



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



Form **990**
 Department of the Treasury
 Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form.
 ▶ Information about Form 990 and its instructions is at 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: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Pomona College Doing Business As _____ Number and street (or P O box if mail is not delivered to street address) Room/suite 550 N COLLEGE AVENUE Suite _____ City or town, state or province, country, and ZIP or foreign postal code CLAREMONT, CA 917114434	D Employer identification number 95-1664112 E Telephone number (909) 621-8135 G Gross receipts \$ 1,129,621,535
F Name and address of principal officer DAVID OXTOBY 550 N COLLEGE AVENUE CLAREMONT, CA 917114434		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number ▶
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ WWW.POMONA.EDU		
K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1887 M State of legal domicile CA

Part I Summary

1	Briefly describe the organization's mission or most significant activities POMONA COLLEGE IS AN INDEPENDENT, COEDUCATIONAL LIBERAL ARTS INSTITUTION DEDICATED TO THE PURSUIT OF KNOWLEDGE AND UNDERSTANDING THROUGH THE STUDY OF THE SCIENCES & THE HUMANITIES				
2	Check this box <input type="checkbox"/> 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		36	
4	Number of independent voting members of the governing body (Part VI, line 1b)	4		35	
5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5		2,750	
6	Total number of volunteers (estimate if necessary)	6		905	
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a		-4,667,681	
b	Net unrelated business taxable income from Form 990-T, line 34	7b		-5,321,136	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year		Current Year	
	9 Program service revenue (Part VIII, line 2g)	17,708,985		34,878,711	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	87,546,415		92,416,282	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	92,990,068		146,938,300	
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,409,408		1,277,816	
		199,654,876		275,511,109	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	31,922,456		34,510,375	
	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)	75,841,512		79,957,475	
	16a Professional fundraising fees (Part IX, column (A), line 11e)	266,107		71,689	
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 8,455,360				
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	70,409,617		74,945,350	
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	178,439,692		189,484,889		
19 Revenue less expenses Subtract line 18 from line 12	21,215,184		86,026,220		
Net Assets or Fund Balances		Beginning of Current Year		End of Year	
	20 Total assets (Part X, line 16)	2,509,752,885		2,818,129,750	
	21 Total liabilities (Part X, line 26)	308,569,673		315,272,371	
22 Net assets or fund balances Subtract line 21 from line 20	2,201,183,212		2,502,857,379		

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	***** Signature of officer	2015-05-13 Date			
	KAREN SISSON TREASURER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name REGINA L PRINCE	Preparer's signature	Date 2015-05-11	Check <input type="checkbox"/> if self-employed	PTIN P00576936
	Firm's name ▶ KPMG LLP	Firm's EIN ▶			
	Firm's address ▶ 550 S Hope St Suite 1500 Los Angeles, CA 90071	Phone no (909) 621-8276			

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

Through close ties among a diverse group of faculty, staff and classmates, Pomona seeks to inspire students to engage in the probing inquiry and creative learning that will enable them to identify and address their intellectual passions CONTINUED SCHEDULE O

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 \$ 95,529,823 including grants of \$ 34,510,375) (Revenue \$ 91,365,914)

Instruction & Research RANKED IN 2013 AS THE NO 2 COLLEGE IN THE NATION BY FORBES, POMONA OFFERS AN ACADEMIC PROGRAM THAT ENCOMPASSES THE MAJOR FIELDS OF THE ARTS, HUMANITIES, NATURAL SCIENCES, AND SOCIAL SCIENCES LEARNING IS ENCOURAGED THROUGH THEORY-BUILDING AND EMPIRICAL RESEARCH, HISTORICAL AND LINGUISTIC ANALYSIS, INQUIRY AND ETHICAL DEBATE POMONA COLLEGE'S LIBERAL ARTS CURRICULUM, SMALL CLASSES, RESIDENTIAL CAMPUS, AND SOPHISTICATED LABORATORIES AND STUDIOS PREPARE STUDENTS FOR LIVES OF PERSONAL FULFILLMENT AND SOCIAL RESPONSIBILITY IN A GLOBAL CONTEXT continued SCHEDULE O

4b (Code) (Expenses \$ 27,428,752 including grants of \$) (Revenue \$ 832,577)

Auxiliary Enterprises POMONA COLLEGE GUARANTEES ITS STUDENTS ON-CAMPUS HOUSING ALL FOUR YEARS A TESTAMENT TO THE QUALITY OF LIFE ON CAMPUS IS THAT ONLY TWO TO THREE PERCENT OF STUDENTS CHOOSE TO LIVE ELSEWHERE THE SCALE AND ARRANGEMENT OF POMONA'S 16 RESIDENCE HALLS ENCOURAGE STUDENTS TO GET TO KNOW EACH OTHER RANGING IN SIZE FROM 60 TO 250 STUDENTS, WITH AN AVERAGE OF ABOUT 120 EACH, THESE COEDUCATIONAL RESIDENCES ARE LARGE ENOUGH TO BRING TOGETHER STUDENTS WITH A VARIETY OF INTERESTS AND EXPERIENCES, BUT SMALL ENOUGH TO ALLOW RESIDENTS TO WORK AS A COHESIVE GROUP continued schedule o

4c (Code) (Expenses \$ 18,851,733 including grants of \$) (Revenue \$ 34,355)

Student Services POMONA COLLEGE OFFERS STUDENTS A WIDE VARIETY OF PROGRAMS TO EXTEND THEIR EDUCATION BEYOND THE CLASSROOM, INCLUDING CLUBS, SPORTS, THE STUDENT LIFE NEWSPAPER AND STUDENT GOVERNMENT OTHER RESOURCES OFFERED TO STUDENTS INCLUDE THE OFFICE OF BLACK STUDENT AFFAIRS, THE ASIAN AMERICAN RESOURCE CENTER, THE CHICANO/LATIN STUDENT AFFAIRS CENTER, THE WOMEN'S UNION AND THE QUEER RESOURCE CENTER continued schedule o

(Code) (Expenses \$ 28,494,804 including grants of \$ 0) (Revenue \$ 184,066)

OTHER-PUBLIC SERVICE

4d Other program services (Describe in Schedule O)
(Expenses \$ 28,494,804 including grants of \$ 0) (Revenue \$ 184,066)

4e Total program service expenses 170,305,112

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	Yes	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>	Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	Yes	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	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? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		No
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	Yes	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		No
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	Yes	
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	Yes	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	Yes	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		No
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If so, complete Schedule L, Part II</i>	26	Yes	
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? <i>If "Yes," complete Schedule L, Part III</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	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		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	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		
2b	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)	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	Yes	
3b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	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)?		No
b	If "Yes," enter the name of the foreign country <input type="text"/> 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?		No
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		No
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		No
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
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?		No
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		No
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		No
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		No
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13a	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		
13b	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		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		No
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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		
	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		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		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?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	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		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?		No
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	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	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	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?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the States with which a copy of this Form 990 is required to be filed CA
- 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
 MARY LOU WOODS 550 N COLLEGE AVENUE
 CLAREMONT, CA 917114434 (909) 621-8135

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	4,730				
	b	Membership dues 1b					
	c	Fundraising events 1c					
	d	Related organizations 1d					
	e	Government grants (contributions) 1e	2,317,062				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	32,556,919				
	g	Noncash contributions included in lines 1a-1f \$	4,205,957				
	h	Total. Add lines 1a-1f	34,878,711				
Program Service Revenue	2a	TUITION AND FEES					
		Business Code					
		611710	70,619,069	70,619,069			
	b	ROOM AND BOARD					
		611710	20,735,590	20,735,590			
	c	AUXILIARY & EDUCATIONAL SUPPORT					
		611710	1,061,623	1,061,623			
	g	Total. Add lines 2a-2f	92,416,282				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	10,986,362		-5,513,239	16,499,601	
	4	Income from investment of tax-exempt bond proceeds	0				
	5	Royalties	229,002			229,002	
	6a	Gross rents	(i) Real	1,567,805			
			(ii) Personal				
			b Less rental expenses	848,159			
			c Rental income or (loss)	719,646	0		
	d	Net rental income or (loss)	719,646		554,956	164,690	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	987,728,118			
			(ii) Other	1,486,087			
			b Less cost or other basis and sales expenses	853,262,267			
			c Gain or (loss)	134,465,851	1,486,087		
	d	Net gain or (loss)	135,951,938			135,951,938	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18					
	a						
	b	Less direct expenses b					
	c	Net income or (loss) from fundraising events	0				
	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	CATERING & BANQUET REVENUE	722320	291,232	630	290,602		
b	FORFEITED FEE DEPOSITS	900099	8,100			8,100	
c	DUPLICATING REVENUE	900099	11,673			11,673	
d	All other revenue		18,163			18,163	
e	Total. Add lines 11a-11d		329,168				
12	Total revenue. See Instructions		275,511,109	92,416,912	-4,667,681	152,883,167	

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	33,174,121	33,174,121		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	1,336,254	1,336,254		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	3,957,462	1,396,328	1,846,433	714,701
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	53,014			53,014
7	Other salaries and wages	57,437,525	52,679,032	931,347	3,827,146
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,568,732	5,076,344	93,135	399,253
9	Other employee benefits	7,761,582	7,118,812	125,805	516,965
10	Payroll taxes	5,179,160	5,068,212	86,967	23,981
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	980,237	877,440	23,368	79,429
c	Accounting	335,997		335,997	
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	71,689			71,689
f	Investment management fees	3,959,425		3,959,425	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	13,103,606	11,975,832	500,333	627,441
12	Advertising and promotion	641,826	498,852	139	142,835
13	Office expenses	12,784,241	11,190,972	468,073	1,125,196
14	Information technology	2,371,223	2,213,947	15,862	141,414
15	Royalties	0			
16	Occupancy	10,912,437	10,829,908	26,325	56,204
17	Travel	2,764,701	2,161,276	129,704	473,721
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	264,429	236,159	10,687	17,583
20	Interest	8,113,031	8,113,031		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	14,952,362	14,851,769	33,031	67,562
23	Insurance	432,751	405,315	9,009	18,427
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	CHARITABLE GIFT ANNUITY PMT	2,103,131		2,103,131	
b	EQUIPMENT	7,448	7,448		
c	OTHER	1,218,505	1,094,060	25,646	98,799
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	189,484,889	170,305,112	10,724,417	8,455,360
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 <input type="checkbox"/> 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)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	8,021	1	8,172
	2 Savings and temporary cash investments	98,800,324	2	47,746,200
	3 Pledges and grants receivable, net	44,540,019	3	53,509,939
	4 Accounts receivable, net	2,352,476	4	18,869,866
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	1,376,644	5	1,911,583
	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	0	7	0
	8 Inventories for sale or use	0	8	97,536
	9 Prepaid expenses and deferred charges	1,547,403	9	2,024,438
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 561,024,974		
	b Less accumulated depreciation	10b 187,849,195	352,387,894	10c 373,175,779
	11 Investments—publicly traded securities	321,576,675	11	369,899,699
	12 Investments—other securities. See Part IV, line 11	1,650,654,412	12	1,913,700,499
	13 Investments—program-related. See Part IV, line 11	36,509,017	13	37,186,039
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	2,509,752,885	16	2,818,129,750	
Liabilities	17 Accounts payable and accrued expenses	19,839,828	17	23,279,444
	18 Grants payable	0	18	0
	19 Deferred revenue	1,446,171	19	1,796,426
	20 Tax-exempt bond liabilities	190,974,505	20	192,246,192
	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	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	96,309,169	25	97,950,309
	26 Total liabilities. Add lines 17 through 25	308,569,673	26	315,272,371
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,073,567,441	27	1,209,516,387
	28 Temporarily restricted net assets	795,685,013	28	944,196,756
	29 Permanently restricted net assets	331,930,758	29	349,144,236
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	2,201,183,212	33	2,502,857,379	
34 Total liabilities and net assets/fund balances	2,509,752,885	34	2,818,129,750	

Part XI Reconciliation 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	275,511,109
2	Total expenses (must equal Part IX, column (A), line 25)	2	189,484,889
3	Revenue less expenses Subtract line 2 from line 1	3	86,026,220
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,201,183,212
5	Net unrealized gains (losses) on investments	5	191,244,046
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	24,403,901
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,502,857,379

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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? 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 <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?	Yes	
3b	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	Yes	

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 (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			
ROBERT ROBINSON	40 0				X			190,307	0	38,284
ASST VP OF FACILITIES	0 0				X			177,923	0	42,809
MARY LOU WOODS	40 0				X			220,944	0	25,564
ASST VP/ASSOC TREAS	0 0						X	246,655	0	47,069
DEBORAH BURKE	40 0						X	214,814	0	43,109
PROFESSOR	0 0						X	211,485	0	34,522
GARY SMITH	40 0						X	209,539	0	40,894
PROFESSOR	0 0						X			
GARY KATES	40 0						X			
PROFESSOR	0 0						X			
ELEANOR BROWN	40 0						X			
PROFESSOR	0 0						X			
STEVE ERICKSON	40 0						X			
PROFESSOR	0 0						X			

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

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

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

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Pomona College

Employer identification number
95-1664112

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?

- (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?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
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?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
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.")	25,368,000	38,530,152	18,863,210	17,708,985	34,878,711	135,349,058
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	25,368,000	38,530,152	18,863,210	17,708,985	34,878,711	135,349,058
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)						12,834,722
6 Public support. Subtract line 5 from line 4						122,514,336

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	25,368,000	38,530,152	18,863,210	17,708,985	34,878,711	135,349,058
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,480,000	19,394,728	67,124,324	15,203,758	11,334,227	123,537,037
9 Net income from unrelated business activities, whether or not the business is regularly carried on		938,038				938,038
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		237,060	292,591	474,821	329,168	1,333,640
11 Total support (Add lines 7 through 10)						261,157,773
12 Gross receipts from related activities, etc. (see instructions)					12	418,919,983

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	46.912 %
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	49.570 %

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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	0 %
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

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2013

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
See separate instructions. Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Table with 2 columns: Name of the organization (Pomona College) and Employer identification number (95-1664112)

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
2 Political expenditures
3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
2 Enter the amount of any excise tax incurred by organization managers under section 4955
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
4a Was a correction made?
b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
4 Did the filing organization file Form 1120-POL for this year?
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received and promptly and directly delivered to a separate political organization

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?		No	
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		No	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities?	Yes		3,321
j	Total Add lines 1c through 1i			3,321
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

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

Part IV Supplemental Information

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

Return Reference	Explanation
OTHER LOBBYING ACTIVITIES	PART II-B, LINE 1(I) THE ORGANIZATION PAID MEMBERSHIP DUES OF \$3,798 TO NACUBO AND \$16,976 IN DUES TO THE ASSOCIATION OF INDEPENDENT CALIFORNIA COLLEGE AND UNIVERSITIES, WHICH MAY ENGAGE IN LOBBYING ACTIVITIES OF THESE AMOUNTS, \$3,321 IS ATTRIBUTABLE TO LOBBY RELATED EXPENSES FOR HIGHER EDUCATION ISSUES

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2013

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

Name of the organization Pomona College

Employer identification number 95-1664112

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.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number, aggregate contributions, aggregate grants, and aggregate value.

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, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

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

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a-2d for total number, acreage, and number of easements.

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 Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

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 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

Table with 2 columns: Description (1c-1f) and Amount

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.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows include 1a-1g.

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

- a Board designated or quasi-endowment 44.405%
b Permanent endowment 41.134%
c Temporarily restricted endowment 14.461%
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

Table with 3 columns: Description (3a(i), 3a(ii)), Yes, No

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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.

Table with 4 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows include 1a-1e and Total.

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) US EQUITY	258,608,564	F
(B) NON US EQUITY	228,910,874	F
(C) EMERGING MARKETS	131,971,262	F
(D) FIXED INCOME	170,016,393	F
(E) VENTURE CAPITAL	241,566,393	F
(F) PRIVATE EQUITY	154,362,992	F
(G) ABSOLUTE RETURN	497,951,193	F
(H) REAL ASSETS	218,191,226	F
(I) OTHER	12,121,602	F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	1,913,700,499	

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
LIFE INCOME ANNUITIES PAYABLE	75,939,712
FUNDS HELD IN TRUST FOR OTHERS	12,246,840
GOV'T STUDENT LOAN ADVANCES	4,834,757
LEASE OBLIGATION	2,095,234
ASSET RETIREMENT LIABILITY	2,833,766
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	97,950,309

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	453,051,727
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	191,244,046
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	24,726,167
e	Add lines 2a through 2d	2e	215,970,213
3	Subtract line 2e from line 1	3	237,081,514
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	4,450,322
b	Other (Describe in Part XIII)	4b	33,979,273
c	Add lines 4a and 4b	4c	38,429,595
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	275,511,109

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	151,377,560
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	322,266
e	Add lines 2a through 2d	2e	322,266
3	Subtract line 2e from line 1	3	151,055,294
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	4,450,322
b	Other (Describe in Part XIII)	4b	33,979,273
c	Add lines 4a and 4b	4c	38,429,595
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	189,484,889

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
DISCLOSURE FOR MAINTAINING COLLECTIONS OF ART, HISTORICAL TREASURES, OR	OTHER SIMILAR ASSETS HELD FOR PUBLIC EXHIBITION, EDUCATION OR RESEARCH PART III, LINE 1A THE COLLEGE FOLLOWS A POLICY NOT TO RECORD OR CAPITALIZE ITS ART COLLECTIONS THE COLLEGE'S ART COLLECTIONS CONSIST OF OBJECTS OF HISTORICAL AND AESTHETIC SIGNIFICANCE HELD FOR PUBLIC EXHIBITION AND EDUCATIONAL PURPOSES ALL WORKS IN THE COLLECTION ARE CATALOGUED, PRESERVED, CARED FOR AND MONITORED ACCORDING TO PROFESSIONAL MUSEUM STANDARDS, AND ARE SUBJECT TO A POLICY THAT REQUIRES PROCEEDS FROM DE-ACCESSION TO BE USED EXCLUSIVELY FOR ACQUISITION
DESCRIPTION OF ORGANIZATION'S COLLECTIONS	PART III, LINE 4 THE FINE ART COLLECTIONS OF POMONA COLLEGE ARE HOUSED IN THE POMONA COLLEGE MUSEUM OF ART AT THE MONTGOMERY ART CENTER, WHICH WAS INAUGURATED IN 1958 AND NAMED AFTER THE LATE GLADYS K MONTGOMERY, POMONA TRUSTEE AND LOS ANGELES CIVIC LEADER AMONG IMPORTANT HOLDINGS ARE THE KRESS COLLECTION OF 15TH- AND 16TH- CENTURY ITALIAN PANEL PAINTINGS, OVER 5,000 EXAMPLES OF PRE-COLUMBIAN TO 20TH-CENTURY AMERICAN INDIAN ART AND ARTIFACTS, INCLUDING BASKETRY, CERAMICS, AND BEADWORK, AND A LARGE COLLECTION OF AMERICAN AND EUROPEAN PRINTS, DRAWINGS, AND PHOTOGRAPHS IN ADDITION TO SERVING AS THE BASIS FOR EXHIBITIONS, THE COLLECTIONS, WHICH ARE ALWAYS AVAILABLE FOR INDIVIDUAL STUDY AND RESEARCH, ARE FREQUENTLY USED FOR CLASSES THE POMONA COLLEGE MUSEUM OF ART ALSO IS THE SITE OF AN ACTIVE PROGRAM OF TEMPORARY EXHIBITIONS THROUGHOUT THE ACADEMIC YEAR THESE INCLUDE REGULAR FACULTY AND STUDENT SHOWS, AS WELL AS HISTORICAL AND CONTEMPORARY EXHIBITIONS DESIGNED TO COMPLEMENT THE COLLEGES CURRICULA AND TO EXPOSE STUDENTS TO AS WIDE A VARIETY OF WORKS OF ART AS POSSIBLE ALL EXHIBITIONS OPEN WITH PUBLIC RECEPTIONS AND INCLUDE LECTURES AND RELATED PROGRAMS FOR THE COLLEGE COMMUNITY
DISCLOSURE FOR INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4 THE COLLEGES ENDOWMENT CONSISTS OF APPROXIMATELY 1,800 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING BOTH DONOR-RESTRICTED ENDOWMENT FUNDS DESIGNATED BY THE BOARD OF TRUSTEES TO FUNCTION AS ENDOWMENTS THE COLLEGE HAS A POLICY OF APPROPRIATING FOR DISTRIBUTION EACH YEAR 4 5% TO 5 5% OF ITS ENDOWMENT FUNDS' AVERAGE FAIR VALUE OVER THE PRIOR 12 QUARTERS THROUGH THE SEPTEMBER 30TH OF THE PRECEDING FISCAL YEAR IN WHICH THE DISTRIBUTION IS PLANNED THESE FUNDS ARE USED TO FURTHER THE EDUCATIONAL MISSION OF THE COLLEGE
FIN 48 DISCLOSURE	PART X, FIN 48 THE PREPARATION OF FINANCIAL STATEMENTS IN CONFORMITY WITH GAAP PRESCRIBES FOR ALL ENTITIES, INCLUDING PASS-THROUGH ENTITIES, MINIMUM THRESHOLDS FOR FINANCIAL STATEMENT RECOGNITION OF A POSITION TAKEN IN FILING TAX RETURNS (INCLUDING WHETHER AN ENTITY IS TAXABLE IN A PARTICULAR JURISDICTION) AND REQUIRES CERTAIN EXPANDED TAX DISCLOSURES NO SUCH UNCERTAIN TAX POSITIONS EXIST FOR THE COLLEGE AT JUNE 30, 2014 AND 2013 THE COLLEGE FILES INCOME TAX RETURNS IN THE U S FEDERAL AND THE STATE OF CALIFORNIA JURISDICTIONS, AND IS NO LONGER SUBJECT TO FEDERAL AND STATE INCOME TAX EXAMINATION FOR TAX YEARS BEFORE 2008 AND 2007, RESPECTIVELY
REVENUE ON BOOKS NOT ON RETURN	PART XI, LINE 2D Changes in actuarially determined gift liabilities 23,883,916 Unrealized comprehensive gain on staff retirement plan 508,475 Rental Expenses Reported Net on Form 990 322,266 Indirect Cost Adjustment 11,510 ----- Total 24,726,167
REVENUE ON RETURN NOT ON BOOKS	PART XI, LINE 4B Student Financial Aid Reported Gross on Form 990 33,971,825 In-Kind Donation Reported on Form 990 7,448 ----- Total 33,979,273
EXPENSE ON BOOKS NOT ON RETURN	PART XII, 2D Rental Expenses Reported Net on Form 990 322,266

Additional Data

Software ID:
Software Version:
EIN: 95-1664112
Name: Pomona College

Form 990, Schedule D, Part VII - Investments Other Securities

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(3) Other (A) US EQUITY	258,608,564	F
(B) NON US EQUITY	228,910,874	F
(C) EMERGING MARKETS	131,971,262	F
(D) FIXED INCOME	170,016,393	F
(E) VENTURE CAPITAL	241,566,393	F
(F) PRIVATE EQUITY	154,362,992	F
(G) ABSOLUTE RETURN	497,951,193	F
(H) REAL ASSETS	218,191,226	F
(I) OTHER	12,121,602	F

SCHEDULE E
(Form 990 or 990-EZ)

Schools

OMB No 1545-0047

2013

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization
Pomona College

Employer identification number

95-1664112

Part I

1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?

	YES	NO
1	Yes	

2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?

2	Yes	
----------	-----	--

3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space use Part II.

3	Yes	
----------	-----	--

4 Does the organization maintain the following?

a Records indicating the racial composition of the student body, faculty, and administrative staff?

4a	Yes	
-----------	-----	--

b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?

4b	Yes	
-----------	-----	--

c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?

4c	Yes	
-----------	-----	--

d Copies of all material used by the organization or on its behalf to solicit contributions?

4d	Yes	
-----------	-----	--

If you answered "No" to any of the above, please explain. If you need more space, use Part II.

5 Does the organization discriminate by race in any way with respect to

a Students' rights or privileges?

5a		No
-----------	--	----

b Admissions policies?

5b		No
-----------	--	----

c Employment of faculty or administrative staff?

5c		No
-----------	--	----

d Scholarships or other financial assistance?

5d		No
-----------	--	----

e Educational policies?

5e		No
-----------	--	----

f Use of facilities?

5f		No
-----------	--	----

g Athletic programs?

5g		No
-----------	--	----

h Other extracurricular activities?

5h		No
-----------	--	----

If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.

6a Does the organization receive any financial aid or assistance from a governmental agency?

6a	Yes	
-----------	-----	--

b Has the organization's right to such aid ever been revoked or suspended?

6b		No
-----------	--	----

If you answered "Yes" to either line 6a or line 6b, explain on Part II.

7 Does the organization certify that it has complied with the applicable requirements of sections 401 through 405 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II.

7	Yes	
----------	-----	--

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

Return Reference	Explanation
DISCLOSURE FOR SOLICITATION	SCHEDULE E, LINE 3 ALL BROCHURES AND CATALOGS SENT TO THE GENERAL PUBLIC CONTAIN THE COLLEGE'S NONDISCRIMINATORY POLICY. THESE BROCHURES AND CATALOGS ARE AVAILABLE ON CAMPUS FOR INSPECTION.
DISCLOSURE FOR GRANTS RECEIVED FROM GOVERNMENT AGENCIES	SCHEDULE E, PART I, LINE 6A POMONA COLLEGE IS AWARDED GRANTS FROM GOVERNMENT AGENCIES, SUCH AS THE DEPARTMENT OF EDUCATION AND THE CALIFORNIA STUDENT AID COMMISSION, TO PROVIDE FINANCIAL AID TO STUDENTS.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2013

**Open to Public
Inspection**

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

▶ Attach to Form 990. ▶ See separate instructions.

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

Department of the Treasury
Internal Revenue Service

Name of the organization
Pomona College

Employer identification number
95-1664112

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total		5			5,893,566
b Total from continuation sheets to Part I					132,427
c Totals (add lines 3a and 3b)		5			6,025,993

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____

3 Enter total number of other organizations or entities ▶ _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) FINANCIAL AID	Sub-Saharan Africa	8	399,609	CHECK/WIRE		N/A	N/A
(2) FINANCIAL AID	East Asia and the Pacific	14	465,993	CHECK/WIRE		N/A	N/A
(3) FINANCIAL AID	Central America and the Caribbean	3	138,779	CHECK/WIRE		N/A	N/A
(4) FINANCIAL AID	Europe (Including Iceland and Greenland)	5	139,918	CHECK/WIRE		N/A	N/A
(5) FINANCIAL AID	South Asia	3	133,808	CHECK/WIRE		N/A	N/A
(6) FINANCIAL AID	North America	1	58,147	CHECK/WIRE		N/A	N/A
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

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

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	THE FINANCIAL AID PROVIDED BY THE COLLEGE FUNDS THE PROGRAM TUITION, ROOM AND BOARD (WHEN APPLICABLE), WHICH IS CREDITED DIRECTLY TO THE STUDENT ACCOUNT THE STUDENT HAS NO DIRECT ACCESS TO THE PROGRAM FUNDS, THEREFORE, NO ADDITIONAL MONITORING OF THE USE OF FUNDS IS NECESSARY

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 3(F)	ACCOUNTING BASIS FOR REPORTING EXPENDITURES REPORTED IN COLUMN (F) ARE REPORTED IN U S DOLLARS ON THE ACCRUAL BASIS OF ACCOUNTING

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART III, COLUMN (C)	THE NUMBER OF RECIPIENTS REPORTED IN COLUMN (C) IS DETERMINED BY REVIEWING THE EXACT NUMBER OF STUDENTS WHO RECEIVE AID FROM THAT REGION

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART III, COLUMN (D)	ACCOUNTING BASIS FOR REPORTING CASH GRANTS REPORTED IN COLUMN (D) ARE REPORTED IN U S DOLLARS ON THE ACCRUAL BASIS OF ACCOUNTING

Additional Data

Software ID:

Software Version:

EIN: 95-1664112

Name: Pomona College

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Grantmaking	FINANCIAL AID	399,609
East Asia and the Pacific			Grantmaking	FINANCIAL AID	465,993
Central America and the Caribbean			Grantmaking	FINANCIAL AID	138,779

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)			Grantmaking	FINANCIAL AID	139,918
South Asia			Grantmaking	FINANCIAL AID	133,808
North America			Grantmaking	FINANCIAL AID	58,147

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Sub-Saharan Africa			Program Services	STUDY ABROAD DIR EXP	164,009
East Asia and the Pacific			Program Services	STUDY ABROAD DIR EXP	889,465
Central America and the Caribbean			Program Services	STUDY ABROAD DIR EXP	98,495

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Europe (Including Iceland and Greenland)		5	Program Services	STUDY ABROAD DIR EXP	1,971,227
Middle East and North Africa			Program Services	STUDY ABROAD DIR EXP	193,864
South America			Program Services	STUDY ABROAD DIR EXP	344,512

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
South Asia			Program Services	STUDY ABROAD DIR EXP	113,640
Sub-Saharan Africa			Program Services	STUDY ABROAD OTHER EXP	185,820
East Asia and the Pacific			Program Services	STUDY ABROAD OTHER EXP	111,728

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Program Services	STUDY ABROAD OTHER EXP	19,473
Europe (Including Iceland and Greenland)			Program Services	STUDY ABROAD OTHER EXP	465,079
Middle East and North Africa			Program Services	STUDY ABROAD OTHER EXP	23,148

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Russia and the Newly Independent States			Program Services	STUDY ABROAD OTHER EXP	13,695
South America			Program Services	STUDY ABROAD OTHER EXP	30,003
South Asia			Program Services	STUDY ABROAD OTHER EXP	65,581

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2013

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

Name of the organization Pomona College

Employer identification number

95-1664112

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... Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (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. Includes row for MARTS LUNDY INC and a Total row.

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	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	1 Gross receipts				
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				()
11 Net income summary Subtract line 10 from line 3, column (d) ▶					

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))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> 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 _____

.....

.....

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
Part I, Line 2b, column (i)	Marts & Lundy, Inc Address 1200 Wall Street West Lyndhurst, NJ 07071

Schedule I (Form 990)

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

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization Pomona College

Employer identification number

95-1664112

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?
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.

Table with 8 columns: (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) INST AID & GRANTS TO STUDENTS OF POMONA COLLEGE	910	31,988,580		N/A	N/A
(2) OTHER GRANTS AND AWARDS GIVEN TO STUDENTS	528	646,991		N/A	N/A
(3) RESEARCH AWARDS & OTHER STUDENT ASSIST	323	538,550		N/A	N/A

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
SCHEDULE I, PART I, LINE 2	ADMISSION TO POMONA COLLEGE IS ON A NEED BLIND BASIS THIS POLICY IS MAINTAINED TO ACCOMPLISH DIVERSIFICATION OF THE STUDENT BODY REGARDLESS OF THE FINANCIAL STATUS OF THE APPLICANTS A PERMANENT FILE OF ALL STUDENTS WHO ARE RECIPIENTS OF SCHOLARSHIPS AND GRANTS IS MAINTAINED IN THE FINANCIAL AID OFFICE OF POMONA COLLEGE AN ACCOUNTING SYSTEM TRACKS ALL AWARDS TO INDIVIDUAL STUDENTS FOR TUITION AND OTHER COSTS OF ATTENDING THE COLLEGE
SCHEDULE I, PART III	In addition to the \$33,635,571 of grants and other assistance to individuals in the united states that was included in the audited financial statements, an additional \$ 538,550 of financial aid, which includes emergency student assistance, HBD Graduate scholars, national merit scholarships and research awards, is included on Schedule I and Part IX, Statement of Functional Expenses

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2013

Open to Public Inspection

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.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Pomona College

Employer identification number

95-1664112

Part I Questions Regarding Compensation

- 1a** Check the appropriate 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.
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing 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

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- 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

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?
- b** Any related organization?
- If "Yes," to line 5a or 5b, describe in Part III

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

- a** The organization?
- b** Any related organization?
- If "Yes," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued 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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No
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				
See Additional Data Table							

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
FORM 990, SCHEDULE J, PART I, LINE 1A	FORM 990, SCHEDULE J, PART I, LINE 1A HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE PER THE EMPLOYMENT CONTRACTS FOR THE PRESIDENT, VICE PRESIDENT/DEAN OF THE COLLEGE AND DEAN OF STUDENTS, RESIDENCE ON-CAMPUS IS PROVIDED FOR THE CONVENIENCE OF THE EMPLOYER HOUSING FOR THESE LISTED PERSONS IS LOCATED ON THE CAMPUS AND IS REQUIRED AS A CONDITION OF THEIR EMPLOYMENT, THIS IS NOT TREATED AS TAXABLE COMPENSATION PARTS OF THE FACILITIES ARE CARED FOR BY COLLEGE STAFF TO ENSURE READINESS FOR COLLEGE RELATED EVENTS FORM 990, SCHEDULE J, PART I, LINE 1A HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES THE BOARD OF THE COLLEGE REQUIRES THE PRESIDENT TO BE A MEMBER OF A LOCAL CLUB SO THAT BUSINESS MEETINGS MAY BE HELD THERE THERE IS NO PERSONAL USE OF THE MEMBERSHIP BY THE PRESIDENT, THUS NO PART OF THE DUES OR INITIATION FEES ARE TREATED AS TAXABLE COMPENSATION
FORM 990, SCHEDULE J, PART I, LINE 1B	THE ITEMS LISTED ABOVE ARE PROVIDED IN CONNECTION WITH THE EMPLOYMENT CONTRACTS OF THE INDIVIDUALS AS APPROVED BY THE BOARD

Additional Data

Software ID:
Software Version:
EIN: 95-1664112
Name: Pomona 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				
DAVID WOXTOBY PRESIDENT	(i) 425,438 (ii) 0	0 0	41,050 0	29,606 0	66,731 0	562,825 0	0 0
PAMELA BESNARD VP OF ADVANCEMENT	(i) 180,625 (ii) 0	0 0	0 0	14,856 0	32,231 0	227,712 0	0 0
KAREN SISSON VP TREASURER	(i) 275,160 (ii) 0	0 0	0 0	29,539 0	16,953 0	321,652 0	0 0
MIRIAM FELDBLUM VP DEAN OF STUDENTS	(i) 174,284 (ii) 0	0 0	22,500 0	22,260 0	50,356 0	269,400 0	0 0
CHRISTOPHER ALLEN VP DEAN OF ADMISSIONS	(i) 198,292 (ii) 0	0 0	35,949 0	26,468 0	7,682 0	268,391 0	0 0
JANICE HUDGINGS DEAN OF COLLEGE	(i) 124,204 (ii) 0	0 0	0 0	19,435 0	46,486 0	190,125 0	0 0
RICHARD FASS VP OF PLANNING OFFICE	(i) 172,829 (ii) 0	0 0	43,500 0	31,836 0	20,420 0	268,585 0	0 0
ROBERT ROBINSON ASST VP OF FACILITIES	(i) 186,702 (ii) 0	0 0	3,605 0	27,799 0	10,485 0	228,591 0	0 0
MARY LOU WOODS ASST VP/ASSOC TREAS	(i) 177,923 (ii) 0	0 0	0 0	26,714 0	16,095 0	220,732 0	0 0
DEBORAH BURKE PROFESSOR	(i) 220,944 (ii) 0	0 0	0 0	24,990 0	574 0	246,508 0	0 0
GARY SMITH PROFESSOR	(i) 246,655 (ii) 0	0 0	0 0	29,107 0	17,962 0	293,724 0	0 0
GARY KATES PROFESSOR	(i) 179,664 (ii) 0	0 0	35,150 0	24,593 0	18,516 0	257,923 0	0 0
ELEANOR BROWN PROFESSOR	(i) 170,985 (ii) 0	0 0	40,500 0	24,019 0	10,503 0	246,007 0	0 0
STEVE ERICKSON PROFESSOR	(i) 209,539 (ii) 0	0 0	0 0	23,919 0	16,975 0	250,433 0	0 0

**Schedule K
(Form 990)**

Supplemental Information on Tax Exempt Bonds

OMB No 1545-0047

2013

**Open to Public
Inspection**

▶ **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.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Pomona College

Employer identification number

95-1664112

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
							Yes	No	Yes	No	Yes	No
A	California Educational Facilities Authority	52-1705592	130175W99	02-04-2005	41,879,739	Campus fac, iss Cost & refunding		X		X		X
B	California Educational Facilities Authority	52-1705592	130178NN2	06-26-2008	59,475,000	Educ fac & costs of iss Of bond		X		X		X
C	California Educational Facilities Authority	52-1705592	130178SE7	04-20-2009	62,290,000	Educ fac & Partial refunding		X		X		X
D	California Educational Facilities Authority	52-1705592	130178B88	07-12-2011	7,914,174	Refunding of remaining 2001 Bonds		X		X		X

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired	0		0		0		1,185,000	
2	Amount of bonds legally defeased	0		0		0		0	
3	Total proceeds of issue	42,565,205		64,248,356		67,960,259		8,034,728	
4	Gross proceeds in reserve funds	0		0		0		0	
5	Capitalized interest from proceeds	0		0		0		0	
6	Proceeds in refunding escrows	0		0		0		0	
7	Issuance costs from proceeds	576,345		739,587		888,077		158,283	
8	Credit enhancement from proceeds	0		0		0		0	
9	Working capital expenditures from proceeds	0		0		0		0	
10	Capital expenditures from proceeds	25,785,275		63,508,769		0		0	
11	Other spent proceeds	16,203,585		0		67,072,182		7,876,445	
12	Other unspent proceeds	0		0		0		0	
13	Year of substantial completion	2008		2011		2011		2011	
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X		X	X			X
15	Were the bonds issued as part of an advance refunding issue?	X			X	X		X	
16	Has the final allocation of proceeds been made?	X		X		X		X	
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X	

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		X
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X		X		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		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		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 %		0 %		0 %	
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %		0 %		0 %		0 %	
6 Total of lines 4 and 5	0 %		0 %		0 %		0 %	
7 Does the bond issue meet the private security or payment test?		X		X		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		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		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		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			X		X
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X				X		X
b Exception to rebate?		X				X	X	
c No rebate due?	X				X			X
If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X		X		X		X
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		X		X		X		X
b Name of provider	0		0		0			
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?	X		X			X		X
b Name of provider	AIG		FSA		0		0	
c Term of GIC	3 8		3 2					
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?	X		X					
6 Were any gross proceeds invested beyond an available temporary period?	X			X		X		X
7 Has the organization established written procedures to monitor the requirements of section 148?	X		X		X		X	

Part V Procedures To Undertake Corrective Action

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

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

Return Reference	Explanation
PART I, ROW A, COLUMN (F)	\$16,203,586 OF THE PROCEEDS OF THE 2005A BONDS WERE USED TO ADVANCE REFUND \$14,870,000 IN PRINCIPAL OF 1999B BONDS

Return Reference	Explanation
PART I, ROW C, COLUMN (F)	\$5,987,106 OF THE PROCEEDS OF THE 2009 BONDS WERE USED TO ADVANCE REFUND \$5,825,000 OF THE 1999 BONDS \$27,048,890 OF THE PROCEEDS OF THE 2009 BONDS WERE USED TO CURRENT REFUND \$27,040,000 OF THE 2005B BONDS \$34,036,186 OF THE PROCEEDS OF THE 2009 BONDS WERE USED TO CURRENT REFUND \$34,025,000 OF THE 2008B BONDS

Return Reference	Explanation
PART I, ROW D, COLUMN (F)	\$7,740,674 OF THE PROCEEDS OF THE 2011 BONDS WERE USED TO CURRENT REFUND \$7,700,000 OF THE 2001 BONDS

Return Reference	Explanation
PART II, ROW 3, COLUMN (A THRU D)	THE DIFFERENCE BETWEEN THE ISSUE PRICE LISTED IN PART I, COLUMN (E) IS DUE TO INTEREST EARNINGS ON BOND PROCEEDS

Return Reference	Explanation
PART IV, LINE 2C, COLUMN (A)	6/16/10

Return Reference	Explanation
PART IV, LINE 2C, COLUMN (C)	6/17/11

**Schedule K
(Form 990)**

Supplemental Information on Tax Exempt Bonds

OMB No 1545-0047

2013

**Open to Public
Inspection**

▶ **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.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Pomona College

Employer identification number

95-1664112

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A California Municipal Finance Authority	20-1563466		06-26-2014	24,937,500	NEW CONSTRUCTION		X		X		X

Part II Proceeds

	A	B	C	D
1 Amount of bonds retired	0			
2 Amount of bonds legally defeased	0			
3 Total proceeds of issue	24,937,500			
4 Gross proceeds in reserve funds	0			
5 Capitalized interest from proceeds	0			
6 Proceeds in refunding escrows	0			
7 Issuance costs from proceeds	0			
8 Credit enhancement from proceeds	0			
9 Working capital expenditures from proceeds	0			
10 Capital expenditures from proceeds	799,763			
11 Other spent proceeds	137,737			
12 Other unspent proceeds	24,000,000			
13 Year of substantial completion				
	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?		X		
15 Were the bonds issued as part of an advance refunding issue?		X		
16 Has the final allocation of proceeds been made?		X		
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X			

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		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						
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						
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 %						
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 %						
6 Total of lines 4 and 5		0 %						
7 Does the bond issue meet the private security or payment test?		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						
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						
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							

Part IV Arbitrage

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

Part IV Arbitrage (Continued)

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

Part V Procedures To Undertake Corrective Action

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

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

Schedule L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047

2013

Open to Public Inspection

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

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

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

Name of the organization Pomona College

Employer identification number

95-1664112

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

Table with 4 columns: (a) Name of disqualified person, (b) Relationship between disqualified person and organization, (c) Description of transaction, (d) Corrected? (Yes/No)

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

Table with 9 columns: (a) Name of interested person, (b) Relationship with organization, (c) Purpose of loan, (d) Loan to or from the organization (To/From), (e) Original principal amount, (f) Balance due, (g) In default? (Yes/No), (h) Approved by board or committee? (Yes/No), (i) Written agreement? (Yes/No)

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

Table with 5 columns: (a) Name of interested person, (b) Relationship between interested person and the organization, (c) Amount of assistance, (d) Type of assistance, (e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Claire Oxtoby	Wife of President	53,014	SALARY AND BENEFITS		No

Part V Supplemental Information

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

Return Reference	Explanation
------------------	-------------

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No 1545-0047
2013
Open to Public Inspection

▶ **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.**

Name of the organization
Pomona College

Employer identification number
95-1664112

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	X	5	0	APPRAISAL
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	87	4,198,509	avg price val date
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 ▶ (COMPUTER EQUIPMENT)	X	16	7,448	RETAIL VALUE
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?		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?	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	Yes	
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
NUMBER OF CONTRIBUTIONS OR ITEMS CONTRIBUTED	SCHEDULE M, PART I, COLUMN (B) COLUMN B REFLECTS THE NUMBER OF ITEMS RECEIVED FROM VARIOUS CONTRIBUTORS, EXCEPT IN THE CASE OF SECURITIES, WHICH REFLECTS THE NUMBER OF CONTRIBUTORS
USE OF THIRD PARTIES OR RELATED ORGANIZATIONS FOR NONCASH CONTRIBUTIONS	SCHEDULE M, LINE 32B ANY GIFT OF UNNEEDED PERSONAL OR REAL PROPERTY IS SOLD BY PROFESSIONAL REPRESENTATIVES BROKERS ARE USED TO FACILITATE THE SALE OF SECURITIES
TYPES OF PROPERTY RECEIVED FOR NONCASH CONTRIBUTIONS	SCHEDULE M, LINE 33 THE COLLEGE FOLLOWS A POLICY TO NOT RECORD OR CAPITALIZE ITS COLLECTIONS THE COLLEGE'S ART COLLECTIONS CONSIST OF OBJECTS OF HISTORICAL AND AESTHETIC SIGNIFICANCE HELD FOR PUBLIC EXHIBITION AND EDUCATIONAL PURPOSES ALL WORKS IN THE COLLECTION ARE CATALOGUED, PRESERVED, CARED FOR AND MONITORED ACCORDING TO PROFESSIONAL MUSEUM STANDARDS, AND ARE SUBJECT TO A POLICY THAT REQUIRES PROCEEDS FROM DE-ACCESSION TO BE USED EXCLUSIVELY FOR ACQUISITION

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.**

2013

**Open to Public
Inspection**

Name of the organization
Pomona College

Employer identification number

95-1664112

Return Reference	Explanation	
	DESCRIPTION OF ORGANIZATION MISSION	<p>FORM 990, PART III, LINE 1 This experience will continue to guide their contributions as the next generation of leaders, scholars, artists, entrepreneurs and citizens to fulfill the vision of Pomona's founders to bear their added riches in trust for all PROGRAM SERVICE FORM 990, PART III, LINE 4A, CONTINUED POMONA GRADUATES NOT ONLY RECEIVE EXCELLENT LIFELONG PREPARATION FOR A WIDE RANGE OF CAREERS, BUT ALSO ARE ENCOURAGED TO DEVELOP THE RATIONAL DISCRIMINATION, AESTHETIC APPRECIATION, COMPASSION, AND UNDERSTANDING THAT ONLY KNOWLEDGE CAN FOSTER POMONA WAS RANKED #8 ON FORBES 2014 LIST OF AMERICA'S TOP COLLEGES AND #6 ON THE 2014 U.S. NEWS AND WORLD REPORT RANKINGS FOR TOP LIBERAL ARTS COLLEGES POMONA OFFERS 47 MAJORS IN THE NATURAL SCIENCES, HUMANITIES, SOCIAL SCIENCES FINE ARTS, AND INTERDISCIPLINARY FIELDS ALSO COMMON ARE DOUBLE MAJORS AND INDIVIDUAL SPECIAL MAJORS, CRAFTED BY THE STUDENT WITH GUIDANCE FROM FACULTY FIRST-YEAR STUDENTS DELVE INTO A CRITICAL INQUIRY SEMINAR TO DEVELOP SKILLS IN CRITICAL THINKING, ANALYSIS AND WRITING POMONA'S SUMMER UNDERGRADUATE RESEARCH PROGRAM ENABLES STUDENTS TO CONDUCT EXTENDED, FOCUSED RESEARCH IN CLOSE COOPERATION WITH A POMONA FACULTY MEMBER, WITH PROJECTS TAKING PLACE BOTH ON CAMPUS AND IN THE FIELD THE COLLEGE OFFERS APPROXIMATELY 600 CLASSES EACH YEAR, AND STUDENTS ALSO HAVE ACCESS TO THE MORE THAN 2,200 CLASSES AT THE CLAREMONT COLLEGES FORM 990, PART III, LINE 4B, CONTINUED POMONA PROVIDES SELF-OPERATED DINING AND CATERING SERVICES AT THREE DINING HALLS POMONA'S GOAL IS TO SERVE FOOD THAT IS HEALTHY, FRESH AND DELICIOUS AND THAT IS PRODUCED IN A JUST AND SUSTAINABLE MANNER THE INSTRUCTIONAL AND EXTRA-CURRICULAR PROGRAMS ARE FURTHER SUPPORTED BY BRIDGES AUDITORIUM, A PERFORMING ARTS CENTER THAT SEATS 2,500, AND SEAVER THEATRE, A COMPREHENSIVE THEATRE COMPLEX FEATURING A 350-SEAT AUDITORIUM AND 100-SEAT EXPERIMENTAL THEATRE SPACE ATHLETIC FACILITIES INCLUDE THE LILLIORE GREEN RAINS CENTER FOR SPORT AND RECREATION, THE HALDEMAN AQUATICS CENTER, AND FIELDS FOR SOFTBALL, BASEBALL, TRACK, SOCCER, FOOTBALL AND MORE POMONA COLLEGE HAS MADE SIGNIFICANT INVESTMENTS TO MAKE THE CAMPUS MORE SUSTAINABLE, INCLUDING BUILDING THE FIRST LEED-PLATINUM LARGE-SCALE RESIDENCE HALLS IN THE WEST, TO INSTALLING SOLAR ENERGY AND REMOVING IMPERMEABLE SURFACES AND REPLACING THEM WITH DROUGHT RESISTANT LANDSCAPING AND PERMEABLE GROUND COVER THE COLLEGE HAS PLEDGED TO BE CARBON-NEUTRAL BY 2030 AS PART OF THE AMERICAN COLLEGES AND UNIVERSITIES PRESIDENTS' CLIMATE COMMITMENT (ACUPCC) FORM 990, PART III, LINE 4C, CONTINUED THE COLLEGE ALSO ASSISTS STUDENTS WITH ORIENTATION, REGISTRATION AND ACADEMIC COUNSELING FROM THEIR FIRST YEAR AT POMONA, STUDENTS CAN TURN TO THE CAREER DEVELOPMENT OFFICE, WHICH PROVIDES HELP WITH EVERYTHING FROM RESUME WRITING TO MOCK INTERVIEWS STUDENTS ALSO CAN APPLY FOR THE CDO'S PROGRAM OF SUMMER INTERNSHIPS IN THE U.S. AND ABROAD THE CLAREMONT COLLEGES' STUDENT HEALTH SERVICE STRESSES PREVENTATIVE MEDICINE AND HEALTH AWARENESS, WHILE MONSIEUR COUNSELING AND PSYCHOLOGICAL SERVICES HELP STUDENTS WITH PERSONAL AND EMOTIONAL PROBLEMS THE INTERFAITH OFFICE OF THE CHAPLAINS DIRECTS THE PROGRAMS OF THE CLAREMONT COLLEGES' MCALESTER CENTER FOR RELIGIOUS ACTIVITIES, ASSISTING STUDENTS IN MAKING CONTACT WITH MEMBERS OF THEIR COMMUNITY OF BELIEF WORKING CLOSELY WITH STUDENTS, FACULTY AND STAFF, THE DIVISION OF STUDENT AFFAIRS AIMS TO PROVIDE SERVICES, ACTIVITIES, AND RESOURCES THAT SUPPORT THE COLLEGE'S EDUCATIONAL ENTERPRISE AND ENABLE EACH STUDENT TO LEARN, GROW, AND DEVELOP WHILE HERE AT POMONA FORM 990, PART III, LINE 4D Other-Public Service, Institutional Support, Academic Support IN ORDER TO FACILITATE OUR PRIMARY PROGRAM SERVICE OF INSTRUCTION AND RESEARCH, POMONA COLLEGE PROVIDES INSTITUTIONAL SUPPORT THROUGH OUR BUSINESS OFFICE, ALUMNI RELATIONS, INFORMATION TECHNOLOGIES, COMMUNICATIONS, MAJOR GIFTS/GIVING AND STAFF EDUCATIONAL SUPPORT TO KEEP OUR STAFF INFORMED OF NEW AND DEVELOPING WAYS TO ADVANCE OUR PRIMARY MISSION POMONA'S ACADEMIC SUPPORT RESOURCES OFFER EXPERT PEER INSTRUCTION TO HELP DEVELOP STRATEGIC LEARNING SKILLS, ASSIST IN ACHIEVING PERSONAL INTELLECTUAL POTENTIAL, AND PROMOTE LEADERSHIP AND SERVICE LEARNING OPPORTUNITIES THROUGH THE PEER FELLOWS PROGRAM ACADEMIC SUPPORT CENTERS INCLUDE THE WRITING CENTER, THE QUANTITATIVE SKILLS CENTER, THE FOREIGN LANGUAGE RESOURCE CENTER AND THE LEARNING FELLOWS PROGRAM THE HONNOLD/MUDD LIBRARY PARTNERS WITH POMONA COLLEGE AS WELL AS THE OTHER CLAREMONT COLLEGES IN SUPPORTING LEARNING, TEACHING, AND RESEARCH THE LIBRARY TIES THE ACADEMIC COMMUNITY TO VARIED CULTURAL AND SCHOLARLY TRADITIONS BY OFFERING USER-CENTERED SERVICES, BUILDING COLLECTIONS, DEVELOPING INNOVATIVE TECHNOLOGIES, AND PROVIDING AN INVITING ENVIRONMENT FOR STUDY, COLLABORATION, AND REFLECTION THE LIBRARY'S GENERAL COLLECTIONS INCLUDE NEARLY 2 MILLION VOLUMES THE LIBRARY ALSO HAS EXTENSIVE HOLDINGS OF JOURNALS, MAGAZINES, AN</p>

Return Reference	Explanation	
	DESCRIPTION OF ORGANIZATION MISSION	D NEWSPAPERS, PROVIDING ACCESS TO ARTICLES IN OVER 70,000 PERIODICALS TEACHING FROM ORIGINAL WORKS OF ART IS CENTRAL TO THE MISSION AT THE POMONA COLLEGE MUSEUM OF ART THROUGHOUT THE ACADEMIC YEAR THE MUSEUM OFFERS A VARIETY OF EDUCATIONAL PROGRAMS HIGHLIGHTING THE EX HIBITIONS AND COLLECTIONS OF THE MUSEUM AND CONNECTING OUR STUDENTS WITH THE ARTS AND CONC ERNS OF OUR TIME POMONA COLLEGE FACULTY USES THE MUSEUM, ITS EXHIBITIONS, AND ITS COLLECT IONS AS A RESOURCE FOR TEACHING, AND AS A SUBJECT FOR RESEARCH AND WRITING THE DRAPER CEN TER FOR COMMUNITY PARTNERSHIPS IS THE COLLEGE'S MAIN AVENUE FOR FOSTERING MUTUALLY BENEFIC IAL EXCHANGES AMONG COMMUNITY MEMBERS, STUDENTS, FACULTY AND STAFF IN ORDER TO SUPPORT EDU CATIONAL OUTREACH INITIATIVES, COMMUNITY-BASED RESEARCH AND LEARNING, AND OTHER COMMUNITY ENGAGEMENT ACTIVITIES STUDENTS CAN EXPLORE AN ASSORTMENT OF COMMUNITY AND VOLUNTEER OPPOR TUNITIES THROUGH THE DRAPER CENTER, INCLUDING COLLABORATIVE THEATRE WITH LOCAL MIDDLE-SCHO OL STUDENTS, FOOD RESCUE FOR LOCAL SHELTERS, EDUCATIONAL OUTREACH, VOLUNTEERING DURING SPR ING BREAK AND TAKING CLASSES WITH COMMUNITY COLLABORATION

Return Reference	Explanation
REVIEW OF FORM 990	FORM 990, PART VI, SECTION B, LINE 11 THE INFORMATIONAL RETURN IS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND IS INITIALLY REVIEWED BY THE ASST VICE PRESIDENT/ASSOC TREASURER AFTER PRELIMINARY REVIEW BY THE ASST VICE PRESIDENT/ASSOC TREASURER, THE RETURN IS REVIEWED AT THE AUDIT COMMITTEE MEETING THE RETURN IS THEN PROVIDED TO THE FULL BOARD FOR REVIEW PRIOR TO ELECTRONIC FILING

Return Reference	Explanation
CONFLICT OF INTEREST	FORM 990, PART VI, SECTION B, LINE 12C THE BOARD OF TRUSTEES ("THE BOARD") OF POMONA COLLEGE HAS INCORPORATED ITS CODE OF CONDUCT AND CONFLICT OF INTEREST POLICIES INTO ITS BYLAWS THE AUDIT COMMITTEE ("THE COMMITTEE") OF THE BOARD MONITORS ENFORCEMENT OF AND COMPLIANCE WITH THE CODE AND THE POLICIES, AND REPORTS THE RESULTS THEREOF TO THE BOARD THE COMMITTEE MONITORS COMPLIANCE BY MEANS OF AN ANNUAL CODE OF CONDUCT QUESTIONNAIRE IN MAY, THE COLLEGE DISTRIBUTES THE QUESTIONNAIRE TO ALL TRUSTEES, OFFICERS, FACULTY PROGRAM COORDINATORS AND DEPARTMENT CHAIRS AND STAFF AT THE DIRECTOR LEVEL AND ABOVE THE PRESIDENT'S OFFICE COLLECTS THE COMPLETED QUESTIONNAIRES AND COMPILES THE RESULTS, INCLUDING IDENTIFYING NEGATIVE RESPONSES AND ACCOMPANYING EXPLANATIONS IN OCTOBER, AN EXECUTIVE SUMMARY OF THE RESULTS ARE PROVIDED TO THE COMMITTEE, AND THE COMMITTEE REPORTS THOSE RESULTS TO THE BOARD HOWEVER, THROUGHOUT THE ANNUAL QUESTIONNAIRE DISTRIBUTION, COLLECTION AND COMPILATION PROCESS, ANY URGENT AND HERETOFORE UNKNOWN MATTERS IDENTIFIED BY QUESTIONNAIRE RESPONDENTS ARE ESCALATED IMMEDIATELY TO THE APPROPRIATE MEMBERS OF THE BOARD AND MANAGEMENT

Return Reference	Explanation
PROCESS OF DETERMINING COMPENSATION	<p>FORM 990, PART VI, SECTION B, LINE 15 THE COLLEGE HAS IMPLEMENTED PROCEDURES TO FAIRLY COMPENSATE EMPLOYEES OF THE COLLEGE AND PROVIDE AN APPROPRIATE PROCESS FOR SETTING AND APPROVING REASONABLE LEVELS OF COMPENSATION FOR INDIVIDUALS WHO ARE IN A POSITION TO EXERCISE SUBSTANTIAL INFLUENCE OVER THE AFFAIRS OF THE COLLEGE, SUCH AS THE PRESIDENT, VP PLANNING, TREASURER, DEAN OF FACULTY, DEAN OF STUDENTS, VP DEAN OF ADMISSIONS, VP ADVANCEMENT, ASSISTANT VP FACILITIES/CAMPUS SERVICES, ASSISTANT VP/ASSOC TREASURER AND PROFESSORS CONSIDERED AS KEY EMPLOYEES THESE PROCEDURES PROVIDE FOR REVIEW AND APPROVAL BY the executive committee consisting of INDEPENDENT TRUSTEES, USE OF COMPARABILITY DATA, AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION THE EXECUTIVE COMMITTEE OF THE BOARD, ACTING AS THE COMPENSATION COMMITTEE, UTILIZES BENCHMARK SALARY DATA FROM COMPARABLE HIGHER EDUCATION INSTITUTION GROUPS FOR EXECUTIVE MANAGEMENT POSITIONS THE INITIAL PROCESS IN DETERMINING COMPENSATION LEVELS CONSISTS OF GATHERING COMPENSATION DATA OF PEER GROUP INSTITUTIONS, WHICH IS AVAILABLE FROM SUBSCRIBED SURVEY DATA SOURCES THE SALARY MEDIANS OF THE COMPARABLE EDUCATION INSTITUTION GROUPS WILL INFORM THE COMMITTEE AND BE USED AS GUIDES THE COMMITTEE WILL ALSO REVIEW SALARY IN RELATION TO LOCAL AND NATIONAL INFLATION MEASURES, INDIVIDUAL PERFORMANCE, AS EVIDENCED BY THE ANNUAL WRITTEN PERFORMANCE EVALUATIONS, AND THE INDIVIDUAL'S LENGTH OF SERVICE IN THE POSITION SALARY INCREASE RECOMMENDATIONS ARE APPROVED BY THIS COMMITTEE DURING THE MAY BOARD OF TRUSTEES REGULAR MEETING THE MINUTES INCLUDE THE TERMS OF THE TRANSACTIONS AND THE DATE APPROVED, THE MEMBERS OF THE COMMITTEE PRESENT FOR THE DELIBERATIONS AND WHO VOTED, AND THE DESCRIPTION OF THE COMPARABILITY DATA OBTAINED AND HOW IT WAS OBTAINED THIS PROCESS WAS LAST UNDERTAKEN AND COMPLETED FOR ALL EXECUTIVE POSITIONS IN MAY 2013</p>

Return Reference	Explanation
DISCLOSURE OF DOCUMENTS	FORM 990, PART VI, SECTION C, LINE 19 THE POLICY OF POMONA COLLEGE IS TO MAKE ITS GOVERNING DOCUMENTS, INCLUDING THE ARTICLES OF INCORPORATION AND BYLAWS, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC WHEN REQUESTED

Return Reference	Explanation
OTHER CHANGES IN NET ASSETS	FORM 990, PART XI, LINE 9 Changes in actuarially determined gift liabilities 23,883,916 Unrealized comprehensive gain on staff retirement 508,475 INDIRECT COST ADJUSTMENT 11,510 ----- Total Change 24,403,901

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2013

Open to Public Inspection

- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
- ▶ **Attach to Form 990.** ▶ **See separate instructions.**
- ▶ **Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.**

Department of the Treasury
Internal Revenue Service

Name of the organization
Pomona College

Employer identification number

95-1664112

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) CLAREMONT UNIVERSITY CONSORTIUM 100 S MILLS AVE CLAREMONT, CA 91711 95-4786748	SUPPORT UNIV	CA	501(C)(3)	11A	NA		No

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) Charitable Remainder Trust (119)	CRT	CA	NA	Trust	0	0	0 %	Yes	
(2) Pooled Income Fund (2)	Pooled Interest	CA	NA	Trust	0	0	0 %	Yes	

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)

- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)

- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses

- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e		No
1f		No
1g	Yes	
1h		No
1i		No
1j		No
1k	Yes	
1l	Yes	
1m	Yes	
1n		No
1o		No
1p	Yes	
1q	Yes	
1r	Yes	
1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) CHARITABLE REMAINDER TRUSTS	C	396,240	CASH& STOCK REC
(2) CHARITABLE GIFT ANNUITIES	R	2,103,131	CASH PAID

Part VII Supplemental Information

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

Return Reference**Explanation**

Form **4562**
 Department of the Treasury
 Internal Revenue Service (99)

Depreciation and Amortization
 (Including Information on Listed Property)

OMB No 1545-0172
2013
 Attachment
 Sequence No **179**

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

Name(s) shown on return Pomona College	Business or activity to which this form relates CONFERENCE AND FACILITY RENTAL	Identifying number 95-1664112
---	---	---

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	147,080

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 <input type="checkbox"/>		

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	147,080
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? 24b If "Yes," is the evidence written? 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) 26 Property used more than 50% in a qualified business use 27 Property used 50% or less in a qualified business use 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1

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

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 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)

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 44 Total. Add amounts in column (f) See the instructions for where to report