213,8	350,496
3	Revenue less expenses Subtract line 2 from line 1	3		15,2	247,321
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2/5	582,744
5	Net unrealized gains (losses) on investments	-		343,	702,7 4 4
		5		30,7	719,557
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			-1,537
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		391,5	548,085
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	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 separation basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	е	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes	

Software ID: **Software Version:**

EIN: 04-2103544

Name: BABSON COLLEGE

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers,	Direct	ors,	Tru	ste	es, I	(ey	Employees, Higl	hest	
(A) Name and Title	(B) Average hours per week (list any hours for related	verage Position (do not check urs per more than one box, unless ek (list person is both an officer y hours and a director/trustee)							(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 trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-MISC)	_,,	related organizations
MICHAEL J ANGELAKIS	1 20	х						0	0	0
TRUSTEE THE HONOR CRAIG BENSON	1 20	×		×				0	0	0
VICE CHAIR,BOARD OF TRUSTE ETTORE V BIAGIONI	1 20	X						0	0	0
TRUSTEE (STARTING 10/13) MARLA M CAPOZZI	1 20									
TRUSTEE PAUL W CHISHOLM	1 20	Х						4,000	0	0
TRUSTEE	1 20	x						0	0	О
THEODORE A CLARK	1 20	х		х				0	0	0
TREASURER ANN-MARIE SWEENEY COPLAND TRUSTEE	1 20	х						0	0	0
TIMOTHY A DEMELLO TRUSTEE	1 20	х						0	0	0
DEBORAH DESANTIS	1 20	х						0	0	0
TRUSTEE GARY T DICAMILLO	1 20	Х						6,779	0	0
TRUSTEE CRAIG M DONALDSON	1 20	Х						0	0	0
TRUSTEE (STARTING 10/13) FRANK M FISCHER	1 20	х						0	0	0
TRUSTEE MARCO A GARGUREVICH	1 20	Х						0	0	0
TRUSTEE (UNTIL 10/13) THOMAS F GILBANE JR	1 20	Х						0	0	0
TRUSTEE LEONARD GREEN	1 20	Х						0	0	0
TRUSTEE (STARTING 10/13) MUHAMMAD H HABIB	1 20	Х						0	0	0
TRUSTEE DR KERRY HEALEY	40 00			l						
TRUSTEE/PRESIDENT (STARTING 7/1/13) BRUCE T HERRING	20 00	X		Х				413,109	0	52,889
VICE CHAIR,BOARD OF TRUSTE ERIC G JOHNSON	1 20	Х		Х				0	0	0
TRUSTEE FRED SC KIANG		Х						0	0	0
TRUSTEE	1 20	х						0	0	0
CARLETON F KILMER TRUSTEE	1 20	х						0	0	0
CARMELLA KLETJIAN TRUSTEE	1 20	х						0	0	0
DAVID F LAMERE TRUSTEE	1 20	х						0	0	0
LOUIS J LAVIGNE JR TRUSTEE	1 20	Х						0	0	0
MICHAEL S LORBER	1 20 1 20	Х						0	0	0
TRUSTEE (STARTING 10/13)	J			<u> </u>			<u> </u>			

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors **(D)** Reportable **(E)** Reportable (A) Name and Title **(B)** Average (C) Position (do not check **(F)** Estimated amount

Name and Title	Average hours per week (list any hours for related	Posit more the perso and a	han o n ıs b	ne b oth ctor/	ox, u an of /trus	inless fficer tee)	_	Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and
DAVID LUCCHINO	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-14130)	2/1099-14130)	related organizations
TRUSTEE (STARTING 10/13)	1 20	x						0	0	0
WARREN KKLUKE	1 20	X						0	0	0
TRUSTEE ANDRONICO LUKSIC	1.30	^						Ů	0	
TRUSTEE	1 20	×						0	0	0
CARLOS MATTOS	1 20	х						0	0	0
TRUSTEE DR RICHARD K MILLER	1 20									
TRUSTEE		×						0	0	0
GORDON PRICHETT	1 20	х						16,250	0	0
TRUSTEE RICHARD A RENWICK	1 20								0	
TRUSTEE KENNETH G ROMANZI	1.30	Х						0	0	0
TRUSTEE	1 20	х						0	0	0
THOMAS T STALLKAMP	1 20	x						0	0	0
TRUSTEE AMANDA STRONG	1 20 1 20									
TRUSTEE (STARTING 10/13)		Х						0	0	0
MARTHA D VORLICEK TRUSTEE	1 20	х						0	0	0
ROBERT E WEISSMAN	1 20	×						0	0	0
TRUSTEE JOSEPH WINN	1 20									
TRUSTEE/CHAIR,BOARD OF TRUSTEES	1 20	Х		Х				0	0	0
GARY ZWERLING TRUSTEE	1 20	x						0	0	О
DENNIS HANNO	40 00			х				374,560	0	56,896
PROVOST RANCH KIMBALL	40 00									
COO(STARTING 7/22/13)				Х				184,301	0	3,869
KATHERINE CRAVEN	40 00			х				0	0	0
CAO(STARTING 2/14) MARY ROSE	40 00			х				212,710	0	46,265
V P FOR CAMPUS & COMMUNITY AFFAIRS DIANA ZAIS	40 00							212,710		10,203
V P FOR DEVELOPMENT				Х				199,441	0	50,407
CAROL HACKER V P OF ALUMNI&FRIENDS NETW	40 00			х				184,949	0	34,510
PHILIP SHAPIRO	40 00			х				309,663	0	57,322
V P FOR FINANCE (UNTIL 2/14) DONNA BONAPARTE	40 00									5.,522
V P FOR HR				Х				217,352	0	32,640
GRANT GOSSELIN	40 00			х				173,222	0	46,857
JONATHAN MOLL	40 00	-		х				245 524		F4 630
V P AND GENERAL COUNSEL SAMUEL DUNN	20 00							245,531	0	54,630
V P FOR FACILITIES MGT/CIO	40 00			х				387,848	0	36,844
										

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

more pers	ition (ne b oth	ox, u an of	nless ficer	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	
Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-M1SC)	related	
		х							
		l ^	ı			141,701	0	23,250	
						141,701	O .	23,230	
		l x				46,974	0	299	
							-		
			x			349,041	0	43,866	
						·		·	
				х		487,107	0	47,685	
+									
				×		353,979	0	37,046	
				х		372,681	0	39,867	
+									
				х		326,351	0	23,011	
				V		219 627	0	12 545	
				^		318,627	U	13,545	
					х	333.659	0	28,635	
						,			
					x	419.545	0	64,642	
						.15,515		3.,312	
						x	X 326,351 X 318,627 X 333,659	X 326,351 0 X 318,627 0 X 333,659 0	

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DLN: 93493124005445

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

Name of the organization

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.

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

2013

Open to Public Inspection

SABSC	ON COLL	LEGE							
			04-2103544						
	rt I	Reason for Public Charity Status (All organizations must complete this pa		ions.					
The	organı	zation is not a private foundation because it is (For lines 1 through 11, check only one box)						
1	Γ	A church, convention of churches, or association of churches described in section 170(b)	(1)(A)(i).						
2	Γ	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)							
3	Γ	A hospital or a cooperative hospital service organization described in $section 170(b)(1)(b)$	V)(iii).						
4	Γ	A medical research organization operated in conjunction with a hospital described in secti hospital's name, city, and state							
5	Γ	An organization operated for the benefit of a college or university owned or operated by a g	jovernmental unit	describe	d ın				
		section 170(b)(1)(A)(iv). (Complete Part II)							
6	Γ	A federal, state, or local government or governmental unit described in section 170(b)(1)((A)(v).						
7	<u> </u>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)							
8	<u> </u>								
9	Γ	An organization that normally receives (1) more than 331/3% of its support from contribut	ions, membership	fees, an	d gros	S			
		receipts from activities related to its exempt functions—subject to certain exceptions, and	d (2) no more than	331/3%	of				
		its support from gross investment income and unrelated business taxable income (less se	ction 511 tax) fro	m busine	esses				
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part	III)						
10	Γ	An organization organized and operated exclusively to test for public safety See section 5	609(a)(4).						
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the function or more publicly supported organizations described in section 509(a)(1) or section 500 the box that describes the type of supporting organization and complete lines 11e through a Type I b Type II c Type III - Functionally integrated d Type)9(a)(2) See sect i 11h	ion 509(a	a)(3).	Check			
е	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly other than foundation managers and other than one or more publicly supported organization section 509(a)(2)							
f		If the organization received a written determination from the IRS that it is a Type I, Type I check this box		porting o	rganız	zation,			
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of following persons?		,					
		(i) A person who directly or indirectly controls, either alone or together with persons desc	rıbed ın (ıı)		Yes	No			
		and (III) below, the governing body of the supported organization?		11g(i)					
		(ii) A family member of a person described in (i) above?		11g(ii)					
		(iii) A 35% controlled entity of a person described in (i) or (ii) above?		11g(iii)		_			

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you the organi in col (i) o suppor	zation f your	(vi) Is the organization in col (i) organized in the US?		(vii) A mount of monetary support	
		instructions))	Yes	No	Yes	No	Yes	No		
Total										

Provide the following information about the supported organization(s)

supported organization

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 8,711,950 23,762,424 22,033,031 11,275,700 20,810,199 86,593,304 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 8,711,950 23,762,424 22,033,031 11,275,700 20,810,199 86,593,304 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 13,490,037 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 73,103,267 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total beginning in) 🟲 22,033,031 11,275,700 20,810,199 Amounts from line 4 8,711,950 23,762,424 86,593,304 Gross income from interest, dividends, payments received on securities loans, rents, royalties 3,153,483 3,301,836 4,798,963 6,347,086 4,838,469 22,439,837 and income from similar sources Net income from unrelated business activities, whether or 58,349 111,208 169,557 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 60,538 62,305 50,750 66,345 48,260 288,198 capital assets (Explain in Part IV) 11 Total support (Add lines 7 109,490,896 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 66 770 % Public support percentage for 2012 Schedule A, Part II, line 14 15 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 **▶**▽ 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

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	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test

Facts And Circumstances Test							
Return Reference	Explanation						
SCHEDULE A, PART II, LINE 10	LINE 10 INCLUDES INCOME FROM FUNDRAISING AND GAMING ACTIVITIES						

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493124005445

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Political Campaign and Lobbying Activities

► 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-FZ, Part V, line 35c (Proxy Tax), then

	me of the organization SON COLLEGE			Em	ployer ide	ntification number
DAL	SON COLLEGE			04-	2103544	ļ
Par	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a sec	tion 527	7 organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect po	olitical campaign act	tivities in Part IV	,	
2	Political expenditures				F	\$
3	Volunteer hours					
Par	Complete if the or	ganization is exempt und	er section 501((c)(3).		
1	•	e tax incurred by the organization	-		>	\$
2	,	e tax incurred by organization ma			▶	\$
3	•	section 4955 tax, did it file Form	_			⊤ Yes
4a	Was a correction made?	,	·			☐ Yes ☐ No
b	If "Yes," describe in Part IV					
Par	t I-C Complete if the or	ganization is exempt und	er section 501(c), except se	ction 50	01(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activi	ties 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed t	o other organization	s for section 527	, ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b	>	\$
4	Did the filing organization file I	Form 1120-POL for this year?				⊤ Yes
5	organization made payments l amount of political contribution	nd employer identification numbe For each organization listed, ente ns received that were promptly ar political action committee (PAC)	r the amount paid frond directly delivered	om the filing orga I to a separate po	nızatıon's İlitical org	funds Also enter the anızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount filing organi funds If none	zatıon's	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter - 0 -

Sch	hedule C (Form 990 or 990-EZ) 2013					Page 2
P	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 Donk IV an			a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		list in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		ol" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount to	from 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 over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
		1.6				
_	Grassroots nontaxable amount (enter 25% of lir	•				
	Subtract line 1g from line 1a If zero or less, ent			_		1
	Subtract line 1f from line 1c If zero or less, ente			L		1
j	If there is an amount other than zero on either lii 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	have 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

renedate e (i			Г
Part II-B	Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT	
	med Form 5766 (election under Section 501(n)).		

	filed Form 5768 (election under section 501(h)).					
For e	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	1)	((b)	
activ		Yes	No	Am	nount	
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?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo			
C	Media advertisements?		No			
d	Mailings to members, legislators, or the public?		Νo			
e	Publications, or published or broadcast statements?		No			
f	Grants to other organizations for lobbying purposes?		No			
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?		No			
i	O ther activities?	Yes				1
j	Total Add lines 1c through 1i					1
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?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6).	n 501(c)(5), o	rsec	tior	1
				Y	'es	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A lines 1 and 2 are answered					

Par	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I line 3, is answered "Yes."		
1	Dues, assessments and similar amounts from members	1	

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	Taxable 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

Tare in B, fine 1 7430, complete this pare for any additional information					
Return Reference	Explanation				
PART II-B, LINE 1	THE ORGANIZATION PAYS MEMBERSHIP DUES TO MEMBER ORGANIZATIONS WHICH MAY ENGAGE IN LOBBYING ACTIVITIES THEREFORE, A PORTION OF THE DUES MAY BE ATTRIBUTABLE TO LOBBYING ACTIVITIES				

201104410 0 (101111 330 01 330 12) 2013		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493124005445

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

► 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) and its instructions is at www.irs.gov/form990.

Supplemental Financial Statements

Open to Public Inspection

	Name of the organization BARSON COLLEGE			Employer identification number				
DAD	SON COLLEGE		04-	2103544				
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990		Funds	or Account	s. Complet	e if the		
	organization answered Tes to Form 990	(a) Donor advised funds		(b) Funds and	other accou	nts		
	Total number at end of year							
:	Aggregate contributions to (during year)							
;	Aggregate grants from (during year)							
ļ	Aggregate value at end of year							
;	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or			ısed	┌ Yes	┌ No		
•	Did the organization inform all grantees, donors, and doused only for charitable purposes and not for the beneficonferring impermissible private benefit?				┌ Yes	┌ No		
Pa I	rt III Conservation Easements. Complete if	the organization answered "Yes	" to Forn	n 990, Part I	V, line 7.			
!	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Preservation of Preservation of	fa certifie	d historic stru	cture			
	easement on the last day of the tax year	·						
				Held at the	e End of the	Year		
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easements		2b					
С	Number of conservation easements on a certified histo	` '	2c					
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d					
;	Number of conservation easements modified, transferr	ed, released, extinguished, or termin	ated by th	ne organizatior	during			
	the tax year 🛌							
	Number of states where property subject to conservati	on easement is located 🗠						
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	he periodic monitoring, inspection, h	andling of	violations, an	d ┌ Yes	┌ No		
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ea	sements o	during the year				
	A mount of expenses incurred in monitoring, inspecting	and enforcing conservation easeme	ents durini	a the vear				
	► \$, and emoreing conservation caseme	ones aann,	g the year				
i	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of	section 17	70(h)(4)(B)(ı)	┌ Yes	┌ No		
ı	In Part XIII, describe how the organization reports cor balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financ						
ar	t III Organizations Maintaining Collection Complete if the organization answered "Y			her Similar	Assets.			
a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education	on, or rese	arch in further				
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education				ıc		
	(i) Revenues included in Form 990, Part VIII, line 1			► \$				
	(ii) Assets included in Form 990, Part X			► \$				
	If the organization received or held works of art, histor following amounts required to be reported under SFAS							
а	Revenues included in Form 990, Part VIII, line 1			> \$				
b	Assets included in Form 990, Part X			<u> </u>				
-	MODELO IIICIUUEU III FUIIII 990, PAIL A			- →				

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant	Assets (continued)
collection items (check all that apply)	use of its
a	
b Scholarly research e Other	
c 🔽 Preservation for future generations	
4 Provide a description of the organization's collections and explain how they further the organization's exempt purport Part XIII	ose in
5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar	
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	Yes V No
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to For Part IV, line 9, or reported an amount on Form 990, Part X, line 21.	111 990,
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	┌ Yes ┌ No
b If "Yes," explain the arrangement in Part XIII and complete the following table	
	Amount
C Beginning balance	
d Additions during the year	
e Distributions during the year	
f Ending balance	
2a Did the organization include an amount on Form 990, Part X, line 21?	┌ Yes
b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII	<u></u> Г
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line	
(a) Current year (b) Prior year (b) (c) Two years back (d) Three years b	
	13,040,232
c Net investment earnings, gains, and losses 39,608,164 33,419,630 -2,366,163 37,390,	
d Grants or scholarships2,223,083 -2,173,736 -2,152,163 -1,953,	.530 -1,907,729
e Other expenditures for facilities and programs	725 -6,674,628
f Administrative expenses	673 107.005.740
g End of year balance	197,005,749
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as	
a Board designated or quasi-endowment ► 44 000 %	
b Permanent endowment ► 30 000 %	
c Temporarily restricted endowment ► 26 000 % The percentages in lines 2a, 2b, and 2c should equal 100%	
3a Are there endowment funds not in the possession of the organization that are held and administered for the	<u> </u>
organization by (i) unrelated organizations	Yes No
(ii) related organizations	3a(ii) No
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R?	3b
4 Describe in Part XIII the intended uses of the organization's endowment funds	
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990	, Part IV, line
11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) depreciating the control of the basis (other) depreciating the control of the basis (other) depreciating the control of the basis (other)	
	489,673
1a Land	
b Buildings	
b Buildings	6,346 100,812,962
b Buildings 260,159,308 159,34 c Leasehold improvements 38,678,543 33,20	6,346 100,812,962 8,831 5,469,712
b Buildings 260,159,308 159,34 c Leasehold improvements 38,678,543 33,20 d Equipment 38,678,543 33,20	6,346 100,812,962 8,831 5,469,712 4,600 30,455,439

(a) Description of security or category	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(Including name of security) (1)Financial derivatives		Cost of end-of-year market value
(2)Closely-held equity interests		
(3)Other (A)ALTERNATIVE INVESTMENTS	89,032,792	F
	, ,	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	▶ 89,032,792	
Part VIII Investments—Program Related. Co		answered 'Yes' to Form 990, Part IV, line 110
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. Complete if the organization (a) Description		, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Part X Other Liabilities. Complete if the orga		·
Part X Other Liabilities. Complete if the organization of the property of the bulb in the organization of the organization	anızatıon answered 'Yes' to	
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN	anızatıon answered 'Yes' to	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value 3,154,360	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value 3,154,360	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value 3,154,360	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value 3,154,360	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value 3,154,360	·
Form 990, Part X, line 25. 1 (a) Description of liability	(b) Book value 3,154,360	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value 3,154,360	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value 3,154,360	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value 3,154,360	·
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes GOVERNMENT ADVANCES FOR STUDENT LOAN MARKET VALUE OF INTEREST RATE SWAP	(b) Book value 3,154,360	

ADJUSTMENTS

ADJUSTM<u>ENTS</u>

PART XII, LINE 4B - OTHER

Par	rt XI Reconciliation of Revenue per Audited Financial Statements With Rethe organization answered 'Yes' to Form 990, Part IV, line 12a.	venue pe	r R	eturn Complete ıf
1	Total revenue, gains, and other support per audited financial statements		1	231,409,539
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	316,164		
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII)	004,442		
e	Add lines 2a through 2d	2	2e	2,311,722
3	Subtract line 2e from line 1	🗆	3	229,097,817
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)			
С	Add lines 4a and 4b	4	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	${ extstyle $	5	229,097,817
Par	rt XII Reconciliation of Expenses per Audited Financial Statements With Ex if the organization answered 'Yes' to Form 990, Part IV, line 12a.	kpenses p	er	Return. Complete
1	Total expenses and losses per audited financial statements		1	184,028,521
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			
С	Other losses			
d	Other (Describe in Part XIII)			
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	184,028,521
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 29	,821,975		
C	Add lines 4a and 4b		4c	29,821,975
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	[5	213,850,496
Par	rt XIII Supplemental Information			
Part	ovide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines rt V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete th ormation		rovid	de any additional
	Return Reference Explanation			
	WORKS OF ART, HISTORICAL TREASURES, LITERARY WORL PESERVED AND PROTECTED FOR EDUCATIONAL, RESEAR PURPOSES, ARE NOT CAPITALIZED THEY ARE NEITHER D NOR ENCUMBERED IN ANY MANNER ACCORDINGLY, SUCH RECORDED FOR FINANCIAL STATEMENT PURPOSES	CH AND PU ISPOSED C	BLI F F	C EXHIBITION OR FINANCIAL GAIN
	BABSON COLLEGE'S ENDOWMENT CONSISTS OF OVER 25 BEEN ESTABLISHED OVER TIME FOR VARIOUS PURPOSES CHAIRS AND PROFESSORSHIPS, FACILITIES, ATHLETICS SERVICES	, INCLUDIN AND OTHEI	NG S R E C	SCHOLARSHIPS, DUCATIONAL
PART	T XI, LINE 2D - OTHER STUDENT AID -\$35,698,139 CHANGE IN VALUE OF SWAP A	AGREEMEN	TS	& ANNUITY

\$403,392 BABSON GLOBAL ADJUSTMENT \$7,290,305

STUDENT AID \$35,698,139 BABSON GLOBAL ELIMINATION -\$5,876,164

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

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493124005445

OMB No 1545-0047

SCHEDULE E

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

Name of the organization BABSON COLLEGE

Employer identification number

	04-2103544			
Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
4	Does the organization maintain the following?		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	4a_	Yes	
	basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
5 a	Does the organization discriminate by race in any way with respect to Students' rights or privileges?			No
	Admissions policies?	5b		No
c	: Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
e	e Educational policies?	5e		No
f	Use of facilities?	5f		Νo
g	Athletic programs?	5g		Νo
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
		\dashv		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
ь	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II		V -	
	OF NEV PLOC 73-30, 1973-2 C.D. 307, COVERING FACIAL HUNDISCRIMINATION (T.E. NO, EXPIAIN ON PART II	7	Yes	i

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, PART I, LINE 3	BABSON COLLEGE PROHIBITS DISCRIMINATING ON THE BASIS OF RACE, COLOR, NATIONAL, OR ETHNIC ORIGIN, RELIGION, SEX, LIFESTYLE, SEXUAL ORIENTATION PREFERENCE, AGE, HANDICAP, OR VETERAN STATUS THIS POLICY IS PUBLISHED IN FACULTY & STAFF HANDBOOK
SCHEDULE E, PART I, LINE 6	BABSON COLLEGE RECEIVES FEDERAL AID TO ENHANCE SCHOLARSHIP AND WORK STUDY PROGRAMS

Schedule E (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493124005445

OMB No 1545-0047

2013

Department of the Treasury

SCHEDULE F

(Form 990)

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.

Open to Public

Internal Revenue Service					Thispection
Name of the organization BABSON COLLEGE				Employer identi	fication number
BABSON COLLEGE				04-2103544	
Part I General Information "Yes" to Form 990, Par			e United States. Co	omplete if the organiza	ation answered
1 For grantmakers. Does the o					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	ance?				│ Yes │ No
2 For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitorii	ng the use of its grants	s and other
3 Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ce is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data			,		
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	56			1,420,424
b Total from continuation sheets to Part I	0	0			38,419,645
c Totals (add lines 3a and 3b)	0	56			39,840,069

Part II						i ted States. Compl duplicated if additior	9		to Form 990,
	ame of nization	(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) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
						es by the foreign co (c)(3) equivalency l			
3 Ente	er total num	nber of other or	ganızatıons or ent	ities					

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	duplicated if addit	tional space is ne	eeded.				
(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)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
				I.	I .		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<u> </u>	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, 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	IZ	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)	١✓	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)	ᅜ	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)	⊽	Yes	Г	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	√	Yes	Г	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
PART I, LINE 3	ALL THE NUMBERS ARE BASED ON THE AMOUNTS ASSOCIATED WITH THE ACTIVITY ON THE ORGANIZATION'S TRIAL BALANCE

Additional Data

Software ID: Software Version:

EIN: 04-2103544

Name: BABSON 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) 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	0		PROGRAM SERVICESFUNDRAISING/ALUMNI RELATIONS	EXECUTIVE EDUCATION	399,364
EUROPE	0			EXECUTIVE EDUCATION	771,499
MIDDLE EAST AND NORTH AFRICA	0	5		EXECUTIVE EDUCATION	115,200

Form 990 Schedule	F Part I - Act	ivities Outsid	le 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
SOUTH AMERICA	О	2		EXECUTIVE EDUCATION	92,087
NORTH AMERICA	0	1		EXECUTIVE EDUCATION	33,901
EUROPE	0	0	DEVELOPMENT/FUNDRAISING		7,446

Form 990 Schedule F	Part I - Activ	<u>ities Outside</u>	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	0		ALUMNI RELATIONS/FUNDRAISING		628
EUROPE	0	_	ALUMNI RELATIONS/FUNDRAISING		299
NORTH AMERICA	0	<u> </u>	ALUMNI RELATIONS/FUNDRAISING		1,050

Form 990 Schedule F	Part I - Activ	<u>ities Outside</u>	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
SOUTH AMERICA	0	=	ALUMNI RELATIONS/FUNDRAISING		5,496
SOUTH ASIA	0	0	ALUMNI RELATIONS/FUNDRAISING		616
EAST ASIA AND THE PACIFIC	0	0		STUDENT STUDY ABROAD PROGRAM	712,051

Form 990 Schedule F P	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) 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				
EUROPE	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAMS	1,803,386				
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAMS	74,351				
RUSSIA AND THE NEWLY INDEPENDENT STATES	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAMS	84,936				

Form 990 Schedule F F	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) 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	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAMS	162,736				
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	STUDENT STUDY ABROAD PROGRAM	55,652				
CENTRAL AMERICA AND THE CARIBBEAN			INVESTMENT		35,519,371				

DLN: 93493124005445

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

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.

Open to Public Inspection

Name of the organization BABSON COLLEGE					_	Employer iden	tification number
AB30N COLLEGE						04-2103544	
Part I Fundraising Act Form 990-EZ filers				on answered "Yes" part.	to Form	າ 990, Part IV	, line 17.
Indicate whether the organ	zation raised funds t	hrough ar	ny of the f	following activities Che	eck all th	nat apply	
a			e	☐ Solicitation of non			
b Internet and email solid	citations		f	Solicitation of gov			
c Phone solicitations d In-person solicitations			g	Special fundraisin	ig events	5	
Did the organization have a or key employees listed in							Г _{Yes} Г _N
b If "Yes," list the ten highes to be compensated at least			fundraise	rs) pursuant to agreem	ents und	der which the fui	ndraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont contrib	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(orı	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1		Yes	No				
2							
3							
4							
5							
6							
7							
8							
9							
10							
otal			.				
3 List all states in which the or registration or licensing	organization is regist	ered or li	censed to	solicit contributions o	r has be	en notified it is	exempt from

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contribut			
		<u> </u>	(a) Event #1 PRESIDENT'S CUP	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
Ф			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	104,950	0		104,950
Rev	2	Less Contributions	63,300	0		63,300
	3	Gross income (line 1 minus line 2)	41,650	0		41,650
	4	Cash prizes	(0		
မှာ	5	Noncash prizes	249	9		249
Expenses	6	Rent/facility costs	(0		
ă	7	Food and beverages .	380	0		380
Drea	8	Entertainment				
ā	9	Other direct expenses .	14,094	4		14,094
	10	Direct expense summary Add lin	es 4 through 9 ın columr	n (d)		(14,723)
	11	Net income summary Subtract li	ne 10 from line 3, columr	n (d)		26,927
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	irt IV, line 19, or repo	rted more than
Revenue		\$15,500 OH FORM 330 EE, III	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u> </u> ₹	1	Gross revenue			6,610	6,610
မှ	2	Cash prizes			2,200	2,200
Expenses	3	Non-cash prizes			11,989	11,989
	4	Rent/facility costs			0	
Direct	5	Other direct expenses			397	397
	6	Volunteer labor	Г Yes% Г Nо	Г Yes	┌────────────────────────────────────	,
	7	Direct expense summary Add line	s 2 through 5 in column ((d)		14,586
	8	Net gaming income summary Subt	ract line 7 from line 1, co	olumn (d)		-7,976
9 a b	Ent Is t	ter the state(s) in which the organiza the organization licensed to operate No," explain	ation operates gaming ac gaming activities in eac	tivities MA h of these states?		
10a b			licenses revoked, susper	nded or terminated during	the tax year?	·· 「Yes 「No

						1
Doe:	s the organization operate (gamıng actıvıt	ies with nonmembers	5?		res ▼ No
12	Is the organization a gran	ntor, beneficia	ry or trustee of a trus	st or a member of a partnership or o	ther entity	
	formed to administer cha	rıtable gamıng	,			┌ Yes ┌ No
13	Indicate the percentage (of gamıng actı	vity operated in			
а	The organization's facility	y			13a	50 000 %
b	An outside facility				13b	50 000 %
14	Enter the name and addre	ess of the pers	on who prepares the	organization's gaming/special ever	nts books and records	
	Name RICHARD I	BOWMAN				
		ST STREET PARK,MA 02	457			
15a	Does the organization ha	ve a contract	with a third party fror	m whom the organization receives g	amıng	
	revenue?					┌ Yes ┌ No
b	If "Yes," enter the amour	nt of gaming re	venue received by th	ne organization 🟲 \$	and the	
	amount of gaming revenu	e retained by	the third party 🟲 \$ _			
c	If "Yes," enter name and	address of the	third party			
	Name 🟲					
	Address 🟲					
16	Gaming manager informa					
	Name NONE					
	Gaming manager compen	sation 🟲 \$				
	Description of services p	rovided 🟲				
	Director/officer	Г	_ Employee	☐ Independent contra	actor	
L7	Mandatory distributions		' /	·		
а	Is the organization requir	ed under state	e law to make charita	able distributions from the gaming pi	roceeds to	
	retain the state gaming li	cense?				Γ _{Yes} Γ _{No}
ь	Enter the amount of distr	ıbutıons requii	ed under state law d	istributed to other exempt organization	tions or spent	, , , , , , , , , , , , , , , , , , , ,
	ın the organızatıon's own	exempt activi	ties during the tax ye	ear 🟲 💲		
Pa		9b, 10b, 15	b, 15c, 16, and 17	planations required by Part I, l b, as applicable. Also complete		
	Return Reference		•	Explanation	<u> </u>	

(Form 990)

Department of the Treasury

Grants and Other Assistance to Organizations,

Governments and Individuals in the United States

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

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

DLN: 93493124005445 OMB No 1545-0047

Open to Public

Internal Revenue Service Name of the organization	► Info	rmation about Schedule I	(Form 990) and its ins	structions is at <u>www.i</u>	rs.gov/form990.	Fmplover identi	Inspection ification number
BABSON COLLEGE						04-2103544	
Part I General Inform	nation on Grant	s and Assistance					
	d to award the grants rganization's proced ner Assistance t	s or assistance?		United States The United State	s. Complete if the o	rganization answere	
	v, lille 21, loi all	- recipient that receiv	eu more than \$5,00	rait II can be du	The steel is additional	Tapace is fieeded.	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BABSON GLOBAL INC 231 FOREST STREET BABSON PARK,MA 02457	27-1642647		331,978	0			TO SUPPORT THE COLLEGE'S MISSION INTERNATIONALLY
2 Enter total number of sec	. , . ,					<u> ▶</u>	
3 Enter total number of other				Cat No 50055P			

(a)Type of grant or assistance

(f)Description of non-cash assistance

1	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.		

(d)A mount of

AWARDING AND DISBURSEMENT FUNCTIONS (DIFFERENT INDIVIDUALS RESPONSIBLE FOR EACH), MONTHLY RECONCILIATIONS

BETWEEN STUDENT ACCOUNTS AND THE COLLEGE'S GENERAL LEDGER, AND AN ANNUAL AUDIT IN ACCORDANCE WITH OMB CIRCULAR A-

(c)A mount of

133 SCHEDULE I, PART III THE CASH GRANT IS REFLECTED ON STUDENTS' ACCOUNTS

(b) Number of

(e)Method of valuation (book,

		recipients	cash grant	non-cash assistance	FMV, appraisal, other)			
(1) INSTITUTIONAL GRANTS/SCHOLARSHIP		1285	35,698,139	0				
Part IV Supplemental Ir	nformati	on. Provide the infor	mation required in Pa	art I, line 2, Part III,	column (b), and any other	additional information.		
Return Reference	Explanat	ion						
PART I, LINE 2		THE PROCEDURES FOR NEED-BASED AWARDS INCLUDE REVIEW AND RESOLUTION OF ALL FEDERAL-PROCESSOR-IDENTIFIED ELIGIBILITY CONFLICTS, AND 100% VERFICATION OF REPORTED PARENT AND STUDENT INCOMES FOR ALL FUNDS THERE IS A SEPARATION OF THE						

DLN: 93493124005445

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

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

Open to Public Inspection

Name of the organization BABSON COLLEGE

Employer identification number

		04-2103544		
Pa	Part I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regards			
	First-class or charter travel Housing allowance or residence for	r personal use		
	▼ Travel for companions F Payments for business use of pers	onal residence		
	▼ Tax idemnification and gross-up payments ▼ Health or social club dues or initia	tion fees		
	Discretionary spending account Personal services (e.g., maid, chai	uffeur, chef)		
b	b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding reimbursement or provision of all of the expenses described above? If "No," complete Part III			No
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred be directors, trustees, officers, including the CEO/Executive Director, regarding the items checke		Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation organization's CEO/Executive Director Check all that apply Do not check any boxes for methoused by a related organization to establish compensation of the CEO/Executive Director, but ex	ods		
	▼ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compens	ation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to or a related organization	the filing organization		
а	a Receive a severance payment or change-of-control payment?	4a		Νo
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
С	c Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item	ın Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5		any		
а	a The organization?	5a	Yes	
b	b 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 $1a$, did the organization pay or accrue compensation contingent on the net earnings of	any		
а	a The organization?	6a		No
b	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 1a, did the organization provide any not payments not described in lines 5 and 6? If "Yes," describe in Part III	on-fixed 7	Yes	
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that	was		
	"Yes," describe			
	ın Part III	8	Yes	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure describ section 53 $4958-6(c)$?	ed in Regulations	Yes	_

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 other deferred compensation	(D) Nontaxable	(E) Total of columns (B)(ı)-(D)	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation		benefits		reported as deferred in prior Form 990
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

Return Reference	Explanation
PART I, LINE 1A	FIRST-CLASS TRAVEL COLLEGE POLICIES ALLOW BOTH THE FORMER PRESIDENT (WHILE PRESIDENT) AND THE CURRENT PRESIDENT TO TRAVEL FIRST-CLASS UNDER CERTAIN CIRCUMSTANCES FOR BUSINESS PURPOSES TRAVEL FOR COMPANIONS ON OCCASION, WHILE HE HELD THE POSITION OF PRESIDENT, THE FORMER PRESIDENT'S SPOUSE TRAVELED WITH THE FORMER PRESIDENT TO CERTAIN BABSON COLLEGE FUNDRAISING AND NETWORKING EVENTS TO ASSIST IN THESE ACTIVITIES WHICH FURTHER THE MISSION OF THE COLLEGE HOUSING ALLOWANCE THE CURRENT PRESIDENT AND THE FORMER PRESIDENT (WHILE PRESIDENT) ARE REQUIRED TO LIVE IN CAMPUS HOUSING AS A CONDITION OF EMPLOYMENT FOR THE CONVENIENCE OF BABSON COLLEGE THE FAIR MARKET VALUE OF THE HOUSING AND ANY CLEANING SERVICES, IF PROVIDED, ASSOCIATED WITH THE PROPERTY ARE INCLUDED AS A NONTAXABLE BENEFIT TO BOTH THE FORMER AND THE CURRENT PRESIDENTS THE CURRENT PROVOST RECEIVES HOUSING AS A TAXABLE BENEFIT THE FAIR MARKET VALUE OF HOUSING PROVIDED IS INCLUDED ON SCHEDULE J, PART II, COLUMN (B)(III) TAX INDEMNIFICATION AND GROSS-UP PAYMENTS IN CONNECTION WITH CERTAIN TAXABLE REIMBURSEMENTS, THE FORMER PRESIDENT (WHILE PRESIDENT) RECEIVED CERTAIN TAX GROSS UP PAYMENTS SUCH GROSS UP PAYMENTS ARE APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES AS PART OF HIS EMPLOYMENT CONTRACT HEALTH OR SOCIAL CLUB BOTH THE FORMER AND THE CURRENT PRESIDENTS RECEIVE AN ANNUAL MEMBERSHIP TO A LOCAL COUNTRY CLUB FOR BUSINESS USE RELATED TO THE COLLEGE WHILE SERVING AS PRESIDENT FOR THE PERIOD 1/1/13-6/30/13, THE FORMER PRESIDENT WAS PROVIDED USE OF A CLUB MEMBERSHIP FOR BUSINESS PURPOSES THE CURRENT PRESIDENT RECEIVED A CLUB MEMBERSHIP FOR BUSINESS PURPOSES THE CURRENT PRESIDENT RECEIVED A CLUB MEMBERSHIP FOR BUSINESS PURPOSES BEGINNING 7/1/13
PART I, LINE 1B	ALL THE ITEMS CHECKED ABOVE ARE INCLUDED AS PART OF THE INDIVIDUAL'S EMPLOYMENT CONTRACT AND APPROVED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES
PART I, LINE 4B	EFFECTIVE JULY 1, 2012 THE COLLEGE ENTERED INTO A NON-QUALIFIED SECTION 457(F) ARRANGEMENT WITH ITS FORMER PRESIDENT UNDER THE TERMS OF THE PLAN, THE FORMER PRESIDENT RECEIVED A CREDIT TO HIS ACCOUNT OF NO LESS THAN \$50,000 FOR EACH PLAN YEAR HE HOLDS THE TITLE OF THE FORMER PRESIDENT OF THE COLLEGE ON JUNE 30TH OF SUCH PLAN YEAR AMOUNTS AWARDED UNDER THE PLAN ARE 100% VESTED AT THE TIME OF THE AWARD FOR THE CURRENT PLAN YEAR AN AMOUNT OF \$50,000 AND AN ACCOMPANYING TAX GROSS UP WERE INCLUDED IN TAXABLE WAGES AND ARE REPORTED ON SCHEDULE J, PART II, COLUMN (B)(III) THE FINAL CREDIT MADE UNDER THE PLAN WAS MADE ON JUNE 30, 2013 EFFECTIVE JULY 1, 2013 THE COLLEGE ENTERED INTO A NON-QUALIFIED SECTION 457(F) ARRANGEMENT WITH ITS CURRENT PRESIDENT UNDER THE TERMS OF THE PLAN, THE CURRENT PRESIDENT WILL RECEIVE A CREDIT TO HER ACCOUNT OF NO LESS THAN \$52,500 FOR EACH PLAN YEAR SHE HOLDS THE TITLE OF THE PRESIDENT OF THE COLLEGE ON JUNE 30TH OF SUCH PLAN YEAR AMOUNTS AWARDED UNDER THE PLAN ARE 100% VESTED AT THE TIME OF THE AWARD NO AMOUNTS WERE AWARDED UNDER THE PLAN IN CALENDAR YEAR 2013
PART I, LINE 5	ONE KEY EMPLOYEE HAS A INCENTIVE PLAN BASED ON THE PERFORMANCE OF CERTAIN PROGRAMS AT THE COLLEGE
PART I, LINE 7	FROM TIME TO TIME OFFICERS AND KEY EMPLOYEES MAY RECEIVE NON-FIXED PAYMENT BONUS ALL BONUSES ARE APPROVED BY THE PRESIDENT AND REVIEWED BY HUMAN RESOURCES
PART I, LINE 8	DR KERRY HEALEY IS UNDER HER INITIAL CONTRACT WITH BABSON COLLEGE

Software ID: Software Version:

EIN: 04-2103544 **Name:** BABSON COLLEGE

Form 990, Schedule J, Pa	art II	Officers, Direct	ors, Trustees, Ke	y Employees, and	Highest Compens	sated Employees	,	
(A) Name	7		of W-2 and/or 1099-MIS		(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
DR KERRY HEALEY TRUSTEE/PRESIDENT (STARTING 7/1/13)	(I) (II)) 404,545) 0		0 8,564 0 0	24,000	28,889	9 465,998 0 0	0 0
DENNIS HANNO PROVOST	(I) (II)		0 0 14,429 0	9 48,421	28,326	28,570	431,456	0
RANCH KIMBALL COO(STARTING 7/22/13)	(I) (II)		20,000	0 18,657 0 0	3,650	219	188,170	0 0
MARY ROSE V P FOR CAMPUS & COMMUNITY AFFAIRS	(I) (II)		0 0	0 18,390 0 0	24,343	21,922	2 258,975 0 0	0 0
DIANA ZAIS V P FOR DEVELOPMENT	(I) (II)		8 0	0 823 0 0	22,817	27,590	249,848	0
CAROL HACKER V P OF ALUMNI&FRIENDS NETW	(I) (II)		0 0	0 718 0 0	20,308	14,202	2 219,459	0
PHILIP SHAPIRO V P FOR FINANCE (UNTIL 2/14)	(I) (II)) 290,045) 0	0 0	0 19,618 0 0	28,326	28,996	366,985	0 0
DONNA BONAPARTE V P FOR HR	(1) (11)		5 0	0 877 0 0	24,071		249,992	
GRANT GOSSELIN V P FOR ENROLLMENT/DEAN OF ADMISSIO	(I) (II)		8 0 0	0 144	19,704	27,153	220,079	0
JONATHAN MOLL V P AND GENERAL COUNSEL	(I) (II)		8 0 0	0 1,053 0 0	28,176	26,454	300,161	0 0
SAMUEL DUNN V P FOR FACILITIES MGT/CIO	(I) (II)		24,856 0	6 17,544 0 0	28,326	8,518	424,692	0 0
TRACEE PETRILLO CLERK (UNTIL 10/13)	(1) (11)		1	1				
ELAINE EISENMAN DEAN OF BABSON EXE EDU	(1) (11)		0 0	3,356 0 0	28,326	15,540	392,907	0 0
JAY A RAO FACULTY	(ı) (ıı)) 484,906) 0	2,000 0	0 201 0 0	17,064	30,621	534,792	0 0
PAUL MULLIGAN FACULTY	(I) (II)		8 0 0	0 861 0 0	15,660	21,386	391,025	0 0
PATRICIA GUINAN FACULTY	(1) (11)) 372,148) 0	8 0 0	0 533 0 0	16,058	23,809	9 412,548	
MICHAEL FETTERS FACULTY	(1) (11)) 324,074) 0	o c	0 2,277 0 0	22,261	. 750 0	349,362	0 0
JEAN PIERRE JEANNET FACULTY	(1) (11)) 318,343) 0	3 0 0	0 284	7,326		332,172	
SHAHID ANSARI FORMER PROVOST	(1) (11)		0 0	0 21,159 0 0	28,326		362,294	0 0
DR LEONARD A SCHLESINGER FORMER PRESIDENT	(I) (II)		0 0	· 1	27,726	36,916	484,187	0

DLN: 93493124005445

Open to Public

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.

Inspection

Internal Revenue Service zation

Department of the Treasury

Employer identification number

04-2103544

Name or	tne	orga	ınızatıc
BABSO	N (COL	LEGE

P	Part I Bond Issues											
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	ued (e) Issue price (f) Description of purpose		(g) Defeased		(h) On d behalf of issuer			Pool ncing
								No	Yes	No	Yes	No
A	MA DEVELOPMENT FINANCE AGENCY (2005A)	04-3431814	57583RCV5	08-31-2005	22,996,717	NEW BUILDING,MISC PROJECT, REFINANCE DEB	-	x		х		Х
В	MA DEVELOPMENT FINANCE AGENCY (2007A)	04-3431814	57583RSC0	10-04-2007	21,336,830	REFINANCE DEBT (1997A) FOR THE CONSTRUCTION (SORENSON & THE CHAPEL) F	×		х		Х
С	MA DEVELOPMENT FINANCE AGENCY (2008A)	04-3431814	57583RUW3	04-17-2008		REFINANCE DEBT (2002A) FOR THE NEW ASTROTURF ATHLETIC FIELD AND ETC		Х		х		Х
D	MA DEVELOPMENT FINANCE AGENCY (2011A)	04-3431814	57583UGH5	07-07-2011		REFINANCE DEBT (1998A) BLANK CENTER		Х		х		Х
Pa	art III Proceeds											
					Α	В	С			D		
	A		The state of the s									

Par	tIII Proceeds								
			A		В		С		D
1	A mount of bonds retired		7,779,343		4,403,156		4,125,000		2,835,000
2	A mount of bonds legally defeased								
3	Total proceeds of issue		22,996,717		21,336,830		36,475,000		14,518,050
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds		333,890		315,976		250,504		243,275
8	Credit enhancement from proceeds		337,000		242,000		29,208		
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds		15,230,149						
11	O ther spent proceeds		7,095,678		20,778,854		36,195,288		14,274,775
12	Other unspent proceeds								
13	Year of substantial completion	20	06	20	07	20	08	20	11
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X		Χ		X		X	
15	Were the bonds issued as part of an advance refunding issue?		Х		Х		Х		Х
16	Has the final allocation of proceeds been made?	Х		Х		Х		Х	
17	Does the organization maintain adequate books and records to support the final	Х		X		Х		Х	

allo	cation of pro	ceeds?		
Part III	Private	Business	Use	

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

Χ

Χ

Χ

Χ

Part III Private Business Use (Continued)

Part	Part III Private Business Use (Conunueu)									
			A		В		С			
		Yes	No	Yes	No	Yes	No	Yes	No	
3 a	Are there any management or service contracts that may result in private business use of bond-financed property?		×		х		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?									
с	Are there any research agreements that may result in private business use of bond-financed property?		Х		х		х		Х	
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		0 110 %							
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									
6	Total of lines 4 and 5		0 110 %							
7	Does the bond issue meet the private security or payment test?		Х		Х		Х		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		x		x		х	
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	_		_	_		_		_	
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?									
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X		Х		x		х		

Part IV Arbitrage

		Α		В		C		U	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х		Х		Х		Х
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?		Х		Х		Х	Х	
ь	Exception to rebate?		Х	Х		х		Х	
С	No rebate due?	Х		Х		х		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?		Χ		Х	Х			Х
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		Х	Х			×
ь	Name of provider					GOLDMANS	ACHS		
С	Term of hedge					25 0000	0000000		
d	Was the hedge superintegrated?						Х		
е	Was the hedge terminated?						Х		
	Schedule K (Form 990) 2013								

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

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	
	Χ		Х		Х		Х		
١									

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE K, PART IV,LINE 2C, THE REBATE COMPUTATION DATES

Return Reference

MA DEVELOPMENT FINANCE AGENCY (2005A) AUGUST, 2013 MA DEVELOPMENT FINANCE AGENCY (2007A) OCTOBER, 2013 MA DEVELOPMENT FINANCE AGENCY (2011A) JULY, 2013

Explanation

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

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

(Form 990)

Department of the Treasury

financed property?

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

> ► Attach to Form 990. ► See separate instructions.

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

OMB No 1545-0047

DLN: 93493124005445

Open to Public **Inspection**

Schedule K (Form 990) 2013

Name of the organization Employer identification number

	e of the organization SON COLLEGE									Emp	pioyer ia	entifica	ition nur	nder	
DAD	SON COLLEGE									04	-21035	44			
Pa	TTI Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue prid	:e	(f)) Description	n of purpose	(g) De	feased	beh	On alf of suer		Pool incing
										Yes	No	Yes	No	Yes	No
A	MA DEVELOPMENT FINANCE AGENCY (2013)	04-3431814		07-17-2013	35,000,0		NEW E	BUILDING,N ECT	MISC		×		x		x
Pa	rt III Proceeds														
					A			В	3		С			D	
1	A mount of bonds retired					599,0	030								
	A mount of bonds legally defeas	ed													
3	Total proceeds of issue				35	,000,0	000								
4	Gross proceeds in reserve fund														
5	Capitalized interest from proce	eds													
6	Proceeds in refunding escrows														
7	Issuance costs from proceeds					118,0	081								
8	Credit enhancement from proce	eeds													
9	Working capital expenditures fr	om proceeds													
10	Capital expenditures from proc	eeds			7	,950,5	536								
11	Other spent proceeds														
12	Other unspent proceeds				26	,931,3	383								
13	Year of substantial completion								•			•			
					Yes	No		Yes	No	Yes	N	lo	Yes		No
14	Were the bonds issued as part	of a current refundır	ng issue?			Χ									
15	Were the bonds issued as part	of an advance refun	ding issue?			Х									
16	Has the final allocation of proce	eeds been made?			Х										
17	Does the organization maintain allocation of proceeds?		nd records to supp	ort the final	х										
Par	t IIII Private Business Us	se													
					A			В			<u>C</u>			D	
	Was the organization a partner	in a nartnership or	a member of an II	C which owned	Yes	No		Yes	No	Yes	N	0	Yes	-	No
1	property financed by tax-exemp		a member of all El	Lo, willen owlled		Х									
_	A va thava any lanaa avvangama	nta that many was ult	in nuivata hijainaa	a uaa af band	1		- 1				1			- 1	

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Cat No 50193E

Sche	edule K (Form 990) 2013									Page 2
Par	t IIII Private Business Use (Continued)						1			
			Yes	No	Yes	No No		C L No	V	D No
3a	Are there any management or service contracts that may result in private to food-financed property?	ousiness use	Yes	X	Yes	NO	Yes	No	Yes	No
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?									
С	Are there any research agreements that may result in private business use financed property?	of bond-		Х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the financed									
4	Enter the percentage of financed property used in a private business use by other than a section $501(c)(3)$ organization or a state or local government	y entities ►						•		
5	Enter the percentage of financed property used in a private business use as unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5									
7	Does the bond issue meet the private security or payment test?			Х						
8a	Has there been a sale or disposition of any of the bond financed property to nongovernmental person other than a 501(c)(3) organization since the bonissued?			Х						
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or o	disposed of								I
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations s $1\ 141-12$ and $1\ 145-2$?	sections								
9	Has the organization established written procedures to ensure that all nonq bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		Х							
Par	t IV Arbitrage			1						
		Α			В		С		D	
1	Has the Issuer filed Form 8038-T?	Yes	No X	Yes	No	Y	es	No	Yes	No
<u>-</u>	If "No" to line 1, did the following apply?									
	Rebate not due yet?			1				<u> </u>	ı	
<u>а</u> b	Exception to rebate?	Х								
	No rebate due?		X							
С	To reduce due.		Х							

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

Pa	rt IV Arbitrage (Continued)								•
	· •	А		В	}	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
b	Name of provider								
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		х						
7	Has the organization established written procedures to monitor the requirements of section 148?	х							
Pa	rt V Procedures To Undertake Corrective Action								
		А	\	В	3	С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X							

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

DLN: 93493124005445

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 the or BABSON COLLEGE	ganızatıon						E	Employ	er ident/	ificatio	n numbe	er
					(3) and sectio		organı	zatıoı				
Comp	olete if the o	rganızatıon a <u>ı</u>			90, Part IV, line	25a or 25b,	or Form	1990-	EZ, Part	t V , lıne	40b	
1 (a) Nam	e of disqual	fied person	(b) Relation	onship betwee	n disqualified	(c) Des	cription	of tra	nsaction	ո	(d) Cor	rected?
			pers	son and organ	ıızatıon						Yes	No
												•
												-
												•
												_
3 Enterthe	amount of to	V 10011500 d F	orgon:==t/:-	n mana = = = =	r dio auglific d	roone dum - 1	·ha was:	- استورز م	r c c c t : : :			-
2 Enter the a		x incurred by	organizatioi	i illallagers ol	r disqualified pe	isons during t	ne year	ı unae	Section	П		
									- >			
3 Enter the a	amount of ta	x, ıf any, on lı	ne 2, above	, reimbursed b	by the organizat	ion			- \$			
				ted Person								
					990-EZ, Part \		Form 9	90, P	art IV , lı	ne 26,	or if the	
	janization re	ported an am	ount on Forr	<u>n 990, Part X</u>	, line 5, 6, or 22				1			
(a) Name of	(b)	(c)	(d) Loa		(e)Original	(f)Balance	(g) In		(h)		(i)Wr	
ınterested	Relations				principal	due	defaul	t?	Approv	/ed	agreer	ment?
person	with	loan	organiza	tion?	amount				by .			
	organızatı	on							board			
									commi	ttoo2		
			—	I =	_		\ <u>\</u>	T	+	1	 	T No.
			То	From			Yes	No	Yes	No	Yes	No
											_	
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											_	
									1		_	
	<u> </u>		-				1	-		+	_	
	<u> </u>						1		1		_	
Γotal		▶ \$										
					ed Persons.							
Coi	mplete ıf tl	ne organizat	ion answe	red "Yes" or	n Form 990, P	art IV, line 2	27.					
(a) Name of Ir	nterested	(b) Relation	ship betwee	en (c) A mo	unt of assistanc	e (d) Type	ofass	ıstand	:e (e) Purpos	se of ass	sistance
perso	n	interested p	erson and tl						'	,		
		orgar	nization									
						-						
												
		ı		1								

Complete if the organization			ne 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) Sh o organi reven	f zatıon's
				Yes	No
(1) COMCAST	VICE PRESIDENT IS ALSO A BABSON TRUSTEE	172,000	CABLE FEES PAID		No
(2) JANICE BELL	SPOUSE OF THE FORMER PROVOST	312,543	FACULTY WAGES PAID		No
(3) BANK OF NEW YORK-MELLON	VICE CHAIRMAN & CEO IS ALSO BABSON TRUSTEE	146,000	INVESTMENT FEES PAID		No
(4) PHYLLIS SCHLESINGER	SPOUSE OF THE FORMER PRESIDENT	40,960	FACULTY WAGES PAID		No
(5) FIDELITY	CHIEF INVESTMENT OFFICER IS ALSO BABSON TRUSTEE	0	403(B) RETIREMENT PLAN AND BABSON PAID NO FEES		No
(6) CAROLINE WINN	DAUGHTER OF THE CURRENT OFFICER (JOSEPH WINN)	46,409	COMPENSATION		No

Part V Supplemental Information

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

Return Reference	Explanation

Schedule L (Form 990 or 990-EZ) 2013

DLN: 93493124005445

OMB No 1545-0047

SCHEDULE M (Form 990)

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

Noncash Contributions

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

	ne of the organization ON COLLEGE				Employer identificat	ion nu	mber	
Dribs	on college				04-2103544			
Pa	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	(d Method of d noncash contrib	etermı		ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	39	2,078,890	AVG OFHI&LOW-	DATE	TRAD	
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ▶ ()							
26	O ther ►()							
27	O ther ►()							
28	O ther ► ()							
29	Number of Forms 8283 received for which the organization comple				29			
							Yes	No
30a	During the year, did the organiza							
	it must hold for at least three ye				ired to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
Ŀ	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif					31	Yes	
32a	Does the organization hire or us	e thırd part	ies or related organizations	to solicit, process, or sell	noncash			
	contributions?					32a		Νo
Ŀ	If "Yes," describe in Part II							
33	If the organization did not report	t an amount	: in column (c) for a type of	property for which column	(a) is checked,			

	nether the organization is reporting in Part I, column (b), the number of contributions, the served, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
	BABSON UTILIZES THE SERVICES OF A BROKER TO SELL DONATED SECURITIES COLUMN (B) BABSON USED THE NUMBER OF CONTRIBUTIONS RECEIVED FOR COLUMN (B)

Schedule M (Form 990) (2013)

DLN: 93493124005445

OMB No 1545-0047

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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization BABSON COLLEGE

Employer identification number

04-2103544

990 Schedule O, Supplement	al Information
Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	
FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PREPARED INTERNALLY AND REVIEWED BY MANAGEMENT AND PRICEWATERHOUSECOOPERS, LLP "PWC" THE FULL 990 RETURN, INCLUDING SCHEDULE B, IS THEN REVIEWED BY SENIOR MANAGEME NT, AND THE AUDIT COMMITTEE THE FINAL FORM 990, WITH THE EXCEPTION OF SCHEDULE B, IS THEN MADE AVAILABLE TO THE FULL BOARD OF TRUSTEES PRIOR TO FILING WITH THE IRS PWC SIGNS THE RETURN AS PAID PREPARER
FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR ALL TRUSTEES ARE REQUIRED TO COMPLETE AND SIGN A CONFLICT OF INTEREST QUESTIONNA IRE AND STATEMENT OF COMPLIANCE. THEIR RESPONSE TO THE QUESTIONNAIRE IS REVIEWED BY MANAGE MENT. IN ADDITION, PAYROLL AND VENDOR FILES ARE REVIEWED FOR THE EXISTENCE OF TRANSACTIONS WITH RELATED PARTIES. IF A CONFLICT OCCURS THE BOARD MEMBER WILL RECUSE HIM OR HERSELF FR. OM ANY MATTERS RELATING TO THE TRANSACTION. FORM 990, PART VI, SECTION B, LINE 14 CURRENT LY THE COLLEGE HAS A WRITTEN DOCUMENT RETENTION AND DESTRUCTION POLICY BUT IT IS NOT APPRO VED BY THE BOARD OF TRUSTEES OR A COMMITTEE OF THE BOARD OF TRUSTEES
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR THE PRESIDENT, OFFICERS AND KEY EMPLOYEES OF THE COLLEGE IS REVIEWED BY H UMAN RESOURCES AT LEAST ONCE A YEAR THIS REVIEW INCLUDES COMPARING RELEVANT, INDEPENDENT MARKET COMPENSATION AND IS DOCUMENTED THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES IS PROVIDED APPROPRIATE INFORMATION INCLUDING A RECOMMENDATION FOR COMPENSATION (OR INCREASE IN COMPENSATION) ANY CHANGES TO COMPENSATION FOR THE PRESIDENT, OFFICERS AND KEY EMPLOYE ES IS APPROVED BY THIS COMMITTEE
FORM 990, PART VI, SECTION C, LINE 19	BABSON COLLEGE'S FINANCIAL STATEMENTS CAN BE FOUND AT WWW BABSON EDU BABSON DOES NOT MAKE AVAILABLE TO THE PUBLIC OUR CONFLICT OF INTEREST POLICY, OR OTHER GOVERNING DOCUMENTS
FORM 990 PART VII, SECTION A	GARY T DICAMILLO RECEIVES NO COMPENSATION FOR HOLDING THE POSITION OF TRUSTEE. ALL HIS CO MPENSATION WAS FOR HIS SERVICES AS AN ADJUNCT LECTURER GORDON PRICHETT RECEIVES NO COMPEN SATION FOR HOLDING THE POSITION OF TRUSTEE. ALL HIS COMPENSATION WAS FOR HIS SERVICES AS A N ADJUNCT LECTURER MARLA M CAPOZZI RECEIVES NO COMPENSATION FOR HOLDING THE POSITION OF TRUSTEE. ALL HER COMPENSATION WAS FOR HER SERVICE AS AN ADJUNCT LECTURER
FORM 990, PART XI, LINE 9	YE GLOBAL'S ASSET -1,537
FORM 990 PART XII, LINE 2C	THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES IS RESPONSIBLE FOR OVERSIGHT OF THE AUDIT THE E COMMITTEE REVIEWS AND APPROVES THE AUDITED FINANCIAL STATEMENTS

DLN: 93493124005445

2013

OMB No 1545-0047

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SCHEDULE R (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

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.

BABSON COLLEGE 04-2103544 Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Employer identification number

(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity	
Part II Identification of Related Tax-Exempt Organization	tions Complete ıf t	he organization ar	nswered "Yes"	on Form 990, Pa	art IV, line 34 because it had	one

Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the		e organization ans	swered "Yes" on	Form 990, Part I	V, line 34 because it	had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity statu (if section 501(c)(3)		Section (13) co	g) 512(b) ontrolled tity?
						Yes	No
(1) BABSON GLOBAL INC	SUPPORTING ORGANIZATION	MA	509 (A)(3)	LINE 11A, I	BABSON COLLEGE	Yes	
231 FOREST STREET							
BABSON PARK, MA 02457 27-1642647							
							1
							1
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 5013	5 Y		Schedule R (Form	n 990) 2	013

Part III Identification of Related because it had one or more								ansv	wered "Ye	s" on	Form	990, Part	IV, I	ine 3	4	
(a) Name, address, and related organizati	EIN of on	(b) Primary activity	(c) Legal domicile (state or foreign country)	Dır	i) ect olling tity	(e) Predomin income (rela unrelate excluded f tax undo sections 5 514)	ated, total in ed, from er 512-	e of		(h Disprop alloca	ortionate tions?	(i) Code V-UBI amount in bo 20 of Schedule K-: (Form 1065)	Gene x mar par	(j) eral or naging tner?	Perce	k) entage ership
						,				Yes	No		Yes	No	_	
Part IV Identification of Related line 34 because it had one (a)	or more related organizatio	ons treated a	s a cor		on or T	trust dur	ing the ta (e)	x ye	ear. (f)	1	(g)	(H	1)	Т	(i))
Name, address, and EIN of related organization	Primary activity	Lega domic (state or t count	cile foreign				Type of entit (C corp, S co or trust)	rp,	Share of total income		e of end- year assets	of-Perce			Section (b)(1 contro entit	13) olled y?
(1) CHARITABLE REMAINDER UNITRUST (2)	FUNDRAISING	MA			N/A		Т							ľ	Yes	No No
ONE LINCOLN STREET BOSTON, MA 02111																

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

Yes No

1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more re	elated 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 Gift, grant, or capital contribution from related organization(s)												
d Loans or loan guarantees to or for related organization(s) e Loans or loan guarantees by related organization(s)												
											f Dividends from related organization(s)	
g Sale of assets to related organization(s)												
h Purchase of assets from related organization(s)												
i Exchange of assets with related organization(s)												
j Lease of facilities, equipment, or other assets to related organization(s)												
,												
k Lease of facilities, equipment, or other assets from related organization(s)												
Performance of services or membership or fundraising solicitations for related organization(s)												
m Performance of services or membership or fundraising solicitations by related organization(s)												
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)												
	Sharing of paid employees with related organization(s)				10		No					
·	That my or para employees with related organization(s)											
р	Reimbursement paid to related organization(s) for expenses				1 p		No					
q	Reimbursement paid by related organization(s) for expenses				1q		No					
r	O ther transfer of cash or property to related organization(s)				1r		No No					
	Other transfer of cash or property from related organization(s)				1s		No					
•	o the transfer of easil of property from related organization(s)				Ш							
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	e this line, including co	vered relationships	and transaction thresholds								
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo								
1) B/	BSON GLOBAL INC	В	331,978	ACTUAL COST								
2) B/	BSON GLOBAL INC	L	4,372,989	COST PLUS OVERHEAD RATE								
3) BA	BSON GLOBAL INC	N	0	INCLUDED IN OVERHEAD ABOVE								

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

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 regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) 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	
												\Box	
	•												

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013