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DLN: 93493135000086

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

Open to Public Inspection

A Fo	r the	2014 ca	lendar year, or tax year beginning	07-01-2014 , and ending 06-30-203	L5			
B Che	eck ıf a	pplicable	C Name of organization			D Emplo	yer ider	tification number
Address change			Bucknell University			24-0	772407	,
┌ Nai	me cha	nae	Doing business as				//240/	
_	ial retu	_	Doing Business as					
		***	Number and street (or P O box if ma	all is not delivered to street address) Room/s	uite	E Teleph	one numl	per
Fin ret		mınated	1 Dent Drive Finance Office			(570	577-3	811
┌ Am	ended	return	City or town, state or province, coun	try, and ZIP or foreign postal code				
Г Арг	olication	n pending	Lewisburg, PA 17837			G Gross	receipts \$	544,400,445
			F Name and address of prin	cipal officer	U (a) Io t	L		for
			John C Bravman			his a group ordinates?		ror
			219 Marts Hall Bucknell Univ Lewisburg, PA 17837	,				
			Lewisburg, PA 17837			all subord uded?	ınates	┌ Yes 🔽 No
T Ta	x-exem	npt status	s ▼ 501(c)(3)	nsert no)			n a list	(see instructions)
1 14/	oboito		ww bucknell edu		-			
					H(c) Gro	oup exemp	tion nun	nber 🟲
			n 🔽 Corporation 🗌 Trust 🦳 Association	n	L Year of	formation 1	846 M	State of legal domicile PA
Pa	rt I	Sun	nmary					
			describe the organization's missio					
		Buckne	ell is a unique national university w	here liberal arts and professional pro	grams compl	ement eac	h other	
ည်	-							
屋								
Governance	2 (Check	this box 🛏 if the organization dis	continued its operations or disposed	of more than	25% of its	s net as:	sets
							1 - 1	
Activities &	I			ng body (Part VI, line 1a)			3	33
ĕ	I			if the governing body (Part VI, line 1b			4	30
톭				alendar year 2014 (Part V, line 2a)			5	3,623
ą.			·	ecessary)			6	2,570
	1			art VIII, column (C), line 12		• •	7a	-847,332
	Ь	Net unr	related business taxable income fr	om Form 990-T, line 34			7b	-2,159,394
						ior Year		Current Year
a)	9 Progra			ne 1h)		35,731,430		32,372,293
eu				ne 2g)		197,869,085		203,657,509
Rayenue	10			(A), lines 3, 4, and 7d)	·	17,894,962		27,410,599
_	11		r revenue (Part VIII, column (A), l			5,290,030		3,804,313
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		ie	256,785,507		267,244,714
	13			IX, column (A), lines 1-3)		50,125,	,971	51,539,459
	14	Bene	fits paid to or for members (Part I)	X, column (A), line 4)				0
	15		es, other compensation, employee benefits (Part IX, column (A), lines			124 725 526		120 551 606
8		5-10	0)			124,735,526		130,551,606
Expenses	16a	Profe	essional fundraising fees (Part IX,	column (A), line 11e)	•			0
ੜੇ	Ь	Total f	fundraising expenses (Part IX, column (D)	, line 25) 📭 9,597,685				
	17	Othe	r expenses (Part IX, column (A), li	nes 11a-11d, 11f-24e)		76,782	134	75,681,290
	18			t equal Part IX, column (A), line 25)		251,643,631		257,772,355
	19			L8 from line 12		5,141,		9,472,359
æ æ					Beginni	ng of Curre	ent	End of Year
Net Assets or Fund Balances						Year		Eliu Oi Teal
3.55 B.25	20					,154,472,	.235	1,260,199,818
4 E	21					177,060,		289,678,003
	22	_		ine 21 from line 20		977,411,	719	970,521,815
Pai	rt II	Sig	nature Block					
my k	nowled	dge and	d belief, it is true, correct, and com knowledge ***	mined this return, including accompa plete Declaration of preparer (other t	than officer) i	s based or 2016-05-14		
Sign		Sigr	nature of officer			Date		
Here	е		vid J Surgala VP-Finance & Admin					
		<u> 17 - </u>	Print/Type preparer's name	Droparade cianatura	Date		DTTN	
ь.	.J		Print/Type preparer's name	Preparer's signature		neck / If elf-employed	PTIN	
Paid			Firm's name			rm's EIN 🕨	•	
	pare		Firm's address		DI	none no		
Use	()n	IV I			1''			

۲	orm	990	(2014)	

Total program service expenses

)	a	g	e	2
---	---	---	---	---

Par			of Program Serv dule O contains a res		lishments to any line in this Part	III		.
1	Briefly	describe the o	organization's missio	n				
a life educ Buck char the c	time of c ation en knell fost acter, int common	critical thinking ables students ers a resident formed by a de good and to pr	g and strong leadersh s to interact daily wit ial, co-curricular env ep understanding of omote justice in way	nip characterize h faculty who ex ironment in whi different culture s sensitive to tl	d by continued intelled semplify a passion for ch students develop in is and diverse perspec ne moral and ethical di	complement each other Bictual exploration, creativit learning and a dedication to itellectual maturity, person ctives Bucknell seeks to e imensions of life Bucknells rning extends beyond that	y, and imagination of teaching and school of teaching and sold school of the conviction and sold teaches and help and he	A Bucknell larship trength of to serve ritage will
2	the prio	or Form 990 oi	990-EZ?		ervices during the yea	r which were not listed on	\(\tag{Yes}\)	No
	If "Yes	," describe the	ese new services on !	Schedule O				
3		-	cease conducting, or	•	nt changes in how it co	onducts, any program	\(\tag{Yes} \)	No
	If"Yes	," describe the	ese changes on Sche	dule O				
4	expens	ses Section 50		4) organization	s are required to repor	ree largest program servic t the amount of grants and		
4a	(Code) (Expenses \$	130,498,231	including grants of \$	51,411,919) (Revenue s	\$ 170,879,120)
	Instruct	tion - the expense	es of instructional departn	nents and program	s			
4b	(Code) (Expenses \$	37,984,263	ıncludıng grants of \$) (Revenue \$	2,265,913)
	Studen	t Services - the e	xpenses of activities and	services that indire	ctly support the educational	l programs such as library service	es and athletics/recreation	on
4c	(Code) (Expenses \$	27,787,559	ıncludıng grants of \$) (Revenue \$)	
	Acaden	nic Support - the	expenses of activities and	services that direc	tly support instruction			
4d	Other	program serv	ıces (Describe in Sch	nedule O)				
	(Expe	nses \$	25,333,931 in	cluding grants (of \$) (Revenue \$	36,374,326)	

221,603,984

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A^{2}	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		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	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	Yes	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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	Yes	
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	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to 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		Νo
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 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	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \footnotemark	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	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section $512(b)(13)$?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2014)

art				_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	▽ No
1a Fr	iter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 3,5	61	1 65	140
	ster the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b	0		
	d the organization comply with backup withholding rules for reportable payments to vendors and reportable	_		
ga	ming (gambling) winnings to prize winners?	1c	Yes	
Τa	ter the number of employees reported on Form W-3, Transmittal of Wage and x Statements, filed for the calendar year ending with or within the year covered			
•	<u> </u>	523		
	at least one is reported on line 2a, did the organization file all required federal employment tax returns? Ite. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a Di	d the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b If	"Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
ov	any time during the calendar year, did the organization have an interest in, or a signature or other authority er, a financial account in a foreign country (such as a bank account, securities account, or other financial count)?	4a	Yes	
b If	"Yes," enter the name of the foreign country 🕒 🕒			
Se	e instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts BAR)			
a W	as the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b Di	d any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c If	"Yes," to line 5a or 5b, did the organization file Form 8886-T?		1	
		5c	1	
or	pes the organization have annual gross receipts that are normally greater than \$100,000, and did the ganization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
we	"Yes," did the organization include with every solicitation an express statement that such contributions or given not tax deductible?	ofts 6b		
	ganizations that may receive deductible contributions under section 170(c).			
se	d the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods an rvices provided to the payor?		Yes	
	"Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	d the organization sell, exchange, or otherwise dispose of tangible personal property for which it was require = Form 8282?	. 7c		No
i If	"Yes," indicate the number of Forms 8282 filed during the year	0		
	d the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		No
: Di	d the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. 7f		No
	the organization received a contribution of qualified intellectual property, did the organization file Form 8899			
re	quired?	7g		No
Fo	the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file rm 1098-C?	a 7h		No
Dı	onsoring organizations maintaining donor advised funds. d a donor advised fund maintained by the sponsoring organization have excess business holdings at any tim ring the year?			, , ,
		8		N c
	d the sponsoring organization make any taxable distributions under section 4966? d the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a 9b	+	N c
	ction 501(c)(7) organizations. Enter	90		INC
	itiation fees and capital contributions included on Part VIII, line 12 10a			
o Gr	ross receipts, included on Form 990, Part VIII, line 12, for public use of club			
Se	ction 501(c)(12) organizations. Enter			
	oss income from members or shareholders			
	oss income from other sources (Do not net amounts due or paid to other sources ainst amounts due or received from them)			
a Se	ction 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
	"Yes," enter the amount of tax-exempt interest received or accrued during the ar			
Se	ction 501(c)(29) qualified nonprofit health insurance issuers.			
	the organization licensed to issue qualified health plans in more than one state? Ite. See the instructions for additional information the organization must report on Schedule O	13a		No
	ter the amount of reserves the organization is required to maintain by the states			
	which the organization is licensed to issue qualified health plans			
a Di	d the organization receive any payments for indoor tanning services during the tax year?	14a		No
	"Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14b	1	1

►David J Surgala

217 Marts Hall Bucknell University Lewisburg, PA 17837 (570) 577-3811

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

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

Se	ection A. Governing Body and Management		V	N-
	Enterthe months of other months of the common but at the control of the term.		Yes	No_
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No No
6	Did the organization become aware during the year of a significant diversion of the organization's assets.	6		No No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	H		
	more members of the governing body?	7a 7b		No No
	or persons other than the governing body?	70		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	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		e.)
			Yes	No_
	Did the organization have local chapters, branches, or affiliates?	10a		No_
Ь	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b		ıza	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a	Yes Yes	
c				
	rise to conflicts?	12b	Yes	
13	rise to conflicts?	12b 12c	Yes	
13 14	rise to conflicts?	12b 12c 13	Yes Yes Yes	
13 14 15	rise to conflicts?	12b 12c 13	Yes Yes Yes	
13 14 15 a	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes Yes Yes Yes	No
13 14 15 a	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	12b 12c 13 14	Yes Yes Yes Yes	No
13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes Yes Yes Yes	No No
13 14 15 a b	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	12b 12c 13 14 15a 15b	Yes Yes Yes Yes	
13 14 15 a b	rise to conflicts?	12b 12c 13 14 15a 15b	Yes Yes Yes Yes	
13 14 15 a b	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 organization's exempt status with respect to such arrangements?	12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes	No
13 14 15 a b 16a b	Tise 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 organization's exempt status with respect to such arrangements? List the States with which a copy of this Form 990 is required to be filed▶AL, AZ, CT, HI, KY, MA, MD, MI, MOH, OR, SC, UT, VA, WA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.	12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes	No
13 14 15 a b	rise to conflicts?	12b 12c 13 14 15a 15b 16a	Yes Yes Yes Yes	No

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)

Part VII 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	more t perso	han d n is	ne l both	box, ∣an d	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 trustée or director	Institutional Trustee	Officei	Key employee	2/1099-MI 를 들 목	2/1099-MISC)	SC) 2/1099-MISC)	organization and related organizations	

1b	Sub-Total	•		
c	Total from continuation sheets to Part VII, Section A	►		
d	Total (add lines 1b and 1c)	►	5,402,474	1,107,104

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►175

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Warfel Construction Company 1110 Enterprise Road East Petersburg, PA 17520	Construction	22,926,173
Parkhurst Dining Service PO BOX 644091 Pittsburgh, PA 15264	Food Management	10,027,475
Zartman Construction Inc 3000 Point Township Drive Northumberland, PA 17857	Construction	1,652,217
PW Feats Inc 3 E Read Street Baltimore, MD 21202	Events Planning	1,252,673
Silvertip Inc 600 St Mary Street Lewisburg, PA 17837	Construction	866,665
2 Total number of independent contractors (including but not limited to those listed above	e) who received more than	

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization -36

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Check if Schedule O contains a response or note to any line in this Part VIII	(D) Revenue excluded from tax under sections 512-514
Ca	Revenue excluded from tax under sections
Business Code	
Business Code	1
Business Code	
2a Golf Course	
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	1
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	4
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	
3 Investment income (including dividends, interest, and other similar amounts)	
and other similar amounts)	
5 Royalties	14,867,850
(i) Real (ii) Personal 6a Gross rents b Less rental expenses c Rental income 1	-
6a Gross rents b Less rental expenses c Rental income 1	
b Less rental expenses c Rental income 1	
c Rental income 1	
or (loss) d Net rental income or (loss)	
(i) Securities (ii) Other	
7a Gross amount from sales of assets other	
than inventory	
other basis and 277,155,731 other basis and	
sales expenses c Gain or (loss) 12,542,749	
d Net gain or (loss)	12,542,749
8a Gross income from fundraising events (not including	
events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b c Net income or (loss) from fundraising events	
b Less direct expenses b	
c Net income or (loss) from fundraising events	
9a Gross income from gaming activities	
See Part IV, line 19	
b Less direct expenses b	
c Net income or (loss) from gaming activities	
10a Gross sales of inventory, less	
returns and allowances .	
b Less cost of goods sold b	
c Net income or (loss) from sales of inventory	
Miscellaneous Revenue Business Code	
11a Athletics Related Revenue 611710 2,265,913 2,265,913	
b Other Auxiliary Revenue 611710 3,595,936 3,595,936	
c Sponsorship/A dvertising 900099 105,038 105,03	8
d All other revenue2,162,575 -2,162,575	5
e Total. Add lines 11a-11d	
12 Total revenue. See Instructions	1

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must comp	lete column (A	١)
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Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns Al				
	Check if Schedule O contains a response or note to any line in this	Part IX I			 (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) 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	97,540	97,540		
2	Grants and other assistance to domestic individuals See Part IV, line 22	44,428,005	44,428,005		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	7,013,914	7,013,914		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	5,343,538	1,655,135	3,445,767	242,636
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	349,746	349,746		
7	Other salaries and wages	90,697,050	77,113,712	9,210,138	4,373,200
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	7,570,217	6,433,843	774,042	362,332
9	Other employee benefits	20,003,539	16,581,568	2,460,391	961,580
10	Payroll taxes	6,587,516	5,429,840	841,862	315,814
11	Fees for services (non-employees)			,	·
а	Management	0			
ь	Legal	137,042	11,616	117,511	7,915
c	Accounting	179,158	,	179,158	.,
d	Lobbying	120,588		120,588	
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	1,541,980		1,541,980	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	20,520,632	16,347,467	3,147,877	1,025,288
12	Advertising and promotion	306,690	151,129	155,561	· · · · · · · · · · · · · · · · · · ·
13	Office expenses	11,160,581	9,364,937	1,262,386	533,258
14	Information technology	2,555,966	2,373,518	171,955	10,493
15	Royalties	0	_,_,_,	2. 2, 2. 2	
16	Occupancy	302,522	271,459	31,063	
17	Travel	7,825,562	5,702,873	1,245,689	877,000
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	3,702,073	1,213,003	077,000
19	Conferences, conventions, and meetings	0			
20	Interest	1,664,238	1,623,748		40,490
21	Payments to affiliates	0			·
22	Depreciation, depletion, and amortization	17,347,678	16,453,282	417,800	476,596
23	Insurance	1,254,676	1,249,189	5,487	·
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Utilities & fuel	5,792,715	5,698,402	49,388	44,925
b	Other Repair and Maintenance	4,273,536	2,659,079	1,303,360	311,097
С	Miscellaneous	479,134	415,986	55,864	7,284
d	Real Estate Taxes	218,592	177,996	32,819	7,777
e	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	257,772,355	221,603,984	26,570,686	9,597,685
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)		, , , ,		

Part X Balance Sheet Check if Schedule O

		Check if Schedule O contains a response or note to any line	e in this	Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			9,078,845	1	21,045,009
	2	Savings and temporary cash investments		52,135,898	2	11,225,040	
	3	Pledges and grants receivable, net		24,984,562	3	27,863,052	
	4	Accounts receivable, net			2,994,079	4	3,003,723
	5	Loans and other receivables from current and former officer key employees, and highest compensated employees Com Schedule L	art II of	56 740	-	47,081	
ts	6	Loans and other receivables from other disqualified persons section 4958(f)(1)), persons described in section 4958(c)(employers and sponsoring organizations of section 501(c)(beneficiary organizations (see instructions) Complete Part	and contributing intary employees'	56,710	_	2,704	
Assets	,	Notes and loans receivable, net			16,719,206	-	16,228,227
Ą	7 8	·			100,032	8	109,318
	9	Inventories for sale or use			2,042,640	<u> </u>	2,979,706
	10a	Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis	10a	584,812,857	2,042,040	9	2,919,100
	ь	Complete Part VI of Schedule D	10a	291,862,679	263,337,722	10-	202.050.178
	_	Less accumulated depreciation		• •	341,130,498		292,950,178 326.849.952
	11	Investments—publicly traded securities	443,799,813		494,173,355		
	13	Investments—other securities See Part IV, line 11	-1,911,880		63,722,473		
		Investments—program-related See Part IV, line 11		-1,911,000		05,722,475	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,154,472,235	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)				16	1,260,199,818
	17	Accounts payable and accrued expenses			107,427,625		119,375,391
	18	Grants payable			9 742 100	18	12 915 070
	19	Deferred revenue			8,743,199		13,815,079
	20	Tax-exempt bond liabilities			55,872,787	20	151,706,303
<u>ies</u>	21	Escrow or custodial account liability Complete Part IV of S			21		
Liabiliti	22	Loans and other payables to current and former officers, dir key employees, highest compensated employees, and disq	ualıfıed	,			
匝		persons Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrelated third pa				23	
	24	Unsecured notes and loans payable to unrelated third partic			809,262	24	776,061
	25	Other liabilities (including federal income tax, payables to i and other liabilities not included on lines 17-24) Complete D	Part X	of Schedule	4,207,643	25	4,005,169
	26	Total liabilities. Add lines 17 through 25			177,060,516	26	289,678,003
— s		Organizations that follow SFAS 117 (ASC 958), check here lines 27 through 29, and lines 33 and 34.			,,	20	
a Ne	27	Unrestricted net assets			431,752,949	27	424,647,339
<u> </u>	28	Temporarily restricted net assets			293,095,235	28	284,426,725
	29	Permanently restricted net assets			252,563,535	29	261,447,751
Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), checomplete lines 30 through 34.			, ,		
<u> </u>	30	Capital stock or trust principal, or current funds	-			30	
Ę	31	Paid-in or capital surplus, or land, building or equipment fur				31	
55	32	Retained earnings, endowment, accumulated income, or oth				32	
	33	Total net assets or fund balances			977,411,719	33	970,521,815
Ř	34	Total liabilities and net assets/fund balances					
	34	i otal navinties and net assets/lund balances	•		1,154,472,235	34	1,260,199,818

Par	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		267,2	244,714
2	Total expenses (must equal Part IX, column (A), line 25)	2		257,7	772,355
3	Revenue less expenses Subtract line 2 from line 1	3		.72,359	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			11,719
5	Net unrealized gains (losses) on investments	5			000,138
6	Donated services and use of facilities	6		<u>, </u>	•
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-2,3	362,125
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		970,	521,815
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revial separate basis, consolidated basis, or both	ewed o	n		
	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 Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ght of tl	ne 2с	Yes	ı
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	!	3b	Yes	

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EIN: 24-0772407 Name: Bucknell University

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title A vera hours week (any ho		Posit more th perso and a	ion (han o n is b	ne b oth	ox,ι an o	ınless fficer		(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	Ke) employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations	
(1) Kenneth W Freeman	1 00	x		Х				0	0	0	
Chairman (1) J Randall MacDonald	0 00						_				
		х		х				0	0	0	
Vice Chair/Secr (2) Jane Taylor Elfers	1 00										
Vice Chair	0 00	X		X				0	0	0	
(3) John E Bachman	1 00	х						0	0	0	
Trustee	0 00	^						Ů	0		
(4) Susan Baird	1 00	X						0	0	0	
Trustee (5) Charles W Berger	0 00										
Trustee	0 00	Х						0	0	0	
(6) Juanita Ora Luckett Brown	1 00										
Trustee	0 00	X						0	0	0	
(7) Ellen Q Bush	1 00	х						0	0	0	
Trustee	0 00	^						Ů	0		
(8) Brenda Earl	1 00	X						0	0	o	
Trustee (9) Harnet Edelman	0 00				-						
		Х						0	0	0	
(10) Michael E Flowers	0 00 1 00										
Trustee	0 00	X						0	0	0	
(11) Peter C Gerhard	1 00	х						0	0	0	
Trustee	0 00							Ů	, and the second		
(12) Susan Ginkel	1 00	Х						0	0	0	
Trustee (13) Eugene A Gorab	0 00										
Trustee	0 00	Х						0	0	0	
(14) Kırsten Heinemann	1 00							_	_	_	
Trustee	0 00	X						0	0	0	
(15) Stephen P Holmes	1 00	x						0	0	0	
Trustee	0 00										
(16) Marlene A Hurd	1 00	х						0	0	О	
Trustee (17) Laura A Kınney	1 00										
Trustee	0 00	Х						0	0	0	
(18) Lawrence S Klock	1 00										
Trustee	0 00	Х						0	0	0	
(19) David Maurrasse	1 00	X						0	0	0	
Trustee	0 00										
(20) Craig D Mills	1 00	х						0	0	О	
Trustee (21) William B Morrow Jr	0 00 1 00				+		\vdash				
Trustee	0 00	х						0	0	0	
(22) Christopher J O'Brien	1 00	l ,						_	_		
Trustee	0 00	Х						0	0	0	
(23) Nancy B Prial	1 00	х						0	0	0	
Trustee (24) Daniel R Richards	0 00				-		_				
		x						0	0	0	
Trustee	0 00	L	<u> </u>	l	1	1	1	I	I	<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) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the					
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former	2/1099-MI3C)	2/1099-M13C)	organization and related organizations	
(26) David T Scadden	1 00	х						0	0	0	
Trustee (1) Frank Schoeneman	0 00										
Trustee	0 00	x						0	0	0	
(2) Erika ND Stanat	1 00	х						0	0	0	
Trustee (3) Glenn D Steele Jr	1 00										
Trustee	0 00	x						0	0	0	
(4) Christopher B Sullivan	1 00	х						0	0	0	
Trustee (5) C Alan Walker	0 00										
Trustee	0 00	х						0	0	0	
(6) Robin G Zafirovski Trustee	1 00	х						0	0	0	
(7) John C Bravman President	40 00	×		х				640,107	0	193,554	
(8) Michael A Smyer	40 00			х				330,143	0	63,348	
Provost (9) David J Surgala	0 00 40 00										
VP-Fin & Adm (10) Scott G Rosevear	0 10			X				315,616	0	40,261	
VP-Dev & Alum	40 00			Х				305,336	0	47,224	
(11) William T Conley VP-Enrollment	40 00			х				220,564	0	47,089	
(12) Param S Bedi	40 00			х				219,600	0	25,079	
VP-Library & IT (13) Amy C Foerster	0 00 40 00										
General Counsel	0 00			Х				250,700	0	33,269	
(14) Carol M Kennedy Secretary	40 00			х				120,293	0	19,266	
(15) Dennis W Swank AVP-Finance	40 00 0 10			х				189,733	0	53,141	
(16) Dennis W Hawley	40 00			х				165,661	0	36,830	
AVP-Facilities (17) Pierre D Joanis	0 00 40 00							200 117		24.405	
AVP-Human Res (18) Michael S Cover	0 00			×				200,117	0	34,406	
Treas/Controll	0 10			Х				192,353	0	29,071	
(19) Christopher D Brown Invstmt Officer	40 00			х				277,375	0	43,554	
(20) Kathleen Graham	40 00			х				195,260	0	19,803	
AVP-Development (21) John P Hardt	0 00 40 00				X			226,033	0	54,432	
Director of Athletics (22) Keith W Buffinton	0 00 40 00										
Dean-Engineering	0 00				X			193,045	0	69,492	
(23) George C Shields Dean-Arts and Sciences	40 00				x			193,091	0	60,773	
(24) Susan Lantz	40 00				х			164,857	0	36,067	
Dean of Students	0 00	<u> </u>	<u> </u>			<u> </u>					

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

(A) Name and Title	(B) A verage hours per week (list any hours	Posit more th persor and a	ion (d nan o n is b	ne bo	ox, u an of	nless ficer		(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	Сеі	Key employee	Highest compensated employee	Fornier	2/1099-MISC) 2/1099-MISC		organization and related organizations	
(51) David R Paulsen Coach Men's Basket	40 00					х		287,895	0	76,623	
(1) Joseph G Susan Jr Coach Football	40 00					х		188,281	0	32,175	
(2) James Orbison Professor	40 00					х		180,713	0	24,181	
(3) James P Rice Assoc Provost	40 00					х		177,771	0	32,485	
(4) Matthew Higgins Professor	40 00	_				х		167,930	0	34,981	

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DLN: 93493135000086

OMB No 1545-0047

SCHEDULE A

(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

	Name of the organization Bucknell University						Employer identification number			
DUCKII	en onive	ersity					24-0772407			
Pa	rt I	Reason for Publi	c Charity S	Status (All organiza	itions must co	mplete this p		ons.		
		zation is not a private fo								
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	o)(1)(A)(i).			
2	굣	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)					
3	Г	A hospital or a cooper	ative hospital	service organization (described in sec	tion 170(b)(1)	(A)(iii).			
4	Γ	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the								
5	\vdash	hospital's name, city, An organization opera	and state	nefit of a college or uni	versity owned o	or operated by a	a governmental unit d	escribed in		
,	'	section 170(b)(1)(A)			versity owned t	or operated by t	a governmentar ame a	escribed iii		
6	г	A federal, state, or loc			doceribod in co	oction 170/b)/1	\(\lambda\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
_	<u>'</u>							ranaval muhlia		
7	ı	An organization that n described in section 1				om a governme	ental unit of from the g	Jeneral public		
8	Г	A community trust de				tII)				
9	,	An organization that n					butions, membership	fees, and gross		
	·	receipts from activitie								
		its support from gross								
		acquired by the organ								
10	Г	An organization organ								
11	<u></u>	An organization organ	•	•	•	•		ut the purposes of		
	,	one or more publicly s								
	_	the box in lines 11a th								
а	ļ	Type I. A supporting of								
		supported organizatio organization You mus				ty of the direct	ors or trustees of the	supporting		
ь	Г	Type II. A supporting				with its suppo	rted organization(s), l	ov having control or		
	·		_	•		• •	• • • • • • • • • • • • • • • • • • • •	the supported organization(s) You		
	_	must complete Part I								
C	ı	Type III functionally						grated with, its		
d	Г	supported organizatio						ianization(s) that is		
_	'	Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement.								
	_	(see instructions) Yo								
е	ı	Check this box if the o					s a Type I, Type II, T	ype III functionally		
f	<pre>integrated, or Type III non-functionally integrated supporting organization f</pre>									
-		Provide the following i								
		Trovide the following i	mormation ab	out the supported orga	inizacion(3)					
	(i)Na	ame of supported	(ii) EIN	(iii) Type of	(iv) Is the org	ganızatıon	(v) A mount of	(vi) A mount of		
	(organization		organization	listed in your		monetary support other support			
			(described on lines 1-9 above or IRC	docume	ent?	(see instructions)	ınstructions)			
				section (see						
				instructions))						
					Yes	No				

Sch	edule A (Form 990 or 990-EZ) 2014						Page 2
Pa	Support Schedule for (Complete only if you c	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	ipiete Part I	11.)
	endar year (or fiscal year beginning	(-) 2010	(1) 2011	(-) 2012	(4) 2012	(-) 201	(6) T. t. l
	in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
,	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	1	l			1	
	endar year (or fiscal year beginning	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	in) ►	(a) 2010	(0) 2011	(6) 2012	(d) 2013	(e) 2014	(I) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support Add lines 7 through 10						
12	Gross receipts from related activities	es, etc (see inst	ructions)		•	12	<u> </u>
13	First five years. If the Form 990 is f	or the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	section 501	(c)(3)
	organization, check this box and sto					<u> </u>	<u> </u>
	ection C. Computation of Pub			4.4 1 (5)		 	
14	Public support percentage for 2014	· ·		11, column (f))		14	
15	Public support percentage for 2013	•	•			15	
16a	33 1/3% support test—2014. If the				line 14 is 33 1/3%	∕o or more, ch	
h	and stop here. The organization qua 33 1/3% support test—2013. If the				and line 15 is 3	3 1/3% or mo	re check this
	box and stop here. The organization				, and fine 13 is 3.	3 1/3/0 01 1110	re, check this ▶□
17a	10%-facts-and-circumstances test-	-2014. If the org	anızatıon dıd not	check a box on li			,
	is 10% or more, and if the organizat						
	in Part VI how the organization mee	ts the "facts-and	d-circumstances'	test The organi	zation qualifies as	s a publicly s	
h	organization 10%-facts-and-circumstances test-	-2013. If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and b	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part VI how the organizat						ublicly
	supported organization				471		▶ ┌
18	Private foundation. If the organizations	on ala not check	ca box on line 13	, 16a, 16b, 1/a,	or 1 / b, check this	s pox and see	• ▶ □

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.	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each		1 1	

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	plish exempt purposes		
2 A mounts paid to perform activity that directly furthexcess of income from activity	ers exempt purposes of supp	ported organizations, in	
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 31 and 4c			
8 Breakdown of line 7			
a From 2010			
b From 2011			
c From 2012			
d From 2013			

Part VI 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 Test

Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2014

DLN: 93493135000086

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

	me of the organization			Employer iden	tification number		
				24-0772407			
Par	I-A Complete if the or	ganization is exempt unde	er section 501(d	c) or is a section 527	organization.		
1	Provide a description of the or	ganızatıon's dırect and ındırect pol	ıtıcal campaıgn actı	ıvıtıes ın Part IV			
2	Political expenditures			▶	\$		
3	Volunteer hours						
Par	I-B Complete if the or	ganization is exempt unde	er section 501(d	c)(3).			
1	Enter the amount of any excis	e tax incurred by the organization	under section 4955	▶	\$		
2	Enter the amount of any excis	e tax ıncurred by organızatıon man	agers under sectior	n 4955 ►	\$		
3	If the organization incurred a s	section 4955 tax, did it file Form 4	720 for this year?		┌ Yes ┌ No		
4a	Was a correction made?				┌ Yes ┌ No		
b	If "Yes," describe in Part IV						
Par	•	ganization is exempt unde			1(c)(3).		
1		ended by the filing organization for			\$		
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	other organizations	for section 527 ►	¢		
2		tures Add lines 1 and 2 Enter he	ro and on Form 112	0 DOL line 17h - b -	Ψ		
3	·		re and on Form 112	0-POL, IIIIe 17b	\$		
4	Did the filing organization file	·			☐ Yes ☐ No		
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information 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	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)							
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								
e	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	e 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	r-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

Pa	complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).	has NO	T				
For e	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		(a	a)		(b)	
	each res response to lines 1a through 11 below, provide in rait 1v a detailed description of the lobbying vity.	Y	'es	No	A	mour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers?			N o			
a b		Y	es	140			
c	Media advertisements?			No			
d	Mailings to members, legislators, or the public?			Νo			
е	Publications, or published or broadcast statements?			Νo			
f				Νo			
g		Y	es			12	20,588
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			No			
i	O ther activities?			Νo			
j	Total Add lines 1c through 1i					12	20,588
2a				No			
Ь							
С	, , , , , , , , , , , , , , , , , , , ,			ı			
d	, , , , , , , , , , , , , , , , , , , ,			No			
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 50	1(c)(5), c	or se	ctio	n
	501(c)(6).				Т	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			Г	1	103	110
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			-	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				3		
Pai	rt III-B Complete if the organization is exempt under section $501(c)(4)$, sec	tion 50	1(c)(5),	r se	ctio	n
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answerline 3, is answered "Yes."						
1	Dues, assessments and similar amounts from members		1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit expenses for which the section 527(f) tax was paid).	ical					
а			2a				
b	Carryover from last year		2b				
C	Total		2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	s	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex						
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4				
5	Taxable amount of lobbying and political expenditures (see instructions)		5				
P	Part IV Supplemental Information						
	rovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliat (see instructions), and Part II-B, line 1 Also, complete this part for any additional information	ed group l	ıst),	Part II	-A, lır	nes 1	and
	Return Reference Explanation						

Part IV Supplemental Information (continued)						
Return Reference	Explanation					

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493135000086

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

Open to Public

	me of the organization cknell University		Employer identification number
Pa	rt I Organizations Maintaining Donor A	dvised Funds or Other Similar	Funds or Accounts. Complete if the
	organization answered "Yes" to Form 99	0, Part IV, line 6.	<u> </u>
		(a) Donor advised funds	(b) Funds and other accounts
L	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
1	Aggregate value at end of year		
5	Did the organization inform all donors and donor advifunds are the organization's property, subject to the	-	onor advised Yes No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit?		
Pa	rt II Conservation Easements. Complete	ıf the organization answered "Yes	" to Form 990, Part IV, line 7.
L 2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held	on or education) Preservation of Preservation of	an historically important land area a certified historic structure n the form of a conservation
	easement on the last day of the tax year		Held at the Find of the Veey
а	Total number of conservation easements		Held at the End of the Year
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified his		2c 2c
d	Number of conservation easements included in (c) a	• •	2d
3	Number of conservation easements modified, transfe	erred, released, extinguished, or termin	ated by the organization during
	the tax year -		
ŀ	Number of states where preparty subject to sensery	ation assument is located by	
•	Number of states where property subject to conserva		
•	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	?	☐ Yes ☐ No
5	Staff and volunteer hours devoted to monitoring, insp	pecting, and enforcing conservation eas	sements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easeme	nts during the year
	▶ \$		
3	Does each conservation easement reported on line 2 and section $170(h)(4)(B)(II)$?	(d) above satisfy the requirements of s	section 170(h)(4)(B)(i)
•	In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	the footnote to the organization's financ	
ar	rt III Organizations Maintaining Collection Complete if the organization answered '		s, or Other Similar Assets.
la	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar asservice, provide, in Part XIII, the text of the footnote	sets held for public exhibition, educatio	n, or research in furtherance of public
b	If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar asservice, provide the following amounts relating to the	sets held for public exhibition, educatio	
	(i) Revenue included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA		for financial gain, provide the
а	Revenue included in Form 990, Part VIII, line 1	· · · · · · · ·	► \$
b			
"	Assets included in Form 990, Part X		▶ \$

Part	Organizations Maintaining Co	llections of Art,	Histo	orical 1	reas	ures, or Ot	her Simila	ır Ass	ets (co	ntinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	s, che	ck any o	f the fo	llowing that ar	e a significa	nt use o	fıts	
а	Public exhibition		d	┌ Loai	norex	change progra	ms			
b	Scholarly research		e	┌ Oth	er					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and explair	n how t	they furth	ner the	organızatıon's	exempt pur	pose in		
5	During the year, did the organization solicit							_		
Dor	assets to be sold to raise funds rather than t IV								Yes	✓ No
Pai	Part IV, line 9, or reported an ar					ni aliswereu	res to re	פב ווווכ	υ,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other asse	ts not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the fo	ollowii	ng table		_				
						_		Amo	unt	
c	Beginning balance						lc			
d	Additions during the year					<u> </u>	.d			
e £	Distributions during the year					_	.e			
f	Ending balance					<u> </u>	lf			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, fo	rescrow	orcus	todial account	t liability?	J	Yes	□ No
	If "Yes," explain the arrangement in Part XI					-				<u> </u>
Pa	rt V Endowment Funds. Complete	<u>(a)Current year</u>		<u>rered "Y</u> or year	_	Form 990, I wo years back			a) Eour v	ears back
1a	Beginning of year balance	750,912,781		66,562,29		599,215,781	575,36			91,465,001
ъ	Contributions	65,491,926		18,442,17	7	31,554,185	66,23	30,490	1	1,988,657
c	Net investment earnings, gains, and losses	40.550.755		04 000 47		50.544.404	40.00			
d	Grants or scholarships	10,669,766 12,154,143		.01,823,17		68,641,181 10,496,884	-12,20	90,945		01,254,368
e	Other expenditures for facilities	22,20 1,2 10			1	20,120,001				
	and programs	24,520,314		23,543,04	9	21,435,413	19,35	56,382	1	17,662,912
f	Administrative expenses	1,045,941		978,89		916,552		25,436		1,538,899
g	End of year balance	789,354,075	7	750,912,78	1	666,562,298	599,21	.5,781	57	75,337,496
2	Provide the estimated percentage of the cur	·	e (line	1g, colu	mn (a))	held as				
а	Board designated or quasi-endowment ►	39 030 %								
b	Permanent endowment ► 31 030 %									
C	remporarily restricted endowment	940 %								
	The percentages in lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse organization by	ssion of the organizat	tion th	at are he	eld and	administered	for the		Yes	No
	(i) unrelated organizations							. 3a(i)	+	140
	(ii) related organizations							3a(ii)		No
b	If "Yes" to 3a(II), are the related organization	ns listed as required	on Sc	hedule R	?.			. 3b		No
4	Describe in Part XIII the intended uses of t									
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		ne org	ganızatıd	on ans	wered 'Yes'	to Form 99	0, Parl	t IV, lu	ne
	Description of property	10.		(a) Cost o pasis (inves		(b) Cost or other basis (other)	er (c) Accum		(d) Bo	ok value
	_and		-+			5,204,3	86	-+		5,204,386
	Buildings		 			352,802,0		322,005		9,480,065
	Leasehold improvements		.			332,002,0	133,	,		-,.50,005
	Equipment		.			128,786,9	25 115,	559,230	1	3,227,695
	Other					98,019,4		981,444		5,038,032
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			nn (B), lın	e 10(c)	.)			29	2,950,178
		·					Sche	dule D (Form 9	90) 2014

	nvestments—Other Securities. Com See Form 990, Part X, line 12.	plete if the organization	answered 'Yes' to For	m 990, Part IV, line 11b.
	Description of security or category	(b)Book value	(c) Method of va	aluation
	(including name of security)		Cost or end-of-year	
(1)Financial d	erivatives			
	ld equity interests			
Other				
Total. (Column	(b) must equal Form 990, Part X, col (B) line 12)	494,173,355		
	Investments—Program Related. Cor			orm 990, Part IV, line 11c.
	See Form 990, Part X, line 13.	· -		
	(a) Description of investment	(b) Book value	(c) Method of var	
			Cost or end-of-year	market value
Total. (Column	(b) must equal Form 990, Part X, col (B) line 13)	63,722,473		
	Other Assets. Complete if the organization			Form 990, Part X, line 15
	(a) Descrip		,	(b) Book value
	n (b) must equal Form 990, Part X, col.(B) line 15			
Part X	Other Liabilities. Complete if the organ form 990, Part X, line 25.	nization answered 'Yes' to	o Form 990, Part IV, I	ine 11e or 11f. See
1	(a) Description of liability	(b) Book value		
		(2) 2 3 3 11 11 11 11		
Federal Incom		1 205 710		
Capital Lease		1,205,710		
Funds held for		1,454,712		
runas neia foi	student organizations	1,344,747		
Total (Column	(b) must equal Form 990, Part X, col (B) line 25) 🛛 🖡	4,005,169		

Part		evenue per Audited Financial Statements With vered 'Yes' to Form 990, Part IV, line 12a.	Revenue p	er Re	turn Complete if	
1		r support per audited financial statements		1		
2		t not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	on investments 2a				
b	Donated services and use of fa	acılıtıes 2b				
c	Recoveries of prior year grants	s				
d						
e	Add lines 2a through 2d .			2e		
3	Subtract line 2e from line 1 .			3		
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b . 4a				
b	Other (Describe in Part XIII)	4b				
c	Add lines 4a and 4b			4c		
5	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line 12)	[5		
Part 2		xpenses per Audited Financial Statements Wit swered 'Yes' to Form 990, Part IV, line 12a.	h Expenses	per F	leturn. Complete	
1	Total expenses and losses per	audited financial statements		1		
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25				
a	Donated services and use of fa	acilities				
b	Prior year adjustments					
C	Other losses					
d	Other (Describe in Part XIII)	2d				
e	Add lines 2a through 2d			2e		
3	Subtract line ${f 2e}$ from line ${f 1}$.			3		
4	Amounts included on Form 99	0, Part IX, line 25, but not on line 1:				
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b 4a				
b	Other (Describe in Part XIII)	4b				
С	Add lines 4a and 4b			4 c		
5		nd 4c. (This must equal Form 990, Part I, line 18)		5		
Part	XIII Supplemental Inf	ormation				
	/, line 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 2d and 4b, and Part XII, lines 2d and 4b. Also comple			any additional	
	Return Reference	Explanation				
elected	I, Line 1a If organization I under SFAS 116 to not report storical treasures, o	As permitted by generally accepted accounting principles, art, historical artifacts, and collectibles, which are principa				
organız	I, Line 4 Description of cation's collections and how it states purpose	The University has obtained certain art work, rare books, a safekeeping at the University's library and art gallery. The as the University is a private institution of higher education.	se items are us			
Part V, Line 4 Intended uses of the endowment fund		The university's endowment fund provides a relatively stable investment income stream to the university's operations. As noted in Schedule D, Part V, Line 1(d), a significant portion of that investment income is restricted by endowment donors for student scholarships. The remaining endowment investment income provides annual support to various programs of the university.				
Part X	FIN48 Footnote	The University records income tax liabilities and assets us recognition and derecognition of tax positions taken or exp University does not believe that there are any unrecognize recorded in the financial statements	ing a theshold ected to be tak	of more	lıkely than not for tax return The	

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

Schedule D (Form 990) 2014

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As Filed Data -

DLN: 93493135000086

Employer identification number

OMB No 1545-0047

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.

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

Open to Public Inspection

ıckn	iell University 24-077	72407		
Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its chart other governing instrument, or in a resolution of its governing body?	ter, bylaws,	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all brochures, catalogues, and other written communications with the public dealing with student admission programs, and scholarships?	•	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast me the period of solicitation for students, or during the registration period if it has no solicitation program, in that makes the policy known to all parts of the general community it serves? If "Yes," please describe I please explain If you need more space use Part II	n a way	Yes	
	Does the organization maintain the following?			
	Records indicating the racial composition of the student body, faculty, and administrative staff?		Yes	-
	• Records documenting that scholarships and other financial assistance are awarded on a racially nondisc basis?	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dea with student admissions, programs, and scholarships?	aling 4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	<u> </u>
5	If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to			
	Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	: Employment of faculty or administrative staff?	<u>5c</u>		No
d	Scholarships or other financial assistance?	<u>5d</u>		No
€	Educational policies?	<u>5e</u>		No
f	Use of facilities?	5f		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>	<u> </u>	No
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a	Yes	NI -
	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 thro	ugh 4 05		No
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No." explain on Part II	7	I vac	1

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, Line 6 - Explanation of Aid or Assistance from Governmental Agency	Bucknell University receives research grants and contracts from various governmental agencies as well as funds for student aid
Schedule E, Line 3 - Racially Nondiscriminatory Policy Publicized	The University's racially nondiscriminatory policy is available on the university's website and is printed in University publications
Schedule E, Line 4 - Explanation of Records and Materials Not Maintained	
Schedule E, Line 5 - Explanation of Organization Discrimination by Race	

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

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As Filed Data -

DLN: 93493135000086

OMB No 1545-0047

2014

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				Employer ident	ification number
	nell University					
					24-0772407	
Par	General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the organiz	ation answered
1	For grantmakers. Does the d	organization m	aıntaın record:	s to substantiate the a	amount of its grants	
	and other assistance, the gra	ntees' eligibili	ty for the gran	its or assistance, and	the selection criteria	
	used to award the grants or a	assistance?				√ Yes √ No
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitori	ng the use of its gran	ts and other
3	Activites per Region (The follow	ing Part I, line 3	table can be du	uplicated if additional spa	ace 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	3	3			9,676,848
b	Total from continuation sheets to Part I					198,467,002
C	Totals (add lines 3a and 3b)	3	3			208,143,850

Ρć				eived more than \$5,0			9		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)		Europe	Subrecipient Award	30,000	wire			
(2)								
(3)								
(4)								
2				ted above that are re e or counsel has pro					
3	Enter total num	ber of other	organizations or en	tities					1

Schedule F (Form 990) 2014

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

Part III can be duplicated if additional space is needed. (c) Number of (a) Type of grant or (b) Region (d) A mount of (e) Manner of cash (h) Method of (f) A mount of (a) Description assistance recipients cash grant disbursement non-cash of non-cash valuation assistance assistance (book, FMV, appraisal, other) (1) Scholarships to Non-US Central America 2 60,552 Financial Aid Citizens (2) Scholarships to Non-US East Asia/Pacific 1,533,943 Financial Aid 64 lFM∨ Citizens (3) Scholarships to Non-US Europe 34 1,290,539 Financial Aid lFM∨ Citizens (4) Scholarships to Non-US Mid East/Nrth Africa 81,443 Financial Aid FΜV 2 Citizens (5) Scholarships to Non-US North America FM∨ 6 241,454 Financial Aid Citizens (6) Scholarships to Non-US Russia/Ind States 237,468 Financial Aid FM∨ 6 Citizens (7) Scholarships to Non-US South America 205,907 Financial Aid lFM∨ 11 Citizens (8) Scholarships to Non-US South Asia 840,399 Financial Aid FΜV 16 Citizens (9) Scholarships to Non-US Sub-Saharan Africa 19 987,620 Financial Aid FΜV Citizens (10) Scholarships-BU 39,250 Financial Aid Central America 5 lFM∨ Students Abroad (11) Scholarships-BU East Asia/Pacific 18 188,028 Financial Aid lFM∨ Students Abroad (12) Scholarships-BU 1,166,270 Financial Aid FΜV 96 Europe Students Abroad (13) Scholarships-BU 48,143 Financial Aid FM∨ South America 7 Students Abroad (14) Scholarships-BU 2 40,710 Financial Aid FMV Sub-Saharan Africa Students Abroad (15) Scholarships-BU Mid East/Nith Africa 1 22,188 Financial Aid lFM∨ Students Abroard (16) (17) (18)

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	V	Yes	Г	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Γ	Yes	∀	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)	দ	Yes	Γ	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)	্ব	Yes	Γ	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)	্ব	Yes	Г	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713: do not file with Form 990)	Г	Yes	অ	No

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
Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US	The University provides grants in the form of University scholarship for certain non-US ci tizens attending the University. These scholarships are posted directly to the recipient's University billing account and, thus, reduce tuition, room and/or board fees billed to the recipient. The University also provides grants in the form of University scholarship for certain Bucknell University students to study abroad. These scholarships are posted directly to the recipient's University billing account and, thus, reduces tuition, room and/or board fees billed to the recipient. The majority of these scholarships are need-based fina incial aid.

Additional Data

Software ID: 14000265

Software Version: 2014v6.0

EIN: 24-0772407

Name: Bucknell University

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America	0	0	Scholarships		99,802
East Asia and the Pacific	0	0	Scholarships		1,721,971
Europe	0	0	Scholarships		2,456,809

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies 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
Middle East/Nrth Africa	0	0	Scholarships		103,631
North America	0	0	Scholarships		241,454
Russia and Ind States	0	0	Scholarships		237,468

Form 990 Schedule F	Part I - Activit	<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 America	0	0	Scholarships		254,050
South Asia	0	0	Scholarships		840,399
Sub-Saharan Africa	0	0	Scholarships		1,028,330

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)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America	0	0	Program Services	Study Abroad Prg	131,452
Europe	3	3	Program Services	Study Abroad Prg	2,092,025
Central America	0	0	Program Sevices	Student Philanthropy	113,870

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Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies 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
Central America	0	0	Program Services	A cademic & Related	58,434
East Asia and the Pacific	0	0	Program Services	Academic and Related	98,946
Europe	0	0	Program Services	Academic and Related	184,608

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies 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
North America	0	0	Program Services	A cademic and Related	11,684
Russia	0	0	Program Services	A cademic and Related	1,915
South America	0	0	Program Services	Academic and Related	2,551

Form 990 Schedule F	<u> Part I - Activit</u>	<u>ies 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	0	Program Services	A cademic and Related	868
Sub-Saharan Africa	0	0	Program Services	Academic and Related	17,551
Central America	0	0	Investments		198,416,032

Form 990 Schedule F I	Part I - Activit	ties Outside T	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
Europe	0	0	Subrecipiant Grant Award		30,000

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DLN: 93493135000086

OMB No 1545-0047

Schedule I (Form 990)

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

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

Open to Public **Inspection**

Internal Revenue Service Name of the organization **Bucknell University**

Department of the Treasury

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

24-0772407

Employer identification number

Part I	General Information on Grants and Assistance	
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Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

0

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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Geisinger Clinic 100 North Academy Avenue Danville, PA 17822	23-6291113	501 (c)(3)	97,540	0			Collaborative Research

2	2 Enter total number of section 501(c)(3) and government 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 (c)A mount of recipients cash grant		(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Scholarships to Attend BU	1710		44,428,005	FMV	Account Credit

Part IV Supplemental In	nformation. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.
Return Reference	Explanation
Grants are Used	The University provides grants in the form of University scholarship for certain individuals attending the University. These scholarships are posted directly to the recipient's University billing account and, thus, reduces tuition, room and/or board fees billed to the to the recipient. The majority of these scholarships are need-based financial aid

Schedule I (Form 990) 2014

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DLN: 93493135000086

OMB No 1545-0047

Open to Public Inspection

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.

Compensation Information

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

Name of the organization Bucknell University

Employer identification number 24-0772407

Pai	rt I Questions Regarding Compensation								
					Yes	No			
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III								
	First-class or charter travel	<u> - </u>	Housing allowance or residence for personal use						
	▼ Travel for companions	Γ	Payments for business use of personal residence						
	▼ Tax idemnification and gross-up payments	<u>~</u>	Health or social club dues or initiation fees						
	Discretionary spending account	ᅜ	Personal services (e g , maid, chauffeur, chef)						
b	If any of the boxes in line 1a are checked, did the org reimbursement or provision of all of the expenses de			1b	Yes				
2	Did the organization require substantiation prior to redirectors, trustees, officers, including the CEO/Exec			2	Yes				
					165				
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all th used by a related organization to establish compensation	at appl	y Do not check any boxes for methods						
	▼ Compensation committee	Γ	Written employment contract						
	✓ Independent compensation consultant	a related organization to establish compensation of the CEO/Executive Director, but explain in Part III mpensation committee pendent compensation consultant mathematical property of the policy of							
	Form 990 of other organizations	굣	Approval by the board or compensation committee						
4	During the year, did any person listed in Form 990, For a related organization	art VII	I, Section A, line 1a with respect to the filing organization						
а	Receive a severance payment or change-of-control p	aymer	nt?	4a		Νo			
b	Participate in, or receive payment from, a supplemen	tal non	qualified retirement plan?	4b	Yes				
С	Participate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4c		Νo			
	If "Yes" to any of lines 4a-c, list the persons and pro	vide th	ne applicable amounts for each item in Part III						
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizat	ions m	ust complete lines 5-9.						
5	For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of								
a	The organization?			5a		Νo			
b	Any related organization?			5b		Νo			
	If "Yes," to line 5a or 5b, describe in Part III								
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a	, did the organization pay or accrue any						
а	The organization?			6a		Νo			
b	Any related organization?			6b		Νo			
	If "Yes," to line 6a or 6b, describe in Part III								
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d			7		No			
8	Were any amounts reported in Form 990, Part VII, p	aid or a	accured pursuant to a contract that was						
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe								
	ın Part III								
9	If "Yes" to line 8, did the organization also follow the section 53 $4958\text{-}6(c)^{2}$	rebutt	able presumption procedure described in Regulations	9		No			

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)(1)-(111) 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	(F) Compensation in
	(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	column(B) reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2014

Part III Supplemental Information

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

Also complete this part for any additional information

	omplete this part for any additional information										
Return Reference	Explanation										
Part I, Line 1a Relevant information in regards to selections on 1a	FIRST CLASS OR CHARTER TRAVEL - the president is permitted to travel by first class airfare in limited circumstances per university policy. First class travel costs is not considered taxable compensation. TRAVEL FOR COMPANIONS - Travel costs of companions of university trustees, officers, and key employees are reimbursed in limited circumstances and such reimbursement is considered taxable income to the trustee, officer, or key employee unless the companion's travel would otherwise be considered deductible under the Internal Revenue Code. Any such taxable reimbursements to companions of university officers are included in Schedule J, Part II, column (B)(III). TAX INDEMNIFICATION & GROSS UP PAYMENTS - Tax gross-up payments, considered taxable compensation, were provided to 5 officers and key employees listed in Part II of Schedule J for one or more of the following items (a) taxable tuition remission benefits, or (b) years of service recognition awards. HOUSING ALLOWANCE OR RESIDENCE FOR PERSONAL USE - The university requires the president and provost to reside in a specific campus housing. The estimated fair rental value of the personal living space, including utilities, is not considered taxable income since on-campus residency is an employment requirement imposed by the university. The estimated fair value is included in Schedule J HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES - Certain employees have golf memberships at the university owned golf course. In addition, the university pays membership dues at certain private establishments for the purpose of holding business or fundraising events PERSONAL SERVICES-Certain facilities and maintenance staff have primary responsibilities for the upkeep of the campus building in which the president resides. Those duties include from time to time cooking, cleaning, and driving/chauffeur duties for the president to maximize the president's time devoted to university business. The allocable costs of these employee duties are not considered taxable compensation to the pre										

Schedule J (Form 990) 2014

Software ID: 14000265

Software Version: 2014v6.0

EIN: 24-0772407

Name: Bucknell University

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

(A) Name and Table	•						(F) Compensation in
(A) Name and Title	(B) Breakdown o (i) Base Compensation	of W-2 and/or 1099-MIS (ii) Bonus & Incentive	SC compensation (iii) Other reportable	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
	Compensation	compensation	compensation	·			piloi Foiiii 330
Amy C Foerster, General Counsel	(I) 250,700 (II)			25,450	7,819	283,969	
Christopher D Brown, Invstmt Officer	(I) 277,375	,		26,000	17,554	320,929	
David J Surgala, VP-Fin & Adm	(I) 308,157		7,459	26,000	14,261	. 355,877	
David R Paulsen, Coach Men's Basket	(I) 282,795 (II)	,	5,100	26,000	50,623	364,518	
Dennis W Hawley, AVP- Facilities	(I) 165,267 (II)		394	17,750	19,080	202,491	
Dennis W Swank, AVP- Finance	(I) 187,571 (II)		2,162	19,800	33,341	. 242,874	
George C Shields, Dean- Arts and Sciences	(I) 187,702 (II)	2	5,389	19,886	40,887	253,864	
James Orbison, Professor	(I) 180,713 (II)	}		15,509	8,672	204,894	
James P Rice, Assoc Provost	(I) 177,442	2	329	18,510	13,975	210,256	
John C Bravman, President	(I) 576,701	25,000	38,406	123,429	70,125	833,661	
John P Hardt, Director of Athletics	(I) 215,690	,	10,343	22,626	31,806	280,465	
Joseph G Susan Jr, Coach Football	(I) 185,470 (II)	,	2,811	19,203	12,972	2 220,456	
Kathleen Graham, AVP- Development	(I) 194,991 (II)		269	19,500	303	215,063	
Keith W Buffinton, Dean- Engineering	(I) 193,045 (II)	;		20,325	49,167	262,537	
Matthew Higgins, Professor	(I) 167,930 (II)			11,653	23,328	202,911	
Michael A Smyer, Provost	(I) 307,727 (II)		22,416	26,000	37,348	393,491	
Michael S Cover, Treas/Controll	(I) 192,219 (II)	,	134	19,800	9,271	. 221,424	
Param S Bedi, VP-Library & TT	(I) 218,315 (II)	<i>j</i>	1,285	22,100	2,979	244,679	
Pierre D Joanis, AVP- Human Res	(I) 169,489 (II)	9 20,000	10,628	15,500	18,906	234,523	
Scott G Rosevear, VP-Dev & Alum	(I) 292,804 (II)	,	12,532	26,000	21,224	352,560	

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC (i) Base (ii) Bonus & Compensation Incentive compensation		C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred in prior Form 990
Susan Lantz, Dean of Students	(I) (II)	164,857		compensation	17,444	18,623	200,924	
William T Conley, VP- Enrollment	(I) (II)	218,347		2,217	23,150	23,939	267,653	

DLN: 93493135000086

Open to Public

Inspection

OMB No 1545-0047

Schedule K (Form 990)

Name of the organization

Bucknell University

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Employer identification number

24-0772407

Pa	art I Bond Issues													
	(a) Issuer name	(b) Issuer EIN (c) CUSIP # (d) Date		(d) Date issued	(e) Issue price	(f	f) Descriptior	n of purpose	(g) De	efeased	(h) beha ıssı	alfof		Pool ncing
		<u> </u>		<u></u>		<u>l</u>			Yes	No	Yes	No	Yes	No
A	Union County Higher Educational Facilities Financing Auth	23-2228275	906459EL2	04-07-2010	13,685,672	2 Refund	ded 1996 & 1	998 bonds		Х		Х		Х
В	Union County Higher Educa	23-2228275	906459EX6	04-12-2012	29,994,932	2 constr	ruction of aca	demic facil		Х		Х		Х
c _	Union County Higher Educa	23-2228275	906459FH0	04-04-2013	17,294,121	1 Refund	ded 2002A bo	onds		Х		Х		Х
D_	Union County Higher Educa	23-2228275	906459FU1	06-01-2015	24,995,531	1 Acquis	A cquisition, construction, reno			X		Х		Х
Pa	rt III Proceeds													
1	Amount of bonds retired				Α		E	3	С			D		
2	Amount of bonds legally defe	ased												
3	Total proceeds of issue			13,6	685,672		29,994,932		17,294	1,121		24,	995,531	
4	Gross proceeds in reserve fu	sbnu									,			
5	Capitalized interest from prod	ceeds												
6	Proceeds in refunding escrow	WS			13,4	496,044				17,120	,949			
7	Issuance costs from proceed	ds			:	189,628		275,873		173	3,172	,		105,639
8	Credit enhancement from pro	oceeds												
9	Working capital expenditures	s from proceeds												
10	Capital expenditures from pro	oceeds					;	29,719,059	ξ			8,	000,000	
11	Other spent proceeds													
12	Other unspent proceeds												16,	889,892
13	Year of substantial completion	on					20	14						
					Yes	No	Yes	No	Yes	No.	٥	Yes	,	No
14	Were the bonds issued as pa	rt of a current refun	ıdıng issue?		×	l		X	X					Х
15	Were the bonds issued as pa	art of an advance ref	funding issue?			Х		Х		Х				Х
16	Has the final allocation of pro	oceeds been made?	,		Х		х		Х					Х
17	Does the organization mainta allocation of proceeds?	X		×		Х			Х					
Pai	rt IIII Private Business	Use												
					Α		_	В		<u>C</u>	$-\!\!\!\!+$		D	
1	Was the organization a partno property financed by tax-exe		or a member of an	LLC, which owned	Yes	No X	Yes	No X	Yes	No	<u> </u>	Yes	+	No
l ——	property illianted by tax exe	pt bollab					+	_		+			$-\!\!\!\!\!-$	

financed property?

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

Χ

Sche	edule K (Form 990) 2014									Page 2
Par	Private Business Use (Continued)									
				Α	 	В		<u> </u>		D
_	Are there any management or conver contracts that may recult in private	huainaaa uaal	Yes	No	Yes	No	Yes	No No	Yes	No
3a	Are there any management or service contracts that may result in private of bond-financed property?	business use		Х		X				
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?									
С	Are there any research agreements that may result in private business us financed property?	e of bond-		х		х				
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance									
4	Enter the percentage of financed property used in a private business use bother than a section $501(c)(3)$ organization or a state or local government			•				•		•
5	unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5									
7	Does the bond issue meet the private security or payment test?			Х		Х				
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?			х		х				
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		•		•				- _
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections								
9	Has the organization established written procedures to ensure that all non- bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		Х		х					
Pai	rt IV Arbitrage									
		А	_		В		С		D	
		Yes	No	Yes	No	·	res es	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X		X			Χ		Х
2	If "No" to line 1, did the following apply?		•		•	•	•		•	
a	Rebate not due yet?									
ь	Exception to rebate?	Х		Х			Х		Х	
c	No rebate due?									
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?									
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х			X		х
_ b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
е	Was the hedge terminated?									

6

period?

Χ

Pai	Part IV Arbitrage (Continued)												
		A		В	В			D					
		Yes	No	Yes	No	Yes	No	Yes	No				
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×		X		Х		Х				
Ь	Name of provider												
С	Term of GIC												
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?												

the requirements of section 148? Part V Procedures To Undertake Corrective Action

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor

	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?	Х		×		×		×	

Χ

Χ

Χ

Χ

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

Schedule K (Form 990) 2014

Χ

Χ

Χ

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

(Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a, Provide descriptions, explanations, and any additional information in Part VI. ► Attach to Form 990.

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

DLN: 93493135000086 OMB No 1545-0047

Open to Public **Inspection**

Name of the organization Employer identification number **Bucknell University** 24-0772407

Part I Bond Issues (b) Issuer EIN (c) CUSIP # (d) Date issued (f) Description of purpose (i) Pool (a) Issuer name (e) Issue price (g) Defeased (h) O n behalf of financing ıssuer Yes No Yes No Yes No 25,000,000 Acquisition,construction,reno Union County Higher Edcua 23-2228275 01-30-2015 Χ Χ Χ Proceeds C Α В D Amount of bonds retired Amount of bonds legally defeased 2 Total proceeds of issue 3 25,000,000 Gross proceeds in reserve funds 4 Capitalized interest from proceeds 5 Proceeds in refunding escrows 6 Issuance costs from proceeds 7 167,650 Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 Capital expenditures from proceeds 10 Other spent proceeds 11 Other unspent proceeds 12 24,832,350 Year of substantial completion 13 Yes Yes No No Yes No Yes No Were the bonds issued as part of a current refunding issue? Χ 14 Were the bonds issued as part of an advance refunding issue? Χ 15 Has the final allocation of proceeds been made? 16 Χ

allocation of proceeds? Private Business Use

17

-		Α			В	С		D	
	l de la companya de	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?		×						
2	Are there any lease arrangements that may result in private business use of bond- financed property?		Х						
For P	aperwork Reduction Act Notice, see the Instructions for Form 990.	C	at No 5019	93E			Sch	edule K (For	m 990) 2014

Χ

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

Sche	dule K (Form 990) 2014									Page 2
Par	Private Business Use (Continued)						•			
				Α		В		<u> </u>		D
2-	Are there any management or service contracts that may result in private	husiness use	Yes	No	Yes	No	Yes	No	Yes	No
За	of bond-financed property?	Dusilless use		X						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?									
С	Are there any research agreements that may result in private business use financed property?	e of bond-		Х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance									
4	Enter the percentage of financed property used in a private business use bother than a section $501(c)(3)$ organization or a state or local government			•		•		,		•
5	Enter the percentage of financed property used in a private business use a unrelated trade or business activity carried on by your organization, anothe 501(c)(3) organization, or a state or local government									
6	Total of lines 4 and 5									
7	Does the bond issue meet the private security or payment test?			Х						
8a	Has there been a sale or disposition of any of the bond-financed property t nongovernmental person other than a 501(c)(3) organization since the bor issued?			х						
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of		•						· ·
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?	sections								
9	Has the organization established written procedures to ensure that all non- bonds of the issue are remediated in accordance with the requirements und Regulations sections 1 141-12 and 1 145-2?		х							
Pai	t IV Arbitrage						•		·	
		А			В		С		D	
		Yes	No	Yes	No	<u> </u>	Yes	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		Х							
2	If "No" to line 1, did the following apply?		_							
<u>a</u>	Rebate not due yet?	Х								
b	Exception to rebate?									
С	No rebate due?									
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?									
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х							
ь	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was the hedge terminated?									
		1							1	

Pa	rt IV Arbitrage (Continued)								•
	· •	A		В		C	,	D	,
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х						
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?		Х						
7	Has the organization established written procedures to monitor the requirements of section 148?	х							
Pa	rt V Procedures To Undertake Corrective Action								
		А		В	ı	C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?	х							

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

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DLN: 93493135000086

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

Open to Public Inspection

	tv										n numbe	
ucknell Universit	-,						2	4-07	72407			
	cess Benefit Transplete of the organization										40b	
	ne of disqualified per			p between di		(c) Desc					(d) Corrected	
1 (a) Nan	ne or alsquamica per	3011 (b) 10		ind organizat		(6) 5030	ription	iption of transaction		' ⊢	Yes	No
			•	_							103	110
4958 .	amount of tax incurr •••••• amount of tax, if any						ne year 	under	rsection • \$ • \$	1 		
oans to a	nd/or From Intended	ered "Yes" o	n Form 99		V, line 38a, o	r Form 990, F	art IV	, line 2	26, or if	the orga	anızatıor	1
Complete if th	he organization answ mount on Form 990,	ered "Yes" o	n Form 99	n to the	(e)Original principal amount	r Form 990, F (f) Balance due	art IV (g) defau	In	(h) Appro by boal) ved rd or	(i)Wri agreen	tten
oans to a omplete if the ported an a on a of other ported and a of other ported and a of other ported and a ofter ested	ne organization answ mount on Form 990, (b) Relationship	vered "Yes" o Part X, line! (c) Purpose	on Form 99 5, 6, or 22 (d) Loar or from t	n to the	(e)Original principal	(f) Balance	(g)	In	(h) Appro by boa) ved rd or	(i)Wrı	tten
oans to a omplete if the ported an a) Name of oterested person	(b) Relationship with organization	vered "Yes" o Part X, line! (c) Purpose	(d) Loar or from t	the	(e)Original principal	(f) Balance	(g) defau	In ult?	(h) A ppro by boa commit) ved rd or ttee?	(i)Wrı agreen	tten nent?
oans to a omplete if the eported an a i) Name of interested person M Smyer	(b) Relationship with organization Officer	vered "Yes" o Part X, line! (c) Purpose of loan Relocation	(d) Loar or from t	n to the ion?	(e)O riginal principal amount	(f) Balance due	(g) defau	In ult?	(h) A ppro by boa commit	ved rd or ttee?	(i)Wri agreen	tten nent?
Complete if the eported an a a a) Name of nterested person M Smyer	(b) Relationship with organization Officer Key Emp	vered "Yes" of Part X, line! (c) Purpose of loan Relocation	(d) Loar or from t	n to the ion? From X	(e)O riginal principal amount	(f) Balance due 42,807	(g) defau	In ult? No No	(h) A ppro by boa commit	ved rd or ttee?	(i)Wri agreen Yes Yes	tten nent?

Part IV	Business Transactions In	_					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.						
(a) N	ame of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction		(e) Sh of organiz revent	ation's	
					Yes	No	
See	Addıtıonal Data Table						

	Part V Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions)					
Return Reference	Explanation					
Schedule L, Part V Supplemental Information	Part IV - Although not a 35% controlled entity Geisinger Health Plan - Glenn D Steele, Jr , a member of the University's Board of Trustees, is president and chief operating officer of Geisinger Health Plan, a healthcare organization providing to the University certain healthcare insurance, services, and, beginning in January 2013, healthcare claims administration. The President of Bucknell University (John C Bravman) and another member of Bucknell University's Board of Trustees (Christopher B Sullivan), are members of that healthcare organization's board of directors. Amounts paid to the healthcare organization and its affiliates for services totaled \$4,252,555 for year ended June 30, 2015. Also, the University and the healthcare organization conduct certain programs whereby University students and faculty participate with the healthcare organization in educational and research activites related to medical and healthcare endeavors. The healthcare organization provides approximately 75% of the grant revenues to support these University programs. University expenditures for the year ended June 30, 2015 for those programs totaled \$307,625.					

Schedule L (Form 990 or 990-EZ) 2014

Additional Data

Software ID: 14000265

Software Version: 2014v6.0

EIN: 24-0772407

Name: Bucknell University

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of Interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
	organization			Yes	No
(1) Wendelin J Wright	Spouse-Pres	125,799	employment		No
(2) Christine M Buffinton	Spouse-Key Employ	80,845	employment		No
(3) Anne Conley	Spouse-Offic	10,537	employment		No
(4) Eric A Kennedy	Spouse-Offic	132,564	employment		No
(5) Geisinger Health Plan	See Part V	4,252,555	See Part V		No
(6) KPMG LLP	Subst Donor	165,000	Independent Contract		No
(7) Susquehanna Transit Comp	Subst Donor	572,045	Independent Contract		No
(8) Zartman Construction Inc	Subst Donor	1,652,217	Independent Contract		No

DLN: 93493135000086

OMB No 1545-0047

Open to Public

Noncash Contributions

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

▶ 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.

Inspection

Name of the organization **Employer identification number Bucknell University**

				24	-0772407			
Pa	rt I Types of Property	1			,			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr		_	nts
1	Art—Works of art	X	4					
2	Art—Historical treasures .							
3	Art—Fractional interests	Х	1					
4	Books and publications							
5	Clothing and household							
e	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property		150	E 330 300	EMV			
	Securities—Publicly traded .	X	150	5,238,388	ILIMI A			
	Securities—Closely held stock .							
TT	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
	Q ualified conservation contribution—Historic							
	structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
	Real estate—Other							
18	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
	Other► (X	29					
	olies) Other ► (1		1			
	cation Equip)	_ ^						
	Other ► ()							
28	Other ► ()							
29	Number of Forms 8283 received by th							
	for which the organization completed F	Form 8283,	Part IV, Donee Acknowled	dgement 2	9			2
							Yes	No
30a	During the year, did the organization							
	it must hold for at least three years fr			•	to be used			
	for exempt purposes for the entire ho					30a		No
b	If "Yes," describe the arrangement in							
31	Does the organization have a gift acc					31	Yes	
32a	Does the organization hire or use thir	d parties or	related organizations to s	olicit, process, or sell no	ncash			
	contributions?					32a		Νo
b	If "Yes," describe in Part II							
33	If the organization did not report an a describe in Part II	mount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			

	32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
Return Reference	Explanation						
Part I, Line 33, Revenues Not Reported	As permitted under ASC 958 605 25, Works of Art, Historical Treasures, and similar items, the University does not capitalize its collections of artwork and historical collections for financial statement purposes. Furthermore, certain donated goods incidental to University operations are acknowledged by the University but not recorded in revenues nor expenses for financial statement purposes.						

Schedule M (Form 990) (2014)

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As Filed Data -

DLN: 93493135000086

OMB No 1545-0047

2014

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 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 Bucknell University	Employer identification number
	24-0772407

Return Reference	Explanation
Form 990, Part III, Line 4d Other Program Services Description	OTHER PROGRAM SERVICES 4 Academic Support - the expenses of activities and services that directly support instruction

Return Reference	Explanation
Form 990, Part VI, Line 2 Description of Business or Family Relationship of Officers, Directors, Et	The following individuals have business relationships with each other based on their positions within the University's related organizations. Bucknell University Bucknell Real Estate Bison VenturesDavid Surgala VP for Finance President/ President/ and Administration Board Member Board MemberDennis Swank Associate VP for Vice President/ Vice President/ Finance/ Assistant Board Member Board Member SecretaryMichael Cover Treasurer and Controller/ Secretary/ Secretary/ Assistant Secretary Board Member Board MemberEdward Loftus Employee Board Member

Return Reference	Explanation
Form 990 Review Process	An external review of the Form 990 is performed by the outside tax preparer. The final Form 990 is provided to the University's Audit, Compliance, and Risk Management Committee for review. The Form 990 is made available electronically to the trustees prior to filing.

Return Reference	Explanation
Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	All trustees are required to complete and submit an annual conflict of interest statement to the University's General Counsel All Officers and Key Employees are required to complete and submit an annual conflict of interest statement to the University's Vice President for Finance and Administration All statements are reviewed by General Counsel and/or the VP for Finance and Administration to determine if the possible conflicts of interest noted are actual conflicts and what action should be taken including prohibiting an individual from participating in any deliberations, decisions or transactions related to the conflict, and whether disclosures regarding the conflict should be made in financial statements or other documents

Return Reference	Explanation
Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The president's compensation was reviewed and approved by the Executive Resource Committee of the Board of Trustees. The Committee used various sources of data, including but not limited to, financial and legal consultants, other organizations' Form 990s and compensation surveys. There is a written employment contract in place which is signed by the president and the Chairperson of the Board of Trustees Part VI, 15bin addition, compensation of certain officers and key employees (those employees reporting directly to the president) are reviewed by the Executive Resource Committee and approved by the president of the university. The president and Committee used various sources of data, including but not limited to, other organizations' Form 990s and compensation surveys.

Return Reference	Explanation
Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	The president's compensation was reviewed and approved by the Executive Resource Committee of the Board of Trustees. The Committee used various sources of data, including but not limited to, an independent compensation consultant, other organizations' Form 990s and compensation surveys. There is a written employment contract in place which is signed by the president and the Chairperson of the Board of Trustees in addition, compensation of certain officers and key employees (employees reporting directly to the president) are reviewed by the Executive Resource Committee and approved by the president of the university. The president and Committee used various sources of data, including but not limited to, an independent compensation consultant, other organizations' Form 990s and compensation surveys.

Return Reference	Explanation
Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	The University has audited financial statements available on the University's Finance Office website

Return Reference	Explanation
Other Changes In Net Assets Or Fund Balances - Other Increases	Change in pledge receivable = \$2529661

Return Reference	Explanation
Other Changes In Net Assets Or Fund Balances - Other Decreases	Postretiree healthcare costs other than periodic expense = -\$4891786

Return Reference	Explanation
Schedule D, Part X-Other Liabilities	Capital lease payablein May 2009, the University entered into various agreements with its wholly-owned for-profit subsidiary, Bison Ventures, Inc. and community development entities owned or controlled by a bank and a real estate corporation. The agreements provided (primarily through Bucknell University and the new markets tax credit program) financing to construct a bookstore in Lewisburg, Pennsylvania. Bison Ventures, Inc., through an arrangement with Bucknell University, leases the bookstore. Because of the interdependent loan agreements and lease agreements, the University has accounted for the financing arrangement as a capital lease. See also Schedule R, Part IV, for additional information regarding transactions with Bison Ventures, Inc.

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DLN: 93493135000086

2014

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

Name of the organization **Employer identification number Bucknell University** 24-0772407

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

(a) Name, address, and EIN (ıf applıcable) of dısregarded entıty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
					_

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b) (13) controlled entity?	
						Yes	No
701 Moore Avenue Lewisburg, PA 17837	Real Estate Property Management	PA	501 (c) (2)		Bucknell University	Yes	
27-3576298							

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(i))	(k)
Name, address, and EIN of	Primary activity	Legal	Direct	Predominant	Share of	Share of	Disprop	rtionate	Code V-UBI	Gener	ral or	Percentage
related organization		domicile	controlling	ıncome(related,	total income	end-of-year	allocati	ions?	amount in box	mana	iging	ownership
-		(state or	entity	unrelated,		assets			20 of	partr	ner?	
		foreign		excluded from					Schedule K-1			
		country)		tax under					(Form 1065)			
				sections 512-								
				514)						L		
							Yes	No		Yes	No	
									ı			

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	
Name, address, and EIN of	Primary activity	Legal	Direct controlling	Type of entity	Share of total	Share of end-	Percentage	Section 512	
related organization		domicile	entity	(C corp, S	ıncome	of-year	ownership	(b)(13)	
		(state or foreign		corp,		assets		controlled	
		country)		or trust)				entity?	
								Yes	No
See Additional Data Table									

Yes No

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

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

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
- a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- **b** Gift, grant, or capital contribution to related organization(s)
- **c** Gift, grant, or capital contribution from related organization(s)
- **d** Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- **f** Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- **k** Lease of facilities, equipment, or other assets from related organization(s)
- I Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- **p** Reimbursement paid to related organization(s) for expenses
- **q** Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- **s** Other transfer of cash or property from related organization(s)
- If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Bucknell Real Estate Inc	а	121,429	Estimated FMV
(2) Bucknell Real Estate Inc	k	177,000	Estimated FMV
(3) Bison Ventures Inc	I	120,160	Estimated FMV

1a	Yes	
1b		No
1c		No
1d		No
1e		No
1f		No
1 g		No
1h		No
1i		No
1j		No
1k	Yes	
11	Yes	
1m		No
1n		No
10		No
1р		No
1q	Yes	
1r		No
1s		No

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	/ Legal	Predominant	Are all partners	Share of	Share of	Disproprtionate	e Code V-UBI	General or	Percentage
1	1	domicile	ıncome	section	total	end-of-year	allocations?	amount in	managing	ownership
1	1	(state or	(related,	501(c)(3)	ıncome	assets	1	box 20	partner?	' '
1	1	foreign	unrelated,	organizations?		1	1	of Schedule	1	,
1	1	country)	excluded from	1		1	1	K-1	1	·
1	1	1 "	tax under	1		1	1	(Form 1065)	1	1
1	1	1	sections 512-	1		1	1	' ' '	1	
1	1	1	514)	$\overline{}$	\neg	,		⊣ '		+
	1	1	1 ' '	Yes No		'	Yes N	No	Yes No	7
1	<u> </u>		1	$\overline{}$	+	 				_
/		 .	<u> </u>							

Part VII Supplemental Information

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

Return Reference	Explanation							
	As part of a New Markets Tax Credit project in Lewisburg, PA, Bucknell University loaned \$12,022,694 in December 2010 to an entity controlled by Wells Fargo Community Investment Holdings, LLC That entity then loaned the \$12,022,694 (loan A) and an additional \$4,167,306 (loan B) to Wells Fargo Community Development Enterprises 7, LLC, which in turn loaned those funds to Bucknell Real Estate, Inc in December 2010 The funds were used for the acquisition and improvement of certain properties in Lewisburg, PA The loans require interest payable quarterly at 1 01% with principal payments beginning April 1, 2018 through January 1, 2046 Interest paid to Bucknell University relating to loan A was \$121,429 for the year ended June 30, 2015							

Schedule R (Form 990) 2014

Software ID: 14000265

Software Version: 2014v6.0

EIN: 24-0772407

Name: Bucknell University

Form 990, Schedule R, Part IV	- Identification	of Related O	rganizations Ta	axable as a Co	orporation or Tru	st			ļ
(a) Name, address, and EIN of related organization	(b) Primary activity	(c)	(d) Direct Controlling Entity	(e)	(f) Share of total	(g) Share of end-of-year assets	(h) Percentage ownership	(i Section (13) coi enti	ntrolled
Yes	No								!
Bison Ventures Inc 701 Moore Ave Lewisburg, PA 17837 26-4730096	Bookstore Operations	PA	Bucknell Univ	С	-226,587	-300,472	100 000 %	Yes	
Charitable remaind trusts 43 1 Dent Dr Bucknell University Lewisburg, PA 17837	Support Bucknell University	PA	N/A	Trust					No
Charitable lead trusts 2 1 Dent Dr Bucknell University Lewisburg, PA 17837	Support Bucknell University	PA	N/A	Trust					No
Pooled income funds 3 1 Dent Dr Bucknell University Lewisburg, PA 17837	Support Bucknell University	PA	N/A	Trust					No
Funds held trust by others 1 201 Milan Pkwy - 2nd Floor Birmingham, AL 35211	Support Bucknell University	AL	N/A	Trust					No
Funds held trust by others 1 PO Box 4655 Atlanta, GA 30302	Support Bucknell University	СО	N/A	Trust					No
Funds held trust by others 1 1201 Market St Suite 2000 Wilmington, DE 19801	Support Bucknell University	DE	N/A	Trust					No
Funds held trust by others 1 2801 Buick-Cadillac Blvd Bloomington, IN 47401	Support Bucknell University	IN	N/A	Trust					No
Funds held trust by others 1 4967 Tens Oaks Road Dayton, MD 21036	Support Bucknell University	MD	N/A	Trust					No
Funds held trust by others 1 One West Fourth Street 2nd Fl WinstonSalem, NC 27101	Support Bucknell University	NC	N/A	Trust					No
Funds held trust by others 1 PO Box 1377 Buffalo, NY 14240	Support Bucknell University	NY	N/A	Trust					No
Funds held trust by others 1 PO Box 1558 Columbus, OH 43216	Support Bucknell University	ОН	N/A	Trust					No
Funds held trust by others 1 1712 Glenbrook Ave Lancaster, PA 17603	Support Bucknell University	PA	N/A	Trust					No