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DLN: 93493134002316

OMB No 1545-0047

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

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www.IRS.gov/form990

Open to Public Inspection

A Fo	or the 20	014 cal	endar year, or tax year beginning 07-01-2014 , and ending 06-30-2015					
	eck if app		C Name of organization		D Emplo	yer ide	ntification number	
	dress cha		NAZARETH COLLEGE OF ROCHESTER			•		
	me chang	_				743088	8	
_			Doing business as					
•	tıal return		Number and street (or P O box if mail is not delivered to street address) Room/suit	e .	E Telepho	one num	ber	
Fir ret	nal :urn/termi	ınated	4245 EAST AVENUE		(585)	389-2	525	
☐ An	nended re	turn	City or town, state or province, country, and ZIP or foreign postal code					
	plication p		ROCHESTER, NY 14618		G Gross r	eceipts	109,699,190	
, ,,	pileation	zenanig	F. Names and address of monages left and					
			F Name and address of principal officer DAAN BRAVEMAN		Is this a group subordinates?		for	
			4245 EAST AVENUE		suborumates.		1 1631 110	
			ROCHESTER,NY 14618		Are all subord	ınates	┌ Yes ┌ No	
	ax-exemp	t ctatus	✓ 501(c)(3)		included?	. a liat	(cooungtructions)	
	<u> </u>				ir No, attach	i a iist	(see instructions)	
J W	ebsite:	► WW	/W NAZ EDU	H(c)	Group exempt	ion nur	mber 🟲	
K For	m of orga	nızatıon	✓ Corporation Trust Association Other ►	L Yea	r of formation 19	924 M	State of legal domicile NY	
Pa	rt I	Sum	mary				-	
	1 Br	riefly de	escribe the organization's mission or most significant activities					
	N.	AZÁRE	TH COLLEGE OF ROCHESTER IS A COEDUCATIONAL, INDEPENDE					
			: TO THEIR POTENTIAL WITH A LIBERAL ARTS AND SCIENCES FO ENTIAL LEARNING, AND INNOVATIVE CURRICULUM THAT ADDRE:					
9		HE WO	,	3323 1	THE CORRENT	ANDL	MERGING NEEDS OF	
Ē	_							
ell e	-							
Governance	, -	hack th	nis box 📭 if the organization discontinued its operations or disposed o	f more t	han 25% of its	net ac	cate	
	-	neck ti	is box F ₁ in the organization discontinued its operations of disposed of	i illore c	11411 25 70 01 103	i iict as	3613	
Activities &	3 N	umber	of voting members of the governing body (Part VI, line 1a)			з	32	
幫	4 N	umber	of independent voting members of the governing body (Part VI, line 1b)			4	31	
ទ្ឋ	5 To	otal nu	mber of individuals employed in calendar year 2014 (Part V, line 2a) .			5	2,225	
•	6 T	otal nu	mber of volunteers (estimate if necessary)			6	323	
	7a ⊤o	otal uni	related business revenue from Part VIII, column (C), line 12			7a	87,294	
	b N	et unre	lated business taxable income from Form 990-T, line 34			7b	49,716	
					Prior Year		Current Year	
	8	Contri	butions and grants (Part VIII, line 1h)	II, line 1h)				
Revenue	9	Progra	m service revenue (Part VIII, line 2g)		87,627,	886	91,569,340	
ЭÆ	10	Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)		5,708,	781	7,283,346	
立	11	Other	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,076,	633	952,845	
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		108,464,	846	106,417,627	
	13		s and similar amounts paid (Part IX, column (A), lines 1–3)		21,750,		23,324,536	
	14		ts paid to or for members (Part IX, column (A), line 4)		21,730,	0	23,324,330	
	15		es, other compensation, employee benefits (Part IX, column (A), lines					
83	13	5-10)			39,948,	649	41,369,405	
Expenses	16a	Profes	sional fundraising fees (Part IX, column (A), line 11e)		86,	163	116,708	
₹	Ь	Total fu	ndraising expenses (Part IX, column (D), line 25) 🛌 1,416,419					
ш	17	Othor	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		31,513,	537	31,398,549	
			expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		93,298,		96,209,198	
	19		ue less expenses Subtract line 18 from line 12		15,165,		10,208,429	
- or		T(C V CII	de less expenses subtrace line to nom line 12		inning of Curre			
Not Assets or Fund Balances					Year		End of Year	
988 988	20	Total	assets (Part X, line 16)		243,054,	586	245,220,493	
# <u>E</u>	21	Total I	labilities (Part X, line 26)		70,875,	739	71,195,832	
z:Z	22	Net as	sets or fund balances Subtract line 21 from line 20		172,178,	847	174,024,661	
Pa	rt II	Sign	ature Block					
my k	nowledg	je and i	perjury, I declare that I have examined this return, including accompany belief, it is true, correct, and complete Declaration of preparer (other the nowledge					
		****	**		2016-05-12			
Sigi	n	Signa	ature of officer		Date			
Her			ICK E RICHEY VP FOR FINANCE & ADMINISTRATIO					
		Туре	or print name and title					
	I		rint/Type preparer's name Preparer's signature Da	ate	Check I if	PTIN P01378	3913	
Pai	d		irm's name ► BONADIO & CO LLP		self-employed Firm's EIN 🟲 1			
Pre	parer	•						
	e Only		irm's address ► 171 SULLYS TRAIL SUITE 201		Phone no (585	5) 381-10	000	
			PITTSFORD, NY 14534					
May	the IRS	discus	ss this return with the preparer shown above? (see instructions)				✓ Yes No	

Total program service expenses ▶

4e

FOIII	1990 (2014)							Page ∠
Par	Statement o Check if Sched	of Program Servule O contains a res	•		art III			
1	Briefly describe the o	rganızatıon's mıssıo	n					
ART BY I MEA STU	MISSION OF NAZARE S, SCIENCES, VISUAL NTELLECTUAL, ETHIC NINGFUL CAREERS, A DENTS WHO WANT TO DEVELOP THE UNDERSES	AND PERFORMING AL, SPIRITUAL, AN ND TO INSPIRE D MAKE A DIFFERE	G ARTS, AND P ND AESTHETIC EDICATION TO NCE IN THEIR	ROFESSIONAL FI C VALUES, TO DEN O THE IDEAL OF S OWN WORLD AND	ELDS, FOSTER /ELOP SKILLS ERVICE TO TH THE WORLD A	ING COMMITM NECESSARY FO HEIR COMMUN: ROUND THEM,	ENT TO A LIFE OR THE PURSU ITIES NAZARI AND ENCOUR	E INFORMED IIT OF ETH SEEKS AGES THEM
2	Did the organization u the prior Form 990 or	990-EZ?						√ No
	If "Yes," describe the							
3	Did the organization coservices?							; ▼ No
	If "Yes," describe the	se changes on Sche	dule O					
4	Describe the organiza expenses Section 50 the total expenses, an	1(c)(3) and 501(c)(4) organization	s are required to re		•	•	•
4a	(Code) (Expenses \$	31,878,762	ıncludıng grants of \$) (Revenue \$	76,800,4	48)
	HIGHER EDUCATION INST UNDERGRADUATE, GRADI AND SCHOOLS OF EDUCA	JATE, AND CONTINUING	EDUCATION LEVEL	S PROGRAMS OF STUD	Y ARE DELIVERED	THROUGH THE COL) SCIENCES,
	(Code) (Expenses \$	23,324,536	including grants of \$	23 324	536) (Revenue \$)
70	SCHOLARSHIP PROGRAMS GRANTS AWARDED TO ST	S SCHOLARSHIPS AND G	GRANTS-REFLECTS	THE COMPETITIVE SCH	OLARSHIPS, NEED	BASED AID, AND HI		OPPORTUNITY
_	(0.1	\	11 072 511) (D +	44 200 0	42.)
4 c	(Code AUXILIARY ENTERPRISES-) (Expenses \$	11,972,514	,	TO FUDNICULA CEI) (Revenue \$	14,386,0	•
	CHARGE A FEE THAT IS D ESSENTIALLY SELF-SUPPO	IRECTLY RELATED TO, A	LTHOUGH NOT NE	CESSARILY EQUAL TO, T	HE COST OF THE S	ERVICE AUXILIARY	ENTERPRISES ARE	MANAGED AS
	See Additional Data							
	Other program service	ces (Describe in Sch	nedule O)					
	(Expenses \$	18,162,187 in	•	of\$) (Rever	nue \$	1,116,737)	

85,337,999

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🥵	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	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? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		Νo
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			1
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Νo
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	Check if Schedule O contains a response or note to any line in this Part V			_
	Check it Schedule O contains a response of note to any line in this Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 4,045			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
ь	If "Yes," enter the name of the foreign country FR, SP			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	F-		
6-	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
	organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Оа		NO
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
ь	services provided to the payor?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to		103	
d	file Form 8282?	7 c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
0-		8 9a		
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Check if Schedule O contains a response or note to	e to any line in this Part VI	

Se	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		Νο
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Yes	
b 11a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
b 11a b 12a	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a b c	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a b c 13 14	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13	Yes Yes Yes	No
b 11a b 12a c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15	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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No

(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)

- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, address, and telephone number of the person who possesses the organization's books and records 20 ►PATRICK E RICHEY

4245 EAST AVENUE ROCHESTER, NY 14618 (585) 389-2525

Form 990 (2014)	
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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

- ♣ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - ◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(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-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or chiector	2/1099-MISC)	2/1099-MISC)	organization and related organizations

Form **990** (2014)

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				unless officer stee)	1	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

1b	Sub-Total	Ŧ			
c	Total from continuation sheets to Part VII, Section A	۰			
d	Total (add lines 1b and 1c)	►	1,866,241	0	235,501

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization►33

			Yes	No				
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No				
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual							
	marviadar	4	Yes					
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person			1				
	services relidered to the organization. If Test, complete schedule Froi such parson	5		Νo				

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
HARTER SECREST & EMERY LLP 1600 BAUSCH LOMB PL ROCHESTER, NY 14604	LEGAL SERVICES	245,950
	<u> </u>	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►1

Part VI	• • •	Statement o	f Revenue ule O contains a respor	aco or noto to any lir	o in this Part VIII			
		CHECK II SCHEOL	are o contains a respon	ise of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
0	1a	Federated cam	paigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	b	Membership du	es 1b					
B 2	c	Fundraising eve		40,895				
<u>~</u> `₹	_							
<u>5</u> <u>1</u>	d	Related organiz	zations 1d					
ğΞ	е	Government grant	s (contributions) 1e	1,889,815				
is i	f	All other contribution	ons, gifts, grants, and 1f	4,681,386	į	į	İ	
를 을			ons included in lines		}	-		
틀잎ㅣ	g	1a-1f \$		47,000				
9 ē	h	Total. Add lines	s 1a-1f	· · · · •	6,612,096			
				Business Code				
i l	2a	TUITION AND FEES	5	611310	76,800,448	76,800,448		
£8	b	ROOM AND BOARD)	611310	13,777,618	13,777,618		
93	c	OTHER AUXILIARY	INCOME	611310	622,299	608,424	13,875	
Program Serwce Revenue	d	PUBLIC SERVICES		611310	368,975	329,073	39,902	
ගී	e		-			•	· ·	
眶	f	All other progra	am service revenue					
ا بج								
			s 2a – 2f		91,569,340			
	3		ome (including dividen ar amounts)		1,095,795			1,095,79
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties	<u> </u>	🕨				
			(ı) Real	(II) Personal				
	6a	Gross rents	118,680					
	b	Less rental expenses	0					
	С	Rental income or (loss)	118,680					
	d		me or (loss)		118,680			118,680
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	9,446,407	2,500				
	b	Less cost or other basis and sales expenses	3,253,880	7,476				
	c	Gain or (loss)	6,192,527	-4,976				
	d	Net gain or (los	ss)		6,187,551			6,187,551
Other Kevenue	8a	Ψ	luding ,895 s reported on line 1c)	21 960				
를	b	Less direct ex	penses b	21,860 20,207				
5	c		(loss) from fundraising	· · · · · · · · · · · · · · · · · · ·	1,653			1,653
	9a		rom gaming activities ne 19 					
	b	Less direct ex	penses b					
			(loss) from gaming acti	vities				
	10a	Gross sales of returns and allo						
	b	Less costofa	oods sold b					
		-	(loss) from sales of inv	entory 📭				
f		Miscellaneous		Business Code				
	11a b	OVERHEAD RE	EIMBURSEMENT	900099	11,331			11,33
	c							
	d	All other reven	ue		821,181	787,664	33,517	
	e	Total. Add lines	s 11a-11d		022 515			
	12	Total revenue	See Instructions .		832,512			
		. Ctar revellae.		• • • • •	106,417,627	92,303,227	87,294	7,415,010

Part IX Statement of Functional Expenses

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

Do no	Check if Schedule O contains a response or note to any line in this of include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	22,605,882	22,605,882		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	718,654	718,654		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,415,271	543,732	635,143	236,396
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	31,305,015	26,960,970	3,809,539	534,506
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,190,284	1,889,539	 	36,687
9	Other employee benefits	4,025,861	3,396,398	· · ·	88,854
10	Payroll taxes	2,432,974	2,049,436	327,523	56,015
11	Fees for services (non-employees)				
а	Management				
b	Legal	122,546		122,546	
С	Accounting	121,475		121,475	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17	116,708			116,708
f	Investment management fees	350,926		350,926	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	624,127	442,743	 	354
12	Advertising and promotion	1,173,893	760,170	 	1,549
13	Office expenses	4,415,151	3,481,302	837,885	95,964
14	Information technology	1,025,400	999,508	22,201	3,691
15	Royalties				
16	Occupancy	5,285,857	4,836,559	· · · · · · · · · · · · · · · · · · ·	67,395
17	Travel	709,997	631,000	60,732	18,265
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	272,601	204,962	 	7,967
20	Interest	2,006,889	1,836,303	144,998	25,588
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,538,267	6,897,514	· · · · · ·	96,113
23 24	Insurance	573,377	548,767	24,610	
а	FOOD SERVICE	3,588,353	3,456,437	108,533	23,383
b	OTHER EXPENSES	2,548,839	2,074,653	 	4,497
c	ACADEMIC COURSE WAIVERS	703,734	666,353	' 	2,487
d	STUDY ABROAD EXPENSES	337,117	337,117	0	0
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	96,209,198	85,337,999	9,454,780	1,416,419
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)	,,	,,	-,,	.,,

Part X Balance Sheet

	rt X	Check if Schedule O contains a response or note to any line in	n this	Part X							
					(A) Beginning of year		(B) End of year				
	1	Cash-non-interest-bearing			298,344	1	1,613,344				
	2	Savings and temporary cash investments			29,397,213	2	27,292,411				
	3	Pledges and grants receivable, net			8,221,324	3	6,032,378				
	4	Accounts receivable, net			2,407,304	4	2,427,903				
	5	employees, and highest compensated employees Complete F	Loans and other receivables from current and former officers, directors, trustees, keen employees, and highest compensated employees. Complete Part II of Schedule L								
ts	6	4958(f)(1)), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary	Loans and other receivables from other disqualified persons (as defined under sect $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employe and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficial organizations (see instructions) Complete Part II of Schedule L								
Assets	,	Notes and loans reservable, not			0 1,530,963		1,561,984				
AS.	7	Notes and loans receivable, net			1,550,965	_	1,301,904				
	8	Inventories for sale or use				4 007 004					
	9	Prepaid expenses and deferred charges		 I	667,532	9	1,097,994				
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	235,222,968							
	b	Less accumulated depreciation	10b				136,120,808				
	11	Investments—publicly traded securities	45,011,743	11	43,533,741						
	12	Investments—other securities See Part IV, line 11		•	22,670,344	12	22,406,654				
	13	Investments—program-related See Part IV, line 11			0	13	0				
	14	Intangible assets			0	14	0				
	15	Other assets See Part IV, line 11			3,231,108	15	3,133,276				
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			243,054,586	16	245,220,493				
	17	Accounts payable and accrued expenses			9,327,071	17	10,215,725				
	18	Grants payable				18					
	19	Deferred revenue			1,474,215	19	1,901,951				
	20	Tax-exempt bond liabilities			47,052,557	20	44,797,039				
φ.	21	Escrow or custodial account liability Complete Part IV of Sci	hedule	D		21					
Liabilitie	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua		trustees,							
аę		persons Complete Part II of Schedule L				22					
	23	Secured mortgages and notes payable to unrelated third parti	es .			23					
	24	Unsecured notes and loans payable to unrelated third parties				24					
	25	Other liabilities (including federal income tax, payables to rel and other liabilities not included on lines 17-24) Complete P									
		D			13,021,896	25	14,281,117				
	26	Total liabilities. Add lines 17 through 25			70,875,739	26	71,195,832				
S e S		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	▼ ar	nd complete							
e G	27	Unrestricted net assets			138,571,380	27	143,562,111				
- B	28	Temporarily restricted net assets			17,625,180	28	13,801,923				
Ξ	29	Permanently restricted net assets		15,982,287	29	16,660,627					
Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check	here 🕨	- ┌─ and							
<u>-</u>		complete lines 30 through 34.									
Š	30	Capital stock or trust principal, or current funds				30					
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31					
AS	32	Retained earnings, endowment, accumulated income, or other	funds			32					
Ř	33	Total net assets or fund balances			172,178,847	33	174,024,661				
~	34	Total liabilities and net assets/fund balances			243,054,586	34	245,220,493				

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI			,	৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		106,4	117,627
2	Total expenses (must equal Part IX, column (A), line 25)	2			209,198
3	Revenue less expenses Subtract line 2 from line 1	2			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		10,2	208,429
•		4		172,1	178,847
5	Net unrealized gains (losses) on investments	5		-7,2	254,821
6	Donated services and use of facilities	6			
7	Investment expenses				
8	Prior period adjustments	7			
Ū		8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-1,1	107,794
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		174 (024,661
Par	t XII Financial Statements and Reporting	10		177,0	724,001
	Check if Schedule O contains a response or note to any line in this Part XII				. 区
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revi- a separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	ne	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b	Yes	
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits				İ

Additional Data

(Code

Software ID: **Software Version:**

EIN: 16-0743088

Name: NAZARETH COLLEGE OF ROCHESTER

Form 990, Part III - Line 4c: Program Service Accomplishments (See the Instructions)

18,162,187

) (Expenses \$

) (Revenue \$ 1,116,737) ALL OTHER PROGRAM EXPENSES, INCLUDES STUDENT SERVICES, ACADEMIC SUPPORT AND ARTS CENTER STUDENT SERVICES PERTAINS TO OFFICES SERVING STUDENTS INCLUDING REGISTAR, STUDENT DEVELOPMENT, CENTER FOR CIVIC ENGAGEMENT, CAREER SERVICES, ENROLLMENT MANAGEMENT AND CENTER FOR STUDENT SUCCESS ATHLETIC EXPENSES ARE ALSO REFLECTED IN THIS CATEGORY ACADEMIC SUPPORT PERTAINS TO LIBRARY SERVICES. ACADEMIC ADVISEMENT.

including grants of \$

THE CENTER FOR INTERNATIONAL EDUCATION AND THE OFFICES OF THE DEANS, AMONG OTHERS THE ARTS CENTER IS A PREMIER PRESENTER OF WORLD-CLASS DANCE, MUSIC, CHILDREN'S AND FAMILY THEATRE, AND INTERNATIONAL ENTERTAINMENT THE ARTS CENTER HOUSES THE COLLEGE'S DEPARTMENTS OF ART, MUSIC, AND THEATRE ARTS (2582

TOTAL STUDENT FTE'S)

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

(A) (B) (C) (D)

Compensated Employees, and Inde		ntractors						1	1	1
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th person and a	ion (e nan o n is b	ne b oth	ox, ι an o	ınless fficer	5	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(1) JACKIE AAB	2 00	х						0	0	0
TRUSTEE (1) JACK ALLOCCO TRUSTEE	2 00	х						0	0	0
(2) YOLANDA BENITEZ	2 00	x						0	0	0
TRUSTEE (3) STEPHEN BROWN	2 00									
TRUSTEE (4) JAMES COSTANZA	2 00	X						0	0	0
CHAIR		×		х				0	0	0
(5) JOHN DRAIN	2 00	х						0	0	0
TRUSTEE (6) EMIL DUDA	2 00							0	0	0
TRUSTEE (7) SERGIO ESTEBAN	2 00	X						0	0	
VICE CHAIR		Х		Х				0	0	0
(8) TIMOTHY FOURNIER TRUSTEE	2 00	×						0	0	0
(9) ANDY GALLINA	2 00	x						0	0	0
TRUSTEE (10) KEN GLAZER	2 00	x						0	0	0
TRUSTEE (11) WARREN HERN	2 00									
TRUSTEE (12) BRIAN HICKEY	2 00	X						0	0	0
TRUSTEE		×						0	0	0
(13) BRIDGETTE HOBART TRUSTEE	2 00	х						0	0	0
(14) RICHARD KAPLAN	2 00	x						0	0	0
TRUSTEE (15) CLEVE KILLINGSWORTH	2 00									
TRUSTEE	2.00	X						0	0	0
(16) GIGI LAMB TRUSTEE	2 00	×						0	0	0
(17) JUDY LINEHAN	2 00	х						0	0	0
TRUSTEE (18) ELIZABETH MCANARNEY	2 00	X						0	0	0
TRUSTEE (19) KIM MCCLUSKI	2 00								0	
TRUSTEE		х						0	0	0
(20) MARY LOUISE MITCHELL	2 00	×						0	0	0
(21) ROBERT MORGAN	2 00	х						0	0	0
TRUSTEE (22) STEPHEN NATAPOW	2 00	.,								
TRUSTEE (23) MITCH NUSBAUM	2 00	×						0	0	0
TRUSTEE		х						0	0	0
(24) SANDY PARKER	2 00	х						0	0	0
TRUSTEE		Ĺ				1	<u> </u>	<u> </u>		

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor/	ox, ι an o ⁄trus	inless fficer tee)	_	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and		
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-M13C)	2/1099-MI3C)	related organizations		
(26) LARRY PECKHAM	2 00	х						0	0	0		
TRUSTEE		^						Ů	<u> </u>	•		
(1) RICHARD PIERPONT	2 00	l x						0	0	0		
TRUSTEE								-	-			
(2) CYNTHIA REDDECK-LIDESTRI	2 00	×						0	0	0		
TRUSTEE (2) DAVID MICHEN	2.00											
(3) DAVID VIGREN	2 00	×						0	0	0		
TRUSTEE (4) KEITH WILSON	2 00						_					
() ()		×						0	0	0		
TRUSTEE (5) FRANK YORK	2 00											
TRUSTEE		×						0	0	0		
(6) DAAN BRAVEMAN	50 00											
PRESIDENT AND TRUSTEE		×		Х				395,872	0	58,183		
(7) JEFFREY L BURKE	2 00								_			
FORMER TRUSTEE		X						0	0	0		
(8) THOMAS C WILMOT SR	2 00	V						0	0	0		
FORMER TRUSTEE		Х						0	U	0		
(9) JANE L GLAZER	2 00	l x						0	0	0		
FORMER TRUSTEE												
(10) LAURIE LEO	2 00	×						0	0	0		
FORMER TRUSTEE	3.00											
(11) SUSAN ACKER	2 00	×						0	0	0		
FORMER TRUSTEE (12) IAN MORTIMER	50 00											
				х				188,438	0	22,210		
VICE PRESIDENT FOR ENROLLMENT MANAGEMENT (13) SARA VARHUS	50 00											
VICE PRESIDENT FOR ACADEMIC AFFAIRS				Х				196,196	0	20,101		
(14) PATRICK RICHEY	50 00											
VICE PRESIDENT FOR FINANCE AND ADMINISTRATION				X				173,147	0	13,628		
(15) KELLY GAGAN	50 00			V				177 227	0	10.112		
VICE PRESIDENT FOR INSTITUTIONAL ADVANCEMENT				X				177,227	0	18,113		
(16) KEVIN WORTHEN	50 00			×				125,882	0	19,267		
VICE PRESIDENT FOR STUDENT DEVELOPMENT				L ^				123,002		13,207		
(17) DEBORAH DOOLEY	50 00					×		124,359	0	16,921		
DEAN OF ARTS AND SCIENCES	50.00							,		,		
(18) JO ELLEN PINKHAM	50 00					x		126,516	0	13,072		
ASSOCIATE VICE PRESIDENT FOR HUMAN RESOURCES (19) TRACY MORAN	50 00											
						x		123,967	0	14,367		
FORMER CONTROLLER (20) TRINA MARQUEZ	50 00		_			1	\vdash			_		
						×		117,616	0	19,844		
ASSOCIATE VICE PRESIDENT FOR CAMPUS OPERATIONS (21) SHIRLEY SZEKERES	50 00					1						
DEAN OF HEALTH AND HUMAN SERVICES						×		117,021	0	19,795		
DE III OF HEREIT MAD HOLINIA DELIVATORS	1	<u> </u>				1	<u> </u>	<u> </u>	<u> </u>	<u> </u>		

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DLN: 93493134002316

OMB No 1545-0047

SCHEDULE A Public

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

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

2014

Open to Public Inspection

		ne organization DLLEGE OF ROCHESTER		Employer identification number				
IVAZAI	(LIII CC	DELEGE OF ROCHESTER					16-0743088	
Pa	rt I	Reason for Publi	c Charity S	itatus (All organiza	tions must co	mplete this r		ons.
		zation is not a private fo						
1	Ť	A church, convention		·	= -	•	•	
2	~	A school described in	-			•	,,,,,,,	
3	Ė	A hospital or a cooper				tion 170(b)(1)	(A)(iii).	
4	Ē	A medical research or	ganızatıon ope	_				i). Enter the
_	_	hospital's name, city, An organization opera	and state	afit of a college or uni	waraity aymad a	r anaratad bu	a accommontal control	a a sub a d un
5	1				versity owned d	or operated by	a governmentar unit d	escribed in
_	_	section 170(b)(1)(A)			4	470/1-1/	12/42/-2	
6	<u> </u>	A federal, state, or loc						
7	ı	An organization that n described in section 1				om a governme	ental unit or from the g	general public
8	\vdash	A community trust de				t II)		
9	Ė	An organization that n					butions, membership	fees, and gross
_	,	receipts from activitie						
		its support from gross	ınvestment ır	ncome and unrelated b	usiness taxable	income (less	section 511 tax) from	n businesses
		acquired by the organi	ızatıon after Ju	ine 30, 1975 See sec	tion 509(a)(2).	(Complete Pa	rt III)	
10	Г	An organization organ						
11		An organization organ	· ·	•	· ·	•		out the purposes of
	·	one or more publicly s						
	_	the box in lines 11a th						
а	ı	Type I. A supporting of						
		supported organization organization				ty of the direct	ors or crustees or the	Supporting
b	\sqcap	Type II. A supporting				with its suppo	rted organization(s), l	by having control or
		management of the su			same persons t	hat control or r	nanage the supported	organization(s) You
	_	must complete Part IV						
С	ļ	Type III functionally is supported organization						grated with, its
d	Г	Type III non-function						ianization(s) that is
-	,	not functionally integr						
	_	(see instructions) Yo						
е	ı	Check this box if the c					s a Type I, Type II, T	ype III functionally
f		integrated, or Type III Enter the number of si						
g		Provide the following i						
y		Trovide the following r	mormation abo	out the supported orga	inization(3)			
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	janization	(v) A mount of	(vi) A mount of
	(organızatıon		organization	listed in your	governing	monetary support	other support (see
				(described on lines 1 - 9 above or IRC	docume	nt?	(see instructions)	ınstructions)
			section (see					
				instructions))				
					Yes	No		

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.)

	ection A. Public Support	ation rails to qu	anny under the	tests listed bele	w, picase com	olete i t	11 (111.)		
	endar year (or fiscal year beginning	T			1				
-	in) 📂	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2	014	(f) Total	
1	Gifts, grants, contributions, and								
	membership fees received (Do not	7,611,605	8,732,903	5,607,734	13,051,546	e	5,612,096	41,615,884	
	ınclude any "unusual	7,011,00	0,732,303	3,007,734	13,031,340	,	,,012,030	41,015,004	
	grants ")								
2	Tax revenues levied for the								
	organization's benefit and either								
	paid to or expended on its behalf								
3	The value of services or facilities								
3	furnished by a governmental unit								
	to the organization without charge								
4	Total. Add lines 1 through 3	7,611,605	8,732,903	5,607,734	13,051,546	ϵ	,612,096	41,615,884	
5	The portion of total contributions								
-	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11, column								
	(f)								
6	Public support. Subtract line 5							41,615,884	
	from line 4								
	ection B. Total Support	1							
Care	endar year (or fiscal year beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 20	14	(f) Total	
7	Amounts from line 4	7,611,605	8,732,903	5,607,734	13,051,546	6	,612,096	41,615,884	
8	Gross income from interest,	7,011,003	0,732,703	3,007,734	13,031,340		,012,030	41,015,004	
0	dividends, payments received on								
	securities loans, rents, royalties	1,107,731	995,205	1,040,037	895,381	1	,095,795	5,134,149	
	and income from similar	_,,	,	_, _ , ,	,		, ,	-,,	
	sources								
9	Net income from unrelated								
	business activities, whether or	49,180	48,072	79,375	82,321		87,294	346,242	
	not the business is regularly	49,100	40,072	79,373	62,321		07,234	340,242	
	carried on								
10	Other income Do not include								
	gain or loss from the sale of	1,517,649	1,348,224	1,450,902	1,912,572		832,512	7,061,859	
	capital assets (Explain in Part	, ,	, ,	, ,	, ,		<i>'</i>	, ,	
	VI)								
11	Total support Add lines 7 through 10							54,158,134	
12	Gross receipts from related activit	les etc (see inst	ructions)			12		383,208,669	
	·		•		0.1		E 0 4 / - \/ 2 ³		
13	First five years. If the Form 990 is organization, check this box and st								
	ection C. Computation of Pul			<u> </u>	<u> </u>	<u> </u>	<u></u>	<u> </u>	
14	Public support percentage for 2014			11 column (f))		14		76.040.0/	
				11, column (1))		14		76 840 %	
15	Public support percentage for 201	3 Schedule A, Pai	rt II, line 14			15		67 520 %	
16a	33 1/3% support test—2014. If the				ıne 14 ıs 33 1/3%	or more	, check tl		
_	and stop here. The organization qu							► ✓	
b	33 1/3% support test—2013. If the				and line 15 is 33	1/3% or	more, ch		
	box and stop here. The organizatio	•		=	10.16 161			►	
1/a	10%-facts-and-circumstances test	_				•			
	is 10% or more, and if the organization mo							to d	
	in Part VI how the organization me organization	ers the lacts-all	u-circumstances	test The Organiz	acion quannes as	a public	iy suppor	ted ▶□	
h	10%-facts-and-circumstances test	-2013 If the ora	anization did not	check a hov on lin	e 13 16a 16b o	r 17aa	nd line	FI	
	15 is 10% or more, and if the orga								
	Explain in Part VI how the organiza							,	
	supported organization						_ pablicl)	▶ □	
18	Private foundation. If the organiza	tion did not check	c a box on line 13	, 16a, 16b, 17a. c	r 17b, check this	box and	see	- ,	
	instructions		20	. , , , - : - ; -	, 22			▶ ┌	

Schedule A (Form 990 or 990-EZ) 2014 Page 3 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 (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))

16 Public support percentage from 2013 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17 Investment income percentage from 2014 (line 10c, column (f) divided by line 13, column (f))

18 Investment income percentage from 2013 Schedule A, Part III, line 17

18

19a 33 1/3% support tests—2014. 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%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

Section A. All Supporting Organizations

Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) .	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
L0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).	10b		
l1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below,			
	the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

Pa	rt IV Supporting Organizations (continued)			
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
S	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3				
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.	За		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each			l

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	_	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other
ype	[]	II non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom			
2 A mounts paid to perform activity that directly furthexcess of income from activity			
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	nured)		
6 Other distributions (describe in Part VI) See instru	JCTIONS		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2014 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		(::)	(:::)
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2014			
a From 2009			
b From 2010			
c From 2011			
d From 2012			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7 \$			
A pplied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2015. Add lines 3j and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances	s Test
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Return Reference	Explanation
, ,	OTHER INCOME CONSISTS OF GROSS INCOME FROM FUNDRAISING (NOT INCLUDING CONTRIBUTIONS REPORTED ON LINE 1), COMMISSIONS, OTHER INCOME NOT REPORTABLE
	ON SCHEDULE A PART II LINES 1-9

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493134002316

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Political Campaign and Lobbying Activities

www.irs.gov/form990. 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) (see separate instructions) or Form 990-EZ, Part V,

line 35c (Proxy Tax) (see separate instructions), then Section 501(c)(4) (5) or (6) organizations. Complete Part III.

Na	section 30 i(c)(4), (3), or (6) org me of the organization ZARETH COLLEGE OF ROCHESTER			Employer iden	tification number
INPA	ZARETH COLLEGE OF ROCHESTER			16-0743088	
Par	t I-A Complete if the or	ganization is exempt und	er section 501(c) or is a section 527	organization.
1	Provide a description of the or	rganization's direct and indirect po	olitical campaign ac	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	Complete if the o	ganization is exempt und	er section 501 <i>(</i>	(c)(3).	
1		e tax incurred by the organization			\$
2	·	e tax incurred by organization ma			\$
3	·	section 4955 tax, did it file Form	_		⊤ Yes
4a	Was a correction made?		,		□ Yes □ No
ь	If "Yes," describe in Part IV				, ,
	•	ganization is exempt und	er section 501(c), except section 50	1(c)(3).
1	Enter the amount directly exp	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing exempt function activities	organization's funds contributed to	o other organization	s for section 527 ►	\$
3	Total exempt function expend	itures Add lines 1 and 2 Enter he	ere and on Form 112	20-POL, line 17b ►	¢
4	Did the filing organization file				→
		ns received that were promptly ar political action committee (PAC)			tion in Part IV
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

5 c	hedule C (Form 990 or 990-EZ) 2014					Page 2
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	:)(3) and file	d Form 5768	
	Check If the filing organization belongs to a expenses, and share of excess lobb	ying expenditures)		_	p member's nam	e, address, EIN,
	Limits on Lobbying E (The term "expenditures" means an	xpenditures			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	ying)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	Other exempt purpose expenditures					
е	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	00		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)				
h	Subtract line 1g from line 1a If zero or less, ente	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	ır - 0 -				
j	If there is an amount other than zero on either lin section 4911 tax for this year?	ne 1h or line 1ı, did the	organızatıon file F	Form 4720 repo	rtıng	┌ Yes ┌ No
	4-Year Av (Some organizations that made a s columns below. See t		ection do not	have to com		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontaxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Grassroots lobbying expenditures

	edule C (Form 990 or 990-EZ) 201					P	age 3
Pa		rganization is exempt under section 501(c)(3) and has l election under section 501(h)).	NOT				
For e	ach "Vec" reconnect to lines 1a through	gh 11 below, provide in Part IV a detailed description of the lobbying	(8	a)		(b)	
activ		gn 11 below, provide in rait 1v a detailed description of the lobbying	Yes	No	'	A moui	nt
1		anization attempt to influence foreign, national, state or local t to influence public opinion on a legislative matter or referendum,					
а	Volunteers?			Νo	_		
Ь		le compensation in expenses reported on lines 1c through 1i)?	Yes		4		
C	Media advertisements?			No	-		
d	Mailings to members, legislators			No	-		
e	Publications, or published or broad			No	-		
f	Grants to other organizations for	· · ·	V	No	+		
g		heir staffs, government officials, or a legislative body?	Yes		+		678
h :	Other activities?	rs, conventions, speeches, lectures, or any similar means?	Yes	No	-		545
i	Total Add lines 1c through 1:			NO	+		1,223
2a	_	the organization to be not described in section 501(c)(3)?		No			1,223
b	If "Yes," enter the amount of any				┪		
c		tax incurred by organization managers under section 4912					
d		a section 4912 tax, did it file Form 4720 for this year?					
Pai		rganization is exempt under section 501(c)(4), section	501(c)(5),	or s	ectio	n -
	501(c)(6).						
						Yes	No
1	· · ·	nore) dues received nondeductible by members?		-	1	├	
2	_	n-house lobbying expenditures of \$2,000 or less?		-	2	<u> </u>	
3		ry over lobbying and political expenditures from the prior year?			3		
Pai	t III-B Complete if the or 501(c)(6) and if e line 3, is answere	rganization is exempt under section 501(c)(4), section ! either (a) BOTH Part III-A, lines 1 and 2, are answered " d "Yes."	No" C)(5),)R (b)	or s Par	t III	n -A,
1	Dues, assessments and similar a	amounts from members	1				
2	Section 162(e) nondeductible lol expenses for which the section 5	bbying and political expenditures (do not include amounts of political 527(f) tax was paid).					
а	Current year		2a				
Ь	Carryover from last year		2b				
c	Total		2c				
3		ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		unt on line 2c exceeds the amount on line 3, what portion of the excess arryover to the reasonable estimate of nondeductible lobbying and	4				
5	• • • • • • • • • • • • • • • • • • • •	political expenditures (see instructions)	5				
P	art IV Supplemental Info						
		Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated ground II) Part II	up list),	Part I	I-A,I	ines 1	Land
	Return Reference	Explanation					
SCF	EDULE C, PART II-B, LINE-1	THE COLLEGE IS A MEMBER OF A REGIONAL CHAMBER OF COMMITHEIR ACTIVITIES ENGAGE IN STATE AND FEDERAL LOBBYING I					J F

Return Reference	Explanation
SCHEDULE C, PART II-B, LINE-1	THE COLLEGE IS A MEMBER OF A REGIONAL CHAMBER OF COMMERCE WHEREAS 10% OF THEIR ACTIVITIES ENGAGE IN STATE AND FEDERAL LOBBYING IN ADDITION, THE PRESIDENT AS WELL AS AN ADDITIONAL STAFF MEMBER AVERAGED 6 HOURS IN FISCAL YEAR 2015 ENGAGED IN LOBBYING ACTIVITIES FOR THE COLLEGE THESE ACTIVITIES INCLUDED PHONE CONVERSATIONS AND MEETINGS WITH LEGISLATORS AND OTHER GOVERNMENT OFFICIALS, SEEKING FEDERAL AND STATE AID FOR NAZARETH COLLEGE INITIATIVES

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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

DLN: 93493134002316

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Open to Public

emal	Revenue Service	Information about Schedule D (Form	1 990) and its instructions is at <u>www.irs</u>	.gov/1	Inspection
	ne of the organ			Emp	loyer identification number
NAZ	ARETH COLLEGE O	FROCHESTER		16-0	0743088
Pa	rt I Organ	nizations Maintaining Donor Adv	vised Funds or Other Similar Fu		
	organı	zation answered "Yes" to Form 990			<u> </u>
			(a) Donor advised funds		(b) Funds and other accounts
	Total number a	•			
		ue of contributions to (during year)			
	55 5	ue of grants from (during year)			
		ue at end of year		<u> </u>	
		zation inform all donors and donor adviso organization's property, subject to the or		or advı	sed Yes No
	used only for d	zation inform all grantees, donors, and do charitable purposes and not for the benef			
20.0		permissible private benefit? Pervation Easements. Complete if	the organization answered "Ves" to	Form	
	Preservati Protection Preservati Complete line	conservation easements held by the org on of land for public use (e g , recreation of natural habitat on of open space s 2a through 2d if the organization held a the last day of the tax year	or education) Preservation of an Preservation of a c	ertified	d historic structure
		,			Held at the End of the Year
а	Total number	of conservation easements		2a	
b	Total acreage	restricted by conservation easements		2b	
c	Number of cor	nservation easements on a certified histo	oric structure included in (a)	2c	
d		nservation easements included in (c) acq ture listed in the National Register	uired after 8/17/06, and not on a	2d	
	Number of cor	nservation easements modified, transferr	ed, released, extinguished, or terminate	d by th	e organization during
	the tax year 🕨	•			
	Number of sta	tes where property subject to conservat	on easement is located ►		
		nization have a written policy regarding to the conservation easements it holds?	the periodic monitoring, inspection, hand	lling of	violations, and Yes No
	Staff and volui	nteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	nents d	luring the year
	A mount of exp	 penses incurred in monitoring, inspecting	, and enforcing conservation easements	during	g the year
	► \$				
		nservation easement reported on line 2(o70(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	tion 17	70(h)(4)(B)(ι)
	balance sheet	describe how the organization reports con , and include, if applicable, the text of the on's accounting for conservation easeme	e footnote to the organization's financial		
ar	t IIII Organ	nizations Maintaining Collection lete if the organization answered "Y	s of Art, Historical Treasures, o	or Otl	ner Similar Assets.
a	If the organiza works of art, h	ation elected, as permitted under SFAS 1 istorical treasures, or other similar asse de, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its revents held for public exhibition, education, o	or rese	arch in furtherance of public
b	works of art, h	ation elected, as permitted under SFAS 1 istorical treasures, or other similar asse de the following amounts relating to thes	ts held for public exhibition, education, o		
	(i) Revenue ir	ncluded in Form 990, Part VIII, line 1			► \$
	(ii) Assets inc	cluded in Form 990, Part X			▶ \$
	If the organiza	ation received or held works of art, histor unts required to be reported under SFAS		r finan	cial gain, provide the
a	_	ded in Form 990, Part VIII, line 1	· ,		► \$
	Sirae illelu				· т

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art,	<u> Histo</u>	<u>rical T</u>	reasur	es, or C	<u>)ther</u>	<u>Similar A</u>	<u>ssets (</u>	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	s, chec	k any of	the follo	wing that	are a	sıgnıficant us	e of its	
а	Public exhibition		d [Loan	or exch	ange prog	rams			
b	Scholarly research		е Г	– Othe	r					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and explair	n how th	ney furth	er the or	ganızatıor	n's exe	empt purpose	: In	
5	During the year, did the organization solicit							lar	_	_
Do.	assets to be sold to raise funds rather than							all to Farms	☐ Yes	│ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					answere 	a "Ye	es" to Form	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other intermed	liary fo	r contribi	utions o	r other ass	ets n	ot	┌ Yes	☐ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the f	ollowin	g table		_				
						-		A	mount	
С	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year					Ĺ	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for	escrow	orcusto	dıal accou	nt Iıal	oility?	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the 6	explana	ation has	been pr	ovided in	Part X	III		Γ
Pai	rt V Endowment Funds. Complete									
	•	(a)Current year	(b) Prio	r year	b (c) Tw	o years back	(d) ⊤	hree years back	(e)Four	years back
1a	Beginning of year balance	67,836,654		59,858,988		55,593,630)	56,885,668		48,786,820
b	Contributions	937,528		1,697,216		617,485	5	1,422,126	<u> </u>	696,942
C	Net investment earnings, gains, and losses	-490,231		9,237,022		6,385,901	L	280,725	j	10,285,855
d	Grants or scholarships	978,883		893,094		664,408	3	534,199	,	669,252
e	Other expenditures for facilities and programs	2,141,283		2,063,478		2,073,620		2,058,289	,	2,214,697
f	Administrative expenses			0		(402,401		0
g	End of year balance	65,163,785	6	7,836,654		59,858,988	3	55,593,630)	56,885,668
2	Provide the estimated percentage of the cur	rent year end balance	e (line 1	Lg, colum	nn (a)) h	eld as				
а	Board designated or quasi-endowment 🕨	65 070 %								
b	Permanent endowment ► 24 720 %									
C	Temporarily restricted endowment ► 10 The percentages in lines 2a, 2b, and 2c sho	210 % uld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organizat	ion tha	t are hel	d and ac	dministere	d for t	:he		
	organization by							_	Ye	
	(i) unrelated organizations								a(i)	No
L	(ii) related organizations								ı(ii)	No
ь 4	Describe in Part XIII the intended uses of t	•					•	🗀	3b	
	t VI Land, Buildings, and Equipme				n answ	ered 'Yes	s' to F	-orm 990 P	art IV	line
	11a. See Form 990, Part X, line		ic org	amzado		crea rec		01111 330, 1	ui (1 v ,	
	Description of property			(a) Cost o asıs (ınve		(b)Cost o other basi (other)		c) Accumulated depreciation	(d) B	ook value
1a	_and		$\neg \uparrow$	8,	232,974		\dashv		1	8,232,974
Ь	Buildings			<u> </u>	652,320			33,591,61	9	69,060,701
c l	_easehold improvements		.		35,189			4,39	9	30,790
	Equipment		.	42,	748,472			31,675,89	9	11,072,573
e (Other				,554,013			33,830,24	3	47,723,770
	I. Add lines 1a through 1e <i>(Column (d) must e</i>		columr	n (B), line	10(c).)					136,120,808
		•						Schedule	D (Form	990) 2014

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives	15,968,683	Cost or end-of-year market value F
(2)Closely-held equity interests	6,437,971	F
Other	0,137,371	'
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	22,406,654	
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	omplete if the organization	answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation
	(-,	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organization		
(a) Desc	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
	anızatıon 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	
<u> </u>	.,	
Federal income taxes ACCRUED POSTRETIREMENT BENEFIT COSTS	10,921,089	
ASSET RETIREMENT OBLIGATION	2,078,278	
GOVERNMENT LOAN PROGRAM REFUNDABLE	2,078,278	
ADVANCES	1,281,750	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	14,281,117	
2. Liability for uncertain tax positions. In Part XIII, provid		

Part		evenue per Audited Financial Sta ered 'Yes' to Form 990, Part IV, line :		nts With Revenue բ	er F	teturn Complete If
1		support per audited financial statements			1	75,512,527
2	Amounts included on line 1 but	not on Form 990, Part VIII, line 12				
a I	Net unrealized gains (losses) o	n investments	2a	-7,254,821		
b 1	Donated services and use of fa	cilities	2b			
c I	Recoveries of prior year grants		2c			
d (Other (Describe in Part XIII)		2d	-23,324,536		
е /	Add lines 2a through 2d .		· · ·		2e	-30,579,357
3 9	Subtract line 2e from line 1 .				3	106,091,884
4	Amounts included on Form 990	, Part VIII, line 12, but not on line 1				
a 1	nvestment expenses not inclu	ded on Form 990, Part VIII, line 7b .	4a	350,926		
b (Other (Describe in Part XIII)		4b	-25,183		
c /	Add lines 4a and 4b				4c	325,743
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	12)		5	106,417,627
Part X		rpenses per Audited Financial St swered 'Yes' to Form 990, Part IV, line			per	Return. Complete
1		audited financial statements			1	72,558,919
2 /	Amounts included on line 1 but	not on Form 990, Part IX, line 25				
a I	Donated services and use of fac	cilities	2a			
ь	Prior year adjustments		2b		1	
c (Otherlosses		2c		1	
d (Other (Describe in Part XIII)		2d	25,183	1	
е /	Add lines 2a through 2d				2e	25,183
3 9	Subtract line 2e from line 1 .				3	72,533,736
4	Amounts included on Form 990	, Part IX, line 25, but not on line 1:				
a]	nvestment expenses not inclu	ded on Form 990, Part VIII, line 7b	4a	350,926		
ь (Other (Describe in Part XIII)		4b	23,324,536		
c /	Add lines 4a and 4b				4c	23,675,462
5	otal expenses Add lines 3 and	d 4c. (This must equal Form 990, Part I, lir	ne 18)		5	96,209,198
Part >	Supplemental Info	ormation				
	line 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
PART X: ADJUST	, LINE 2D - OTHER MENTS	SCHOLARSHIPS AND GRANTS -23,324	,536			
PART X: ADJUST	, LINE 4B - OTHER MENTS	LOSS ON DISPOSAL OF FIXED ASSETS	-4,97	6 SPECIAL EVENT EXI	ENS	ES -20,207
PART X: ADJUST	I, LINE 2D - OTHER MENTS	SPECIAL EVENT EXPENSES 20,207 LO	SSON	DISPOSAL OF FIXED	ASSE	TS 4,976
	I, LINE 4B - OTHER	GRANTS AND SCHOLARSHIPS 23,324,	536			

Jenedale 2 (1 31111 33 3) 23 13		1 age 5
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	
l		
-		

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493134002316

Employer identification number

OMB No 1545-0047

. . . .

2014

Department of the Treasury Internal Revenue Service

Name of the organization

SCHEDULE E

(Form 990 or 990-EZ)

Schools

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

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

AZAF	RETH COLLEGE OF ROCHESTER	074000		
Pa	rt I	-0743088	YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its of other governing instrument, or in a resolution of its governing body?	charter, bylaws,	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in brochures, catalogues, and other written communications with the public dealing with student admiss programs, and scholarships?		Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcass the period of solicitation for students, or during the registration period if it has no solicitation prograthat makes the policy known to all parts of the general community it serves? If "Yes," please descriptease explain If you need more space use Part II	it media during im, in a way	Yes	
4	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nor basis?	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the publi with student admissions, programs, and scholarships?	c dealing 4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	<u>5a</u>	<u> </u> 	No
b	Admissions policies?	5b	<u> </u>	No
c	Employment of faculty or administrative staff?	<u>5c</u>	_	No
d	Scholarships or other financial assistance?	<u>5d</u>		No
e	Educational policies?	<u>5e</u>		No
f	Use of facilities?	<u>5f</u>		No
g	Athletic programs?	<u>5g</u>		No
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	<u>5h</u>		No
62	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
	Has the organization's right to such aid ever been revoked or suspended?	6b		No
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 of Rev. Proc. 75-50.1975-2 C.B. 587, covering racial nondiscrimination? If "No." explain on Part I		Vac	

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

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	THE COLLEGE USES ITS WEBSITE AS A MEANS OF PUBLICIZING ITS NON- DISCRIMINATORY POLICY THE COLLEGE BELIEVES THAT NOTICES SUCH AS THIS, PREVIOUSLY PUBLISHED IN THE NEWSPAPER, ARE MORE EFFECTIVELY COMMUNICATED THROUGH THE USE OF ITS WEBSITE, HIGHLY VISIBLE AND FREQUENTED BY STUDENTS
SCHEDULE E, PART I, LINE 6	THE COLLEGE RECEIVES FUNDING FROM THE US DEPARTMENT OF EDUCATION FOR THE FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT, FEDERAL WORK STUDY, FEDERAL PELL GRANT PROGRAM, AND TEACH GRANTS NEW YORK STATE FUNDS VARIOUS PROGRAMS SUCH AS HIGHER EDUCATIONAL OPPORTUNITY PROGRAM, TEACHERS OPPORTUNITY CORP, EISENHOWER GRANT, NYS TAP, NYS EXCELLENCE, AND NYS LOTTERY AND STATE APPROPRIATIONS IN THE FORM OF BUNDY AID AND HIGH NEEDS NURSING AID

Schedule E (Form 990 or 990-EZ) (2014)

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As Filed Data -

DLN: 93493134002316

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990.

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

Open to Public **Inspection**

Name of the organization NAZARETH COLLEGE OF ROCHESTE	= D			Employer identi	ification number
NAZAKETH COLLEGE OF ROCHESTE	- IX			16-0743088	
Part I General Information "Yes" to Form 990, Par	n on Activitie rt IV, line 14b.	s Outside th	e United States. Co	omplete if the organiza	ation answered
1 For grantmakers. Does the cand other assistance, the grants or a used to award the grants or a	✓ Yes				
2 For grantmakers. Describe in assistance outside the United		ganızatıon's pr	ocedures for monitori	ng the use of its grant	s and other
3 Activites per Region (The follow	ing Part I, line 3	table can be du	plicated if additional spa	ice is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	0	50			607,011
b Total from continuation sheets to Part I	0	11			111,643
c Totals (add lines 3a and 3b)	0	61			718,654

Schedule F (Form 990) 2014

Pē				izations or Entitle ived more than \$5,0		•			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2				ed above that are re or counsel has pro					
3	Enter total nun	nber of other or	ganizations or ent	ities					

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	e duplicated if additio	nal space is ne	eded.	·			,
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) FINANCIAL AID	EAST ASIA	18		CREDIT ON THE STUDENT	0		FAIR MARKET VALUE
(2) FINANCIAL AID	SOUTH ASIA	8		CREDIT ON THE STUDENT			FAIR MARKET VALUE
(3) FINANCIAL AID	EUROPE	6		CREDIT ON THE STUDENT			FAIR MARKET VALUE
(4) FINANCIAL AID	MIDDLE EAST	7		CREDIT ON THE STUDENT			FAIR MARKET VALUE
(5) FINANCIAL AID	NORTH AMERICA	6		CREDIT ON THE STUDENT	0		FAIR MARKET VALUE
(6) FINANCIAL AID	SUB-SAHARAN AFRICA	3		CREDIT ON THE STUDENT	0		FAIR MARKET VALUE
(7) FINANCIAL AID	CENTRAL AMERICA	2		CREDIT ON THE STUDENT			FAIR MARKET VALUE
(8) FINANCIAL AID	SOUTH AMERICA	2		CREDIT ON THE STUDENT			FAIR MARKET VALUE
(9) FINANCIAL AID	RUSSIA	1		CREDIT ON THE STUDENT			FAIR MARKET VALUE
(10) FINANCIAL AID	CENTRAL ASIA	1		CREDIT ON THE STUDENT			FAIR MARKET VALUE
(11) FINANCIAL AID	EAST AFRICA	1		CREDIT ON THE STUDENT			FAIR MARKET VALUE
(12) FINANCIAL AID	WEST AFRICA	1		CREDIT ON THE STUDENT			
(13) FINANCIAL AID	NORTH AFRICA	4		CREDIT ON THE STUDENT			
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1	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)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>\</u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	⊽	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	▼	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	<u> </u>	Νo

Schedule F (Form 990) 2014

Schedule F (Form 990) 2014 Page **5**

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
,	INTERNATIONAL STUDENTS RECEIVING SCHOLARSHIPS ARE CODED SEPARATELY IN THE COLLEGE'S ERP SY STEM A REPORT IS GENERATED FROM THE COLLEGE'S ERP SY STEM DETAILING EACH STUDENT AND THEIR SPECIFIC AWARDS THIS REPORT IS REVIEWED PERIODICALLY TO MONITOR FUNDS

990 Schedule F, Supplemental Information

Return Reference	Explanation
, ,	INTERNATIONAL STUDENTS RECEIVING SCHOLARSHIPS ARE CODED SEPARATELY IN THE COLLEGE'S ERP SY STEM A REPORT IS GENERATED FROM THE COLLEGE'S ERP SYSTEM DETAILING EACH STUDENT AND THEIR SPECIFIC AWARDS THIS REPORT IS REVIEWED PERIODICALLY TO MONITOR FUNDS

Additional Data

Software ID:

Software Version:

EIN: 16-0743088

Name: NAZARETH COLLEGE OF ROCHESTER

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)	(d) is a program service, describe specific type of service	(f) Total expenditures for region
EAST ASIA	0	18	GRANTMAKING	AWARDED FINANCIAL AID	172,238
SOUTH ASIA	0	7		AWARDED FINANCIAL AID	100,774
EUROPE	0	6	I	AWARDED FINANCIAL AID	78,843

Form 990 Schedule F	<u> Part I - Activi</u>	<u>ties Outside T</u>	he 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)	(d) is a program service, describe specific type of service	(f) Total expenditures for region
MIDDLE EAST	0	7		AWARDED FINANCIAL AID	62,250
NORTH AFRICA	0	2	GRANTMAKING	AWARDED FINANCIAL AID	56,186
NORTH AMERICA	0	5	GRANTMAKING	AWARDED FINANCIAL AID	55,000

Form 990 Schedule F	<u>Part I - Activit</u>	<u>ties Outside T</u>	he 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)	(d) is a program service, describe specific type of service	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	3		AWARDED FINANCIAL AID	47,121
CENTRAL AMERICA	0	2	GRANTMAKING	AWARDED FINANCIAL AID	34,599
SOUTH AMERICA	0	2		AWARDED FINANCIAL AID	32,000

Form 990 Schedule F	form 990 Schedule F Part I - Activities Outside The United States									
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(d) is a program service, describe specific type of service	(f) Total expenditures for region					
CENTRAL ASIA	0	1		AWARDED FINANCIAL AID	28,093					
EAST AFRICA	0	1		AWARDED FINANCIAL AID	16,250					
WEST AFRICA	0	2		AWARDED FINANCIAL AID	9,000					

Form 990 Schedule F	<u>Part I - Activi</u>	<u>ties Outside T</u>	he 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	0	1	GRANTMAKING	AWARDED FINANCIAL AID	6,500
NORTH AFRICA	0	2	PROGRAM SERVICES	GRADUATE TUITION ASSISTANTS	13,582
NORTH AMERICA	0	1	PROGRAM SERVICES	GRADUATE TUITION ASSISTANTS	1,244

Form 990 Schedule F	<u> Part I - Activi</u>	<u>ties Outside T</u>	he 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	0	1		GRADUATE TUITION ASSISTANTS	4,974

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DLN: 93493134002316

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV. lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.

Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** NAZARETH COLLEGE OF ROCHESTER 16-0743088

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. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e 🔽 Solicitation of non-government grants Internet and email solicitations f Solicitation of government grants Phone solicitations ▼ Special fundraising events ✓ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (i) Name and address of (ii) Activity (iii) Dıd (iv) Gross receipts (v) A mount paid to (vi) A mount paid to (or retained by) (or retained by) ındıvıdual fundraiser have from activity or entity (fundraiser) custody or fundraiser listed in organization control of col (i) contributions? Yes No MANAGE THE 0 65,000 -65,000 Nο RUFFALO NOEL LOVITZ COLLEGE PO BOX 3018 PHONATHON SOLICITATIONS CEDAR RAPIDS, IA 52406 CAMPAIGN Νo 0 26,154 -26,154 THE SOLSTICE GROUP CONSULTANT 120 BRINDLEY ST STE 7 ITHACA, NY 14850 10 91,154 -91,154 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

Sche	dule	G (Form 990 or 990-EZ) 2014				Page 2
Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	raising event contribut			
			(a) Event #1 ATHLETICS GOLF	(b) Event #2 SOM GOLF	(c) Other events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	48,990	13,765	i	62,755
ē ē	2	Less Contributions	35,490	5,405	;	40,895
<u>~</u>	3	Gross income (line 1 minus line 2)	13,500	8,360		21,860
	4	Cash prizes		310	,	310
ဟ	5	Noncash prizes	500	202		702
agus L	6	Rent/facility costs	10,110	8,049	1	18,159
Expenses	7	Food and beverages .				
Dreat	8	Entertainment				
ā	9	Other direct expenses .	359	677	,	1,036
	10	Direct expense summary Add lir	nes 4 through 9 in column	ı(d)		(20,207)
	11	Net income summary Subtract li	ine 10 from line 3, columr	n (d)		1,653
Par	t III	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or rep	·
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u> </u>	1	Gross revenue				
enses	2	Cash prizes				
<u>Dyper</u>	3	Non-cash prizes				
Direct E	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	☐ Yes % No	Г Yes% Г No		
	7	Direct expense summary Add line	es 2 through 5 ın column (d)		
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		
9 a		er the state(s) in which the organiz				「Yes 「No
 a Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain						
10a	Wer	re any of the organization's gaming				
b		Yes," explain				- i tes i NO

Sche	edule G (Form 990 or 990-EZ) 2014				Page 3						
11	Does the organization conduct gaming	activities with nonn	members?	T _{Yes} [
12	Is the organization a grantor, beneficia	ry or trustee of a tru	ust or a member of a partnership or other entity								
	formed to administer charitable gaming	J ²		Г _{Yes} Г	— No						
13	Indicate the percentage of gaming acti		1 1	,							
а	The organization's facility		13a		%						
b	An outside facility				%						
14	Enter the name and address of the pers	on who prepares th	ne organization's gaming/special events books and records								
	Name ▶										
	Address ►										
15a	Does the organization have a contract	with a third party fro	om whom the organization receives gaming								
154				┌ Yes 「	– _{No}						
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by	•	the organization > \$ and the								
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										
а	Is the organization required under state	e law to make charıt	table distributions from the gaming proceeds to								
	retain the state gaming license?	retain the state gaming license?									
b	Enter the amount of distributions requi	red under state law	distributed to other exempt organizations or spent								
	ın the organization's own exempt activi		·								
Pa			explanations required by Part I, line 2b, columns (iii) 17b, as applicable. Also provide any additional inforr								
	Return Reference		Explanation								

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493134002316 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization NAZARETH COLLEGE OF ROCHESTER 16-0743088 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 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 Domestic Organizations and Domestic Governments. 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. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other)

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

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

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

·					
(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	, (f) Description of non-cash assistance
(1) COMPETITIVE SCHOLARSHIPS	2201	15,966,993			
(2) GRANTS IN AID	2283	5,468,194			
(3) HIGHER EDUCATION OPPORTUNITY PROGRAM (HEOP)	48	1,170,695			

Part IV Supplemental Ir	iformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
	ALL COLLEGE SCHOLARSHIPS AND GRANTS ARE AWARDED THROUGH THE FINANCIAL AID PROCESS AND ARE RECORDED AS CREDITS ON THE STUDENTS' INVOICES THESE AWARDS HELP TO OFFSET THE COST OF TUITION, FEES AND ROOM AND BOARD THE SCHOLARSHIPS AND GRANTS ARE TRACKED IN THE COLLEGE'S ERP SYSTEM AND MONITORED FOR COMPLIANCE WITHIN THE FINANCIAL AID OFFICE TO COMPLY WITH INTERNAL AND EXTERNAL REGULATIONS

Schedule I (Form 990) 2014

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DLN: 93493134002316

OMB No 1545-0047

Schedule J

(Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Compensation Information

Open to Public Inspection

Name of the organization NAZARETH COLLEGE OF ROCHESTER **Employer identification number**

16-0743088

			10-0743088			
Pa	rt I Questions Regarding Compensati	on				
_			611 611 1 6		Yes	No
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form ride any relevant information regarding these items			
	First-class or charter travel	<u> - </u>	Housing allowance or residence for personal use			
	▼ Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u> </u>				
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement or provision of all of the expenses			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Ex			2	Yes	
3	Indicate which, if any, of the following the filing orgonganization's CEO/Executive Director Check all used by a related organization to establish compe	that apply				
	Compensation committee	굣	Written employment contract			
	Independent compensation consultant	Γ	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization), Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	it?	4a	Yes	
b	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b		No
С	Participate in, or receive payment from, an equity-			4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and					
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiz	zations mı	ust complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section compensation contingent on the revenues of	A , line 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section compensation contingent on the net earnings of	A , line 1a	, did the organization pay or accrue any			
а	The organization?			6a		No
ь	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			7	Yes	
8	Were any amounts reported in Form 990, Part VII					
_	subject to the initial contract exception described		tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8	<u> </u>	No
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	the rebutt	able presumption procedure described in Regulations	9		

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

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

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

(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
1 DAAN BRAVEMAN, PRESIDENT AND TRUSTEE	(i) (ii)	303,915 0	0	91,957 0	51,122 0	7,061 0	454,055 0	0
2 IAN MORTIMER, VICE PRESIDENT FOR ENROLLMENT MANAGE	(i) (ii)	180,338 0	7,500 0	600	14,977 0	7,233 0	210,648	0 0
3 SARA VARHUS, VICE PRESIDENT FOR ACADEMIC AFFAIRS	(i) (ii)	194,636 0	0	1,560 0	19,728	373	216,297	0
4 PATRICK RICHEY, VICE PRESIDENT FOR FINANCE AND ADMIN	(i) (ii)	171,661 0	0	1,486 0	13,255 0	373	186,775 0	0
5 KELLY GAGAN, VICE PRESIDENT FOR INSTITUTIONAL ADV	(i) (ii)	175,667 0	0	1,560 0	17,740 0	373	195,340 0	0

Schedule J (Form 990) 2014

Part IIII Supplemental Information

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

Also complete this part for any additional information

Return Reference Explanation				
PART I, LINE 1A	SOCIAL CLUB MEMBERSHIPS PROVIDED FOR BUSINESS USE			
PART I, LINE 4A	TRACY MORAN RECEIVED \$39,125 IN SEPARATION PAY			
PART I, LINE 7	TRINA MARQUEZ USED TUITION EXCHANGE VALUED AT \$32,500			

Schedule J (Form 990) 2014

Department of the Treasury

NAZARETH COLLEGE OF ROCHESTER

INDUSTRIAL DEVELOPMENT

CORPORATION

14

15

16

17

Internal Revenue Service Name of the organization

DLN: 93493134002316

OMB No 1545-0047

Open to Public

Schedule K **Supplemental Information on Tax Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

explanations, and any additional information in Part VI.

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

► Attach to Form 990.

Inspection Employer identification number

16-0743088

Р	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		_	Pool ncing		
							Yes	No	Yes	No	Yes	No		
A	MONROE COUNTY INDUSTRIAL DEVELOPMENT CORPORATION	51-0188852	61075TBE7	08-04-2011		NEW CONSTRUCTION OF A BUILDING AND REFUNDING OF 2004B BONDS		Х		Х		Х		
В	COUNTY OF MONROE INDUSTRIAL DEVELOPMENT AGENCY	16-1005429	610752EK9	01-30-2008	•	TO FINANCE CONSTRUCTION OF A BUILDING AND SITE IMPROVEMENTS		Х		Х		Х		
c ¯	MONROE COUNTY	51-0188852	61075TFT0	06-13-2013	13,905,000	REFUNDING OF SERIES 2001	Х			Х		Х		

Par	t II Proceeds								
			\		В	Ü	C	D)
1	A mount of bonds retired		2,935,000		1,365,000		965,000		
2	A mount of bonds legally defeased								
3	Total proceeds of issue		23,542,430		9,030,000		14,625,806		
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds		931,722						
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds		647,870		335,820	448,626			
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds		15,000,000		8,567,632				
11	O ther spent proceeds				126,548		518		
12	O ther unspent proceeds		·		·				
13	Year of substantial completion	20	12	20	09	2013			
		Yes	No	Yes	No	Yes	No	Yes	No

Part	Private Business Use								
			4	ı	В	(С	ı	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?		×		×		х		
2	Are there any lease arrangements that may result in private business use of bond-		v		V		v		

Χ

Χ

Were the bonds issued as part of a current refunding issue?

Has the final allocation of proceeds been made?

allocation of proceeds?

financed property?

Were the bonds issued as part of an advance refunding issue?

Does the organization maintain adequate books and records to support the final

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Χ

Part Private Business Use (Continued) C D В Α Yes No Yes No Yes No Yes No Are there any management or service contracts that may result in private business use За Χ Χ Χ of bond-financed property? 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? Are there any research agreements that may result in private business use of bond-С Χ Χ Χ financed property? 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? Enter the percentage of financed property used in a private business use by entities 4 0 % 0 % 0 % other than a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of 5 unrelated trade or business activity carried on by your organization, another section 0 % 0 % 0 % 501(c)(3) organization, or a state or local government Total of lines 4 and 5 6 0 % 0 % 0 % Does the bond issue meet the private security or payment test? 7 Χ Χ Х Has there been a sale or disposition of any of the bond-financed property to a 8a nongovernmental person other than a 501(c)(3) organization since the bonds were Χ Χ Χ issued? If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of b If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections c 1 141-12 and 1 145-2? Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Χ Χ Χ Regulations sections 1 141-12 and 1 145-2? Part IV Arbitrage В C Yes No Yes No Yes No Yes No Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield 1 Х Х Χ Reduction and Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply? 2 Rebate not due vet? а Χ Χ Χ Exception to rebate? b Χ Χ Χ No rebate due? c Χ Χ Χ If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue? 3 Χ Χ Χ Has the organization or the governmental issuer entered 4a Χ Χ Χ into a qualified hedge with respect to the bond issue? JP MORGAN CHASE Name of provider BANK Term of hedge 30 000000000000 C Was the hedge superintegrated? d Χ Was the hedge terminated? Χ

Part IV	Arbitrage	(Continued)

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

Part V Procedures To Undertake Corrective Action

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

Part VI	Supplemental Info	ormation. Provide additiona	I information for respoi	nses to questions on	Schedule K (see instructions).

Return Reference		Explanation
	SCHEDULE K, PART II, LINE 3	08/04/2011 23,765,000 MONROE COUNTY INDUSTRIAL DEVELOPMENT CORPORATION - BOND ISSUES A AND C, AS REFERENCED IN SCHEDULE K PART I, EACH DISCLOSES AN ISSUE (PART I, E) THAT DIFFERS FROM THE PROCEEDS OF ISSUE (PART II, LINE 3) EQUAL TO THAT OF THE DISOUNT OR PREMIUM ASSOCIATED WITH THE ISSUE

Return Reference	Explanation				
SCHEDULE K, PART V	08/04/2011 23,765,000 MONROE COUNTY INDUSTRIAL DEVELOPMENT CORPORATION - CURRENTLY THE COLLEGE DOES NOT HAVE A WRITTEN POLICY IN PLACE, HOWEVER, THERE ARE PROCEDURES BEING FOLLOWED TO ENSURE COMPLIANCE				

Return Reference	Explanation
SCHEUDULE K, PART V	01/30/2008 - 9,030,000 COUNTY OF MONROE INDUSTRIAL DEVELOPMENT AGENCY - CURRENTLY THE COLLEGE DOES NOT HAVE A WRITTEN POLICY IN PLACE, HOWEVER, THERE ARE PROCEDURES BEING FOLLOWED TO ENSURE COMPLIANCE

Return Reference	Explanation				
SCHEDULE K, PART V	06/13/2013 13,905,000 MONROE COUNTY INDUSTRIAL DEVELOPMENT CORPORATION - CURRENTLY THE COLLEGE DOES NOT HAVE A WRITTEN POLICY IN PLACE, HOWEVER, THERE ARE PROCEDURES BEING FOLLOWED TO ENSURE COMPLIANCE				

DLN: 93493134002316

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

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

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

Name of the organization NAZARETH COLLEGE OF ROCHESTER **Employer identification number**

16-0743088

(a) (b) Number of contributions or items contributed amounts report form 990, Part line 1g 1 Art—Works of art 2 Art—Historical treasures 3 Art—Fractional interests 4 Books and publications 5 Clothing and household	ed on	Method o			nts
2 Art—Historical treasures . 3 Art—Fractional interests 4 Books and publications 5 Clothing and household					
3 Art—Fractional interests 4 Books and publications 5 Clothing and household					
4 Books and publications 5 Clothing and household					
5 Clothing and household					
goods					
6 Cars and other vehicles					
7 Boats and planes					
8 Intellectual property					
9 Securities—Publicly traded .					
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►(X PIANOS)	47,000	FMV			
26 Other ▶()					
27 Other • ()					
28 Other • ()					
29 Number of Forms 8283 received by the organization during the tax year for contributions		<u>'</u>			
for which the organization completed Form 8283, Part IV, Donee Acknowledgement	. 29	9			0
30a During the year, did the organization receive by contribution any property reported in Part I,	lines 1 :	through 28 that		Yes	No
it must hold for at least three years from the date of the initial contribution, and which is not					
for exempt purposes for the entire holding period?	requirec	i to be used			
			30a		No
b If "Yes," describe the arrangement in Part II31 Does the organization have a gift acceptance policy that requires the review of any non-stan	dard co	ntrihiitions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or contributions?	sell nor	ncash • • •	32a		No
b If "Yes," describe in Part II					
33 If the organization did not report an amount in column (c) for a type of property for which column describe in Part II	ımn (a)	ıs checked,			

Page 2

Schedule M (Form 990) (2014)

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

Schedule M (Form 990) (2014)

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DLN: 93493134002316

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Name of the organization NAZARETH COLLEGE OF ROCHESTER **Employer identification number** 16-0743088

990 Schedule O. Supplemental Information

990 Schedule O, Supplem	nental Information
Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	
FORM 990, PART VI, SECTION A, LINE 2	JUDY WILMOT LINEHAN AND THOMAS WILMOT HAVE A FAMILY RELATIONSHIP
FORM 990, PART VI, SECTION B, LINE 11	THE AUDIT COMMITTEE, A SUB-COMMITTEE OF THE GOVERNING BODY, REVIEWED THE 2014 FORM 990 IN DETAIL PRIOR TO ITS FILING AFTER APPROVAL OF THE AUDIT COMMITTEE, A FINAL DRAFT OF THE FORM 990 IS DISTRIBUTED TO THE ENTIRE BOARD OF TRUSTEES PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C	THE COLLEGE ANNUALLY DISTRIBUTES THE CONFLICT OF INTEREST POLICY TO THE TRUSTEES, OFFICERS , THE ASSISTANT SECRETARY TO THE BOARD AND THE SECRETARY TO THE COLLEGE. THE INFORMATION R
	ECEIVED IS COMPILED, ANALYZED, MAINTAINED AND MONITORED BY THE COLLEGE'S GENERAL COUNSEL ALL RESULTS ARE FORWARDED TO THE CHAIR OF THE BOARD OF TRUSTEES, THE CHAIR OF THE AUDIT CO
	MMITTEE, THE CHIAR OF THE TRUSTEESHIP COMMITTEE, COLLEGE'S PRESIDENT, AND VICE PRESIDENT F OR FINANCE AND ADMINISTRATION
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION SUB-COMMITTEE, A SUB-COMMITTEE OF THE EXECUTIVE COMMITTEE OF THE BOARD OF
	TRUSTEES, MEETS ANNUALLY TO REVIEW THE PRESIDENT'S PERFORMANCE AS COMPARED TO THE GOALS S
	ET FORTH FOR HIM FROM THE PREVIOUS FISCAL YEAR IN ADDITION, THE SUB-COMMITTEE'S RECOMMEND ATIONS ALONG WITH DATA FROM AN INDEPENDENT COMPENSATION CONSULTANT ARE SUBMITTED TO THE EX
	ECUTIVE COMMITTEE FOR REVIEW AND ENDORSEMENT ONCE APPROVED BY THE EXECUTIVE COMMITTEE, TH
	E RECOMMENDATIONS ARE CONSIDERED AND VOTED ON BY THE FULL BOARD OF TRUSTEES IN EXECUTIVE S
	ESSION COMPENSATION LEVELS FOR THE VICE PRESIDENTS OF THE COLLEGE ARE DETERMINED ANNUALLY
	BY THE PRESIDENT, WITH REVIEW AND ENDORSEMENT FROM THE EXECUTIVE COMMITTEE OF THE BOARD INPUTS INCLUDE PERFORMANCE TO ANNUAL GOALS, AN OVERALL ASSESSMENT OF SIGNIFICANT CONTRIBUT
	IONS TO AND LEADERSHIP OF THE COLLEGE, AS WELL AS COMPETITIVENESS OF PAY RELATIVE TO COMPA
	RABLE INSTITUTIONS ON A PERIODIC BASIS, AN INDEPENDENT CONSULTANT IS ENGAGED TO REVIEW FO R EACH VICE PRESIDENT, TO PROVIDE COMPETITIVE MARKET INFORMATION, AND TO RECOMMEND ADJUSTM
	ENTS FOR CONSIDERATION BY THE PRESIDENT AND EXECUTIVE COMMITTEE.
FORM 990, PART VI, SECTION C, LINE 19	THE COLLEGE MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST
FORM 990, PART VI, SECTION B, LINE 14	THE COLLEGE DOES NOT CURRENTLY HAVE AN ADOPTED DOCUMENT RETENTION AND DESTRUCTION POLICY, HOWEVER A DRAFT HAS BEEN UPDATED AND IS CURRENTLY UNDER REVIEW
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS 113,828 POSTRETIREMENT-RELATED CHANGES OTHER THAN NET PERIODIC BENEFIT COST -1,221,622
FORM 990, PART XII, LINE 2C	NO CHANGES WERE MADE TO OVERSIGHT PROCESS OR SELECTION PROCESS RELATED TO INDEPENDENT AUDITORS DURING THE CURRENT YEAR
<u>, </u>	