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DLN: 93493075012125

Form **990** 

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

OMB No 1545-0047

2013

Open to Public Inspection

		pplicable	C Name of organization  LASELL COLLEGE	013 , 2013, and ending 06	-30-2014	D Employe	er iden	tification number		
Add	dress ch	hange	Doing Business As			04-210	3585			
	me cha	_	Doing Business As							
_	ial retu		Number and street (or P O box if mail is not de 1844 COMMONWEALTH AVENUE	livered to street address) Room/	suite	E Telephon	e numb	er		
	mınate					(617)2	43-2	100		
_	ended		City or town, state or province, country, and ZIF NEWTON, MA 024662709	or foreign postal code						
App	olication	n pending	- 1		1			83,701,994		
			F Name and address of principal offic MICHAEL B ALEXANDER	er		s this a group r subordinates?	eturn 1	for □ Yes 🔽 No		
			1844 COMMONWEALTH AVENUE NEWTON, MA 024662709							
			WEW1611,117A 621662769			Are all subordin ncluded?	ates	Γ Y es Γ No		
г Та	x-exen	npt status	▼ 501(c)(3)	☐ 4947(a)(1) or ☐ 527			ılıst (	see instructions)		
ı w	ebsite	e: ► WW	W LASELL EDU		H(c)	Group exemption	n num	ber ►		
<b>K</b> For	n of or	ganızatıon	Corporation Trust Association Other	<u> </u>	<del></del>	of formation 185	1 M S	State of legal domicile MA		
	rt I		mary					· · · - <b>y</b> - · · · · · · · · · · · · · · · · · ·		
Governance		LASELL	escribe the organization's mission or most COLLEGE ENGAGES STUDENTS IN THE NG THAT FOSTERS LIFELONG INTELLE	PRACTICE OF THEIR FIE				LLABORATIVE		
oye II	2	Check th	nis box 🚩 if the organization discontinue	d its operations or disposed	d of more th	an 25% of its r	et ass	ets		
	,	N	of voting mambage of the recognition to 1.1.1	Dart VI line 1 - V		1	, l	2.5		
ACTIVITIES &	I		of voting members of the governing body ( of independent voting members of the gove	·			3 4	2.8		
	I		mber of individuals employed in calendar y				5	1,100		
្ន	I		nber of volunteers (estimate if necessary)			-	6	270		
	7a	Total un	related business revenue from Part VIII, c	column (C), line 12		[	7a	С		
	ь	Net unre	lated business taxable income from Form	990-T, line 34	<u> </u>		7b	0		
						Prior Year		Current Year		
a)	8		butions and grants (Part VIII, line 1h) .			2,019,16		2,369,824		
Ravenue	9 10		m service revenue (Part VIII, line 2g) . ment income (Part VIII, column (A), lines		69,132,5! 3,770,6:		74,842,254			
ž	11		revenue (Part VIII, column (A), lines 5, 6		111,90	_	129,718			
	12		evenue—add lines 8 through 11 (must equ		ine					
			<u> </u>			75,034,23		79,443,898		
	13		and similar amounts paid (Part IX, colum			22,336,83	0	24,031,818		
	14 15		ts paid to or for members (Part IX, column es, other compensation, employee benefits	, ,,			-			
\$	15	5-10)		s (Farcix, column (A), mes	' <u> </u>	24,727,841 2				
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A	A), line 11e)		2,5	20	18,052		
ਡੋ	Ь		ndraısıng expenses (Part IX, column (D), line 25) 🕨							
	17		expenses (Part IX, column (A), lines 11a-			24,385,2	_	24,860,093		
	18 19		expenses Add lines 13–17 (must equal P ue less expenses Subtract line 18 from lii			71,452,43		76,464,010 2,979,888		
Net Assets or Fund Balances	13	Keven	ac 1633 expenses Subtract line 10 Hom III			nning of Current Year	_	End of Year		
SS et	20	Total	assets (Part X, line 16)			121,296,47	70	127,250,342		
절	21		iabilities (Part X, line 26)			69,259,0	_	68,860,053		
žZ	22		sets or fund balances Subtract line 21 fro	om line 20		52,037,40	3	58,390,289		
Jnde ny ki	nowled arer ha	alties of dge and as any ki	ature Block  Derjury, I declare that I have examined this pelief, it is true, correct, and complete. De nowledge  **  Sture of officer  ALL J HOYLE PH D VP FOR BUSINESS & FINANCE							
			or print name and title							
			rint/Type preparer's name Preparer's OSEPH M GISO CPA MST	s signature	Date 2015-03-03	CHECK! II I	PTIN P000301	126		
Paid		F	Irm's name ► CBIZ TOFIAS		2013-03-03	self-employed Firm's EIN 🕨 26-				
	pare	r L								
Use	On	lv   F	ırm's address 🟲 500 BOYLSTON STREET			Phone no (617)	/61-060	JU		

BOSTON, MA 02116

May the IRS discuss this return with the preparer shown above? (see instructions)  $\,$  .

✓ Yes ☐ No

• • • • • • • • • • • • • • • • • • • •	1550 (2015)	ige z
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	<u>.[~</u>
1	Briefly describe the organization's mission	
_ _A S	ELL COLLEGE ENGAGES STUDENTS IN THE PRACTICE OF THEIR FIELDS OF STUDY THROUGH COLLABORATIVE LEARNING	i
	T FOSTERS LIFELONG INTELLECTUAL EXPLORATION AND SOCIAL RESPONSIBILITY	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code ) (Expenses \$ 64,634,584 including grants of \$ 24,031,818 ) (Revenue \$ 71,195,089 )	
	LASELL COLLEGE IS A COMPREHENSIVE COEDUCATIONAL COLLEGE WHICH OFFERS PROFESSIONALLY ORIENTED BACHELOR'S AND MASTER'S DEGREE PROGRAI INCLUDING MORE THAN 25 ACADEMIC MAJORS OUR STUDENTS ARE GIVEN THE OPPORTUNITY TO PRACTICE AND PREPARE FOR THE REAL WORLD THROUGH PROJECT-BASED AND PROBLEM-BASED APPROACH TO TEACHING, THROUGH EXPOSURE TO DIVERSE CULTURES AND PEOPLES, THROUGH THE DEVELOPMENT CRITICAL SKILLS SUCH AS WRITING AND SPEAKING IN FRONT OF GROUPS, AND THROUGH CONFRONTATION WITH ETHICAL AND MORAL QUESTIONS LASELL COLLEGE IS KNOWN FOR HELPING STUDENTS MAKE THE CONNECTION BETWEEN CLASSROOM LESSONS AND REAL LIFE THROUGH HANDS-ON ACTIVITIES SUC INTERNSHIPS, PRACTICA, SERVICE LEARNING, AND MEANINGFUL PROJECTS CONNECTED LEARNING AT LASELL COLLEGE INVOLVES STUDENTS DIRECTLY AND ACTIVELY IN THE FIELDS THEY ARE LEARNING IN ALL MAJORS, STUDENTS EXPLORE REAL ISSUES, EVENTS, PROBLEMS, AND SOLUTIONS LASELL COLLEGE FAC ARE COMMITTED TO CREATIVELY INTEGRATING CHALLENGING COURSEWORK WITH PRACTICAL EXPERIENCE IN AN ENVIRONMENT THAT FOSTERS LIFELONG INTELLECTUAL EXPLORATION, ACTIVE CITIZENSHIP AND SOCIAL RESPONSIBILITY **NUMBER OF STUDENTS IN 2013-2014 SCHOOL YEAR FALL 2013 SEMESTEI UNDERGRADUATE 1649 FULL-TIME, 18 PART-TIME, GRADUATE 118 FULL-TIME, 276 PART-TIME SPRING 2014 SEMESTER UNDERGRADUATE 1567 FULL-TIME PART-TIME, GRADUATE 128 FULL-TIME, 293 PART-TIME SUMMER 2013 TERM 2 UNDERGRADUATE 41 PART-TIME, GRADUATE 4 FULL-TIME, 210 PART-TIME SUMMER 2014 TERM 1 UNDERGRADUATE 155 PART-TIME, GRADUATE 4 FULL-TIME, 213 PART-TIME OUR UNDERGRADUATE STUDENTS REPRESENT 26 STATES AND 14 FOREIGN COUNTRIES AND OUR GRADUATE STUDENTS REPRESENT 36 STATES AND 22 FOREIGN COUNTRIES	A OF  H AS  ULTY
4b	(Code ) (Expenses \$ 1,257,902 including grants of \$ ) (Revenue \$ 2,156,843 )	
-12	PROVIDED MANAGEMENT AND EDUCATIONAL SERVICES AND LEASED LAND TO LASELL VILLAGE, INC , A TAX-EXEMPT AFFILIATE, FUNCTIONS THAT ARE INTEGRATE CONDUCT OF THE EXEMPT FUNCTIONS OF LASELL VILLAGE, INC	AL TO
4c	(Code ) (Expenses \$ 1,232,401 including grants of \$ ) (Revenue \$ 1,293,893 )	
	PROVIDED COLLABORATIVE POLICE AND INFORMATION TECHNOLOGY SERVICES WITH TWO OTHER LOCAL COLLEGES, FUNCTIONS THAT ARE INTEGRAL TO THE CONDUCT OF THE EXEMPT FUNCTIONS OF THOSE COLLEGES, WITH THE GOAL OF PROVIDING QUALITY SERVICES TO EACH COLLEGE CAMPUS IN A COST EFFE MANNER	
	(Code ) (Expenses \$ 233,295 including grants of \$ ) (Revenue \$ 196,429 )	
	PROVIDED FACILITIES FOR OTHER EDUCATIONAL ORGANIZATIONS TO CONDUCT EDUCATIONAL PROGRAMS AND TO PROVIDE HOUSING TO STUDENTS	
4d	Other program services (Describe in Schedule O )	
	(Expenses \$ 233,295 including grants of \$ ) (Revenue \$ 196,429)	
4e	Total program service expenses ► 67,358,182	

Part IV	Checklist of	Required	<b>Schedules</b>

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I^{\bullet}$	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</i>	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	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🦉	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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 "Yes," complete Schedule F, Parts III and IV</i>	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	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$ $\blacksquare$	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	

Pali	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   127		163	110
	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	1		
-	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	
٠.		_		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
44	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
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<sub> </sub>		
6-	Does the organization have applied gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
	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? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			No
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year   7d	-		110
-	74 Test, indicate the number of forms of 202 med during the year 1 1 1 1	•		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.	8		
	Did the organization make any taxable distributions under section 4966?	9a	i l	[ 
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	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	-		
l1	Section 501(c)(12) organizations. Enter			
а	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 )			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?			ĺ
_	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			
C	Enter the amount of reserves on hand	į l		ļ
14a	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	1 7	1

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

Check if Schedule O contains a	esponse or note to ar	v line in this Part VI .							

Se	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			
	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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
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, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16a		Νo
_	taxable entity during the year?			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	100		
b		16b		
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			

- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
  - Own website Another's website V 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►MICHAEL JHOYLE PH D VP FOR BU 1844 COMMONWEALTH AVENUE NEWTON, MA 024662709 (617) 243-2100

Form 990	(2013	
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D	-	$\alpha$	Δ	4
г	a	ч	_	•

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . .

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

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

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

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

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

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

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

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

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

	(A) Name and Title	(B)	: :								<b>(E)</b> Reportable		(F)	
	ivallie allu Title	Average hours per	· · · · · · · · · · · · · · · · · · ·										Estima amount o compens	fother
		any hours					stee)		organiza	organization (W- organizations			from t	:he
		for related organizations	악교	<u> </u>	Office	<u>중</u>	eng Hig	Fo	2/1099	-MISC)	2/1099-MISC	)   (	organızatı relate	
			stifut	_₹	Keş emploşee	doy.	Former					organıza	itions	
		dotted line)	호프			양	18 g							
			Individual trustee or director	Institutional Trustee		o o	Highest compensated employee							
			ā·	31 66			ਲ   ∰							
							<u> </u>							
												_		
16	Sub-Total													
1b c	Total from continuation sheet	s to Part VII. S	· · · ection A	٠.	•		_	•						
d	Total (add lines 1b and 1c) .			· ·	٠.	٠.		<b> -</b>		1,588,191		0		247,160
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) wl	ho receive	d more th	an	I		
													Yes	No
3	Did the organization list any <b>f</b> o	<b>ormer</b> officer, dir	ector o	r trus	tee,	key	emplo	yee,	, or highes	tcompen	sated employee		103	110
	on line 1a? If "Yes," complete S				•	•		•				3		No
4	For any individual listed on line													
	organization and related organ	ızatıons greater	than \$1	150,0	•	11	Yes," (	omp •	lete Sched	ule J for s	uch • • • •	4	Yes	
5	Did any person listed on line 1	a receive or acc	rue cor	npen	satio	on fro	om any	unr/	elated org	janization	or individual for		+	
	services rendered to the organ											5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your fix	/e highest comp												
	compensation from the organiz	ration Report co	ompens	ation	for t	he c	alenda	arye	ar ending	with or wi	thin the organizat	ion's T		
	N	ame and business	address							Des	(B) cription of services		(C Comper	

(A)	(B)	(C)
Name and business address	Description of services	Compensation
SODEXO INC 9801 WASHINGTON BLVD GAITHERSBURG MD 20878	FOOD/HOUSEKEEPING SERVICES	4,224,747
METRIC CONSTRUCTION CORP 55 HENSHAW ST BOSTON MA 02135	CONSTRUCTION SERVICES	2,027,840
METRO WEST CONTRACTING CORP 6 BEAUMONTS POND DRIVE FOXBORO MA 02035	CONSTRUCTION SERVICES	712,464
D&S LANDSCAPING 498 PLEASANT ST WATERTOWN MA 02472	LAWN CARE/SNOW REMOVAL	429,235
ECK MACNEELY ARCHITECTS 560 HARRISON AVE SUITE 403 BOSTON MA 02118	ARCHITECTS	405,223
Total number of independent contractors (including but not limited to these lighted phases)	Vicho received more than	

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 ►16

Contributions, Gifts, Grants and Other Similar Amounts	1a
Program Serwice Revenue	2. 1  
ievenue	3 4 5 6 1 7 1
Other	   9- 
	10
	11a

Form 99		<u> </u>						Page <b>9</b>
Part V	4++1	Statement o Check if Schedu	o <b>f Revenue</b> ule O contains a respons	se or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated cam	paigns 1a					
Grants mounts	ь	Membership du	es <b>1b</b>					
ي ق	С	Fundraising eve	ents <b>1c</b>					
Giffs, iilar A	d	Related organiz	zations 1d					
∄. ⊡	e	Government grants	s (contributions) <b>1e</b>	535,071				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and <b>1f</b>	1,834,753				
di ibu	g		ons included in lines	1,513,864				
Con	h	Total. Add lines	s 1 a - 1 f		2,369,824			
				Business Code				
entié	2a	FO		611310	53,022,536	53,022,536		
E Se	ь	ROOM & BOARD		611310	15,735,012	15,735,012		
<u> 5</u>	С	MGMT FEE/RENT F	FROM TAX-EXEMPT AFF	561499	2,156,843	2,156,843		
Ž.	d	CONNECTED LEARI	NING/ED	611710	1,711,149	1,711,149		
Ē	e	COLLABORATIONS	WITH COLLEGES	611710	1,293,893	1,293,893		
Program Serwce Revenue	f	All other progra	am service revenue		922,821	502,351		420,470
	g	Total. Add lines	s 2a – 2f		74,842,254			
	3		ome (including dividend: ar amounts)		742,105			742,105
	4		stment of tax-exempt bond p	F				
	5	Royalties		🕨				
			(ı) Real	(II) Personal				
	6a	Gross rents Less rental	47,046 12,004					
	b	expenses	<u> </u>					
	С	Rental income or (loss)	35,042					
	d			·	35,042			35,042
	7a	Gross amount	(ı) Securities	(II) O ther				
	, "	from sales of assets other than inventory	5,604,844					
	ь	Less cost or other basis and	4,244,847					
		sales expenses Gain or (loss)	1,359,997					
	c d	· · · · · · · · · · · · · · · · · · ·	(ss)		1,359,997			1,359,997
	8a	Gross income f	_		, ,			, ,
Other Revenue		events (not inc						
ev ev		of contributions See Part IV, lin	reported on line 1c)					
ūζ		See rate IV, iiii	a	26,139				
Ŧ	ь	Less direct ex	penses <b>b</b>	1,245				
Ò	c	Net income or (	(loss) from fundraising e	vents 🛌	24,894			24,894
	9a	Gross income f See Part IV, lin	rom gaming activities					
		See rate iv, iii	a					
	ь	Less direct ex	penses <b>b</b>					
	С		loss) from gaming activi)	ities				
	10a	Gross sales of returns and allo						
		recamb and and	a					
	ь	Less cost of go	oods sold <b>b</b>					
	С	Net income or (	(loss) from sales of inve	ntory 🛌				
		Miscellaneous	s Revenue	Business Code				
	11a	MISCELLANEC	DUSINCOME	900099	46,211	46,211		
	ь	ALUMNI EVEN	ITS	900099	23,571	23,571		
	С							
	d	All other reven						
	e	<b>Total.</b> Add lines		🕨	69,782			
	12	Total revenue.	See Instructions		79,443,898	74,491,566	0	2,582,508

#### Part IX Statement of Functional Expenses

Part TX	Statement of F	unctional Ex	cpenses														
Section 50:	L(c)(3) and 501(c)(4	) organizations	must comple	te all colum	ns All	other or	ganı	zatio	ons n	nust	com	plet	te c	olum	nn (A	١)	
	Check if Schedule O	contains a resp	onse or note	to any line	ın thıs F	art IX											

5000	on so I (c)(s) and so I (c)(4) organizations must complete an columns Al	_	•		
	Check if Schedule O contains a response or note to any line in this	Part IX			<u>Г</u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	24,031,818	24,031,818		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	874,874		776,306	98,568
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	22,003,540	16,959,833	4,063,634	980,073
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	880,680	660,359	189,926	30,395
9	Other employee benefits	2,174,463	1,554,278	549,656	70,529
10	Payroll taxes	1,620,490	1,204,706	336,860	78,924
11	Fees for services (non-employees)		_,,. 30		
a	Management				
b	Legal	321,712	155	321,557	
•	Accounting	104,250	133	104,250	
d	Lobbying	58,500		58,500	
	Professional fundraising services See Part IV, line 17	18,052		38,300	10.052
e	· · · · · · · · · · · · · · · · · · ·			122 271	18,052
f	Investment management fees	122,271		122,271	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,141,172	814,972	270,639	55,561
12	Advertising and promotion	509,744	490,398	19,346	
13	Office expenses	2,252,961	1,381,581	738,411	132,969
14	Information technology	1,104,055	255,968	834,675	13,412
15	Royalties	1,104,033	233,900	834,073	15,412
16	Occupancy	5,182,822	595,868	4,586,954	
			· · · · · · · · · · · · · · · · · · ·		21 467
17 18	Travel	1,070,366	928,296	110,603	31,467
	state, or local public officials				
19	Conferences, conventions, and meetings	82,587	57,535	24,005	1,047
20	Interest	2,754,699	2,709,009	45,690	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,704,712	4,192,977	417,584	94,151
23	Insurance	178,382	23,767	154,615	
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)				
а	CAFETERIA FOOD SERVICE	2,828,305	2,828,305		
b	OTHER EXPENSES	2,154,859	1,596,778	456,576	101,505
c	ANNUITY PAYMENTS	288,696	1,330,770	288,696	101,303
d	ALLOCATION OF OPERATION	288,090	7,071,579	-7,114,346	42,767
	All other expenses		7,071,373	-7,114,540	42,707
25	Total functional expenses. Add lines 1 through 24e	76 464 040	C7 350 403	7.256.400	1 740 430
		76,464,010	67,358,182	7,356,408	1,749,420
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Pa	rt X	Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	29,919	1	24,016
	2	Savings and temporary cash investments	7,485,330	2	6,135,336
	3	Pledges and grants receivable, net	1,430,098	3	119,661
	4	Accounts receivable, net	339,810	4	1,273,188
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	,	5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	5	6	
% %	7	Notes and loans receivable, net	93		5,114
⋖	8	Inventories for sale or use		8	,
	9	Prepaid expenses and deferred charges	873,450	9	727,088
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 117,731,40	9		<u>'</u>
	ь	Less accumulated depreciation	74,903,523	10c	76,262,738
	11	Investments—publicly traded securities	29,796,701	11	38,503,254
	12	Investments—other securities See Part IV, line 11	2,803,275	12	117,111
	13	Investments—program-related See Part IV, line 11	369,284	13	550,553
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	3,264,987	15	3,532,283
	16	Total assets. Add lines 1 through 15 (must equal line 34)	121,296,470	16	127,250,342
-	17	Accounts payable and accrued expenses	4,645,945	17	4,874,205
	18	Grants payable		18	
	19	Deferred revenue	4,788,223	19	5,242,601
	20	Tax-exempt bond liabilities	53,048,804	20	51,961,069
φ.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
qе		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	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	0.770.005		0.700.470
		D	6,776,095		6,782,178
	26	Total liabilities. Add lines 17 through 25	69,259,067	26	68,860,053
5		lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets	39,913,505		44,889,071
ñ	28	Temporarily restricted net assets	4,313,186		5,510,670
Ē	29	Permanently restricted net assets	7,810,712	29	7,990,548
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
ζ.	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ř	33	Total net assets or fund balances	52,037,403	33	58,390,289
	34	Total liabilities and net assets/fund balances	121,296,470	34	127,250,342

Par	t XI Reconcilliation of Net Assets				-9
	Check if Schedule O contains a response or note to any line in this Part XI				. [~
1	Total revenue (must equal Part VIII, column (A), line 12)	1		79,4	143,898
2	Total expenses (must equal Part IX, column (A), line 25)	2		76,4	64,010
3	Revenue less expenses Subtract line 2 from line 1	3		2,9	79,888
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) $\cdot$ .	4		52,0	37,403
5	Net unrealized gains (losses) on investments	5		3,0	67,037
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		3	805,961
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		58,3	390,289
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ewed 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 sep basis, consolidated basis, or both	arate			
	▼ 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	2 <b>c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
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?	ne	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: 04-2103585
Name: LASELL COLLEGE

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

Form 990, Part VII - Compensation Compensated Employees, and Inde	of Officers, pendent Cor	Direct ntracto	ors, ers	Tru	ste	es, ŀ	(ey	Employees, High	nest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion ( nan o n is b	ne b oth ctor/	ox, ι an o ⁄trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2,2033 11300)	2,2000 112007	related organizations
RICHARD K BLANKSTEIN	1 00	х		х				0	0	0
JUDITH B WITTENBERG	1 00	×		×				0	0	0
VICE CHAIR SALLY M ANDREWS	1 00	х		х				0	0	0
CLERK SUSAN HASS TREASURER	1 00	х		х				0	0	0
ERIC M TURNER	1 00	Х						0	0	0
PAST CHAIR ED BERSOFF	1 00	х						0	0	0
TRUSTEE RENA CLARK	1 00	Х						0	0	0
TRUSTEE JOHN CONCANNON	1 00	х						0	0	0
TRUSTEE  GERRY DEROCHE	1 00	Х						0	0	0
TRUSTEE JOHN DORAN	1 00	Х						0	0	0
TRUSTEE SUSAN RINKLIN DUNNE	1 00	х						0	0	0
TRUSTEE  IRWIN GRUVERMAN  TRUSTEE	1 00	х						0	0	0
HELENA BENTZ HARTNETT TRUSTEE	1 00	х						0	0	0
KATHLEEN HEGENBART TRUSTEE	1 00	Х						0	0	0
KEON HOLMES TRUSTEE	1 00	Х						0	0	0
SHELAGH JOYCE TRUSTEE	1 00	х						0	0	0
JOHN F LEONARD TRUSTEE	1 00	х						0	0	0
JOHN MAGUIRE TRUSTEE	1 00	х						0	0	0
KAREN MCCAFFERTY TRUSTEE	1 00	х						0	0	0
DAVID MCINNIS TRUSTEE	1 00	х						0	0	0
MARK MENDELL TRUSTEE	1 00	х						0	0	0
SUSAN MORAN TRUSTEE	1 00	х						0	0	0
LAURIE PASCAL TRUSTEE	1 00	х						0	0	0
LUCIE SALHANY TRUSTEE	1 00	х						0	0	0
PETER SCHULTE TRUSTEE	1 00	х						0	0	0
-	_				-	1	1	1		

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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	person is both an officer and a director/trustee)				( <b>D)</b> 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		
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
ELISSE ALLINSON SHARE TRUSTEE	1 00	х						0	0	0
DOUGLAS N SHARP TRUSTEE	1 00	х						0	0	0
ADELAIDE SHAFFER VAN WINKLE TRUSTEE	1 00	х						0	0	0
MICHAEL B ALEXANDER PRESIDENT	40 00			х				373,455	0	80,211
DR MICHAEL J HOYLE  ASST TREASURER, VP BUS & FIN	40 00			х				209,631	0	23,798
PAMELA FARIA ASST CLERK, EXEC ASST TO PRESIDENT	40 00			Х				116,238	0	18,219
DR KATHLEEN M O'CONNOR  VP ENROLLMENT MGMT	40 00					х		210,121	0	24,453
DR JAMES M OSTROW  VP ACADEMIC AFFAIRS	40 00					х		193,332	0	35,815
DR PAULA D PANCHUCK  VP LASELL VILLAGE	40 00					х		193,622	0	25,309
DIANE M AUSTIN  VP STUDENT AFFAIRS	40 00					х		148,243	0	18,523
RUTH S SHUMAN  VP COM, COM, GOV REL	40 00					х		143,549	0	20,832
in conj conj dovine	T		1		1	l				

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OMB No 1545-0047

**SCHEDULE A** 

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

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

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

Open to Public **Inspection** 

**Employer identification number** Name of the organization LASELL COLLEGE

							04-2103585			
Par	tΙ	Reaso	n for Pu	blic Charity Sta	tus (All organization	ons must complete this	part.) See instruct	ions.		
he o	rganız	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forlines 1 th	rough 11, check only one b	ox)			
1	$\Gamma$	A churc	h, conventi	on of churches, or a	ssociation of churche	s described in <b>section 170(</b>	b)(1)(A)(i).			
2	<u>~</u>	A schoo	l described	in <b>section 170(b)(1</b>	.)(A)(ii). (Attach Sch	edule E )				
3	$\Gamma$	A hospi	tal or a coo	perative hospital se	rvice organization des	scribed in <b>section 170(b)(1</b>	)(A)(iii).			
4	$\Gamma$	A medic	al research	n organization operat	ed in conjunction witl	h a hospital described in <b>se</b>	ction 170(b)(1)(A)(i	ii). Ente	er the	
	_			ty, and state						_
5	ļ	An orga	nızatıon op	erated for the benefi	t of a college or unive	rsity owned or operated by	a governmental unit	describ	ed ın	
		sect ion	170(b)(1)(	<b>A)(iv).</b> (Complete P	art II)					
6	$\sqcap$	A federa	al, state, or	local government or	governmental unit de	escribed in <b>section 170(b)(</b>	1)(A)(v).			
7	$\sqcap$					its support from a governm	ental unit or from the	genera	l public	
	_			n 170(b)(1)(A)(vi).		Samuelata Dawt II )				
8 9	<u>'</u>		-		170(b)(1)(A)(vi) (0		h	<b>6</b>		_
9	ı					% of its support from contri				S
					•	ject to certain exceptions,	• •			
			=			iness taxable income (less	· ·	m busir	iesses	
	acquired by the organization after June 30, 1975 See <b>section 509(a)(2).</b> (Complete Part III)  An organization organized and operated exclusively to test for public safety. See <b>section 509(a)(4).</b>									
10	<u> </u>	_	•	•	•	•				_
11	ı	_		•	•	enefit of, to perform the fun	, ,			
						ection 509(a)(1) or section nd complete lines 11e throi		ion sosi	(a)(3).	Check
						ionally integrated <b>d</b>		tionally	ıntegra	ited
e	$\Gamma$					ontrolled directly or indirect				
				on managers and ot	ner than one or more p	publicly supported organiza	tions described in se	ction 5	09(a)(	L) or
			509(a)(2)		. k	IDC that the a Town I Town	- II T III			
f		check t	_	received a written de	etermination from the	IRS that it is a Type I, Typ	e II, or Type III sup	porting	organi	zation,
g				2006, has the organi	zation accepted any	gift or contribution from any	of the			,
_			g persons?							
		. ,		•	•	or together with persons de	scribed in (ii)		Yes	No
			*		e supported organiza	tion?		11g(i)		
		(ii) A fa	mily memb	er of a person descr	bed in (i) above?			11g(ii)		
		(iii) A 3	5% contro	lled entity of a perso	n described in (i) or (	ıı) above?		<b>11g(iii)</b>		
h		Provide	the following	ng information about	the supported organi	zatıon(s)				
							1			
• • •	) Nam		(ii) EIN	(iii) Type of	(iv) Is the	(v) Did you notify	(vi) Is the	(	•	nount of
S	uppor	tea		organization	organization in	the organization	organization in		mone	сагу

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	(iv) Is to organization col (i) listo your gove docume	on in ted in rning	the organiz	(v) Did you notify the organization in col (i) of your support?  (vi) Is the organization in col (i) organized in the U S?		on in anized	(vii) A mount of monetary support
		instructions))	Yes	No	Yes No		Yes	No	
Total									

Sch	edule A (Form 990 or 990-EZ) 2013						Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	( <b>b)</b> 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV )						
11	<b>Total support</b> (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and <b>stop here.</b> The organization qua <b>33</b> 1/3% <b>support test—2012.</b> If the				and line 15 is 33	8 1/3% or more	
	box and <b>stop here.</b> The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	<b>-2013.</b> If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	<b>-2012</b> . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	<b>▶</b> 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		<b>▶</b> □
18	<b>Private foundation.</b> If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 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						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> 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>(b)</b> 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	( <b>B)</b> 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	<b>(B)</b> 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	<b>(b)</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>(b)</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>b)</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>b)</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>b)</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>b)</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>b)</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>b)</b> 2010	(6) 2011	(1) 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>b)</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>b)</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>b)</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>b)</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>b)</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>b)</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)) <b>ge</b> by line 13, column	fifth tax year as a	15 16	nization,

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

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

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, line 17a or ine 12. Also complete this part for any additional information. (See instructions).			
	Facts And Circumstances Test				
Retu	ırn Reference	Explanation			
		Schodulo A / Form 000 o	000 E7) 201		

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493075012125

## OMB No 1545-0047

# **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Political Campaign and Lobbying Activities

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

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

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

Open to Public Inspection

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

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

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

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

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

	me of the organization ELL COLLEGE			Em	ployer ider	nt if ica	tion numb	er
LAS	SELL CULLEGE			04	-2103585			
Par	t I-A Complete if the or	ganization is exempt under	section 501(	c) or is a sec	ction 527	7 orga	anizatio	n.
1	Provide a description of the org	ganızatıon's dırect and ındırect polit	ıcal campaıgn act	:ivities in Part I\	/			
2	Political expenditures				►	\$		
3	Volunteer hours							
Par	t I-B Complete if the or	ganization is exempt under	section 501(	c)(3).				
1	Enter the amount of any excise	e tax incurred by the organization ur	nder section 4955	5	►	\$		
2	Enter the amount of any excise	e tax incurred by organization mana	gers under sectio	n 4955	►	\$		
3	If the organization incurred a s	ection 4955 tax, did it file Form 47	20 for this year?				☐ Yes	┌ No
4a	Was a correction made?						☐ Yes	┌ No
b	If "Yes," describe in Part IV							
	•	ganization is exempt under				)1(c)	(3).	
1		ended by the filing organization for s				\$		
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to o	ther organizations	s for section 52	7 <b>►</b>	\$		
3	Total exempt function expendit	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17	o 🕨	\$		
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?					┌ Yes	┌ No
5	organization made payments F amount of political contribution	nd employer identification number (E For each organization listed, enter the ns received that were promptly and opposite (PAC) In political action committee (PAC) In	ne amount paid fro directly delivered	om the filing orga to a separate p	anızatıon's olitical orga	funds anızatı	Also ente on, such a	rthe
	(a) Name	<b>(b)</b> Address	(c) EIN	( <b>d)</b> A mount filing organ funds If none	ızatıon's	con a dire	A mount o tributions nd promp ectly deliv eparate p janization enter -	received tly and ered to a olitical If none,

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

	dule C (Form 990 or 990-EZ) 2013					Page
Pa		anization is exempt under section 501(c)(3) and has ection under section 501(h)).	NOT			
For e	ach "Yes" response to lines 1a through	11 below, provide in Part IV a detailed description of the lobbying	(a)			(b)
actıv	ty.		Yes	No	Aı	mount
1		ızatıon attempt to ınfluence foreıgn, natıonal, state or local o ınfluence publıc opınıon on a legıslatıve matter or referendum,				
а	Volunteers?			Νo		
b	Paid staff or management (include o	compensation in expenses reported on lines 1c through 1i)?	Yes			
C	Media advertisements?			Νo		
d	Mailings to members, legislators, o	r the public?	Yes			3,62
е	Publications, or published or broadd	cast statements?		Νo		
f	Grants to other organizations for lol	bbying purposes?		Νo		
g	Direct contact with legislators, thei	ır staffs, government officials, or a legislative body?	Yes			42
h	Rallies, demonstrations, seminars,	conventions, speeches, lectures, or any similar means?		Νo		
i	O ther activities?		Yes			58,50
j	Total Add lines 1c through 1i					62,55
2a	Did the activities in line 1 cause the	e organization to be not described in section 501(c)(3)?		Νo		
b	If "Yes," enter the amount of any ta	ax incurred under section 4912				
C	If "Yes," enter the amount of any ta	ax incurred by organization managers under section 4912		_		
d		section 4912 tax, did it file Form 4720 for this year?				
Par	Complete if the organization 501(c)(6).	anization is exempt under section 501(c)(4), section	501(c	)(5), o	r se	ction
						Yes No
1	Were substantially all (90% or mor	e) dues received nondeductible by members?			1	
2		nouse lobbying expenditures of \$2,000 or less?			2	
3		over lobbying and political expenditures from the prior year?			3	
Par		anization is exempt under section 501(c)(4), section her (a) BOTH Part III-A, lines 1 and 2, are answered ' "Yes."				
1	Dues, assessments and similar am	ounts from members	1			
2	Section 162(e) nondeductible lobby expenses for which the section 527	ying and political expenditures (do not include amounts of political (f) tax was paid).				
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3		ion 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4		t on line 2c exceeds the amount on line 3, what portion of the excess yover to the reasonable estimate of nondeductible lobbying and	4			
5		litical expenditures (see instructions)	5			
	rt IV Supplemental Infor					
Pro		irt I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro	up list),	Part II	-A, lır	ie 2, and
	Return Reference	Explanation				
D A D		ASELL COLLEGE EMPLOYED A LOBBYIST TO SEEK OUT AND OBT	AIN GE	2ΔNT M	ONEV	FOP
- 4 K	11 D, L114L 1	A SELE COLLEGE EMPLOTED A LODDITST TO SELK OUT AND OBT	WIN GL	VALVE IN	ONLI	i O K

PART II-B, LINE 1	LASELL COLLEGE EMPLOYED A LOBBYIST TO SEEK OUT AND OBTAIN GRANT MONEY FOR THE COLLEGE

201104410 3 (1 01111 3 3 0 01 3 3 0 12 ) 2 0 1 3	rage		
Part IV Supplemental Information	on <i>(continued)</i>		
Return Reference	Explanation		

Schedule D (Form 990) 2013

### DLN: 93493075012125

OMB No 1545-0047

**SCHEDULE D** 

(Form 990)

Department of the Treasury

## **Supplemental Financial Statements**

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

Open to Public

nal Revenue Service	tions is at <u>www.irs.gov/10111990</u> .		Inspection
ame of the organization		Employer identifica	tion number
SEE COLLEGE		04-2103585	
art I Organizations Maintaining Donor Adv		unds or Accounts	. Complete if the
organization answered "Yes" to Form 990	, Part IV, line 6.  (a) Donor advised funds	(b) Funds and	other accounts
Total number at end of year	(a) Donor advised funds	(b) Fullus allu	other accounts
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor advise	ors in writing that the assets held in don	or advised	
funds are the organization's property, subject to the or			┌ Yes ┌ No
Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef			_
conferring impermissible private benefit?			Yes No
art II Conservation Easements. Complete if	the organization answered "Yes" t	o Form 990, Part I\	/, line 7.
Purpose(s) of conservation easements held by the org	<u>—</u>		
Preservation of land for public use (e.g., recreation  Protection of natural habitat	<u> </u>	historically important certified historic struc	
Preservation of open space	j Freservation of a	certified mistoric struc	ture
Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in t	the form of a conserva	tion
,		Held at the	End of the Year
Total number of conservation easements		2a	:
Total acreage restricted by conservation easements		2b	2 20
Number of conservation easements on a certified histo	oric structure included in (a)	2c	(
Number of conservation easements included in (c) accommodate structure listed in the National Register	quired after 8/17/06, and not on a	2d	(
Number of conservation easements modified, transferi	red, released, extinguished, or terminate	d by the organization	during
the tax year 🗠			
Number of states where property subject to conservat	ion easement is located by 1		
Does the organization have a written policy regarding		—— dling of violations, and	
enforcement of the conservation easements it holds?			✓ Yes
Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easer	nents during the year	
A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easements	s during the year	
<b>▶</b> \$			
Does each conservation easement reported on line 2(and section $170(h)(4)(B)(II)$ ?	d) above satisfy the requirements of sec	tion 170(h)(4)(B)(ı)	✓ Yes
In Part XIII, describe how the organization reports colbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial		
rt III Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures,	or Other Similar	Assets.
If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse	.16 (ASC 958), not to report in its reven ets held for public exhibition, education,	or research in furthera	
service, provide, in Part XIII, the text of the footnote to If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to thes	.16 (ASC 958), to report in its revenue ets held for public exhibition, education,	statement and balanc	
(i) Revenues included in Form 990, Part VIII, line 1	<del></del>	<b>►</b> \$	
(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			
Revenues included in Form 990, Part VIII, line 1	. , <u>-</u>	<b>►</b> \$	
Assets included in Form 990, Part X	<b>►</b> \$		

Part	•••• Organizations Maintaining Co	llections of Art,	His	torical T	reasu	ires, or Otl	<u>her Similar As</u>	ssets (continued
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, ch	eck any of	the foll	owing that ar	e a significant us	e of its
а	Public exhibition		d	┌ Loar	orexc	hange progra	ms	
b	Scholarly research		e	┌ Oth	er			
c	Preservation for future generations							
4	Provide a description of the organization's c Part XIII	ollections and explai	n how	they furth	ner the o	organization's	exempt purpose	ın
5	During the year, did the organization solicit	or receive donations	ofart	t, historica	ıl treası	ıres or other :	sımılar	_
	assets to be sold to raise funds rather than							☐ Yes ☐ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar	nount on Form 99	0, Pa	irt X, line	21.			990, 
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	dıary	for contrib	outions	or other asse	ts not	┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follow	ıng table		_		
							Ai	mount
С	Beginning balance					1	с	
d	Additions during the year					1	d	
е	Distributions during the year					_	e	
f	Ending balance					_1	f	
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					┌ Yes ┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expla	nation has	s been p	provided in Pa	rt XIII	
Pa	rt V Endowment Funds. Complete	ıf the organızatıon	ans	wered "Y	es" to	Form 990, F	Part IV, line 10.	
		(a)Current year	<b>(b)</b> F	Prior year	<del>+ ` ´</del>		(d)Three years back	(e)Four years back
1a	Beginning of year balance	31,927,933		26,264,14		26,527,439	22,588,164	· · · · ·
b	Contributions	1,763,429		3,406,03	9	807,458	787,496	487,14
C	Net investment earnings, gains, and losses	5,290,492		3,446,87	3	47,335	4,278,026	2,713,19
d	Grants or scholarships	110,590		96,33	2	74,298	76,475	48,68
e	Other expenditures for facilities and programs	1,045,540		919,77	0	854,734	853,195	831,42
f	Administrative expenses	204,990		173,02	1	189,056	196,577	211,29
g	End of year balance	37,620,734		31,927,93	3	26,264,144	26,527,439	22,588,16
2	Provide the estimated percentage of the cur	rent year end balanc	e (lın	e 1g, colu	mn (a))	held as		
а	Board designated or quasi-endowment 🕨	66 000 %						
b	Permanent endowment ► 21 220 %							
c	Temporarily restricted endowment ► 12 The percentages in lines 2a, 2b, and 2c sho	780 % uld equal 100%						
За	Are there endowment funds not in the posse	ssion of the organiza	tion t	hat are he	ld and a	administered	for the	
	organization by							Yes No
	(i) unrelated organizations							(i) Yes
L	(ii) related organizations						<del></del>	(ii) No
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second of the second of the second or the second of the seco	•			• • •			<u>                                     </u>
	t VI Land, Buildings, and Equipme				n ansv	wered 'Yes'	to Form 990 P	art IV line
	11a. See Form 990, Part X, line		110 01	garnzado	711 G115 1	wered res		arciv, me
	Description of property			(a) Cost of basis (inve		( <b>b</b> )Cost or other)		d (d) Book value
1a	Land					1,235,1	18	1,235,11
	Buildings					97,229,2		
	Leasehold improvements					, ,	. ,	<u> </u>
	Equipment					9,388,7	93 7,812,29	93 1,576,50
e (	Other			1,	852,000	8,026,2		
	I. Add lines 1a through 1e (Column (d) must e		, colu	mn (B), lın	e 10(c).)	)		76,262,73
							Schedule	D (Form 990) 201

(g) Description of resturbs and accuracy (control of control of co	Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
Total. (Column (b) must repeal from 990, Part X, and (ii) less 22 ) >   Total. (Column (b) must repeal from 990, Part X, and (iii) less 22 ) >   Total. (Column (b) must repeal from 990, Part X, and (iii) less 22 ) >   Total. (Column (b) must repeal from 990, Part X, and (iii) less 22 ) >   (a) Councepton of investment.  (b) Book value  (c) Method of valuation  Cost of end of year market value  (c) Method of valuation  Cost of end of year market value  (a) Description  (b) Book value  (c) Method of valuation  Cost of end of year market value  (c) Method of valuation  (a) Description  (b) Book value  (c) Method of valuation  (c) Method of valuation  (c) Form 990, Part X, line 11  (a) Description  (b) Book value  (c) Form 990, Part X, line 11  (c) Description from 990, Part X, line 11  (d) Description of line 25  (e) Description of line 25  (e) Book value  (f) Book value  (h) Book val	(a) Description of security or category	(b)Book value		
Total, (Column (b) must equal from 590, Part X cot (d) two 12)  Part VIII Investments—Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line See Form 990, Part X, line 13.  (a) Description of investment (b) Book value Cost of and of year mirrett value  Cost of and of year mirrett value  Total, (Column (b) must equal from 590, Part X cot (d) line 13].  Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 1 (a) Description  (b) Book value  Total, (Column (b) must equal from 590, Part X cot (d) line 15).  Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d See Form 990, Part X, line 1 (a) Description (b) Book value  (c) Book value (b) Book value (c) Book val	(1)Financial derivatives			
Total. (Column (b) mast equal from 390, Fast X, cat (b) the 22.) P  Part VIII Investments—Program Related. Complete if the organization answered 'Yes' to Form 990, Part IV, line 13.  (a) Description of investment (b) Book value (c) Method of valuation Cost or and-of-year market value  Total. (Column (b) mast equal from 990, Fast X, cat (b) the 20.) P  Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 116 See Form 990, Part X, line 1  (b) Book value (c) Method of valuation (c) Method of valuation (d) Description (b) Book value (c) Method of valuation (c) Method of valuation (d) Description (e) Description (d) Description (e) Description (d) Book value (e) Description of liability (f) Book value (g) Book value (h) Book v				
Total. (Column (b) must equal form 990, Part X, col (8) line 12.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 12.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  To	Other			
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See Form 990, Part X, line 13.  (a) Description of investment  (b) Book value  Cost or end-of-year market value  Total. (Column (b) must equal Form 990, Part X, col (8) line 13)  Part X Other Assets. Complete if the organization answered Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 1  (a) Description  (b) Book value  (c) Method of valuation  Cost or end-of-year market value  Total. (Column (b) must equal Form 990, Part X, col (8) line 13)  Part X Other Assets. Complete if the organization answered Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 1  (a) Description  (b) Book value  Total. (Column (b) must equal form 990, Part X, col (8) line 15.)  Part X Other Liabilities. Complete if the organization answered Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.  (a) Description of liability  (b) Book value  Federal income taxes  FAV INTEREST RATE SWAPS  FAV INTEREST RATE SWAPS  FAV INTEREST RATE SWAPS  CAPITAL LEASE LIABILITY  177,689		noloto if the organization		orm 990 Part IV line 11c
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Form 990, Part X, line 25.  1 (a) Description of liability (b) Book value  Federal income taxes  FMV INTEREST RATE SWAPS 5,090,829  REFUNDABLE ADVANCES - PERKINS LOAN PROGRAM 355,470  CONDITIONAL ASSET RETIREMENT OBLIGATION 56,500  ANNUITY OBLIGATIONS 1,041,690  CAPITAL LEASE LIABILITY 177,689				line 11e or 11f See
Federal income taxes  FMV INTEREST RATE SWAPS  REFUNDABLE ADVANCES - PERKINS LOAN PROGRAM  CONDITIONAL ASSET RETIREMENT OBLIGATION  ANNUITY OBLIGATIONS  CAPITAL LEASE LIABILITY  177,689	Form 990, Part X, line 25.			110 01 111. 000
FMV INTEREST RATE SWAPS  REFUNDABLE ADVANCES - PERKINS LOAN PROGRAM  CONDITIONAL ASSET RETIREMENT OBLIGATION  ANNUITY OBLIGATIONS  CAPITAL LEASE LIABILITY  177,689	1 (a) Description of liability	(b) Book value		
REFUNDABLE ADVANCES - PERKINS LOAN PROGRAM 355,470 CONDITIONAL ASSET RETIREMENT OBLIGATION 56,500 ANNUITY OBLIGATIONS 1,041,690 CAPITAL LEASE LIABILITY 177,689	-			
CONDITIONAL ASSET RETIREMENT OBLIGATION 56,500 ANNUITY OBLIGATIONS 1,041,690 CAPITAL LEASE LIABILITY 177,689				
ANNUITY OBLIGATIONS 1,041,690 CAPITAL LEASE LIABILITY 177,689				
CAPITAL LEASE LIABILITY 177,689				
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Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	Total (Column (h) must aqual Farm 000 Part V and (R) to 25	A = A = . = .		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) [6,782,178]  2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that			ne organization's financia	I statements that

Cile	dule D (1 01111 990 ) 2013		Page
Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Retu	rn Complete ıf
	the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	58,793,64
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	3,385,00
3	Subtract line <b>2e</b> from line <b>1</b>	3	55,408,64
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 122,271		
b	Other (Describe in Part XIII )		
C	Add lines <b>4a</b> and <b>4b</b>	4c	24,035,25
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	79,443,89
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses of the organization answered 'Yes' to Form 990, Part IV, line 12a.	s per Re	turn. Complete
1	Total expenses and losses per audited financial statements	1	52,440,75
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	1	
C	Other losses	1	
d	Other (Describe in Part XIII )	,	
e	Add lines <b>2a</b> through <b>2d</b>	2e	12,00
3	Subtract line <b>2e</b> from line <b>1</b>	3	52,428,75
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 122,271		
b	Other (Describe in Part XIII ) 4b 23,912,986	5	

### Part XIII Supplemental Information

C

Total expenses Add lines  $\bf 3$  and  $\bf 4c.$  (This must equal Form 990, Part I, line 18 ) . .

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

Return Reference	Explanation
PART II, LINE 5	MEMBERS OF THE CITY'S CONSERVATION COMMITTEE VISIT THE LOCATION TO ENSURE THAT WE ARE IN COMPLIANCE
PART V, LINE 4	BOARD-DESIGNATED ENDOWMENT - FUNDS SET ASIDE BY THE BOARD OF TRUSTEES FOR STRATEGIC PURPOSES AND TO PROVIDE INVESTMENT INCOME TO SUPPORT OPERATIONS THESE AMOUNTS MAY ONLY BE USED WITH THE APPROVAL OF THE BOARD OF TRUSTEES PERMANENT ENDOWMENT - AMOUNTS RESTRICTED BY DONORS AGAINST ANY EXPENDITURE OF PRINCIPAL SUBSTANTIALLY ALL THE INCOME EARNED ON PRINCIPAL MAY BE USED FOR GENERAL OR DONOR-RESTRICTED PURPOSES AND IS RECORDED IN UNRESTRICTED NET ASSETS, AS APPROPRIATE
PART X, LINE 2	THE COLLEGE ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON A "MORE LIKELY THAN NOT" THRESHOLD TO THE RECOGNITION OF THE TAX POSITIONS BEING SUSTAINED BASED ON THE TECHNICAL MERITS OF THE POSITION UNDER SCRUTINY BY THE APPLICABLE TAXING AUTHORITY IF A TAX POSITION OR POSITIONS ARE DEEMED TO RESULT IN UNCERTAINTIES OF THOSE POSITIONS, THE UNRECOGNIZED TAX BENEFIT IS ESTIMATED BASED ON A "CUMULATIVE PROBABILITY ASSESSMENT" THAT AGGREGATES THE ESTIMATED TAX LIABILITY FOR ALL UNCERTAIN TAX POSITIONS THE COLLEGE HAS IDENTIFIED ITS TAX STATUS AS A TAX-EXEMPT ENTITY AND ITS DETERMINATION AS TO ITS INCOME BEING RELATED OR UNRELATED AS ITS ONLY SIGNIFICANT TAX POSITIONS, HOWEVER, THE COLLEGE HAS DETERMINED THAT SUCH TAX POSITIONS DO NOT RESULT IN AN UNCERTAINTY REQUIRING RECOGNITION THE COLLEGE IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION THE COLLEGE'S FEDERAL AND STATE INCOME TAX RETURNS ARE GENERALLY OPEN FOR EXAMINATION FOR THREE YEARS FOLLOWING THE DATE FILED
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN FAIR VALUE OF INTEREST RATE SWAPS -64,630 RENTAL EXPENSES INCLUDED ON PART VIII, LINE 6B 12,004 CHANGE IN ACTUARIAL VALUE OF ANNUITY LIABILITIES 104,457 CHANGE IN VALUE OF BENEFICIAL INTERESTS 266,134
PART XI, LINE 4B - OTHER ADJUSTMENTS	FINANCIAL AID 23,609,786 AUXILIARY ENTERPRISE DISCOUNTS 13,754 OTHER EXPENSE 750 ANNUITY PAYMENTS 288,696
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES INCLUDED ON PART VIII, LINE 6B 12,004
PART XII, LINE 4B - OTHER ADJUSTMENTS	FINANCIAL AID 23,609,786 AUXILIARY ENTERPRISE DISCOUNTS 13,754 ANNUITY PAYMENTS 288,696 OTHER EXPENSE 750

4с

5

24,035,257

76,464,010

•	<u> </u>								
Part XIII	Part XIII Supplemental Information (continued)								
Return Reference		Explanation							

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493075012125

OMB No 1545-0047

**SCHEDULE E** 

(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.

Open to Public

**Employer identification number** 

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

LASELL COLLEGE 04-2103585 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II 3 Νo Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? **4**c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II 5 Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? <u>5g</u> Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a Yes b Has the organization's right to such aid ever been revoked or suspended? Νo If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

Yes

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

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	PER PART 4 03 2(B) OF REV PROC 75-50, 1975-2 C B 587, THE COLLEGE CUSTOMARILY DRAWS A SUBSTANTIAL PERCENTAGE OF ITS STUDENTS FROM A LARGE GEOGRAPHICAL SECTION OF THE UNITED STATES AND FOLLOWS A RACIALLY NONDISCRIMINATORY POLICY AS TO ITS STUDENTS IT CURRENTLY ENROLLS STUDENTS OF RACIAL MINORITY GROUPS IN MEANINGFUL NUMBERS ITS PROMOTIONAL ACTIVITIES AND RECRUITING EFFORTS ARE REASONABLY DESIGNED TO INFORM STUDENTS OF ALL RACIAL SEGMENTS OF THE AVAILABILITY OF THE COLLEGE
SCHEDULE E, PART I, LINE 6	THE COLLEGE RECEIVES GRANTS IN THE FORM OF FUNDS DISTRIBUTED FOR FINANCIAL AID OR SUPPORT OF EDUCATIONAL PROGRAMS

Schedule E (Form 990 or 990-EZ) 2013

DLN: 93493075012125

OMB No 1545-0047

2013

### **SCHEDULE G** (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

	Revenue Service	Attach t Information about Sched	Open to Public Inspection					
	e of the organization ELL COLLEGE				·			entification number
							04-210358	35
Par		<b>tivities.</b> Complete rs are not required					o Form 990, Part 1	IV, line 17.
L	Indicate whether the orga	nızatıon raısed funds t	through ar	ny of the 1	follo	wing activities Che	ck all that apply	
а	Mail solicitations			e	~	Solicitation of non	-government grants	
b	✓ Internet and email sol	ıcıtatıons		f	~	Solicitation of gov	ernment grants	
c	Phone solicitations			g	~	Special fundraising	g events	
d	▼ In-person solicitation	S						
	Did the organization have or key employees listed in If "Yes," list the ten highe to be compensated at leas	i Form 990, Part VII) st paid individuals or	or entity entities (f	ın connec	tion	with professional f	undraising services?	Γ <sub>Yes</sub> Γ <sub>No</sub>
<b>(</b> i	i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?	(iv	v) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(or retained by)
			Yes	No				
	THE WAYLAND GROUP 323 BOSTON POST ROAD	FUNDRAISING COUNSEL		No		0	18,05	-18,052
	SUDBURY, MA 01776							

		contrib	utions?			
		Yes	No			
1 THE WAYLAND GROUP 323 BOSTON POST ROAD SUDBURY, MA 01776	FUNDRAISING COUNSEL		No	0	18,052	-18,052
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total			<b>&gt;</b>		18,052	-18,052

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

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribut			
			(a) Event #1	<b>(b)</b> Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	33. (3),
₹	1	Gross receipts			26,139	26,139
Revenue	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)			26,139	26,139
	4	Cash prizes				
ω.	5	Noncash prizes				
Expenses	6	Rent/facility costs				
鱼	7	Food and beverages .				
Dreg	8	Entertainment				
à	9	Other direct expenses .			1,245	1,245
	10	Direct expense summary Add lin	es 4 through 9 in colum	n (d)		(1,245)
	11	Net income summary Subtract lii	ne 10 from line 3, colum	n (d)		24,894
Par	t II			"Yes" to Form 990, Pa	rt IV, line 19, or repo	
		\$15,000 on Form 990-EZ, lir	1e 6a. (a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gamıng (add
Revenue			(a) billigo	bingo/progressive bingo	(c) other gaming	col (a) through col (c))
<u>~</u>	1	Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	Г Yes <u>%</u> Г No	Г Yes %	│ Yes %   \( \bar{\chi} \) No	
	7	Direct expense summary Add lines	s 2 through 5 ın column	(d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)		
9	Ent	er the state(s) in which the organiza	ation operates gaming ag	rtivities		
a		the organization licensed to operate		<u> </u>		. 「Yes 「No
b		No," explain				
10a	We	re any of the organization's gaming l				]
b	If"	Yes," explain				

						11
Does	s the organization operate gaming activi	ties with nonmembers	s?	Г	Yes $\Gamma_{No}$	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gamin	g <sup>,</sup>			┌ Yes ┌	No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special eve	nts books and record	ls	
	Name 🟲					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by the	he organization 🟲 \$		· 「Yes 「	No
	amount of gaming revenue retained by	the third party 🟲 🕏 _				
C	If "Yes," enter name and address of th	e third party				
	Name 🕨					
	Address ►					
16	Gaming manager information					
	Name <b>▶</b>					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	Employee	☐ Independent contr	actor		
17	Mandatory distributions					
а	Is the organization required under stat	:e law to make charita	able distributions from the gaming p	proceeds to		
	retain the state gaming license?				$\Gamma_{ m Yes}$ $\Gamma$	No
b	Enter the amount of distributions requ	red under state law d	distributed to other exempt organiza	ations or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	ear 🟲 💲			
Pai		5b, 15c, 16, and 17	planations required by Part I, 7b, as applicable. Also complet			nd
	Return Reference		Explanation	n		
		<u> </u>	·	Schodulo G /Forn	- 000 000 F7\	2012

DLN: 93493075012125

OMB No 1545-0047

Schedule I (Form 990)

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

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

Open to Public **Inspection** 

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

**Employer identification number** 

						04-2103585	
Part I General Information	on on Grants and	d Assistance				•	
<ul> <li>Does the organization maintain the selection criteria used to a</li> <li>Describe in Part IV the organization</li> </ul>	ward the grants or as	sıstance?					✓ Yes
	·			United States. Com	nlete if the orga	nization answered "V	es" to
				rt II can be duplicate			63 10
	, , , , , , , , , , , , , , , , , , ,	<u> </u>		<u> </u>	<u>'</u>		
(a) Name and address of organization or government	<b>(b)</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 grar or assistance
2 Enter total number of section 5		_				<b>-</b>	
3 Enter total number of other org						<b>▶</b> _	
For Paperwork Reduction Act Notice, se	e the Instructions for	Form 990.		Cat No 50055P		Schedu	e I (Form 990) 2013

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SEOG GRANTS	68	102,179			
(2) MASSACHUSETTS GILBERT GRANTS	162	306,100			
(3) LASELL SCHOLARSHIPS AND OTHER FINANCIAL AID AWARDS	1645	23,381,721			
(4) SCHOLARSHIPS FROM RESTRICTED GIFTS	8	31,500			
(5) LASELL SIBLING DISCOUNTS	25	39,054			
(6) LASELL TUITION EXCHANGE DISCOUNTS	7	160,400			
(7) LASELL OTHER TUITION DISCOUNTS	8	10,864			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

	Hermanen Fredrice the information required in Fart 1/ mile 2/ Fart 111/ Column (5// and any other daditional information)
Return Reference	Explanation
,	INSTITUTIONAL FINANCIAL ASSISTANCE IS AWARDED BASED ON BOTH A FINANCIAL NEED AND MERIT BASIS FINANCIAL NEED IS DETERMINED BY THE SUBMISSION OF THE FREE APPLICATION FOR FEDERAL STUDENT AID AND SUPPORTING DOCUMENTS AND THE USE OF THE FEDERAL METHODOLOGY NEED ANALYSIS FORMULA AND THE INSTITUTIONAL METHODOLOGY NEED ANALYSIS FORMULA MERIT AID IS AWARDED TO STUDENTS WHO MEET CERTAIN ACADEMIC CRITERIA WHO MAY OR MAY NOT ALSO HAVE FINANCIAL NEED FOR ASSISTANCE CAMPUS BASED FINANCIAL ASSISTANCE FROM FEDERAL AND STATE SOURCES IS AWARDED BASED ON FINANCIAL NEED AND OTHER ELIGIBILITY REQUIREMENTS AS STIPULATED BY FEDERAL OR STATE GUIDELINES FINANCIAL NEED IS DETERMINED BY THE SUBMISSION OF THE FREE APPLICATION FOR FEDERAL STUDENT AID AND SUPPORTING DOCUMENTS AND THE USE OF THE FEDERAL METHODOLOGY NEED ANALYSIS FORMULA

Schedule I (Form 990) 2013

#### DLN: 93493075012125

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

Schedule J (Form 990)

# **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 LASELL COLLEGE

**Employer identification number** 

104-2103585

			104-2103363					
Pa	rt I Questions Regarding Compensati	on			I			
_					Yes	No		
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ide any relevant information regarding these items					
	First-class or charter travel	<u>  -                                   </u>	Housing allowance or residence for personal use					
	Travel for companions	Г	Payments for business use of personal residence					
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees					
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)					
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b	Yes			
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?							
3	Indicate which, if any, of the following the filing orgonization's CEO/Executive Director Check all used by a related organization to establish compe	that apply						
	✓ Compensation committee	<b>▼</b>	Written employment contract					
	☐ Independent compensation consultant	<u> </u>	Compensation survey or study					
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee					
4	During the year, did any person listed in Form 990 or a related organization	), Part VII	, Section A, line 1a with respect to the filing organization					
а	Receive a severance payment or change-of-contro	ol paymen	t?	4a	Yes			
b	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b		Νo		
c	Participate in, or receive payment from, an equity-	-based co	mpensation arrangement?	4c		Νo		
	If "Yes" to any of lines 4a-c, list the persons and							
	Only 501(c)(3) and 501(c)(4) organizations only r	must comp	olete lines 5-9.					
5	For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of	A , line 1a	, did the organization pay or accrue any					
а	The organization?			5a		Νo		
b	Any related organization?			5b		Νo		
	If "Yes," to line 5a or 5b, describe in Part III							
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	A , line 1a	, did the organization pay or accrue any					
а	The organization?			6a		Νo		
ь	Any related organization?			6b		No		
	If "Yes," to line 6a or 6b, describe in Part III							
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			7	Yes			
8	Were any amounts reported in Form 990, Part VII							
	subject to the initial contract exception described		tions section 53 4958-4(a)(3)? If "Yes," describe					
	ın Part III			8		Νo		
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	the rebutt	able presumption procedure described in Regulations	9				

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

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

Note. The sum of columns (B)(I)-(III) 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 of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)MICHAEL B ALEXANDER PRESIDENT	(i) (ii)	346,663 0	17,000 0	9,792 0	59,125 0	21,086 0	<b>453,666</b> 0	0
(2)DR MICHAEL J HOYLE ASST TREASURER, VP BUS & FIN	(i) (ii)	189,451 0	20,000	180 0	14,400 0	9,398	233,429	0
(3)DR KATHLEEN M O'CONNOR VP ENROLLMENT MGMT	(i) (ii)	194,398 0	15,000 0	723 0	14,775 0	9,678 0	234,574 0	0
(4)DR JAMES M OSTROW VP ACADEMIC AFFAIRS	(i) (ii)	172,816 0	20,000	516 0	13,750 0	22,065 0	229,147 0	0
(5)DR PAULA D PANCHUCK VP LASELL VILLAGE	(i) (ii)	172,830 0	20,000	792 0	13,350	11,959	218,931	0
(6)DIANE M AUSTIN VP STUDENT AFFAIRS	(i) (ii)	137,451 0	10,000	792 0	10,500	8,023 0	166,766 0	0
(7)RUTH S SHUMAN VP COM, COM, GOV REL	(i) (ii)	138,033	5,000, 5 0	516 0	10,725	10,107 0	164,381 0	0

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
,	THE COLLEGE PROVIDED NON-TAXABLE HOUSING TO THE ASSISTANT CLERK/EXECUTIVE ASSISTANT TO THE PRESIDENT AS PART OF HER COMPENSATION
PART I, LINE 4A	IN JULY OF 2014 A SEVERANCE AGREEMENT WAS ENTERED INTO WITH AN EMPLOYEE LISTED ON SCHEDULE J, PART II
,	AS DETAILED ON SCHEDULE J, PART II, BONUSES WERE AWARDED TO CERTAIN EMPLOYEES DURING THE YEAR A BONUS WAS AWARDED TO THE PRESIDENT OF THE COLLEGE AT THE RECOMMENDATION OF THE EXECUTIVE COMPENSATION COMMITTEE AND UPON THE APPROVAL OF THE BOARD OF TRUSTEES BONUSES TO ALL OTHER PERSONS WERE AWARDED AT THE DISCRETION OF THE PRESIDENT OF THE COLLEGE

Schedule J (Form 990) 2013

DLN: 93493075012125

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** 

Employer identification number

04-2103585

Internal Revenue Service Name of the organization LASELL COLLEGE

Department of the Treasury

#### Part I Bond Issues (h) On (i) Pool (g) Defeased behalf of financing (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (a) Issuer name ıssuer Yes No Yes No Yes No MASSACHUSETTS CONSTRUCTION OF DEVELOPMENT FINANCE 04-3431814 Χ Χ 57583RZC2 08-07-2008 14,665,000 RESIDENCE HALL & EXISTING Χ AGENCY **PROJECTS** MASSACHUSETTS ADVANCE REFUND OF PRIOR DEVELOPMENT FINANCE 04-3431814 57583RGS8 09-28-2006 6,400,000 Χ Χ Χ AGENCY ISSUE MASSACHUSETTS CONSTRUCTION OF DEVELOPMENT FINANCE С Χ 04-3431814 57583RGS8 09-28-2006 12,070,000 RESIDENCE HALL & EXISTING Χ Χ **AGENCY PROJECTS** MASSACHUSETTS REFUND PRIOR ISSUE AND DEVELOPMENT FINANCE

D	AGENCY	04-3431814	57583UCZ9	05-25-2011	24,5		W CONSTRU	CTION		×	×	×
Pa	rt III Proceeds	1		1		•				<b>I</b>	<u> </u>	•
						\	I	В		С		D
1	A mount of bonds retired					3,775,000		585,000		440,000		1,080,000
2	A mount of bonds legally defeas	mount of bonds legally defeased										
3	Total proceeds of issue					14,732,917		6,400,000		12,292,016		24,589,866
4	Gross proceeds in reserve fund	ls				1,959,213						1,959,213
5	Capitalized interest from proce	eds				661,923				330,000		807,400
6	Proceeds in refunding escrows											
7	Issuance costs from proceeds					248,753		123,645		281,019		382,372
8	Credit enhancement from proce	eds				69,657		17,921		33,798		
9	Working capital expenditures fr	om proceeds										
10	Capital expenditures from proc	eeds				13,752,884		53,884		8,592,712		11,023,653
11	Other spent proceeds					6,204,550		6,204,550		3,054,487		10,417,228
12	Other unspent proceeds											
13	Year of substantial completion				20	09	20	07	20	07	20	12
					Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part	of a current refundıı	ng issue?			Х		х	Х		Х	
15	Were the bonds issued as part	of an advance refun	ding issue?			Х	Х			Х		Х

Χ Χ Χ 16 Does the organization maintain adequate books and records to support the final Χ Χ Χ allocation of proceeds? **Private Business Use** 

			A		В		С		)
		Yes	Yes No		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?		×		×		×		×
2	Are there any lease arrangements that may result in private business use of bond-financed property?		×		×		×		×

Has the final allocation of proceeds been made?

Χ

Χ

Part III Private Business Use (Continued)

ECL	Private Business Use (Continued)								
			4		В		С	[	)
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use of bond-financed property?		х		х		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 %			0 %	% 0 %		
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0 %	0 %			0 %		0 %
6	Total of lines 4 and 5		0 %	0 %		0 %		%	
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		х		х		Х
ь	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?	Х		X		×		Х	

Par	IV Arbitrage		·		·				
		Α		В		С		D	•
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х		Х		Х		Χ
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?		Х		Х		Х		Χ
b	Exception to rebate?		Х		Х		X		×
С	No rebate due?	X		×		X	X		
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	Х		Х		Х			X
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	×		X		Х			Х
b	Name of provider	RBS CITIZEN	S	RBS CITIZEN	IS	RBS CITIZEN	NS		
С	Term of hedge	29 00000000000		20 00000	0000000	30 000000000000			
d	Was the hedge superintegrated?		Х		Х		Х		
е	Was the hedge terminated?		Х		Х		Х		
							Scl	nedule K (Forn	n 990) 2013

Par	Part IV Arbitrage (Continued)										
		Α		В		С		D			
		Yes	No	Yes	No	Yes	No	Yes	No		
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		×		×		×		
ь	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		x		x		x		
7	Has the organization established written procedures to monitor the requirements of section 148?	x		X		x		x			

## Part V Procedures To Undertake Corrective Action

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?

A		В		С		D		
Yes	No	Yes	No	Yes	No	Yes	No	
Х		X		X		Х		

Part VI	Supplemental Info	ormation. Provide additional information for responses to questions on Schedule K (see instructions).
Ret	urn Reference	Explanation

LINE 3-TOTAL PROCEEDS OF ISSUE

FORM 990, SCHEDULE K-PART II, THE DIFFERENCES CONSIST OF INTEREST EARNED COLUMN A AMOUNT \$67,917 COLUMN C AMOUNT \$222,016 COLUMN D AMOUNT \$413

Schedule K (Form 990) 2013

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DLN: 93493075012125

# 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.

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Name of the or LASELL COLLEGE	ganızatıon						E	mploy	er ident	ificatio	n numbe	er
									03585			
	ess Benefit											
	olete if the orga											
<b>1 (a)</b> Nam	e of disqualifie	d person (		ship between n and organiz		(c) Desc	ription	of tra	nsactior	י		rected?
			perso	ii aliu organiz	2411011						Yes	No
												=
												-
												-
												-
												_
												_
												_
2 Enterthe a	amount of tax ı	ncurred by or	ganızatıon r	managers or o	disqualified pe	rsons durına t	he year	r unde	rsection	n		
4958 .			·						<b>F</b> \$			
3 Enterthe a	amount of tax,	ıf any, on lıne	2, above, r	eımbursed by	the organizat	ion			<b>►</b> \$			
_												
	ans to and,											
	mplete if the o						Form 9	90, Pa	art IV , li	ne 26,	or if the	
	janization repo		(d) Loan				(m) In		(h)		(:)\//	
(a) Name of interested	(b) Relationship	(c) Purpose of	1 \ /		(e)Original principal	(f)Balance due	(g) In defaul		(h) Approv	/ed	agree	ntten ment?
person	with	loan	organizatio		amount			-	by		3.55.	
	organization								board			
									or	++ 2		
			То	From	1		Yes	No	Yes	No	Yes	No
			10	FIOIII			res	140	165	140	res	INO
		+		<u> </u>						1	_	
							+			-	_	
							-		1		_	
							1		1		_	
				-			-		1		_	
					<u> </u>		-		1		$\neg$	
Total		<b>▶</b> \$	6:44:	T	d D							
	ants or Assimplete if the					art IV line 1	7					
(a) Name of II		<b>b)</b> Relationsh		_	nt of assistanc			ıctano	. (0	) Burno	co of ac	sistance
perso		nterested per			it of assistant	e (u) Type	: UI a55	istaiit	.   (•	) Fulpo	se oi as	Sistance
F		organiz										
	İ					•			•			
	1											
				1		<del></del>						
				1								

Part IV Business Transactions Complete if the organizat			e 28a. 28b. or 28c.			
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization revenues?		
				Yes	No	
(1) MAGUIRE ASSOCIATES INC	ENTITY OWNED BY JOHN MAGUIRE, TRUSTEE	120,000	CONSULTING AGREEMENT		No	
(2) CANNON BOSTON INC DBA CANNON DESIGN INC	MARK MENDELL, TRUSTEE IS A PRINCIPAL OF THE ENTITY	30,000	DESIGN SERVICES		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

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DLN: 93493075012125

OMB No 1545-0047

(Form 990)

**SCHEDULE M** 

# **Noncash Contributions**

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

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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

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ASEI	L COLLEGE				04-2103585			
Pa	rt I Types of Property				04-2103565			
		(a) Check ıf applıcable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of de noncash contrib	etermi		ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded .	X	7	1,513,864	FAIR MARKET VAL	U E		
	Securities—Closely held stock .			, ,				
	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							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other ► ()							
	O ther ► ()							
	Other ► () Other ► ( )							
	Number of Forms 8283 received	by the orga	nization during the tay yea	r for contributions				
23	for which the organization comple				29			0
							Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	erty reported in Part I, lines	1 through 28, that			
	ıt must hold for at least three ye	ars from the	e date of the initial contribu	ıtıon, and which is not requi	red to be used			
	for exempt purposes for the enti	re holding p	eriod?			30a		No
b	If "Yes," describe the arrangem	ent in Part 1	II					
31	Does the organization have a gif	t acceptano	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	·	<del>-</del>	to solicit, process, or sell	noncash • • •	32a		No
b	If "Yes," describe in Part II							
33	If the organization did not report	: an amount	ın column (c) for a type of	property for which column (	a) is checked,			
	describe in Part II							

, ,	nether the organization is reporting in Part I, column (b), the number of contributions, the									
number of items received, or a combination of both. Also complete this part for any additional information.										
Return Reference	Explanation									
PART I, COLUMN (B)	THE AMOUNTS IN COLUMN (B) REPRESENT THE NUMBER OF CONTRIBUTIONS									

Schedule M (Form 990) (2013)

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DLN: 93493075012125

OMB No 1545-0047

2013

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## SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

Name of the organization LASELL COLLEGE

Employer identification number

04-2103585

#### 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	FAMILY RELATIONSHIP
FORM 990, PART VI, SECTION B, LINE 11	A MEETING OF THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES (BOT) REVIEWED THE FORM 990 AND RECOMMENDED TO THE FULL BOT THAT THE FORM 990 BE ACCEPTED AND FILED THE FORM 990 WAS MADE AVAILABLE TO THE FULL BOT PRIOR TO THE BOARD MEETING AND THE BOT APPROVED THE MOTION TO A CCEPT THE FORM 990 AND FILE THE DOCUMENT
FORM 990, PART VI, SECTION B, LINE 12C	THE TRUSTEES SEND THE CONFLICT OF INTEREST FORMS TO THE EXECUTIVE ASSISTANT TO THE PRESIDE  NT WHO REVIEWS THE FORMS, LOOKING FOR CONFLICTS NOTED OR NOT NOTED BY THE TRUSTEE  (S) IF A  CONFLICT IS NOTED, THE FORM IS SENT TO THE COMMITTEE ON TRUSTEES OF THE BOARD TO REVIEW
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF TRUSTEES OF LASELL COLLEGE CONDUCTS AN ANNUAL WRITTEN EVALUATION OF THE PRESI DENT OF THE COLLEGE WHOSE DUTIES ALSO INCLUDE CEO OF LASELL VILLAGE AND ESTABLISHES COMPEN SATION BASED ON PERFORMANCE AND AMONG OTHER DATA, CONSIDERS A COMPARISON OF PRESIDENTS AND CEO'S AT SIMILAR SIZED INSTITUTIONS THE PRESIDENT REVIEWS THE PERFORMANCE OF EACH OFFICE R AND KEY EMPLOYEE AGAINST A WRITTEN SET OF GOALS COMPENSATION IS DETERMINED BY REVIEWING SALARY DATA OF THE RESPECTIVE POSITION AT PEER INSTITUTIONS, AS WELL AS REVIEWING SALARY DATA FROM NATIONAL SURVEYS
FORM 990, PART VI, SECTION C, LINE 19	THESE DOCUMENTS ARE AVAILABLE FOR REVIEW UPON REQUEST THE FINANCIAL STATEMENTS OF LASELL COLLEGE ARE AVAILABLE ON THE COLLEGE'S WEBSITE AS WELL AS IN THE RESERVE SECTION OF THE CO LLEGE LIBRARY ADDITIONALLY, THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE V IA THE MASSCHUSETTS ATTORNEY GENERAL'S WEBSITE AND WWW GUIDESTAR ORG
FORM 990, PART XI, LINE 9	CHANGE IN FAIR VALUE OF INTEREST RATE SWAP -64,630 CHANGE IN ACTUARIAL VALUE OF ANNUITY L IABILITIES 104,457 CHANGE IN VALUE OF BENEFICIAL INTERESTS 266,134

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

DLN: 93493075012125

2013

OMB No 1545-0047

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**SCHEDULE R** (Form 990)

**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.

Name of the organization LASELL COLLEGE

Department of the Treasury

Internal Revenue Service

**Employer identification number** 

04-2103585

Part I Identification of Disregarded Entities Comp	lete if the organization	answered "Yes" on	Form 990, Part I'	V, line 33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income End-	(e) of-year assets	Dii	<b>(f)</b> rect controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during		he organization ans	swered "Yes" on I		rt IV, l	ine 34 because it	: had or	ne
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity s (if section 501)	status (c)(3))	<b>(f)</b> Direct controlling entity	Section (13) co	g) n 512(l ontrolle
(1) LASELL VILLAGE	RESIDENTIAL CARE	MA	501(C)(3)	LINE 9		LASELL INC	Yes	No No
120 SEMINARY AVE			, , , ,					
AUBURNDALE, MA 02466 22-3042122								
(2) LASELL INC	ADMINISTRATIVE SUPPORT	MA	501(C)(3)	LINE 11B, II				No
1844 COMMONWEALTH AVE NEWTON, MA 024662716						N/A		
86-1070319							$\perp$	+
							-	

because it had one or more re	eiated organizations tr			_	ı	1 (0		1		(2)	<del></del>		
<b>(a)</b> Name, address, and EIN related organization	of	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-yead assets	<b>(h</b> Disprop r allocai	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	<b>(k)</b> Percentage ownership
					,			Yes	No		Yes	No	
Part IV Identification of Related C line 34 because it had one or								wered	d "Yes	" on Form	990,	Part	IV,
( <b>a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controlli entity	rg (e) Type of entit (C corp, S corp, or trust)		otal Share	(g) e of end- -year ssets		(h) ercentage ownership	Section (b) continued ent	rolled ity?	
ee Additional Data Table									-		Yes	•	No

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No		
<b>1</b> D	During the tax year, did the orgranization engage in any of the following transactions with one or more related organization	ons lis	sted in Parts II-IV?						
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No		
b	Gift, grant, or capital contribution to related organization(s)				1b		No		
c Gift, grant, or capital contribution from related organization(s)									
d	Loans or loan guarantees to or for related organization(s)				1d		No		
e	Loans or loan guarantees by related organization(s)				1e		No		
f	Dividends from related organization(s)				1f		No		
g	Sale of assets to related organization(s)				1g		No		
h	Purchase of assets from related organization(s)				1h		No		
i	Exchange of assets with related organization(s)				<b>1</b> i		No		
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	Yes			
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No		
1	Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes			
m Performance of services or membership or fundraising solicitations by related organization(s)									
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)								
0	Sharing of paid employees with related organization(s)				10	Yes			
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p		No		
q	Reimbursement paid by related organization(s) for expenses				<b>1</b> q		No		
r	O ther transfer of cash or property to related organization(s)				1r		No		
s	Other transfer of cash or property from related organization(s)				1s		No		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, includi  (a)  (b)	ng co		(d)					
	Name of related organization  Name of related organization  type (a-s)		(c) Amount involved	Method of determining amo	ount I	nvolved	İ		
		ŀ							

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 i													
(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) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations <sup>7</sup>	_	(i) Code V <sup>2</sup> 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	
												1	
													_
			<u> </u>				l					<u> </u>	

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

Software ID: Software Version:

**EIN:** 04-2103585

Name: LASELL COLLEGE

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

Form 990, Schedule R, Part IV	- Identification 🗸	of Related Orc	janizations Tay	Kable as a Co	 , ust	1		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(g) Share of end-of-year assets	(h) Percentage ownership	Section (13) co	(i) in 512(b) ontrolled itity?
					 		Yes	No
CHARITABLE REMAINDER UNITRUST	INVESTMENTS	МА	N/A	Т	180,818	100 000 %		No
CHARITABLE REMAINDER ANNUITY TRUST	INVESTMENTS	МА	N/A	Т	21,263	100 000 %		No
CHARITABLE REMAINDER ANNUITY TRUST	INVESTMENTS	МА	N/A	Т	38,717	100 000 %		No
CHARITABLE REMAINDER UNITRUST	INVESTMENTS	МА	N/A	Т	 193,519	100 000 %		No
CHARITABLE REMAINDER UNITRUST	INVESTMENTS	МА	N/A	Т	341,606	100 000 %		No
TRUST	INVESTMENTS	МА	N/A	Т	621,291	100 000 %		No
TRUST	INVESTMENTS	МА	N/A	Т	 1,040,175	100 000 %		No
TRUST	INVESTMENTS	МА	N/A	T	184,196	50 000 %		No
CHARITABLE REMAINDER UNITRUST	INVESTMENTS	МА	N/A	Т	177,737	50 000 %		No