

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	rthe 2	2013 cal	endar year, or tax year beginning	g 07-01-2013 ,2013, and ending 06	-30-2014			
		plicable	C Name of organization Simmons College			D Emplo	yer ic	lentification number
☐ Add		-	Doing Business As			04-21	1036	29
∏ Nar		_						
Initi			Number and street (or P O box if m 300 The Fenway	nail is not delivered to street address) Room/	suite	E Telepho	one nu	ımber
Ten			Suite			(617)	521	-2877
_	ended r		City or town, state or province, cour Boston, MA 02115	ntry, and ZIP or foreign postal code				
 App	lication	pending			_	G Gross r	receipt	s \$ 160,996,383
			F Name and address of prir Helen Drinan	ncipal officer		s this a group Subordinates?		rn for ┌─ Yes 🔽 No
			300 The Fenway		"	suporumates		j resj• No
			Boston,MA 02115		1	Are all subordi	ınate	s
	r-exem	pt status	<u> </u>	Insert no)		ncluded? [f "No." attach	na lis	t (see instructions)
		<u> </u>		, , ,(=,(=, -, -, -, -, -, -, -, -, -, -, -, -, -,	-			
			w sımmons edu		H(c)	Group exempt	tion n	umber ►
			Corporation Trust Associatio	n	L Year	of formation 18	399	M State of legal domicile MA
Pa	rt I	Sum	nmary					
		,	escribe the organization's mission	on or most significant activities				
a.	3	SEE SC	HEDULE O					
Governance	_							
Ē	_							
Ne.	2 (Check t	his box দ if the organization di	scontinued its operations or disposed	d of more th	nan 25% of its	net	assets
	.			ing hady (Dart VI line 1 a)			ء ا	I 20
Activities &				ing body (Part VI, line 1a)			4	30
III				of the governing body (Part VI, line 1			5	2.8
χĮΛ				calendar year 2013 (Part V, line 2a) ecessary)			6	3,532 1,430
đ				art VIII, column (C), line 12			7a	
				rom Form 990-T, line 34			7b	
						Prior Year	1 75	Current Year
	8	Contr	ıbutıons and grants (Part VIII, lı	ne 1 h)		10,121,	718	14,669,183
Ξ	9			ne 2g)		134,440,	-	136,297,949
Revenue	10	_		(A), lines 3, 4, and 7d)		3,925,		6,927,355
æ	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		3,094,	807	3,101,896
	12			(must equal Part VIII, column (A), li	ne	151 501	007	160,006,303
	12			IX, column (A), lines 1–3)		151,581,	_	160,996,383
	13 14			X, column (A), line 4)	—	29,929,	0	32,818,245
	15			ee benefits (Part IX, column (A), lines				0
\$	13	5-10		se beliefits (Fart IX, Column (A), inles	'	72,368,	641	71,929,049
Expenses	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)			0	0
ੜ	b	Total fu	undraising expenses (Part IX, column (D), line 25) ▶ 2,430,607				
_	17	Other	expenses (Part IX, column (A),	lines 11a-11d, 11f-24e)		55,311,	348	49,511,406
	18	Total	expenses Add lines 13-17 (mu	st equal Part IX, column (A), line 25)		157,609,	505	154,258,700
	19	Rever	nue less expenses Subtract line	18 from line 12		-6,027,		6,737,683
20 g 20 g 20 g					Begi	nning of Curre Year	nt	End of Year
Set Sess	20	Total	assets (Part X, line 16)			412,478,	401	430,151,592
Not Assets or Fund Balances	21		liabilities (Part X, line 26)			199,882,	$\overline{}$	198,254,002
\$5	22		ssets or fund balances Subtract			212,595,		231,897,590
_	t II		nature Block		L	=1	-1	,,
Undei my kr	r pena nowled	Ities of ge and	perjury, I declare that I have exa	amined this return, including accompanded in the manner of preparer (other				
		k				2015-05-12		
Sign		Signa	ature of officer			Date		
Here		N PHJL	IP N SHAPIRO INT VICE PRESIDENT					
			e or print name and title					
			Print/Type preparer's name PAUL TANIS	Preparer's signature	Date	Check I if	PTIN	l41612
Paic	i	<u> </u>	Firm's name FricewaterhouseCoope	rs LLP		self-employed Firm's EIN ▶	1 1014	rT1012
Pre	pare	r L		·		5		
_	Onl		Firm's address 🕨 125 High Street			Phone no (617	7) 521	-2877

Boston, MA 02110

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

✓ Yes ☐ No

Form	n 990 (20	13)					Page 2
Par				rvice Accomp esponse or note t	lishments o any line in this Part	: III	٦
1	Briefly	describe the orga	nızatıon's mıss	ion			
SEE	SCHEDU	LE O					
2		organization unde r Form 990 or 99		ıfıcant program se	ervices during the year	ar which were not listed o	n
	If"Yes,	" describe these	new services oi	n Schedule O			
3	Did the services	_	se conducting, o	or make significar	nt changes in how it c	onducts, any program	
	If"Yes,	" describe these	changes on Sch	nedule O			
4	expense	es Section 501(d	c)(3) and 501(c		s are required to repo	hree largest program ser rt the amount of grants a	
4a	(Code) (Expenses \$	59,738,471	ıncludıng grants of \$	26,967,934) (Revenu	ne \$ 66,694,535)
	SERVES INCLUDE	1,732 UNDERGRADU ES EXPENDITURES FO RSHIPS AND GRANTS	IATE WOMEN DUR OR THE UNDERGRA	ING THE 2014 ACADE ADUATE PROGRAM AS	MIC YEAR, THE COLLEGE WELL AS FINANCIAL AID F	CONFERRED 477 BACCALAURE PROVIDED BY THE COLLEGE TO	
4b	(Code	OTTON OR ADJUSTE 5) (Expenses \$	31,645,526	including grants of \$	5,770,757) (Revenu	, , ,
	LEVELS MANAGE CONFER	THESE PROGRAMS A MENT, THE SCHOOL RED 1,092 GRADUAT	RE HOUSED IN THI OF NURSING AND TE DEGREES INSTE	E GRADUATE SCHOOL HEALTH SCIENCE ANI RUCTION INCLUDES E	OF LIBRARY AND INFORM O IN THE COLLEGE OF ART XPENDITURES FOR THE G	NATION SCIENCE, THE SCHOOL IS AND SCIENCES DURING TH	AMS AT THE MASTER AND DOCTORAL OF SOCIAL WORK, THE SCHOOL OF E 2014 ACADEMIC YEAR, THE COLLEGE AS FINANCIAL AID APPROXIMATELY
_	(6.1) (F	20.020.127		0 \ (D	
4 c	(Code	-d.ul- 0) (Expenses \$	20,030,127	including grants of \$	0)(Revenu	ue \$ 0)
	See Sch	eaule U					
	Other	program services	(Describe in S	chedule O)			
	(Exper	-	•	including grants o	of \$	0)(Revenue\$	22,148,172)
4e		program service e		125,747,721	·		<u> </u>

Part IV	Checklist of	Requi	red S	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 💆	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <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 $11e^{2}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		N o
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		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	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

2611				_
	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 224		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?	1		ĺ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		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			
5a	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?			
_		5c		<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	90		
	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			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
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			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
	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]		
С	Enter the amount of reserves on hand			
	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		ı

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

Check if Schedule O contains a response or note to any line in this Part	VΙ														
--	----	--	--	--	--	--	--	--	--	--	--	--	--	--	--

56	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	30			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	28			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co	•		3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	prior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	raanız	zation's assets? .	5		Νο
6	Did the organization have members or stockholders?			6	Yes	
	Did the organization have members, stockholders, or other persons who had the pow	erto	elect or appoint one or			
	more members of the governing body?			7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b		No
	Did the organization contemporaneously document the meetings held or written active year by the following	ons ui	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	•		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		Νo
Se	ection B. Policies (This Section B requests information about policies not	requi	ired 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 act affiliates, and branches to ensure their operations are consistent with the organization			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	ts gov	erning body before filing	11a	Yes	
ь	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annual	ly inte	erests that could give	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with	the p	olicy? If "Yes," describe	12c	Yes	
13	In Schedule O how this was done			13	Yes	
14	Did the organization have a written document retention and destruction policy?			14	Yes	
	, ,			14	162	
15	Did the process for determining compensation of the following persons include a rev independent persons, comparability data, and contemporaneous substantiation of the	ne deli	beration and decision?			1
	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 of taxable entity during the year?			16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organ participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	e step	s to safeguard the	16b		
Se	ection C. Disclosure					
17	List the States with which a copy of this Form 990 is required to be filed▶MA					
18						

- Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►PHILIP N SHAPIROINTERIM VP 300 THE FENWAY BOSTON, MA 02115 (617) 521-2010

Form 990	(2013	
----------	-------	--

D	2	а	۵	7
М	а	ч	u	•

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)	(B)			(C)				([D)	(E)		(F)	
	Name and Title	Average hours per	Posi more t	tıon ((do r		heck unless		Repor	table	Reportable compensation		Estima amount o	ited
		week (list	perso	n is l	both	and	officer	,	from	the	from related organizations (V		compens from t	ation
		any hours for related					stee) I <u>o</u> エ	Ιπ	organiza 2/1099		2/1099-MISC		organızatı	on and
		organizations below	Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee	Former					relate organiza	
		dotted line)	용하	ilti o	<u> -</u>) မှုမှ ()	왁					J	
			rtas	<u> </u>		99(0	Si							
			8	ruste E		-	ens:							
				ď			# ⊕							
												+		
												+		
1b	Sub-Total							<u> </u>				-		
C	Total from continuation sheet	· · · · · s to Part VII, S	ection A	٠.				•				+		
d	Total (add lines 1b and 1c) .				٠.			Þ		3,538,982		0		642,689
2	Total number of individuals (in	-					d abov	e) w	ho receive	d more th	an			
	\$100,000 of reportable compe	ensation from th	e organ	izatio	on F €	86								
													Yes	No
3	Did the organization list any fc on line 1a? <i>If "Yes," complete S</i>								or highes,	t compen	sated employee	٦	V	
4	For any individual listed on line								d other co	mpensatio	on from the	3	Yes	
	organization and related organ													1
5	Did any person listed on line 1	a receive or ac	rue cor	 mnan	e atu	• on fr	om anv	· / unr	· ·	· · ·	or individual for	4	Yes	
,	services rendered to the organ									• • •	· · · ·	5		No
	ction B. Independent Co		onasta	الحمرا ا	. n	.dc=1		20+5	ro that ===		ro than #100 00	0 65		
1	Complete this table for your five compensation from the organization												tax year	
	N	(A)	address							Dec	(B)		(C	

(A) Name and business address	(B) Description of services	(C) Compensation
Aramark, 1101 Market Street PHILADELPHIA PA 19107	food serviceS	3,431,626
DTZ INC, 4002 SOLUTIONS CENTER CHICAGO IL 60677	FACILITIES MGMT SERV	2,646,150
ROBERT D CONNORS, 400 WEST COMMINGS PARK STE 1725-18 WOBURN MA 01801	GENERAL CONTRACTOR	810,100
ROYALL, 1920 East Parham Road RICHMOND VA 23228	EDUCATION CONSULTANT	568,783
GOODWIN PROCTER LLP, EXCHANGE PLACE 53 STATE STREET BOSTON MA 02109	LEGAL SERVICES	452,701

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 ►37

I di C v	
rants rounts	1a
ffs,G irAm	
ıs, Gi imila	•
utior her S	1
Contributions, Gifts, Grants and Other Similar Amounts)
Program Service Revenue	2
Se Pa	,
Serv	
ogran	1
<u>*</u>	3
	2. II () () () () () () () () ()
	6
	ı
	7
	'
	(
une	8
Rever	
lher l	ı
δ	9.
	10
	(
	11
	ı
	,
	4

VIII	Statement o	f Revenue ule O contains a respoi	ase or note to any lu	ne in this Part VIII			_
	CHECK II SCHOOL	are o contums a respon	isc of flote to any fi	(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					
b	Membership du	es 1b					
С	Fundraising eve	ents 1c					
d	Related organiz	rations 1d					
e	Government grant	s (contributions) 1e	2,256,294				
f	All other contribution	ons, gifts, grants, and 1f ot included above	12,412,889				
g		ons included in lines	1,546,326				
h	1a-1f \$ Total. Add lines	- 1 - 1 f		14,669,183			
! "	Total. Add filles	5 1 d - 1 1	•	11,003,103			
2a	TUITION AND FEES		Business Code	115 200 222	115 200 222		
b	AUXILIARY ENTERS		900099	115,388,333 16,550,388	115,388,333 16,550,388		
c	OTHER SOURCES		900099	4,359,228	4,356,366	2,862	
d			300033	4,333,220	4,330,300	2,002	
e	_						
f	All other progra	am service revenue					
	Total. Add lines	22 25		136,297,949			
3		s 2a-2f ome (including dividen		136,297,949			
	and other simil	aramounts)	•	1,174,246		-97,845	1,272,091
4		stment of tax-exempt bond	· · · · · · · · · · · · · · · · · · ·	0			
5	Royalties	(ı) Real	(u) Dersonal	0			
6a	Gross rents	(I) Real 3,101,896	(II) Personal				
b	Less rental	, ,					
c	expenses Rental income	3,101,896	0				
d	or (loss)	me or (loss)		3,101,896		1,279,217	1,822,679
	Tractical med	(ı) Securities	(II) O ther	, ,			, .
7a	Gross amount from sales of						
	assets other	-7,021	5,760,130				
ь	than inventory Less cost or						
	other basis and sales expenses						
С	Gain or (loss)	-7,021	5,760,130	5 750 400			5 750 400
d	Net gain or (los		· · · · •	5,753,109			5,753,109
8a	Gross income f events (not inc						
	of contributions	reported on line 1c)					
	See Part IV, lin	ie 18 a					
ь	Less direct ex	penses b					
c	Net income or ((loss) from fundraising	events 🛌	0			
9a		rom gaming activities					
	See Part IV, III	ie 19 a					
b	Less direct ex	penses b					
c	Net income or ((loss) from gamıng actı	vities	0			
10a	Gross sales of returns and allo						
	recurris and all	a a					
ь	Less cost of g	oods sold b					
С		(loss) from sales of inv		0			
	Miscellaneous	s Revenue	Business Code				
11a							
b							
C	All other rawa						
d e	All other reven		▶				
				0			
12	Total revenue.	See Instructions .	· · · · •	160,996,383	136,295,087	1,184,234	8,847,879

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al		•	iete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX		(0)	<u>.</u> .
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations				
	in the United States See Part IV, line 21	79,554	79,554		
2	Grants and other assistance to individuals in the				
	United States See Part IV, line 22	32,738,691	32,738,691		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the United				
_	States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,627,391		2,330,801	296,590
6	Compensation not included above, to disqualified persons				
	(as defined under section $4958(f)(1)$) and persons	45.055		45.055	
_	described in section 4958(c)(3)(B)	15,865		15,865	
7	Other salaries and wages	54,774,637	43,953,623	9,362,548	1,458,466
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,359,946	2,586,654	672,161	101,131
9	Other employee benefits	7,163,058	5,514,480	1,640,382	8,196
10	Payroll taxes	3,988,152	3,070,279	797,834	120,039
11	Fees for services (non-employees)	3,300,132	3,010,213	757,054	120,033
a	Management	0			
b	Legal	323,444	5,550	317,894	
c	Accounting	241,826	3,330	241,826	
		241,828		241,820	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	0		251.125	
f	Investment management fees	322,963	58,827	264,136	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on				
	Schedule O)	1,745,544	1,299,364	422,506	23,674
12	Advertising and promotion	677,485	178,661	498,138	686
13	Office expenses	610,920	530,937	73,399	6,584
14	Information technology	2,052,593	676,919	1,299,020	76,654
15	Royalties	0			
16	Occupancy	3,919,639	3,199,375	720,264	
17	Travel	1,529,531	1,279,906	130,204	119,421
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	249,164	184,897	56,013	8,254
20	Interest	6,419,881	4,747,254	1,672,627	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	11,838,938	10,382,236	1,456,702	
23	Insurance	629,662	12,658	617,004	
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	CONTRACTED SERVICES	7,382,636	5,620,563	1,736,679	25,394
b	FOOD SERVICE EXPENSE	4,498,120	3,771,061	647,320	79,739
c	LIBRARY EXPENSES	729,344	704,899	15,520	8,925
d	PRINTING & PUBLICATION	513,634	78,169	380,683	54,782
e	All other expenses	5,826,082	5,073,164	710,846	42,072
25	Total functional expenses. Add lines 1 through 24e	154,258,700	125,747,721	26,080,372	2,430,607
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

Pai	rt X	Balance Sheet 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	7,790,385	1	8,986,441
	2	Savings and temporary cash investments	24,893,315	2	18,837,981
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	5,632,400	4	8,586,183
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
86	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	0	5	0
ē			0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
4	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	4,858,621	9	5,965,312
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 304,489,803			
	ь	Less accumulated depreciation 10b 122,653,864	188,006,092	10c	181,835,939
	11	Investments—publicly traded securities	65,701,985	11	72,660,656
	12	Investments—other securities See Part IV, line 11	103,594,567	12	118,514,872
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	12,001,036	15	14,764,208
	16	Total assets. Add lines 1 through 15 (must equal line 34)	412,478,401	16	430,151,592
	17	Accounts payable and accrued expenses	8,713,860	17	8,160,959
	18	Grants payable	0	18	0
	19	Deferred revenue	5,277,203	19	7,312,254
	20	Tax-exempt bond liabilities	176,716,569	20	173,973,679
\mathcal{Q}	21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	977,043	21	688,381
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
i		persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule	8,197,774	25	8,118,729
	26	D	199,882,449	26	198,254,002
<u></u>	20	Total liabilities. Add lines 17 through 25	133,002,443	20	190,234,002
ű	27	lines 27 through 29, and lines 33 and 34.	76,767,760	,	70 604 400
<u>ත</u>	27	Unrestricted net assets	70,602,520	27	79,621,129
ă	28	Temporarily restricted net assets		28	81,220,324
Fund Balances	29	Permanently restricted net assets	65,225,672	29	71,056,137
重		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
Assets or	30	Capital stock or trust principal, or current funds		30	
Ą	31	Paid-in or capital surplus, or land, building or equipment fund		31	
\$ S.5	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net /	33	Total net assets or fund balances	212,595,952	33	231,897,590
Ź	34	Total liabilities and net assets/fund balances	412,478,401	34	430,151,592
	1	The state of the s	, 47 0 , 40 1	J-1	.55, 75 1,552

Par	TEXT Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				. ৷
1	Total revenue (must equal Part VIII, column (A), line 12)	1		160,9	96,383
2	Total expenses (must equal Part IX, column (A), line 25)	2			258,700
3	Revenue less expenses Subtract line 2 from line 1	3			 37,683
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			 595,952
5	Net unrealized gains (losses) on investments	5			 287,419
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		-3,7	23,464
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		231,8	397,590
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. Г</u>
				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 revie a separate basis, consolidated basis, or both	wed on	1		_
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigl audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	За	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	

Software ID: Software Version:

> **EIN:** 04-2103629 Name: Simmons College

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th person and a	ion (d nan o n is b	ne b oth ctor/	ox, u an of trus	inless ficer 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			related organizations
Helen G Drınan	40 0	×		х				498,485	0	188,779
President/Trustee Carmen Aponte Baez	1 0									
Trustee (UNTIL 5/14)		х								
Lauren Brisky	10 0			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
Chair (UNTIL 5/14)/TRUSTEE		Х		Х						
Deborah C Brittain	1 0	x								
Trustee Jane Buyers	5 0									
VICE-CHR BRD(UNT 5/14)/TRUSTEE		Х		х						
Jennifer A Kelly Choi	5 0									
Trustee		Х								
Barbara Latz Cohen	1 0	х								
Trustee										
Dwight B Crane	5 0	Х								
Trustee Atsuko Toko Fish Trustee	1 0	х								
JAMES D FLYNN	1 0									
Trustee		X								
Jill A Greenthal CLERK (AS OF 5/14)/TRUSTEE	1 0	х		х						
Karen Hammond Trust/VICE-CHR BRD(AS OF 5/14)	5 0	х		х						
John W Humphrey Trustee	1 0	х								
Kathleen MORRISSEY LaPoint Trustee	1 0	х								
Ngına Lythcott	1 0	Х								
Trustee (UNTIL 5/14) JudITH Samdpeni Mann	1 0	Х								
Trustee (UNTIL 5/14) Stephen P McCandless	5 0	Х								
Trustee Jacqueline C Morby	1 0	х								
Trustee Susan A Ollila	5 0	x								
Trustee (UNTIL 5/14) Denise Pappas	1 0	x								
Trustee Regina M Pisa	5 0	×		X						
CHAIR (AS OF 5/14)/TRUSTEE Christian Pope Campbell	1 0									
Trustee Carol Waller Pope	1 0	X								
Trustee Faith M Richardson	1 0	X								
Trustee		Х								
Jo-Ann Robotti	5 0	х								
Trustee (UNTIL 5/14)	J				<u> </u>		1	1		L

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe Former <u>8</u>0€ Individual trustee or director organizations related nstitutional Trustee below organizations employee dotted line) t compensated ee Emily Scott Pottruck 1 0 Χ Trustee (UNTIL 5/14) Toby M Sloane 10 Χ Trustee Paula A Sneed 1 0 Χ Trustee Winston Tabb 1 0 Х Trustee Janet Trafton Tobin 10 Х Trustee Roslyn M Watson 5.0 Χ Trustee Amy E White 5 0 Χ Trustee PAMELA TOULOPOULOS 1 0 Х KATHLEEN SCHULLER BLEAKIE 1 0 Χ TRUSTEE LESLIE LAKE 10 Χ TRUSTEE YVONNE JACKSON 1 0 Х TRUSTEE Stefano Falconi 40 0 Χ 340,675 0 53,073 Sr VP Fin/Admin & Treasurer Cheryl E Howard 40 0 Χ 230,281 0 21,619 VP of Marketing Kathleen B Rogers 40 0 205,688 Х 0 23,015 VP/GENERAL Counsel Sarah H Neill 40 0 Χ 180,956 0 25,068 VP STUDENT AFFAIRS REGINA MELFI SHERWOOD 40 0 Х 202,335 0 41,054 VP TALENT & HUMAN CAP STRATEGY MARIANNE LORD 40 0 Х 256,697 0 38,571 VICE PRESIDENT OF ADVANCEMENT Sheila C Conboy 40 0 Χ 137,038 0 32,262 Provost (AS OF 7/1/13)/Sr VP Suzanne Murphy 40 0 Х 185,634 0 45,847 VICE PRES STRATEGIC INITIATIVE Michele V Cloonan 40 0 181,855 Χ 0 18,220 FORMER DEAN/FAC MEMBER Stefan Krug 40 0 189,062 0 Х 44,638 Dean Andrew Effrat 40 0 228,180 0 Х 37,178 ASSOCIATE PROVOST CATHY MINEHAN 40 0 Х 251,153 0 17,915 DEAN Judy Beal 40 0 180,692 0 Х 24,438 DEAN Charlena Seymour 40 0 19,404 0 Χ 155,633 FORMER provost (UNTIL 6/30/13)

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

	hours per week (list any hours for related organizations below dotted line)	more the personal individual trustage or director	n ıs b	oth ctor/	an of /trus /trus	fficer	Forme	compensation from the organization (W- 2/1099-MISC)	compensation from related organizations (W- 2/1099-MISC)	of other compensation from the organization and related organizations
		i iii e	rustee			ensated				
Diane Grossman FORMER DEAN/Fac MEMBER	40 0						х	114,618	0	11,608

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134039055

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**

Name	of	the	orga	niza	ıti	0	n
Simmo							

Employer identification number

		04-2103629									
	rt I			blic Charity Sta						nstructions	
⊺he	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	ıgh 11, check	only one b	ox)		
1	\sqcap	A chur	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in s e	ection 170(b)(1)(A)(i).		
2	굣	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Schedı	ule E)				
3	\vdash	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descr	ıbed ın sectio	n 170(b)(1)(A)(iii).		
4	\vdash	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital des	cribed in se	ction 170(b)(1)(A)(iii). E	nter the
_	_	hospita	ıl's name, cı	ty, and state							
5	ļ			erated for the benefi		or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in
	_			A)(iv). (Complete P	•						
6	<u> </u>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public									
7	Г	_		•			support from	a governm	ental unit or f	rom the gen	eral public
8	Г			n 170(b)(1)(A)(vi). described in sectior			nplete Part II)			
9	Γ	An orga	anization tha	at normally receives	(1) more th	an 331/3% c	of its support	from contri	butions, mem	bership fees	, and gross
		receipt	s from activ	ities related to its ex	xempt function	ons—subjec	t to certain e	xceptions,	and (2) no mo	re than 331,	/3% of
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from bu	ısınesses
		acquire	ed by the org	janization after June	30,1975 S	ee section !	509(a)(2). (C	omplete Pa	rt III)		
10	Γ	An orga	anızatıon org	ganized and operated	d exclusively	to test for p	public safety	See sect io	n 509(a)(4).		
11	\vdash	Anorga	anızatıon org	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fun	ictions of, or t	o carry out t	the purposes of
				y supported organiz						ee section 5	609(a)(3). Check
				bes the type of supp b Type II c						functions	.ll., into avato d
_	Г			ox, I certify that the							
е	,	•		on managers and ot	_		,		, ,		•
			509(a)(2)				,				
f				received a written de	etermination	from the IR	S that it is a	Type I, Typ	oe II, or Type	III support	ing organizatio <u>n,</u>
_			this box	2006, has the organi		tad any aift	or contributi	on from on	, of the		J.
g			ng persons?	1000, nas the organi	ization accep	ited any gnt	or contributi	on nom any	or the		
			.	rectly or indirectly o	ontrols, eith	er alone or t	together with	persons de	scribed in (ii))	Yes No
		and (111) below, the	governing body of th	e supported	organizatioi	n?			11g	(i)
		(ii) A fa	amıly memb	er of a person descr	bed in (i) abo	ove?				11g	(ii)
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g((iii)
h		Provide	e the follown	ng information about	the supporte	ed organızat	ion(s)				_
		_					T		1		T
	(i) Nam suppor		(ii) EIN	(iii) Type of organization	(iv) Is t organızatı		(v) Did you the organiz	•	(vi) Is organizat		(vii) A mount of monetary
	rganiza			(described on	col (i) list		in col (i) o		col (i) org		support
_	- -			lines 1- 9 above	your gove		suppor		in the U		
				or IRC section	docume	nt?					
				(see							
				instructions))	Yes	No	Yes	No	Yes	No	
T-4-			I								

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do 11,337,523 11,168,402 15,295,170 10,121,718 14,669,183 62,591,996 not include any "unusual grants ") Tax revenues levied for the organization's benefit and either 0 paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit 0 to the organization without charge 11,337,523 11,168,402 15,295,170 10,121,718 14,669,183 62,591,996 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 1,631,375 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 60,960,621 from line 4 Section B. Total Support Calendar year (or fiscal year (c) 2011 (a) 2009 **(b)** 2010 (d) 2012 (e) 2013 (f) Total beginning in) 🟲 11,337,523 15,295,170 10,121,718 Amounts from line 4 11,168,402 14,669,183 62,591,996 Gross income from interest, dividends, payments received on securities loans, rents, royalties 3,813,319 4,222,832 3,955,588 4,206,512 4,276,142 20,474,393 and income from similar sources Net income from unrelated business activities, whether or O not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 83,066,389 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 73 388 % Public support percentage for 2012 Schedule A, Part II, line 14 15 0 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493134039055

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

	e organization answered "Yes Section 501(c)(4), (5), or (6) orga	s" to Form 990, Part IV, Line 5 (Pro anizations Complete Part III	oxy Tax) or Form	990-EZ, Part V, line 35c	(Proxy Tax), then
Na	me of the organization	·		Employer iden	tification number
				04-2103629	
Par	t I-A Complete if the or	ganization is exempt under	section 501(d	c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect politic	al campaign acti	vities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt under s	section 501(c	:)(3).	
1		e tax incurred by the organization und			\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under sectior	n 4955 ►	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	O for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under :	section 501(d	c), except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	t function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to otl	her organizations	for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file I	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments l amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid fro irectly delivered	m the filing organization's f to a separate political orga	funds Also enter the inization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Sch	nedule C (Form 990 or 990-EZ) 2013					Page 2
Pä	art II-A Complete if the organization	is exempt under	section 501(c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l .)		(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	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) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
C	Total lobbying expenditures					
d	Grassroots nontaxable amount					

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

Grassroots lobbying expenditures

<i></i>	-	ion under section 501(h)).	(;	a)		(b)	
ror e activ		elow, provide in Part IV a detailed description of the lobbying	Yes	No	A	mour	nt
1		on attempt to influence foreign, national, state or local luence public opinion on a legislative matter or referendum,					
а	Volunteers?			No			
b	Paid staff or management (include com	pensation in expenses reported on lines 1c through 1i)?		No			
C	Media advertisements?			Νo	1		
d	Mailings to members, legislators, or the	e public?		No			
е	Publications, or published or broadcast	statements?		No			
f	Grants to other organizations for lobbyi	ng purposes?		No			
g	Direct contact with legislators, their st	affs, government officials, or a legislative body?		No			
h	Rallies, demonstrations, seminars, con	ventions, speeches, lectures, or any similar means?		No			
i	O ther activities?		Yes				1
j	Total Add lines 1c through 1i						1
2a b	Did the activities in line 1 cause the or If "Yes," enter the amount of any tax in	ganization to be not described in section 501(c)(3)? curred under section 4912		No			
С		curred by organization managers under section 4912					
d		ion 4912 tax, did it file Form 4720 for this year?		1			
Par	t III-A Complete if the organi 501(c)(6).	zation is exempt under section 501(c)(4), section 5	501(c)(5),	or se		
	Word substantially all (00% or more) d	ues received nondeductible by members?		ſ	1	Yes	No
1	, , ,	•			2		
2 3		e lobbying expenditures of \$2,000 or less? r lobbying and political expenditures from the prior year?			3		
		zation is exempt under section 501(c)(4), section 5	01/0	\/E\		oti o	
Гa		(a) BOTH Part III-A, lines 1 and 2, are answered "					
1	Dues, assessments and similar amoun		1				
2	Section 162(e) nondeductible lobbying expenses for which the section 527(f)	and political expenditures (do not include amounts of political tax was paid).					
а	Current year		2a				
b	Carryover from last year		2b				
С	Total		2c				
3		5033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		line 2c exceeds the amount on line 3, what portion of the excess er to the reasonable estimate of nondeductible lobbying and	4				
5	Taxable amount of lobbying and political	al expenditures (see instructions)	5				
	art IV Supplemental Informa	<u> </u>					
Pro		A , line 1 , Part I-B , line 4 , Part I-C , line 5 , Part II-A (affiliated grou	ıp lıst),	Part I	I-A, lı	ne 2,	and
ı· a	Return Reference	Explanation					
Sch		ons College is a member of various educational associations which	h may 4	engage	ın loh	byına	<u> </u>
	activi	ties on BEHALF OF COLLEGES AND UNIVERSITIES FROM WHICONS College is not aware of the actual amount of member fees asso	CHSIM	1MONS	MAY	BEN	EFIT

201104410 3 (1 3111 330 31 330 12) 2013		r age -			
Part IV Supplemental Information	on <i>(continued)</i>				
Return Reference	Explanation				

Schedule D (Form 990) 2013

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

DLN: 93493134039055

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

	instructions is at <u>www.irs.gov/10111990</u> .		Inspection
nme of the organization nmons College		Employer identifi	cation number
		04-2103629	
	or Advised Funds or Other Similar F		s. Complete if th
organization answered "Yes" to For	· ·	1 (1) = 1	
Tatal acceptance and afternal	(a) Donor advised funds	(b) Funds and	d other accounts
Total number at end of year Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and dono	radvicers in writing that the access held in der		
funds are the organization's property, subject to	o the organization's exclusive legal control?		☐ Yes ☐ No
Did the organization inform all grantees, donors used only for charitable purposes and not for th conferring impermissible private benefit?			┌ Yes ┌ No
rt III Conservation Easements. Comp	olete if the organization answered "Yes" t	to Form 990, Part	IV, line 7.
Purpose(s) of conservation easements held by Preservation of land for public use (e g , rec Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization	reation or education) Preservation of ar Preservation of a	n historically importa certified historic stru the form of a conserv	icture
easement on the last day of the tax year			
		Held at th	e End of the Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easen		2b	
Number of conservation easements on a certific	· ·	2c	
Number of conservation easements included in historic structure listed in the National Registe		2d	
Number of conservation easements modified, tr the tax year ►	ransferred, released, extinguished, or terminate	ed by the organizatio	n during
Number of states where property subject to cor	econyation eacoment is located .		
Does the organization have a written policy reg- enforcement of the conservation easements it h	arding the periodic monitoring, inspection, han		nd Yes No
Staff and volunteer hours devoted to monitoring	g, inspecting, and enforcing conservation easei	ments during the yea	r
A mount of expenses incurred in monitoring line			
	pecting, and enforcing conservation easement	s during the year	
Does each conservation easement reported on and section 170(h)(4)(B)(II)?			ΓYes ΓNο
Does each conservation easement reported on and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization repobalance sheet, and include, if applicable, the terms	line 2(d) above satisfy the requirements of seconts of seconts conservation easements in its revenue an xt of the footnote to the organization's financia	ction 170(h)(4)(B)(i) d expense statement	┌ Yes ┌ N o :, and
Does each conservation easement reported on and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reported balance sheet, and include, if applicable, the test the organization's accounting for conservation of the test of the organization's accounting for conservation of the test organization's accounting for conservation of the test organization's accounting for conservation of the test organization organizat	line 2(d) above satisfy the requirements of seconts of seconts conservation easements in its revenue an xt of the footnote to the organization's financia	ction 170(h)(4)(B)(i) d expense statement l statements that de:	Yes No c, and scribes
Does each conservation easement reported on and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reported alance sheet, and include, if applicable, the test the organization's accounting for conservation of till Organizations Maintaining Collections (Complete if the organization answer If the organization elected, as permitted under works of art, historical treasures, or other similar.	Inne 2(d) above satisfy the requirements of seconts conservation easements in its revenue an xt of the footnote to the organization's financial easements actions of Art, Historical Treasures, ared "Yes" to Form 990, Part IV, line 8. SFAS 116 (ASC 958), not to report in its revear assets held for public exhibition, education,	d expense statement I statements that desorted or Other Similar nue statement and bor research in furthe	Yes No
Does each conservation easement reported on and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reported and include, if applicable, the test the organization's accounting for conservation of the organization answers. IIII Organizations Maintaining College Complete if the organization answers. If the organization elected, as permitted under works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footening and section in the service of the footening and section in the service of the footening and section in the sectio	Inne 2(d) above satisfy the requirements of seconts conservation easements in its revenue an easements of the footnote to the organization's financial easements actions of Art, Historical Treasures, ared "Yes" to Form 990, Part IV, line 8. SFAS 116 (ASC 958), not to report in its revear assets held for public exhibition, education, otnote to its financial statements that describe SFAS 116 (ASC 958), to report in its revenue ar assets held for public exhibition, education,	d expense statement I statements that desormance or Other Similar nue statement and bor research in furtheses these items statement and balar	Yes No
Does each conservation easement reported on and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reported balance sheet, and include, if applicable, the test the organization's accounting for conservation of the organization's accounting for conservation of the organization answers. Complete if the organization answers of art, historical treasures, or other similar service, provide, in Part XIII, the text of the food of the organization elected, as permitted under the works of art, historical treasures, or other similar works.	Inne 2(d) above satisfy the requirements of seconts conservation easements in its revenue an xt of the footnote to the organization's financial easements ections of Art, Historical Treasures, and "Yes" to Form 990, Part IV, line 8. SFAS 116 (ASC 958), not to report in its revear assets held for public exhibition, education, othote to its financial statements that describes SFAS 116 (ASC 958), to report in its revenue ar assets held for public exhibition, education, to these items	d expense statement I statements that destatements that destatement and bear research in furthers these items statement and balar or research in furthers.	Yes No
Does each conservation easement reported on and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reported balance sheet, and include, if applicable, the test the organization's accounting for conservation of the organization's accounting for conservation of the organization answers. If the organization elected, as permitted under works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the food of the organization elected, as permitted under works of art, historical treasures, or other similar service, provide the following amounts relating (i) Revenues included in Form 990, Part VIII,	Inne 2(d) above satisfy the requirements of seconts conservation easements in its revenue an xt of the footnote to the organization's financial easements ections of Art, Historical Treasures, and "Yes" to Form 990, Part IV, line 8. SFAS 116 (ASC 958), not to report in its revear assets held for public exhibition, education, othote to its financial statements that describes SFAS 116 (ASC 958), to report in its revenue ar assets held for public exhibition, education, to these items	d expense statement I statements that desormate or Other Similar nue statement and bor research in furthers these items statement and balar or research in further these statement and balar or research in further these statement and balar or research in further these statements and the statements and the statements and the statements are statements and the statements are statements are statements and the statements are statements are statements are statements and the statements are statements are statements are statements and the statements are statements.	Yes No
Does each conservation easement reported on and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reported balance sheet, and include, if applicable, the test the organization's accounting for conservation of the organization's accounting for conservation of the organization answers. If the organization elected, as permitted under works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the fool of the organization elected, as permitted under works of art, historical treasures, or other similar service, provide the following amounts relating	Inne 2(d) above satisfy the requirements of seconts conservation easements in its revenue an xt of the footnote to the organization's financial easements actions of Art, Historical Treasures, and "Yes" to Form 990, Part IV, Inne 8. SFAS 116 (ASC 958), not to report in its revear assets held for public exhibition, education, between the its financial statements that describes SFAS 116 (ASC 958), to report in its revenue ar assets held for public exhibition, education, to these items line 1	d expense statement I statements that desormer Similar nue statement and bor research in furthees these items statement and balar or research in furthees these items statement and balar or research in furthees the statemen	Yes No. Assets. alance sheet rance of public ce sheet rance of public
Does each conservation easement reported on and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reported balance sheet, and include, if applicable, the test the organization's accounting for conservation of the organization's accounting for conservation of the organization's accounting for conservation of the organization answer. If the organization elected, as permitted under works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the fool of the organization elected, as permitted under works of art, historical treasures, or other similar service, provide the following amounts relating (i) Revenues included in Form 990, Part VIII, (ii) Assets included in Form 990, Part X	Inne 2(d) above satisfy the requirements of seconts conservation easements in its revenue an easements ext of the footnote to the organization's financial easements ections of Art, Historical Treasures, and "Yes" to Form 990, Part IV, Inne 8. SFAS 116 (ASC 958), not to report in its revear assets held for public exhibition, education, between the its financial statements that describe SFAS 116 (ASC 958), to report in its revenue ar assets held for public exhibition, education, to these items line 1 c, historical treasures, or other similar assets for SFAS 116 (ASC 958) relating to these items	d expense statement I statements that desorted or Other Similar nue statement and bor research in furthes statement and balar or research in furthes or research in furthes statement and balar or research in furthes or research in furthes the statement and balar or research in furthes statement and balar or research in furthes the statement and balar or	Yes No. Assets. alance sheet rance of public ce sheet rance of public

Part	Organizations Maintaining Co	ollections of Art	, His	<u>toric</u>	al Treas	sures, or Ot	ther S	<u>Similar As</u>	sets (co	ntinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	eck aı	ny of the fo	ollowing that a	re a si	gnıfıcant use	of its	
а	Public exhibition		d	Γ	Loan or ex	change progra	ams			
b	Scholarly research		e	Γ	Other					
С	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and expla	ın how	they	further the	e organization'	s exen	npt purpose i	n	
5	During the year, did the organization solicit								-	-
Day	assets to be sold to raise funds rather than t IV Escrow and Custodial Arrange		·						Yes	✓ No
Fell	Part IV, line 9, or reported an air					on answered	1 165	to rollii 9	90,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					s or other asse	ets not	:	Yes	✓ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	ıng ta	ble	_				
						_		An	ount	
С	Beginning balance					<u> </u>	1c			
d	Additions during the year					F	1d			
e	Distributions during the year					<u> </u>	1e			
f	Ending balance					L	1f		_	
2a	Did the organization include an amount on F	orm 990, Part X, lin	e 21?						✓ Yes	□ No
	If "Yes," explain the arrangement in Part XI					-				<u> </u>
Pa	rt V Endowment Funds. Complete	If the organization (a)Current year		were rior yea		o Form 990, Two years back			(e)Four ye	aare hack
1a	Beginning of year balance	168,818,367		156,61		161,839,794	(u)iiie	141,511,154		10,053,294
ь	Contributions	5,018,544		1,53	32,420	3,048,249		2,924,080		3,007,951
c	Net investment earnings, gains, and losses	47.025.707		47.00	0.760	4 424 224		24 420 402		7 447 222
d	Grants or scholarships	17,025,797 1,902,335			9,769 6,184	-1,431,324 1,604,708		24,430,493 1,396,601		7,117,233
e e	Other expenditures for facilities	1,302,333			10,101	1,001,700		1,330,001		1,321,337
	and programs	1,084,697		4,79	96,014	5,233,635		5,629,332		7,345,967
f	Administrative expenses									
g	End of year balance	187,875,676		168,81	.8,367	156,618,376		161,839,794	14	1,511,154
2	Provide the estimated percentage of the cur	•	ce (lını	e 1g,	column (a))) held as				
а	Board designated or quasi-endowment 🕨	30 000 %								
b	Permanent endowment ► 70 000 %									
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiz	atıon t	hat ar	e held and	d administered	for the	e		
	organization by							2-7	Yes	No
	(i) unrelated organizations			•				3a(No No
ь	If "Yes" to 3a(II), are the related organization		· · d on S	 chedu	· · · · ıle R? ·			3t		110
4	Describe in Part XIII the intended uses of t	•							i	<u> </u>
Par	t VI Land, Buildings, and Equipme		the or	ganız	zation an	swered 'Yes'	to Fo	rm 990, Pa	rt IV, lı	ne
	11a. See Form 990, Part X, line Description of property	10.		(a) C	ost or other	(b)Cost or oth	ner (d	c) Accumulated	(d) Bo	ok value
				basis ((ınvestment)	basis (other) '	depreciation		
1a	Land					815,	000			815,000
	Buildings					250,082,		86,343,043	16	3,739,543
	Leasehold improvements									
d I	Equipment					53,592,	217	36,310,821	1	7,281,396
	Other									
Tota	I. Add lines 1a through 1e (Column (d) must o	equal Form 990, Part .	X, colui	mn (B), line 10(c).)		▶	18	1,835,939
								Schedule D	(Form 9	90) 2013

Part VII Investments—Other Securities. Comp See Form 990, Part X, line 12.	olete if the organization a	answered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other	47.627.605	_
(A) EQUITY SECURITIES	47,637,685	F F
(B) HEDGE FUNDS	29,783,532	F
(C) PRIVATE EQUITY	31,329,580	F
(D) FIXED INCOME SECURITIES	1,091,244	F
(E) PARTIES	8,672,831	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	118,514,872	
Part VIII Investments—Program Related. Con See Form 990, Part X, line 13.	nplete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total (Column (b) must equal Form 000, Part V col (B) line 12.)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization a	lanswered 'Yes' to Form 990] , Part IV, line 11d See Form 990, Part X, line 15
(a) Descript		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.		
Part X Other Liabilities. Complete if the organ Form 990, Part X, line 25.	ızatıdı answered 'Yes' to	o romn 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes	0	
LOAN PAYABLE	740,741	
U S GOVERNMENT LOAN ADVANCES ASSET RETIREMENT OBLIGATION	3,099,655	
ANNUITIES PAYABLE	1,794,806	
DEPOSIT PAYABLE	889,935	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	8,118,729	
2 Liability for uncertain tay positions In Part XIII provide t	he text of the footnote to the	organization's financial statements that

Part		evenue per Audited Financial Sta vered 'Yes' to Form 990, Part IV, line		nts With Revenue p	er R	eturn Complete ıf
1		r support per audited financial statements			1	140,821,084
2	· -	t not on Form 990, Part VIII, line 12	• •			140,021,004
a		ments	2a	16,287,419		
b	_	icilities	2b	10,207,113		
c	Recoveries of prior year grants		2c			
d	· · · · ·		2d	-36,462,718		
e	Add lines 2a through 2d .				2e	-20,175,299
3	<u>-</u>				3	160,996,383
4		D, Part VIII, line 12, but not on line 1				100,330,303
a		uded on Form 990, Part VIII, line 7b.	4a	1		
b	•		4b			
c					4c	
5		4c. (This must equal Form 990, Part I, lin			5	160,996,383
		xpenses per Audited Financial St			_	
		swered 'Yes' to Form 990, Part IV, lir			, ро.	- Tetarm complete
1	Total expenses and losses per	audited financial statements			1	121,519,448
2	Amounts included on line 1 but	t not on Form 990, Part IX, line 25				
а	Donated services and use of fa	cilities	. 2a			
b	Prior year adjustments		2b			
C	Other losses		2c			
d	Other (Describe in Part XIII)		2d			
e	Add lines 2a through 2d		•		2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	121,519,448
4	Amounts included on Form 990), Part IX, line 25, but not on line 1:				
а	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b .	. 4a			
b	Other (Describe in Part XIII)		4b	32,739,252		
c	Add lines 4a and 4b				4c	32,739,252
5	Total expenses Add lines 3 an	ıd 4c. (Thıs must equal Form 990, Part I, lı	ne 18)		5	154,258,700
Part	XIII Supplemental Inf	ormation				
	/, line 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1: lines 2d and 4b, and Part XII, lines 2d an				de any additional
	Return Reference	Explanation				
Schedu	ile D, Part III, Line 4	The Simmons College art collection is cophotography which is used to support the College maintains agency accounts for A agent for the funds Schedule D, Part V, L educational mission of the college. It is instudent scholarships, research, instruction Schedule D, Part X - Fin 48 Simmons Copositions were deemed immaterial for the Student Aid (\$32,738,691) EXTINGUIS TOTAL (\$36,462,718) ROUNDING \$561TOTAL	college lumnni ine 4 T ntended onal pro lege do year e HMENT Sched	e's curriculum Schedule and student groups The he Simmons Endowment to provide an intergeneingrams, and general oper ses not have a FIN 48 foonded June 30, 2014 School OF DEBT (\$3,723,464	D, Par colleg Fund rations ations otnote iedule) ROU	t IV, Line 2b The le acts as a fiscal ls used to support the ll source of funding for of the College as any uncertain tax D, Part XI, Line 2d NDING (\$563)

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

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134039055

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Schools

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

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

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Name of the organization Sımmons College

Employer identification number

04-2103629

Pa	rtI		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
ı	Does the organization maintain the following?			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II			
j	Does the organization discriminate by race in any way with respect to Students' rights or privileges?			No
		1		
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?	5g		Νo
h	Other extracurricular activities?	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II			
		-		
6a	Does the organization receive any financial aid or assistance from a governmental agency?	- 6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II	7	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	A DESCRIPTION OF THE COLLEGE'S NON-DISCRIMINATORY POLICY IS PUBLISHED IN ITS ADMISSION AND RECRUITING PUBLICATIONS AND IN THE STUDENT HANDBOOK IT IS ALSO POSTED IN SEVERAL LOCATIONS ON THE COLLEGE'S WEBSITE UNDER "POLICIES," THE OFFICE OF GENERAL COUNSEL, AND HUMAN RESOURCES SCHEDULE E, PART I, LINE 6A SIMMONS COLLEGE RECEIVES FUNDING FROM VARIOUS FEDERAL AND STATE GOVERNMENTAL AGENCIES IN SUPPORT OF THE COLLEGE'S EDUCATIONAL MISSION

Schedule E (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493134039055

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No 1545-0047

2013

Open to Public Inspection

	e of the organization nons College				Employer ident	ification number			
					04-2103629				
Pa	rt I General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiz	ation answered			
1	For grantmakers.Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?								
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitorii	ng the use of its grant	ts and other			
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ce is needed)				
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region			
(1)) See Add'l Data		-						
(2))								
(3))								
(4))								
(5))								
3a	Sub-total					121,001			
t	Total from continuation sheets to Part I					35,735,863			
(Totals (add lines 3a and 3b)					35,856,864			

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

Schedule F (Form 990) 2013

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

Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								
	1			l .				

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	▼	Yes	Γ	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Γ	Yes	ঘ	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	∀	Yes	Г	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	굣	Yes	Γ	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	ত	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	ঘ	Νo

Schedule F (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 04-2103629

Name: Simmons College

Schedule F (Form 990) 2013

Page **5**

Part V Supplemental Information

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Central America and the Caribbean			Program Services	PROF DEVELOPMENT	985
East Asia and the Pacific			Program Services	ACADEMIC SUPPORT	159
East Asia and the Pacific			Program Services	INSTRUCTIONAL	6,906

Form 990 Schedule F Part I - Activities Outside The United States								
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region			
East Asia and the Pacific			Program Services	PROF DEVELOPMENT	9,487			
East Asia and the Pacific			Program Services	STUDY ABROAD	1,770			
Europe (Including Iceland and Greenland)			Program Services	ACADEMIC SUPPORT	16,320			

Form 990 Schedule F	Part I - Activi	<u>ties Outside I</u>	ne United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Program Services	INSTRUCTIONAL	3,280
Europe (Including Iceland and Greenland)			Program Services	PROF DEVELOPMENT	31,714
Europe (Including Iceland and Greenland)			Program Services	RECRUITMENT	35,100

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region			(f) Total expenditures for region				
Middle East and North Africa			Program Services	A cademic Support	92				
North America			Program Services	Institutional Support	5,256				
North America			Program Services	INSTRUCTIONAL	1,470				

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	ther of (c) Number of (d) Activities (e) If in the employees or conducted in region (by (d) is a agents in type) (i.e., fundraising, describ		(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
North America			Program Services	PROF DEVELOPMENT	3,097				
North America			Program Services	RECRUITMENT	200				
North America			Program Services	Recruitment Faculty	37				

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region					
South America			Program Services	PROF DEVELOPMENT	1,800					
South Asia			Program Services	Recruitment	3,328					
Sub-Saharan Africa			Program Services	INSTRUCTIONAL	9,950					

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region agents in region		(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
Sub-Saharan Africa			Program Services	PROF DEVELOPMENT	24,879				
North America			Program Services	Student Services	531				
South America			Program Services	Recruitment	306				

Form 990 Schedule F	Part I - Activi	<u>ties Outside I</u>	ne United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa			Program Services	PROF DEVELOPMENT	3,480
Middle East and North Africa			Program Services	Recruitment	3,053
Europe (Including Iceland and Greenland)			Program Services	Insitutional Support	2,726

Form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region				
Central America and the Caribbean			Program Services	Recruitment	781				
Central America and the Caribbean			Program Services	Study Abroad	749				
Europe (Including Iceland and Greenland)			Program Services	Student Services	1,840				

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region					
Europe (Including Iceland and Greenland)			Investments		15,125,763					
Central America and the Caribbean			Investments		20,561,805					

Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

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

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

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

OMB No 1545-0047

DLN: 93493134039055

Open to Public **Inspection**

					Employer Identific	ation number
					04-2103629	
ation on Grants	and Assistance				I	
to award the grants o	orassistance?					ר Yes רוּ
						"Yes" to
(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
04-2103639	501(C)(3)	17,800				
04-1958460	501(C)(3)	55,400				
04-3167352	501(C)(3)	6,354				
	-	sted in the line 1 table			.	3
	ntain records to substate to award the grants of ganization's procedure er Assistance to V, line 21, for any in (b) EIN 04-2103639 04-1958460 04-3167352	to award the grants or assistance?	ntain records to substantiate the amount of the grants or assistance to award the grants or assistance?	ntain records to substantiate the amount of the grants or assistance, the grantees' eligibility award the grants or assistance?	ntain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance to award the grants or assistance? aparization's procedures for monitoring the use of grant funds in the United States er Assistance to Governments and Organizations in the United States. Complete if the org V, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional s (b) EIN (c) IRC Code section if applicable (d) Amount of cash grant (e) Amount of non-cash assistance (b) EIN (d) Amount of cash grant (e) Amount of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (o) 4-2103639 (o) 4-2103639 (o) 4-2103639 (o) 501(C)(3) (o) 55,400 (o) 4-3167352 (o) 4-316735	nation on Grants and Assistance nation records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and to award the grants or assistance? grantation's procedures for monitoring the use of grant funds in the United States er Assistance to Governments and Organizations in the United States. Complete if the organization answered v, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (b) EIN (c) IRC Code section (f applicable) (c) IRC Code section (f applicable) (d) Amount of cash grant (e) Amount of noncash assistance (b) Amount of noncash assistance (c) Amount of noncash assistance (d) Amount

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

(a)Type of grant or assistance	(b) Number of recipients	(c) 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) Student Financial Aid	2661	32,738,691								
Part IV Supplemental Inf	ormation. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	additional information.					
Datum Dafarana	Detum Defenses Fundametica									

Return Reference Explanation

Schedule I, Part I, Line 2

A cademic excellence and demonstrated financial need are used to determine each student's financial aid. The financial aid consists of any combinAtion of grants and loans and are reviewed each year based on a student's academic record and/or demonstrated need. The free application for federal student aid, which helps to establish a student's financial need, serves as the application for tuition scholarships. Schedule I, Part III Cash grants are credits to student accounts.

DLN: 93493134039055

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

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

Open to Public Inspection

Name of the organization Sımmons College

Employer identification number

04-2103629

Pa	rt I Questions Regarding Compensation		·			
					Yes	No
1a	Check the appropriate box(es) if the organization provided 990, Part VII, Section A, line 1a Complete Part III to p					
	First-class or charter travel	▽	Housing allowance or residence for personal use			
	Travel for companions	\Box	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Г	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organize reimbursement or provision of all of the expenses described.			1b		No
2	Did the organization require substantiation prior to reimb directors, trustees, officers, including the CEO/Executiv			2	Yes	
				<u> </u>	103	
3	Indicate which, if any, of the following the filing organizat organization's CEO/Executive Director Check all that a used by a related organization to establish compensation	ppl	y Do not check any boxes for methods			
	▼ Compensation committee ▼	\Box	Written employment contract			
	✓ Independent compensation consultant	~	Compensation survey or study			
	Form 990 of other organizations	✓	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control paym	nen	nt?	4a		No
b	Participate in, or receive payment from, a supplemental r	non	qualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-based	со	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide	e th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must ∞	omp	plete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the revenues of					
а	The organization?			5a		No
ь	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, line compensation contingent on the net earnings of	1 a	, did the organization pay or accrue any			
а	The organization?			6a		No
b	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 A, line payments not described in lines 5 and 6? If "Yes," described in lines 6 and 6			7		No
8	Were any amounts reported in Form 990, Part VII, paid of	ora	occured pursuant to a contract that was			
	subject to the initial contract exception described in Reg					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow the reb section 53 $4958-6(c)$?	utt	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 o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Addıtıonal Data Table							

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete	this	part for a	ny	addıtıona	Linformation

Also complete this part for any addition	
Return Reference	Explanation
	A HOUSING ALLOWANCE WAS PROVIDED TO HELEN DRINAN, PRESIDENT, AND WAS CONSIDERED TAXABLE AND INCLUDED IN HER TAXABLE INCOME SCHEDULE J, PART I, LINE 1B THE COLLEGE HAS A WRITTEN POLICY REGARDING FIRST CLASS AND SPOUSAL TRAVEL ON OCCASION, OTHER BENEFITS LISTED IN QUESTION 1A OF SCHEDULE J MAY BE PROVIDED, BUT ONLY PURSUANT TO A VOTE OF APPROVAL BY THE BOARD OF TRUSTEES SCHEDULE J, PART I, LINE 4B DURING CALENDAR YEAR 2011, THE COLLEGE ENTERED INTO A SUPPLEMENTAL RETIREMENT AGREEMENT (SRA) WITH THE PRESIDENT UNDER THE SRA THE COLLEGE MAKES DEFERRALS FROM 0 TO 30 PERCENT OF THE PRESIDENT'S BASE PAY, IN THE SOLE DISCRETION OF THE BOARD, FOR EACH YEAR THROUGH THE FISCAL YEAR ENDING JUNE 30, 2016 AMOUNTS DEFERRED ARE SUBJECT TO FORFEITURE IF CERTAIN CONDITIONS ARE NOT MET IN THE DISCRETION OF THE BOARD FOR CALENDAR YEAR 2013, THE AMOUNT DEFERRED WAS \$162,234 THIS AMOUNT IS INCLUDED ON SCHEDULE J, PART II, COLUMN (C) AS DEFERRED COMPENSATION

Schedule J (Form 990) 2013

Software ID: **Software Version:**

EIN: 04-2103629

Name: Simmons College

Form 990, Schedule J,	Part I	I - Officers, Direc	tors, Trustees, Ke	y Employees, and	Highest Compens	sated Employees		
(A) Name			of W-2 and/or 1099-MI		(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & ıncentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Helen G Drinan President/Trustee	(I) (II)			53,150	185,184 0	3,595 0	687,264	0
Michele V Cloonan FORMER DEAN/FAC MEMBER	(I) (II)		,	4,755	16,425 0	1,795 0	200,075	0
Stefan Krug Dean	(1) (11)		,	1,257	17,613 0	27,025 0	233,700	0 0
Diane Grossman FORMER DEAN/Fac MEMBER	(I) (II)		1	1,455	10,220	1,388 0	126,226	0
Charlena Seymour FORMER provost (UNTIL 6/30/13)	(I) (II)) 0		18,562	12,375 0	7,029 0	175,037	0
Stefano Falconi SrVP Fin/Admin & Treasurer	(I) (II)			3,564	22,950 0	30,123 0	393,748 0	0
Cheryl E Howard VP of Marketing	(I) (II)) 227,700) 0		2,581	20,655 0	964 0	251,900	0 0
Kathleen B Rogers VP/GENERAL Counsel	(I) (II)			1,488	18,900 0	4,115 0	228,703	0 0
Andrew Effrat ASSOCIATE PROVOST	(I) (II)		,	3,856	20,700 0	16,478 0	265,358 0	0 0
Sarah H Neill VP STUDENT AFFAIRS	(I) (II)) 179,888) 0	J	1,068	16,538 0	8,530 0	206,024	0
CATHY MINEHAN DEAN	(I) (II)) 248,200) 0		2,953	16,875 0	1,040	269,068	0
REGINA MELFI SHERWOOD VP TALENT & HUMAN CAP STRATEGY	(I) (II)			714	12,900	28,154 0	243,389	0
MARIANNE LORD VICE PRESIDENT OF ADVANCEMENT	(I)		1	1,754	22,950 0	15,621 0	. 295,268 0 0	0
Judy Beal DEAN	(I) (II)) 168,938) 0	J	11,754	16,290 0	8,148 0	205,130	0
Sheila C Conboy Provost (AS OF 7/1/13)/Sr VP	(I) (II)) 0		1,243	13,050 0	19,212 0	169,300	0
Suzanne Murphy VICE PRES STRATEGIC INITIATIVE	(I) (II)	184,644		990	17,700 0	28,147 0	231,481	0

Department of the Treasury

Internal Revenue Service

DLN: 93493134039055

Open to Public

OMB No 1545-0047

Schedule K **Supplemental Information on Tax Exempt Bonds** (Form 990) ▶ 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

Name of the organization Simmons College

04-2102620

3111	mions conege									04	-21036	29			
Р	art I Bond Issues			_		,						ı	,		
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f	f) Descriptio	n of purpose	(g) De	feased	beha	On alf of uer		Pool ncing
										Yes	No	Yes	No	Yes	No
A	SIMMONS COLLEGE MDFA REVENUE BOND SERIES G	04-3431814	57583REX9	01-12-2006	49,6	10,000		/ ACADEMIC AGE, & OTH			x		×		х
В	SIMMONS COLLEGE MDFA REVENUE BOND SERIES H	04-3431814	57583RJG1	01-04-2007	45,3		REFU BO N		RIES C, D, F		х		х		Х
c	SIMMONS COLLEGE MHEFA REVENUE BOND SERIES I	04-2456011	57686EEL1	01-22-2009	59,99			IN E BOND, P TERM	CONSTRUCT	,	Х		x		х
D	SIMMONS COLLEGE MDFA REVENUE BOND SERIES J	04-3431814	57583UYQ5	09-05-2013	19,1		REFI BO N	INANCE SEI IDS	RIES F & I		Х		×		х
P	art III Proceeds	•				'				•					
						A		E	3		С			D	
1						100,	,000		2,300,000		18,270	0,000			0
_2	Amount of bonds legally defea	ased ————————————————————————————————————					0		0			0			0
3	Total proceeds of issue					49,610,	,000	4	45,343,798		59,998	8,380		19,	156,227
4	Gross proceeds in reserve fur						0		0		5,976	6,742			0
5	Capitalized interest from proc						0		0			0			0
6	Proceeds in refunding escrow	S				0 0				0		17,	789,710		
7	Issuance costs from proceed	S				563,922 575,599		1,199,		9,968	968 37		374,131		
8	Credit enhancement from prod	ceeds				732,819 485,410		485,410			0			0	
9	Working capital expenditures	from proceeds				2,480,	,500		0		2,466	6,655			0
10	Capital expenditures from pro	ceeds				44,020,	416		0		19,21	5,015			0
11	O ther spent proceeds					1,813,	175	4	44,282,763		31,140	0,000			992,386
12	Other unspent proceeds						0		0			0			0
13	Year of substantial completio	n			20	09				2	009				
					Yes	No		Yes	No	Yes	N	ю	Yes		No
14	Were the bonds issued as par	t of a current refund	ing issue?			×			Х	X			Χ		
15	15 Were the bonds issued as part of an advance refunding issue?				Х		Х			×	<	Х			
16	Has the final allocation of pro-	ceeds been made?			Х			Х		X		Х			
17	Does the organization mainta allocation of proceeds?		nd records to supp	ort the final	Х			Х		Х			Х		
Pa	rt IIII Private Business U	Jse													
					1	Δ			B I		С			D	

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

property financed by tax-exempt bonds?

financed property?

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

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

No

Χ

Yes

Χ

Yes

No

Χ

No

Χ

Χ

Yes

No

Yes

Χ

Χ

Schedule K (Form 990) 2013

Part III Private Business Use (Continued)

E CIL	Private business Ose (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	
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?			X				×	
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 %		1 980 %		0 %		0 160 %
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5				1 980 %				0 160 %
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?		х		×		Х		Х
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	Х		x		Х		х	
Dar	+ TV Arbitrage								

Part IV Arbitrage

Part IV Arbitrage									
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the Issuer filed Form 8038-T?		Х		X		Х		Х
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?		Х		Х		Х	Х	
ь	Exception to rebate?	Х			Х		Х		Х
С	No rebate due?		Х	Х		Х			Х
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	Х			X		Х		Х
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		х		Х		Х		Х
b	Name of provider	0		0		0			
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								
							Sc	hedule K (Forn	n 990) 2013

Part IV	Arbitrage	(Continued)
	Aibidage	(Contanaca)

Return Reference

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X		x		Х
b	Name of provider	0		0		0		0	
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		X		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?

Α		В		С		D		
Yes	No	Yes	No	Yes	No	Yes	No	
х		х		Х		х		

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

\$31,140,000 OF THE MHEFA REVENUE BOND SERIES I PROCEEDS WERE USED TO REFUND SERIES E BONDS SCHEDULE K, PART II, LINE 13, COLUMN (B) THE YEAR OF SUBSTANTIAL COMPLETION FOR THE MDFA REVENUE BONDS SERIES H HAS BEEN LEFT BLANK BECAUSE THIS ISSUE WAS ENTIRELY FOR AN ADVANCE REFUNDING SCHEDULE K, PART IV, LINE 2C ISSUER NAME SIMMONS COLLEGE MDFA REVENUE BONDS SERIES H DATE THE REBATE COMPUTATION WAS PERFORMED 06/30/2014 ISSUER NAME SIMMONS COLLEGE MHEFA REVENUE BONDS SERIES I DATE THE REBATE COMPUTATION WAS PERFORMED 06/30/2014

Explanation

DLN: 93493134039055

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► 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.

Transactions with Interested Persons

► 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.

Name of the organization **Employer identification number** Sımmons College 04-2103629 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (a) Name of disqualified person (b) Relationship between disqualified (c) Description of transaction (d) Corrected? person and organization Yes 2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part III Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22 (a) Name of (b) (d) Loan to (e)Original (f)Balance (i)Written (c) (g) In (h) ınterested Relationship Purpose of or from the principal due default? Approved agreement? with organization? amount bν person loan organization board or committee? Τо Yes Yes From No Yes No Total Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (d) Type of assistance (b) Relationship between (c) A mount of assistance (a) Name of interested (e) Purpose of assistance person interested person and the organization

Part IV Business Transactions Complete if the organization			e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh of organiz reven	f zatıon':
				Yes	No
(1) Blue Cross Blue Shield	President is director	5,597,919	Medical Insurance Coverage		No
(2) GOODWIN PROCTER LLP	OFFICER/TRUSTEE IS CHAIR	452,701	LEGAL SERVICES		No
					1

Part V Supplemental Information

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

Return Reference	Explanation
	President Drinan is a member of the board of directors of Blue Cross Blue Shield SHE BECAME A MEMBER OF THE BLUE CROSS BLUE SHIELD BOARD PRIOR TO ASSUMING HER POSITION AS PRESIDENT AT SIMMONS COLLEGE SIMMONS' TRANSACTION WITH BLUE CROSS BLUE SHIELD IS MADE AT ARM'S LENGTH REGINA PISA, TRUSTEE, IS THE CHAIR OF GOODWIN PROCTER, LLP

Schedule L (Form 990 or 990-EZ) 2013

DLN: 93493134039055

OMB No 1545-0047

SCHEDULE M (Form 990)

Noncash Contributions

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

Open to Public

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.

Inspection **Employer identification number**

Sımm	nons College									
Pa	rt I Types of Property				04-2103629					
	Types of Freperty	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	Method of d noncash contrib	etermı		ts		
1	Art—Works of art									
2	Art—Historical treasures .									
3	Art—Fractional interests									
4	Books and publications									
5	Clothing and household									
_	goods									
6	Cars and other vehicles									
7	Boats and planes									
	Intellectual property		F.4	4.546.226	EATR MARKET VAL	=				
9	Securities—Publicly traded .	X	54	1,546,326	FAIR MARKET VAI	.UE				
10 11	Securities—Closely held stock . Securities—Partnership, LLC,									
12	or trust interests									
	Qualified conservation									
13	contribution—Historic structures									
14	Qualified conservation									
	contribution—Other									
15	Real estate—Residential .									
16	Real estate—Commercial									
17	Real estate—O ther									
18	Collectibles									
19	,									
20	Drugs and medical supplies .									
	Taxıdermy									
	Historical artifacts									
	Scientific specimens									
	Archeological artifacts									
25	O ther ► ()									
26	O ther ▶()									
27	O ther ►()									
28	Other ▶ ()			<u> </u>	<u> </u>					
29	Number of Forms 8283 received for which the organization comple				29					
	for which the organization comple	sted i oiiii o	205, Fait IV, Dollee Ackin	owiedgement [Yes	No		
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I lines	1 through 28 that		103			
	it must hold for at least three ye									
	for exempt purposes for the enti					302		No		
L	If "Yes," describe the arrangement					30a		No_		
						l	l			
31 32a	Does the organization have a gif Does the organization hire or us					31	Yes			
	contributions?	· · ·	· · · · · · · ·			32a		No		
b	If "Yes," describe in Part II									
33	If the organization did not report describe in Part II	t an amount	: in column (c) for a type of	property for which column (a) is checked,					

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.							
Return Reference	Explanation						
, , , , , , , , , , , , , , , , , , , ,	The amounts listed in column (b) represent total number of contributions received, not individual items						

Schedule M (Form 990) (2013)

DLN: 93493134039055

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization Simmons College

Employer identification number

04-2103629

990 Schedule O, Supplement Return Reference	Explanation
Form 990, Part I, Line 1, and Part III,	
Line 1	
Form 990, Part VI, Lines 6 & 7a	SIMMONS CURRENTLY HAS 46 CORPORATORS (THE CORPORATION) 36 MEMBERS OF THE BOARD OF TRUSTEE
	S PLUS 10 ADDITIONAL MEMBERS SERVING AS A CONSULTATIVE BODY TO THE PRESIDENT AND BOARD OF
	TRUSTEES, AND AS NON-VOTING MEMBERS OF ONE BOARD COMMITTEE. THE CORPORATION'S PRIMARY DUTI
	ES ARE TO ELECT ANNUALLY THE TRUSTEE MEMBERSHIP AND AMEND THE SIMMONS' BY-LAWS FORM 990,
	PART VI, LINE 11B THE FORM 990 IS PREPARED AND SIGNED BY PRICEWATERHOUSECOOPERS AS PAID PR
	EPARER THE FORM 990 IS REVIEWED WITH THE AUDIT COMMITTEE, AND THE COMPENSATION SECTIONS O
	F THE FORM 990 ARE REVIEWED WITH THE COMPENSATION COMMITTEE. THE FORM 990 IS PROVIDED TO T
	HE BOARD OF TRUSTEES PRIOR TO THE FORM'S FILING WITH THE IRS FORM 990, PART VI, LINE 12C IN ITS CONFLICT OF INTEREST DISCLOSURE FORM THE COLLEGE ASKS ALL TRUSTEES AND OFFICERS TO
	DECLARE ANY CONFLICT OF INTEREST COMPLETED CONFLICT OF INTEREST DISCLOSURE STATEMENTS ARE
	REVIEWED BY THE GENERAL COUNSEL WHO ALSO SERVES AS SECRETARY TO THE BOARD THE GENERAL CO
	UNSEL PREPARES A WRITTEN REPORT FOR THE AUDIT COMMITTEE WHICH SETS FORTH ALL DISCLOSURE OR
	COMMENTS MADE BY RESPONDENTS CONCERNING POTENTIAL OR ACTUAL CONFLICTS AND THAT REPORT IS
	PRESENTED TO THE AUDIT COMMITTEE, PRESIDENT AND BOARD CHAIR FOR DISCUSSION AND NECESSARY F
	OLLOW-UP EACH YEAR AT A MINIMUM, THOSE WITH CONFLICTS ARE INSTRUCTED TO REFRAIN FROM VOTI
	NG ON MATTERS WHERE THERE ARE OR MAY BE PERCEIVED TO BE A CONFLICT AND TO RECUSE THEMSELVE
	S DURING ANY DISCUSSION OF THE ISSUE FORM 990, PART VI, LINE 15 THE EXECUTIVE DEVELOPMENT
	AND COMPENSATION COMMITTEE IS GOVERNED BY A DETAILED CHARTER WHICH GRANTS IT JURISDICTION
	OVER COMPENSATION MATTERS FOR ALL SIMMONS OFFICERS THE PRESIDENT MAKES SALARY RECOMMENDA
	TIONS FOR THE OFFICERS EACH YEAR TO THE COMPENSATION COMMITTEE AND THE COMMITTEE REVIEWS T
	HE PERFORMANCE OF THE OFFICERS AGAINST SALARY DATA PREPARED BY EXTERNAL COMPENSATION EXPER
	TS THE COMMITTEE THEN MAKES RECOMMENDATIONS FOR OFFICER SALARIES TO THE BOARD OF TRUSTEES
	FOR REVIEW AND APPROVAL FORM 990, PART VI, LINE 19 SIMMONS COLLEGE FINANCIAL STATEMENTS
	ARE AVAILABLE UPON REQUEST AND ARE POSTED ON THE COLLEGE'S WEBSITE. THE COLLEGE'S GOVERNIN
	G DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST FORM 990, PART XI,
	LINE 9 EXTINGUISHMENT OF DEBT (\$3,723,464)

(Form 990)

Sımmons College

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

2013

Employer identification number

DLN: 93493134039055 OMB No 1545-0047

> Open to Public Inspection

► Attach to Form 990. ► See separate instructions. Department of the Treasury Internal Revenue Service Name of the organization

				04-21036	29			
Part I Identification of Disregarded Entities Complete	e if the organization	answered "Yes" or	n Form 990, Pa	rt IV, line 33.				
(a) Name, address, and EIN (ıf applıcable) of dısregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	Dii	(f) rect controlling entity		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	rations Complete if ite tax year.	the organization ai	nswered "Yes"	on Form 990, P	l art IV, l	ine 34 because it	: had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity (if section 501)	status (c)(3))	(f) Direct controlling entity	(g) Section 51 (13) contr entity	
							Yes	No
							$\overline{1}$	
							+	<u> </u>
							+	\vdash
							+	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 501	<u>1</u> 35Y			Schedule R (For	<u> </u>	2013

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Name, address, and EIN of related organizations Primary activity Legal domicile (state or forleging country) Direct controlling Type of entity Corp., Storp, or trust Share of total more than 1 Share of end-of- year assets Section Share of fortal percentage ownership country Share of total more than 1 Share of end-of- year assets Section Share of total percentage ownership country Share of total percentage or trust Share of total percentage of total percentage of the perce	Name, addre	(a) Name, address, and EIN of related organization		(c) Legal domicile (state or foreign country)	(d) Direct controlli entity	redong predong income (unrele exclude tax u section	ninant related, ited, d from nder s 512-	(f) Share of total incom	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percen owner	ntage
Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (c) FUNDRAISING MA (b) Primary activity Angular domicile (state or foreign country) (b) Direct controlling entity (c) Corp, S corp, or trust) (c) Share of total income assets (b) Share of end-of-year assets (c) Yes (d) Corp, S corp, or trust) (b) Share of total income assets (b) Share of end-of-year assets (c) Fundraising MA SIMMONS COLLEGE T Yes										Yes	No		Yes	No		
Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (c) FUNDRAISING MA SIMMONS COLLEGE (b) Share of total income assets (c) Share of total income assets (b) Share of end-of-year assets (c) Share of end-of-year assets (b) Share of end-of-year assets (c) Sect (b) Share of total income assets (c) Share of end-of-year assets (d) Share of end-of-year assets (e)																
Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (c) FUNDRAISING MA (b) Primary activity Angular domicile (state or foreign country) (b) Direct controlling entity (c) Corp, S corp, or trust) (c) Share of total income assets (b) Share of end-of-year assets (c) Yes (d) Corp, S corp, or trust) (b) Share of total income assets (b) Share of end-of-year assets (c) Fundraising MA SIMMONS COLLEGE T Yes																
Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (c) FUNDRAISING MA (b) Primary activity Angular domicile (state or foreign country) (b) Direct controlling entity (c) Corp, S corp, or trust) (c) Share of total income assets (b) Share of end-of-year assets (c) Yes (d) Corp, S corp, or trust) (b) Share of total income assets (b) Share of end-of-year assets (c) Fundraising MA SIMMONS COLLEGE T Yes																
Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (Type of entity (C corp, S corp, or trust) (b) Primary activity Prescretage ownership Output (b) Primary activity Prescretage ownership Output (c) (b) Primary activity Prescretage ownership Output (b) Primary activity Prescretage Output (c) (c) (b) Share of total income Output (c) (c) (c) (c) (c) (c) (c) (c) (c) (c															\vdash	
Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (Type of entity (C corp, S corp, or trust) (b) Primary activity Prescretage ownership Output (b) Primary activity Prescretage ownership Output (c) (b) Primary activity Prescretage ownership Output (b) Primary activity Prescretage Output (c) (c) (b) Share of total income Output (c) (c) (c) (d) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c																
Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (Type of entity (C corp, S corp, or trust) (b) Primary activity Prescretage ownership Output (b) Primary activity Prescretage ownership Output (c) (b) Primary activity Prescretage ownership Output (b) Primary activity Prescretage Output (c) (c) (b) Share of total income Output (c) (c) (c) (d) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c																
Inne 34 because it had one or more related organizations treated as a corporation or trust during the tax year. (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) (Type of entity (C corp, S corp, or trust) (b) Primary activity Prescretage ownership Output (b) Primary activity Prescretage ownership Output (c) (b) Primary activity Prescretage ownership Output (b) Primary activity Prescretage Output (c) (c) (b) Share of total income Output (c) (c) (c) (d) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c																
(a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state or foreign country) (1) CHARITABLE REMAINDER TRUST (5) (a) Primary activity Corp, Scorp, or trust) (b) Primary activity Legal domicile (state or foreign country) (b) Direct controlling entity (C corp, S corp, or trust) Type of entity (C corp, S corp, or trust) Share of end-of-year assets (b) Percentage ownership Yes Yes (1) CHARITABLE REMAINDER TRUST (5) FUNDRAISING MA SIMMONS T Yes	Part IV Identification of Re	lated Organizations Taxable	e as a Corpo ons treated a	ration s a cori	or Tru	st Comple or trust d	te ıf tl urına	ne orgar the tax v	ization ans ear.	wered	d "Yes	" on Form	990,	Part	:IV,	
(1) CHARITABLE REMAINDER TRUST (5) FUNDRAISING MA SIMMONS COLLEGE T (2) POOLED INCOME FUND FUNDRAISING MA SIMMONS T Yes	(a) Name, address, and EIN of	(b)	(c) Lega domic (state or f	l ile oreign		(d) irect controllin	Type (C co	(e) e of entity rp, S corp,	(f) Share of total		of end- year	of- Percen	tage		(i) Section 5 (b)(13 controlle entity	512 3) led
TRUST (5) COLLEGE COLLEGE (2) POOLED INCOME FUND FUNDRAISING MA SIMMONS T Yes	(1) CHARITABLE REMAINDER	FUNDRAISING	MA		S	MMONS	T									No
(2) POOLED INCOME FUND (1) FUNDRAISING MA SIMMONS COLLEGE T Yes					С	DLLEGE										
	(2) POOLED INCOME FUND (1)	FUNDRAISING	MA				Т								Yes	
															+	
															+	
		I	I		1		1			1		- 1		- 1	1	

Pa	art V	Transactions With Related Organizations Complete if the organization a	nswered "Yes" on Forn	n 990, Part IV, line	e 34, 35b, or 36.					
	Note.	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No			
1 [Ouring th	ne tax year, did the orgranization engage in any of the following transactions with one or mo	ore related organizations l	sted in Parts II-IV?						
а	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity									
b	Gıft, g	grant, or capital contribution to related organization(s)			11	•	No			
c	c Gift, grant, or capital contribution from related organization(s)									
d	d Loans or loan guarantees to or for related organization(s)									
e	e Loans or loan guarantees by related organization(s)									
f	Divide	ends from related organization(s)			11	•	No			
g	Sale	of assets to related organization(s)			19	j	No			
h	Purch	ase of assets from related organization(s)			11	1	No			
i	Excha	nge of assets with related organization(s)			1	i	No			
j	Lease	of facilities, equipment, or other assets to related organization(s)			1	i	No			
k	Lease	e of facilities, equipment, or other assets from related organization(s)			11	(No			
I	Perfor	mance of services or membership or fundraising solicitations for related organization(s)			1	ı	No			
n	n Perfor	mance of services or membership or fundraising solicitations by related organization(s)			11	n	No			
n	Sharın	g of facilities, equipment, mailing lists, or other assets with related organization(s)			1	n	No			
o	Sharıı	ng of paid employees with related organization(s)			10	•	No			
р	Reimb	pursement paid to related organization(s) for expenses			1	•	No			
q	Reimb	pursement paid by related organization(s) for expenses			10	1	No			
r	Other	transfer of cash or property to related organization(s)			11	-	No			
s	Other	transfer of cash or property from related organization(s)			19	Yes	•			
_2	Ifthe	answer to any of the above is "Yes," see the instructions for information on who must comp		overed relationships	and transaction thresholds					
		(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amoun	t involv	ed			
(1)	CHARITAB	LE REMAINDER TRUST (1)	S	274,331	CASH					

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	(h) Disproprtiona allocations ⁷	_	(i) Code V ² 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, PART IV, LINE 1	CHARITABLE REMAINDER TRUSTS ARE DOMICILED IN MASSACHUSETTS AND OHIO

Schedule R (Form 990) 2013

Page **5**