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 www.IRS.gov/form990

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 07-01-2013 , 2013, and ending 06-30-2014

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
IONA COLLEGE

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
715 NORTH AVENUE MCSPEDON HALL
Suite

City or town, state or province, country, and ZIP or foreign postal code
NEW ROCHELLE, NY 108011890

D Employer identification number
13-3508093

E Telephone number
(914)633-2483

G Gross receipts $ 152,920,650

F Name and address of principal officer
DR JOSEPH NYRE
715 NORTH AVE MCSPEDON HALL
NEW ROCHELLE, NY 10801

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ► 0928

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◄ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ► WWW IONA EDU

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ►

L Year of formation 1940

M State of legal domicile NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
IONA COLLEGE IS A CATHOLIC COLLEGE COMPRISED OF A DIVERSE COMMUNITY OF LEARNERS & SCHOLARS DEDICATED TO ACADEMIC EXCELLENCE IN THE TRADITION OF THE CHRISTIAN BROTHERS

2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	24
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	1,844
6	Total number of volunteers (estimate if necessary)	6	27
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	403,920
b	Net unrelated business taxable income from Form 990-T, line 34	7b	39,966

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	7,049,552	7,209,092
	9	Program service revenue (Part VIII, line 2g)	127,774,342	140,044,964
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,047,504	1,207,166
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,123,810	2,973,913
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	137,995,208	151,435,135
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	38,195,495	43,754,694
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	57,453,816	58,361,992
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ►2,520,724		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	37,550,898	36,573,286
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	133,200,209	138,689,972
	19	Revenue less expenses Subtract line 18 from line 12	4,794,999	12,745,163

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	201,825,197	233,169,950
	21	Total liabilities (Part X, line 26)	56,589,314	64,268,758
	22	Net assets or fund balances Subtract line 21 from line 20	145,235,883	168,901,192

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** 2015-02-13
Signature of officer Date

Anne Marie Schettini-Lynch SVP OF FIN & ADMIN
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Paul Hammerschmidt				P01384178

Firm's name ► BDO USA LLP | Firm's EIN ►

Firm's address ► 100 PARK AVENUE NEW YORK, NY 100175001 | Phone no (914) 633-2483

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

IONA COLLEGE IS A CATHOLIC COLLEGE COMPRISED OF A DIVERSE COMMUNITY OF LEARNERS AND SCHOLARS DEDICATED TO ACADEMIC EXCELLENCE IN THE TRADITION OF THE CHRISTIAN BROTHERS WE COMMIT OURSELVES TO EDUCATION WITHIN THE RICH HERITAGE OF THESE LEGACIES, ESPECIALLY INTELLECTUAL INQUIRY AND THE VALUES OF JUSTICE, PEACE AND SERVICE IONA COLLEGE GRADUATES WILL BE SOUGHT AFTER BECAUSE THEY WILL BE (1) ETHICAL AND SKILLED DECISION MAKERS AND PROBLEM SOLVERS MOTIVATED TO LEADERSHIP, SERVICES AND CIVIC RESPONSIBILITY, (2) INDEPENDENT THINKERS INFORMED AND ENRICHED BY A LIBERAL ARTS EDUCATION, (3) LIFELONG LEARNERS SKILLED IN AND ADAPTABLE TO NEW INFORMATION AND TECHNOLOGIES, AND (4) INDIVIDUALS WHO INTEGRATE THE SPIRITUAL, INTELLECTUAL, CIVIC, EMOTIONAL AND PHYSICAL DIMENSIONS OF THEIR LIVES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 74,827,278 including grants of $ 43,754,694) (Revenue $ 121,066,407)

Instruction - IONA COLLEGE IS CHARTED BY THE STATE OF NEW YORK AND FULLY ACCREDITED BY THE COMMISSION ON HIGHER EDUCATION OF THE MIDDLE STATES ASSOCIATION OF SCHOOLS AND COLLEGES (CHE-MSA) TO OFFER CREDIT-BEARING COURSEWORK TOWARDS DEGREES AND REGISTERED CERTIFICATES AT THE UNDERGRADUATE AND GRADUATE LEVELS IN ADDITION TO THE FEDERAL DEPARTMENT OF EDUCATION APPROVED REGIONAL ACCREDITOR (CHE-MSA), IONA'S ACADEMIC PROGRAMS HOLD MULTIPLE PROFESSIONAL AND SPECIAL ACCREDITATIONS FROM OUTSIDE AGENCIES IONA OFFERS A WIDE VARIETY OF UNDERGRADUATE AND GRADUATE DEGREES IN THE SCHOOL OF ARTS AND SCIENCE AND THE HAGAN SCHOOL OF BUSINESS, INCLUDED UNDERGRADUATE DEGREE PROGRAMS FOR STUDENTS ENROLLED IN THE EVENING PROFESSIONAL STUDIES PROGRAM THE SCHOOL OF ARTS AND SCIENCE SUPPORTS THE MISSION OF IONA COLLEGE THROUGH ITS COMMITMENT TO ACADEMIC EXCELLENCE AND EDUCATION IN THE LIBERAL ARTS TRADITION A COMMUNITY OF TEACHER-SCHOLARS DEVOTED TO ACADEMIC EXCELLENCE, THE SCHOOL OF ARTS AND SCIENCE SEEKS, THROUGH THE DEPARTMENTS THAT COMPRISE IT, TO PROVIDE ALL STUDENTS WITH AN EDUCATIONAL FOUNDATION THAT IS BOTH TRADITIONAL AND CONTEMPORARY THROUGH ITS MAJOR PROGRAMS AT THE UNDERGRADUATE AND GRADUATE LEVELS, THE SCHOOL OFFERS COURSES OF STUDY IN THE TRADITIONAL LIBERAL ARTS DISCIPLINES AND APPROPRIATE PRE-PROFESSIONAL AND PROFESSIONAL PROGRAMS THAT PROVIDE ACADEMIC CHALLENGE AND INTELLECTUAL DEPTH, AND ARE ROOTED IN LIBERAL LEARNING BEYOND ITS OWN INHERENT VALUES, SUCH BROADLY BASED EDUCATION SERVES ESPECIALLY WELL THE NEEDS OF STUDENTS WHO WILL BE EMPLOYED IN A RAPIDLY EVOLVING WORK ENVIRONMENT AND MAY CHANGE CAREERS SEVERAL TIMES IN FURTHERANCE OF THESE COMMITMENTS, THE SCHOOL OF ARTS AND SCIENCE STRIVES TO - PROVIDE AN EDUCATION THAT IS CURRENT, STUDENT CENTERED, OUTCOME BASED, AND INVOLVES AN APPROPRIATE MIX OF CLASSROOM BASED INSTRUCTION, INDEPENDENT RESEARCH AND INTERNSHIP OR PRACTICAL EXPERIENCE - EQUIP STUDENTS WITH THE SKILLS NECESSARY FOR SUCCESS IN A RAPIDLY CHANGING ENVIRONMENT, CRITICAL THINKING, EFFECTIVE ORAL AND WRITTEN COMMUNICATION, PROBLEM SOLVING ETHICAL DECISION MAKING, COMPUTER COMPETENCY, AND SCIENTIFIC AND TECHNOLOGICAL LITERACY - INSTILL IN STUDENTS THE HABITS OF MIND ENABLING THEM TO POSSESS OUT MOST PRECIOUS HUMAN HERITAGE, THOSE IDEAS, BELIEFS, AND WRITINGS THAT ARE THE BASIS OF INTELLECTUAL, CULTURAL AND MORAL DEVELOPMENT - DEEPEN STUDENTS' SELF-AWARENESS, REFLECTIVENESS AND COMMITMENT TO A CORE OF VALUES THAT WILL ILLUMINATE BOTH THEIR PERSONAL RELATIONS AND THEIR RELATIONSHIP TO A PLURALISTIC SOCIETY WITH THE QUALITIES OF INTELLIGENCE, TOLERANCE, DECENCY AND COMPASSION - RECRUIT, RETAIN AND SUPPORT THE DEVELOPMENT OF FACULTY OF EXCEPTIONAL TEACHER-SCHOLARS WHOSE PEDAGOGY IS INFORMED BY RESEARCH, EXPERIENCE, AND SCHOLARSHIP THE HAGAN SCHOOL OF BUSINESS OFFERS DEGREE PROGRAMS LEADING TO THE BACHELOR OF BUSINESS ADMINISTRATION (BBA) DEGREE IN SEVEN MAJORS ACCOUNTING, BUSINESS ADMINISTRATION, FINANCE, INFORMATION SYSTEMS, INTERNATIONAL BUSINESS, MANAGEMENT AND MARKETING

4b (Code) (Expenses $ 15,549,402 including grants of $ 0) (Revenue $ 17,709,343)

Auxiliary enterprises - IONA COLLEGE PROVIDE ANCILLARY AUXILIARY SERVICES TO BOTH ITS STUDENT POPULATION AND ITS EMPLOYEE BASE IN AN EFFORT TO SUPPORT ITS EDUCATIONAL MISSION 1) RESIDENTIAL SERVICES - AS PART OF THE STUDENT EXPERIENCE, IONA COLLEGE OFFERS ON-CAMPUS RESIDENCE HALL HOUSING AND RELATED SERVICES THE PRIMARY GOAL OF IONA'S RESIDENTIAL LIFE PROGRAM IS TO PROVIDE A SAFE, SECURE AND COMFORTABLE ENVIRONMENT WHERE ACADEMIC SUCCESS, AS WELL AS THE SOCIAL, EMOTIONAL, SPIRITUAL, PHYSICAL AND CULTURAL DEVELOPMENT OF EACH RESIDENT, IS FACILITATED 2) BOOKSTORE - THE COLLEGE HAS AN ON-CAMPUS BOOKSTORE WHERE STUDENTS CAN PURCHASE TEXTBOOKS, STUDY AIDS, ELECTRONICS, SOFTWARE, STATIONERY AND RELATED HARD GOODS 3) FOOD SERVICES/CAFETERIA - THE COLLEGE HAS AN ON-CAMPUS CAFETERIA THAT IS COMMITTED TO PROVIDING QUALITY AND NUTRITIOUS FOOD WITH EXCEPTIONAL SERVICE RESIDENT STUDENTS AND COMMUTERS MAY PARTICIPATE IN THE FULL MEAL PLAN OFFERED AT IONA COLLEGE

4c (Code) (Expenses $ 27,798,297 including grants of $ 0) (Revenue $ 2,143,306)

Student services - OTHER ACADEMIC AND STUDENT SUPPORT ACTIVITIES ARE PROVIDED FOR ENROLLED STUDENTS AND IN SUPPORT OF FACULTY SCHOLARSHIP CONSISTENT WITH STANDARDS ESTABLISHED BY THE NEW YORK STATE EDUCATION DEPARTMENT, THE COMMISSION OF HIGHER EDUCATION OF THE MIDDLE STATES ASSOCIATION OF SCHOOLS AND COLLEGES AND BEST PRACTICES IN AMERICAN HIGHER EDUCATION THESE INCLUDE FULLY STAFFED AND OPERATIONAL LIBRARIES, A CAREER DEVELOPMENT CENTER, COUNSELING CENTER, HEALTH SERVICES CENTER, IT SUPPORT CENTER, FACULTY TRAINING CENTER, TUTORING AND ACADEMIC SUPPORT CENTER CAMPUS MINISTRIES OFFICE, ATHLETICS DEPARTMENT, AND STUDENT DEVELOPMENT OFFICE SERVICING CLUBS, STUDENT GOVERNMENT, STUDENT MEDIA AND STUDENT RECREATION

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses ▶** 118,174,977

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
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*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part 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			
a	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
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		No
22	Did the organization report more than $5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	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
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
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? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part 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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	213			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	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	2a	1,844			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	Yes	
b	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		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
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?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to 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 VI . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	**1a** 24			
	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** 23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		**5**		No
6	Did the organization have members or stockholders?		**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		**9**		No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ 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
▶ANNE MARIE SCHETTINI-LYNCH 715 NORTH AVE MCSPEDON HALL
NEW ROCHELLE, NY 10801 (914) 633-2468

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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	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
1b Sub-Total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								2,610,886	0	342,966

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶79

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
Chartwells Dining Services, 175 Sunnyside Blvd CHICAGO IL 60612	FOOD SERVICE	3,062,477
FUSEideas LLC, 8 Winchester Place Suite 302 WINCHESTER MA 01890	ENROLLMENT SERVICES	1,963,784
Tarter Krinsky Drogin LLP, 1350 BROADWAY NEW YORK NY 10018	LEGAL	1,196,790
Hennessey Construction Co Inc, 14 OAK STREET CLOSTER NJ 07624	CONSTRUCTION	849,472
Advance 2000 Inc, 1140 Wehrle Drive AMHERST NY 14221	Managed IT Services	440,005

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 ▶50

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c	844,625				
	d	Related organizations . . . 1d					
	e	Government grants (contributions) 1e	1,710,840				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	4,653,627				
	g	Noncash contributions included in lines 1a-1f $	799,987				
	h	**Total.** Add lines 1a-1f . . . . ▶		7,209,092			
Program Service Revenue			Business Code				
	2a	TUITION AND FEES	611710	121,066,407	121,066,407		
	b	ROOM AND BOARD (& OTHER STUDENT CHARGES)	611710	17,709,343	17,709,343		
	c	CAFETERIA	611710	1,099,556			1,099,556
	d	BOOKSTORE	611710	104,994			104,994
	e	VENDING COMMISSIONS	611710	64,664			64,664
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		140,044,964			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		1,429,296			1,429,296
	4	Income from investment of tax-exempt bond proceeds . . ▶		0			
	5	Royalties . . . . ▶		120,000			120,000
			(i) Real / (ii) Personal				
	6a	Gross rents	(i) 529,057 / (ii)				
	b	Less rental expenses					
	c	Rental income or (loss)	(i) 529,057 / (ii) 0				
	d	Net rental income or (loss) . . . . ▶		529,057			529,057
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	(i) / (ii) 775,000				
	b	Less cost or other basis and sales expenses	(i) / (ii) 997,130				
	c	Gain or (loss)	(i) / (ii) -222,130				
	d	Net gain or (loss) . . . . ▶		-222,130			-222,130
	8a	Gross income from fundraising events (not including $ 844,625 of contributions reported on line 1c) See Part IV, line 18 . . a	255,120				
	b	Less direct expenses . . . b	488,385				
	c	Net income or (loss) from fundraising events . . ▶		-233,265			-233,265
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . . ▶		0			
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶		0			
		Miscellaneous Revenue	Business Code				
	11a	NCAA DISTRIBUTION	611710	433,479	433,479		
	b	SPORTS CAMPS	713940	392,765		392,765	
	c	AQUATICS CLUB	713940	254,741	254,741		
	d	All other revenue		1,477,136	1,455,086	11,155	10,895
	e	**Total.** Add lines 11a–11d . . . . . . ▶		2,558,121			
	12	**Total revenue.** See Instructions . . . . . ▶		151,435,135	140,919,056	403,920	2,903,067

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2 Grants and other assistance to individuals in the United States See Part IV, line 22	43,754,694	43,754,694		
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	1,246,455	257,637	988,818	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	44,061,822	36,420,346	6,031,184	1,610,292
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,525,244	2,044,237	391,258	89,749
9 Other employee benefits	7,330,668	5,979,273	1,087,412	263,983
10 Payroll taxes	3,197,803	2,588,688	495,463	113,652
11 Fees for services (non-employees)				
a Management	0			
b Legal	352,556		352,556	
c Accounting	308,470		308,470	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	137,491		137,491	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,410,627	890,238	3,378,070	142,319
12 Advertising and promotion	2,446,608	476,435	1,930,173	40,000
13 Office expenses	767,989	684,223	76,842	6,924
14 Information technology	1,533,094	1,365,876	153,395	13,823
15 Royalties . .	0			
16 Occupancy	7,652,371	6,817,709	765,666	68,996
17 Travel	1,933,122	1,722,271	193,421	17,430
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	76,845	68,463	7,689	693
20 Interest	1,380,177	1,229,638	138,095	12,444
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	5,567,035	4,959,825	557,016	50,194
23 Insurance	1,264,994	1,127,018	126,570	11,406
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a FOOD SERVICE	5,606,802	4,995,255	560,995	50,552
b OTHER ATHLETIC EXPENSES	1,001,495	892,259	100,206	9,030
c STUDENT ACTIVITIES	696,978	620,957	69,737	6,284
d PROFESSIONAL DUES AND TRAINING	353,479	314,924	35,368	3,187
e All other expenses	1,083,153	965,011	108,376	9,766
25 **Total functional expenses.** Add lines 1 through 24e	138,689,972	118,174,977	17,994,271	2,520,724
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**

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		8,700	1	6,823
	2	Savings and temporary cash investments		10,164,623	2	14,019,137
	3	Pledges and grants receivable, net		2,330,468	3	2,397,669
	4	Accounts receivable, net		446,352	4	1,725,433
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		0	5	0
	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	6	0
	7	Notes and loans receivable, net		1,767,963	7	2,518,647
	8	Inventories for sale or use		0	8	0
	9	Prepaid expenses and deferred charges		1,040,173	9	1,387,217
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 205,613,115			
	b	Less accumulated depreciation	10b 95,671,349	107,406,466	10c	109,941,766
	11	Investments—publicly traded securities		195,570	11	265,396
	12	Investments—other securities See Part IV, line 11		73,545,562	12	98,936,131
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		4,919,320	15	1,971,731
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		201,825,197	16	233,169,950
Liabilities	17	Accounts payable and accrued expenses		6,915,531	17	7,545,525
	18	Grants payable		0	18	0
	19	Deferred revenue		4,039,266	19	2,220,265
	20	Tax-exempt bond liabilities		31,224,486	20	35,851,965
	21	Escrow or custodial account liability Complete Part IV of Schedule D		0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties		0	23	3,621,803
	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 D		14,410,031	25	15,029,200
	26	**Total liabilities.** Add lines 17 through 25		56,589,314	26	64,268,758
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		120,623,379	27	141,374,183
	28	Temporarily restricted net assets		8,131,580	28	10,637,415
	29	Permanently restricted net assets		16,480,924	29	16,889,594
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		145,235,883	33	168,901,192
	34	Total liabilities and net assets/fund balances		201,825,197	34	233,169,950

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	151,435,135
2	Total expenses (must equal Part IX, column (A), line 25)	2	138,689,972
3	Revenue less expenses Subtract line 2 from line 1	3	12,745,163
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	145,235,883
5	Net unrealized gains (losses) on investments	5	11,090,146
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	-170,000
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	168,901,192

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ 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 separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

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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*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
IONA COLLEGE

Employer identification number
13-3508093

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

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

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

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

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

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions)**)	**(iv)** Is the organization in col **(i)** listed in your governing document? Yes	**(iv)** No	**(v)** Did you notify the organization in col **(i)** of your support? Yes	**(v)** No	**(vi)** Is the organization in col **(i)** organized in the U S ? Yes	**(vi)** No	**(vii)** Amount of monetary support
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	8,687,356	7,856,446	5,004,535	7,049,552	7,209,092	35,806,981
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 **Total.** Add lines 1 through 3	8,687,356	7,856,446	5,004,535	7,049,552	7,209,092	35,806,981
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,247,147
6 **Public support.** Subtract line 5 from line 4						34,559,834

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	8,687,356	7,856,446	5,004,535	7,049,552	7,209,092	35,806,981
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	938,038	1,207,770	1,506,952	1,631,636	2,078,353	7,362,749
9 Net income from unrelated business activities, whether or not the business is regularly carried on	473,121	767,627	372,689	375,449	403,920	2,392,806
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	1,472,571	-318,348	-76,322	-172,121	-222,370	683,410
11 **Total support** (Add lines 7 through 10)						46,245,946

12 Gross receipts from related activities, etc (see instructions) **12** 636,373,260

13 **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 this box and **stop here** . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) **14** 74 731 %

15 Public support percentage for 2012 Schedule A, Part II, line 14 **15** 79 695 %

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 ▶☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2012** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—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 ▶☐

20 **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

Return Reference	Explanation
PART I	IONA COLLEGE OPERATES AS A SCHOOL DESCRIBED IN SECTION 170(B)(1)(A)(II) BUT HAS DESIGNATED ITSELF AS A PUBLICLY SUPPORTED ORGANIZATION DESCRIBED IN SECTION 170(B)(1)(A)(VI) TO ALLOW ITSELF TO UTILIZE THE SPECIAL RULE FOR 501(C)(3) ORGANIZATIONS ON FORM 990, SCHEDULE B

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
IONA COLLEGE

Employer identification number
13-3508093

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶______________

4 Number of states where property subject to conservation easement is located ▶______________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶______________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ______________

(ii) Assets included in Form 990, Part X ▶ $ ______________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______________

b Assets included in Form 990, Part X ▶ $ ______________

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a [x] Public exhibition
d [x] Loan or exchange programs
b [ ] Scholarly research
e [x] Other EDUCATIONAL INSTRUCTION
c [ ] Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? [ ] Yes [x] No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? [ ] Yes [ ] No

b If "Yes," explain the arrangement in Part XIII and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? [ ] Yes [ ] No

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

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	69,249,440	51,074,097	48,209,785	37,703,748	30,181,581
b	Contributions	19,472,516	12,353,195	3,408,879	3,337,471	5,189,035
c	Net investment earnings, gains, and losses	12,494,911	6,593,610	-52,398	7,427,259	2,630,489
d	Grants or scholarships	783,405	654,574	381,205	154,660	102,200
e	Other expenditures for facilities and programs					119,286
f	Administrative expenses	137,491	116,888	110,964	104,033	75,871
g	End of year balance	100,295,971	69,249,440	51,074,097	48,209,785	37,703,748

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

a Board designated or quasi-endowment ▶ 78 100 %

b Permanent endowment ▶ 15 340 %

c Temporarily restricted endowment ▶ 6 560 %

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

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

			Yes	No
	(i) unrelated organizations	3a(i)		No
	(ii) related organizations	3a(ii)		No
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		9,850,357		9,850,357
b Buildings		141,266,140	57,541,955	83,724,185
c Leasehold improvements		21,743,995	8,518,460	13,225,535
d Equipment		32,357,916	29,610,934	2,746,982
e Other		394,707	0	394,707
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				109,941,766

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) MULTI-STRATEGY EQUITY FUND	62,939,579	F
(B) MULTI STRATEGY BOND FUND	20,936,963	F
(C) GOVERNMENT MONEY MARKET FUND	10,542,339	F
(D) MULTI-STRATEGY COMMODITIES FD	3,435,398	F
(E) LIMITED PARTNERSHIPS	1,043,472	F
(F) CASH VALUE OF LIFE INSURANCE	38,380	F
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶	98,936,131	

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1 (a) Description of liability	(b) Book value
Federal income taxes	0
ACCRUED POSTRETIREMENT BENEFITS	12,713,000
REFUNDABLE ADVANCES FROM U S	2,316,200
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	15,029,200

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	118,951,481
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	11,090,146		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	488,385		
e	Add lines **2a** through **2d**			2e	11,578,531
3	Subtract line **2e** from line **1**			3	107,372,950
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	137,491		
b	Other (Describe in Part XIII)	4b	43,924,694		
c	Add lines **4a** and **4b**			4c	44,062,185
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	151,435,135

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	95,286,172
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	488,385		
e	Add lines **2a** through **2d**			2e	488,385
3	Subtract line **2e** from line **1**			3	94,797,787
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	137,491		
b	Other (Describe in Part XIII)	4b	43,754,694		
c	Add lines **4a** and **4b**			4c	43,892,185
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	138,689,972

Part XIII Supplemental Information

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

Return Reference	Explanation
PART III, LINE 4	THE COLLEGE OPERATES A PUBLIC GALLERY NEAR ITS CAMPUS THAT IS OPEN TO BOTH STUDENTS AND TO THE GENERAL PUBLIC, FREE OF CHARGE THE COLLEGE DOES NOT OWN ANY OF THE ARTWORK EXHIBITED IN THIS GALLERY BUT RECEIVES THESE PIECES FOR PUBLIC EXHIBITION THE GALLERY IS INTENDED AS A VEHICLE TO INCREASE PUBLIC APPRECIATION OF ART AND TO ENHANCE THE STUDENT EDUCATIONAL EXPERIENCE
PART V, LINE 4	THE COLLEGE'S ENDOWMENT FUND IS INTENDED TO SUPPORT ITS EDUCATIONAL MISSION PERMANENT ENDOWMENT FUNDS AND QUASI ENDOWMENT FUNDS WILL FUND STUDENT SCHOLARSHIPS, FACULTY SUPPORT, FACILITY ENHANCEMENTS AND OTHER STRATEGIC INITIATIVES THE COLLEGE INTENDS ON KEEPING THE ENDOWMENT PRINCIPAL UNTOUCHED, WHILE USING ITS EARNINGS TO SATISFY THE ABOVE MENTIONED OBJECTIVES
PART X, LINE 2	IONA COLLEGE (THE "COLLEGE"), A CATHOLIC COLLEGE IN THE TRADITION OF THE CHRISTIAN BROTHERS, IS A TAX-EXEMPT ORGANIZATION AS DESCRIBED IN SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE (THE CODE), AND IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES ON RELATED INCOME PURSUANT TO SECTION 501(A) OF THE CODE THE COLLEGE HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS THE COLLEGE RECOGNIZES THE EFFECT OF UNCERTAIN TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED MANAGEMENT HAS DETERMINED THAT THE COLLEGE HAS NO UNCERTAIN TAX POSITIONS THAT WOULD REQUIRE FINANCIAL STATEMENT RECOGNITION OR DISCLOSURE THE COLLEGE IS NOT CURRENTLY UNDER EXAMINATION BY ANY TAXING JURISDICTION ITS FEDERAL AND STATE INCOME TAX RETURNS FOR THE YEARS SUBSEQUENT TO 2010 ARE STILL SUBJECT TO EXAMINATION THE COLLEGE IS, HOWEVER, SUBJECT TO FEDERAL AND STATE INCOME TAX ON UNRELATED BUSINESS INCOME
PART XI, LINE 2D AND PART XII, LINE 2D	SPECIAL EVENT EXPENSE $488,385
PART XI, LINE 4B	SCHOLARSHIP DISBURSEMENTS $43,754,694 CHANGE IN POSTRETIREMENT BENEFIT OBLIGATION $170,000 TOTAL $43,924,694
PART XII, LINE 4B	SCHOLARSHIP DISBURSEMENTS $43,754,694

Part XIII **Supplemental Information *(continued)***

Return Reference	Explanation

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶Attach to Form 990 or Form 990-EZ. ▶See separate instructions.
▶Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
IONA COLLEGE

Employer identification number
13-3508093

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total . . . . ▶						

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 DINNER DANCE (event type)	(b) Event #2 WINGED FOOT (event type)	(c) Other events 1 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	751,550	270,500	77,695	1,099,745
	2 Less Contributions	597,650	188,180	58,795	844,625
	3 Gross income (line 1 minus line 2)	153,900	82,320	18,900	255,120
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	223,880	71,939	15,244	311,063
	7 Food and beverages				
	8 Entertainment	10,000			10,000
	9 Other direct expenses	90,705	53,360	23,257	167,322
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(488,385)
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				-233,265

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities ____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain ____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain ____

11 Does the organization operate gaming activities with nonmembers? . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a	The organization's facility	13a	%
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ ____________ and the amount of gaming revenue retained by the third party ▶ $ ____________

c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation

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

2013

Open to Public Inspection

Name of the organization
IONA COLLEGE

Employer identification number
13-3508093

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
(1) SCHOLARSHIPS	3306	43,754,694			

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

Return Reference	**Explanation**
PART I, LINE 2	IONA COLLEGE GIVES AID TO STUDENTS IN TWO FORMS MERIT AID AND NEEDS BASED AID THE AMOUNT OF MERIT AID A STUDENT RECEIVES IS BASED ON A CALCULATED ACADEMIC INDEX THAT IS DERIVED FROM THEIR GPA & SAT SCORES NEED BASED AID IS DETERMINED FROM THE STUDENT EFC STUDENTS ARE GIVEN THESE AWARDS UPON ACCEPTANCE TO THE COLLEGE AND THE AWARDS ARE RENEWED ON AN ANNUAL BASIS ASSUMING THE STUDENT MEETS THE REQUIRED CUMULATIVE GPA AND THEIR NEED AS DETERMINED BY THE FAFSA HAS NOT CHANGED ALL SCHOLARSHIPS ISSUED BY THE COLLEGE ARE INTENDED TO BE USED TO DEFRAY TUITION COSTS AND ENABLE STUDENTS TO MATRICULATE AT IONA COLLEGE, THE STUDENT HAS NO DISCRETION ON HOW TO EXPEND THOSE FUNDS ACCORDINGLY, THE COLLEGE DOES NOT FORMALLY MONITOR THE USE OF THE SCHOLARSHIP FUNDS SINCE IT IS REQUIRED THAT SUCH FUNDS BE USED TO OFFSET TUITION COSTS

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
► Attach to Form 990. ► See separate instructions.
► Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
IONA COLLEGE

Employer identification number
13-3508093

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☑ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☑ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ☑ Compensation committee ☐ 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 VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)DR JOSEPH NYRE PRESIDENT	(i)	406,091	60,000	78,393	12,750	107,435	664,669	0
	(ii)	0	0	0	0	0	0	0
(2)JONATHAN IVEC THRU 613 SVP OF FINANCE & ADMIN	(i)	128,313	0	132,935	12,771	11,299	285,318	0
	(ii)	0	0	0	0	0	0	0
(3)BRIAN NICKERSON THRU 1013 PROVOST, SVP ACADEMIC AFFAIRS	(i)	193,462	0	358	8,944	21,980	224,744	0
	(ii)	0	0	0	0	0	0	0
(4)VINCENT CALLUZZO DEAN, HAGAN SCHOOL OF BUSINESS	(i)	223,636	0	2,523	20,199	16,450	262,808	0
	(ii)	0	0	0	0	0	0	0
(5)TIMOTHY CLUESS MEN'S BASKETBALL COACH	(i)	464,109	20,000	1,157	14,712	1,660	501,638	0
	(ii)	0	0	0	0	0	0	0
(6)PAUL SUTERA SVP ADVANCEMENT & EXTERNAL AFF	(i)	252,483	0	146	11,979	30,582	295,190	0
	(ii)	0	0	0	0	0	0	0
(7)KURT ENGEMANN PROFESSOR	(i)	189,465	0	1,677	14,273	0	205,415	0
	(ii)	0	0	0	0	0	0	0
(8)JOANNE LAUGHLIN STEELE VICE PROVOST-IT & CIO	(i)	175,668	0	314	17,822	24,715	218,519	0
	(ii)	0	0	0	0	0	0	0
(9)DIMITRIS HALARIS ASSOCIATE VICE PROVOST-IT	(i)	172,031	0	128	0	9,140	181,299	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	THE COLLEGE PROVIDES DR JOSEPH NYRE, PRESIDENT, HOUSING IN CLOSE PROXIMITY TO THE CAMPUS AS A CONDITION OF EMPLOYMENT ADDITIONALLY, THE COLLEGE PAYS SOCIAL DUES FOR THE PRESIDENT TO THE EXTENT THAT THE PRESIDENT USES THE SOCIAL CLUB OF BUSINESS PURPOSES, THE VALUE OF THE CLUB DUES IS REPORTED AS NON-TAXABLE BENEFITS THE COLLEGE MAKES AVAILABLE TO VARIOUS COLLEGE PERSONNEL AND GUESTS A DRIVER FOR COLLEGE RELATED ACTIVITIES OCCASIONALLY, THE PRESIDENT WILL MAKE USE OF THESE DRIVER SERVICES FOR COLLEGE RELATED ACTIVITIES ONLY
PART I, LINE 4A	JONATHAN IVEC, SENIOR VICE PRESIDENT OF FINANCE THRU JUNE 1, 2013, RECEIVED A SEVERANCE PAYMENT WHICH IS INLCUDED ON SCHEDULE J, PART II, COLUMN B(III)

Additional Data

Software ID:
Software Version:
EIN: 13-3508093
Name: IONA COLLEGE

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
DR JOSEPH NYRE PRESIDENT	(i) (ii)	406,091 0	60,000 0	78,393 0	12,750 0	107,435 0	664,669 0	0 0
JONATHAN IVEC THRU 613 SVP OF FINANCE & ADMIN	(i) (ii)	128,313 0	0 0	132,935 0	12,771 0	11,299 0	285,318 0	0 0
BRIAN NICKERSON THRU 1013 PROVOST, SVP ACADEMIC AFFAIRS	(i) (ii)	193,462 0	0 0	358 0	8,944 0	21,980 0	224,744 0	0 0
VINCENT CALLUZZO DEAN, HAGAN SCHOOL OF BUSINESS	(i) (ii)	223,636 0	0 0	2,523 0	20,199 0	16,450 0	262,808 0	0 0
TIMOTHY CLUESS MEN'S BASKETBALL COACH	(i) (ii)	464,109 0	20,000 0	1,157 0	14,712 0	1,660 0	501,638 0	0 0
PAUL SUTERA SVP ADVANCEMENT & EXTERNAL AFF	(i) (ii)	252,483 0	0 0	146 0	11,979 0	30,582 0	295,190 0	0 0
KURT ENGEMANN PROFESSOR	(i) (ii)	189,465 0	0 0	1,677 0	14,273 0	0 0	205,415 0	0 0
JOANNE LAUGHLIN STEELE VICE PROVOST-IT & CIO	(i) (ii)	175,668 0	0 0	314 0	17,822 0	24,715 0	218,519 0	0 0
DIMITRIS HALARIS ASSOCIATE VICE PROVOST-IT	(i) (ii)	172,031 0	0 0	128 0	0 0	9,140 0	181,299 0	0 0

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Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990. ▶ See separate instructions.
▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
IONA COLLEGE

Employer identification number
13-3508093

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased Yes	(g) Defeased No	(h) On behalf of issuer Yes	(h) On behalf of issuer No	(i) Pool financing Yes	(i) Pool financing No
A	DORMITORY AUTHORITY OF THE STATE OF NEW YORK	14-6000293	649906P65	08-01-2012	31,366,862	REFUNDING 2002 BOND/CONSTRUCTION		X		X		X
B	City of New Rochelle Corp for Local DEVELOPMENT	61-1721247	648535AA0	10-17-2013	5,000,000	Reimburement for acquisition of re		X		X		X

Part II Proceeds

		A	B	C	D
1	Amount of bonds retired	414,897	100,000		
2	Amount of bonds legally defeased	0	0		
3	Total proceeds of issue	31,366,862	5,000,000		
4	Gross proceeds in reserve funds	2,023,887	0		
5	Capitalized interest from proceeds	0	0		
6	Proceeds in refunding escrows	0	0		
7	Issuance costs from proceeds	507,061	0		
8	Credit enhancement from proceeds	0	0		
9	Working capital expenditures from proceeds	0	0		
10	Capital expenditures from proceeds	5,419,844	5,000,000		
11	Other spent proceeds	22,760,914	0		
12	Other unspent proceeds	655,156	0		
13	Year of substantial completion	2013	2014		

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
14	Were the bonds issued as part of a current refunding issue?	X			X				
15	Were the bonds issued as part of an advance refunding issue?		X		X				
16	Has the final allocation of proceeds been made?		X	X					
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

Part III Private Business Use

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

Part III Private Business Use *(Continued)*

		A		B		C		D	
		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?		X		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c	Are there any research agreements that may result in private business use of bond-financed property?		X		X				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %		0 %					
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %		0 %					
6	Total of lines 4 and 5	0 %		0 %					
7	Does the bond issue meet the private security or payment test?		X		X				
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?		X		X				
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?		X		X				
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	X		X					

Part IV Arbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T?		X		X				
2	If "No" to line 1, did the following apply?								
a	Rebate not due yet?	X		X					
b	Exception to rebate?		X		X				
c	No rebate due?		X		X				
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?		X	X					
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X				
b	Name of provider	0		0					
c	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

Part IV Arbitrage *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		X				
b	Name of provider	0		0					
c	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				
7	Has the organization established written procedures to monitor the requirements of section 148?	X		X					

Part V Procedures To Undertake Corrective Action

	A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	X		X					

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

Return Reference	Explanation

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.
►Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
IONA COLLEGE

Employer identification number
13-3508093

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	31	799,987	MARKET QUOTATION
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (____________)				
26 Other ► (____________)				
27 Other ► (____________)				
28 Other ► (____________)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . | 29 |

			Yes	No
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
b	If "Yes," describe in Part II			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

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

Return Reference	Explanation

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
IONA COLLEGE

Employer identification number
13-3508093

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	
FORM 990, PART VI, SECTION B, LINE 12C	EACH TRUSTEE OF THE COLLEGE IS REQUIRED TO ANNUALLY DISCLOSE ANY CONFLICTS OF INTEREST THA T ARISE BY VIRTUE OF THEIR EMPLOYMENT, BOARD SERVICE, OR POSITION WITH THE COLLEGE THE CO LLEGE MONITORS COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY THROUGH AN ANNUAL QUESTIONN AIRE/DISCLOSURE STATEMENT THAT IS DISTRIBUTED TO THESE INDIVIDUALS POTENTIAL CONFLICTS AR E INVESTIGATED IMMEDIATELY
FORM 990, PART VI, SECTION B, LINE 15	THE COLLEGE UNDERTAKES A THOROUGH PROCESS TO ENSURE THAT THE EXECUTIVE COMPENSATION IT PAY S TO ITS TOP MANAGEMENT OFFICIAL AND ALL OF ITS OFFICERS AND KEY EMPLOYEES IS REASONABLE G IVEN THE MARKET IN WHICH THE COLLEGE OPERATES IN RELEVANT PART, THE BOARD OF TRUSTEES HAS ESTABLISHED A COMPENSATION COMMITTEE OF INDEPENDENT PERSONS THAT HAVE NO PERSONAL INTERES T IN THE PROPOSED COMPENSATION AGREEMENT CONTEMPORANEOUS SUBSTANTIATION FOR THE COMPENSAT ION REVIEW IS WITH THE COMPENSATION COMMITTEE MINUTES
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION DOES NOT ORDINARILY MAKE IT'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST P OLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC, HOWEVER IF REQUESTED WILL BE PROVI DED AT MANAGEMENT'S DISCRETION
FORM 990, PART XI, LINE 9	CHANGE IN POSTRETIREMENT BENEFIT OBLIGATION $(170,000)

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Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2013

Attachment Sequence No **179**

Name(s) shown on return	Business or activity to which this form relates	Identifying number
IONA COLLEGE	GENERAL DEPRECIATION	13-3508093

Part I Election To Expense Certain Property Under Section 179
Note: *If you have any listed property, complete Part V before you complete Part I.*

1	Maximum amount (see instructions)	1	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	$ 2,600,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2012 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 ▶	13	

Note: *Do not use Part II or Part III below for listed property. Instead, use Part V.*

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property **)** (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	5,567,035

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2013	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ▶ ☐		

Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions.)

21	Listed property Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	5,567,035
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V **Listed Property** (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: *For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.*

Section A—Depreciation and Other Information (Caution: *See the instructions for limits for passenger automobiles.***)**

24a Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation/ deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)						25		
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1					28			
29 Add amounts in column (i), line 26 Enter here and on line 7, page 1							29	

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (**do not** include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
	Yes	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**	**Yes**	**No**
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

Part VI **Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2013 tax year (see instructions)					
43 Amortization of costs that began before your 2013 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	

Additional Data

Software ID:
Software Version:
EIN: 13-3508093
Name: IONA 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 organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	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
DR JOSEPH NYRE PRESIDENT	75 0	X		X				544,484	0	120,185
JAMES P HYNES CHAIRPERSON	2 0	X		X				0	0	0
DAVID J MCCABE VICE CHAIRPERSON	1 0	X		X				0	0	0
DAVID P BROWN TRUSTEE	1 0	X						0	0	0
LINDA M BRUNO TRUSTEE	1 0	X						0	0	0
RONALD M DEFEO TRUSTEE	1 0	X						0	0	0
ANDREW DOLCE TRUSTEE	1 0	X						0	0	0
PATRICK C DUNICAN JR TRUSTEE	1 0	X						0	0	0
RICHARD FRANCHELLA THRU 913 TRUSTEE	1 0	X						0	0	0
THERESA GOTTLIEB TRUSTEE	1 0	X						0	0	0
JULIA CONSIDINE GREIFELD TRUSTEE	1 0	X						0	0	0
THOMAS E HALES TRUSTEE	1 0	X						0	0	0
MICHAEL P HEGARTY TRUSTEE	1 0	X						0	0	0
ALICE L HOERSCH TRUSTEE	1 0	X						0	0	0
KATHLEEN A HURLIE TRUSTEE	1 0	X						0	0	0
ROBERT LAPENTA TRUSTEE	1 0	X						0	0	0
BARTLEY F LIVOLSI TRUSTEE	1 0	X						0	0	0
PATRICK LYNCH THRU 913 TRUSTEE	1 0	X						0	0	0
PHILLIP MAISANO THRU 514 TRUSTEE	1 0	X						0	0	0
J RILEY MCDONOUGH TRUSTEE	1 0	X						0	0	0
JOANN MAZZELLA MURPHY TRUSTEE	1 0	X						0	0	0
HUGH O'NEILL CFC THRU 514 TRUSTEE	1 0	X						0	0	0
STEPHEN V REITANO TRUSTEE	1 0	X						0	0	0
ARMANDO C RODRIGUEZ JR TRUSTEE	1 0	X						0	0	0
CHARLES W SCHOENHERR TRUSTEE	1 0	X						0	0	0

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 organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	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
RAYMOND J VERCRUYSSE TRUSTEE	1 0	X						0	0	0
BRIAN M WALSH TRUSTEE	1 0	X						0	0	0
LAWRENCE I WILLS TRUSTEE	1 0	X						0	0	0
Anne Marie Schettini-Lynch SVP OF FIN & ADMIN (FROM 7/13)	65 0			X				90,344	0	4,144
JONATHAN IVEC THRU 613 SVP OF FINANCE & ADMIN	55 0			X				261,248	0	24,070
BRIAN NICKERSON THRU 1013 PROVOST, SVP ACADEMIC AFFAIRS	55 0			X				193,820	0	30,924
KATHLEEN GILL GENERAL COUNSEL & BOARD SEC	60 0			X				17,653	0	2,111
VINCENT CALLUZZO DEAN, HAGAN SCHOOL OF BUSINESS	40 0				X			226,159	0	36,649
TIMOTHY CLUESS MEN'S BASKETBALL COACH	40 0					X		485,266	0	16,372
PAUL SUTERA SVP ADVANCEMENT & EXTERNAL AFF	40 0					X		252,629	0	42,561
KURT ENGEMANN PROFESSOR	40 0					X		191,142	0	14,273
JOANNE LAUGHLIN STEELE VICE PROVOST-IT & CIO	40 0					X		175,982	0	42,537
DIMITRIS HALARIS ASSOCIATE VICE PROVOST-IT	40 0					X		172,159	0	9,140