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DLN: 93493127010326

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

Open to Public Inspection

A Fo	rthe 2	2014 ca	alendar year, or tax year beginning	07-01-2014 , and ending 06-30-20	015			
B Che	ck if ap	plicable	C Name of organization Hampden Sydney College			D Empl	oyer ider	ntification number
☐ Add	ress ch	ange	Hampach Syuncy conege			54-0	505906	5
┌ Nar	ne char	nge	Doing business as					
Init	al retur	m						
Fina				ıl ıs not delivered to street address) Room,	/suite	E Teleph	none numl	ber
		nınated	College Road					
☐ Am	ended r	eturn	City or town, state or province, count	ry, and ZIP or foreign postal code				
☐ App	lication	pending	Hampden Sydney, VA 23943			G Gross	receipts \$	80,494,336
			F Name and address of princ	cipal officer	H(a) ī	s this a grou	n raturn	for
			Christopher B Howard			ubordinates?		
			College Road Hampden Sydney, VA 23943	3				
			Trampach Sydney, VA 25545	,		re all subord ncluded?	linates	┌ Yes ┌ No
I Tax	k-exem	pt statu	s ▼ 501(c)(3)	sert no) 4947(a)(1) or 527			h a lıst	(see instructions)
1 W	oheit <i>o</i>	• be bt	tp //www hsc edu		- , ,	C	.	
					1,	Group exemp		nder F
			on 🔽 Corporation 🗌 Trust 🗀 Association	Other -	L Year	of formation 1	919 M	State of legal domicile VA
Pa	rt I	Sur	mmary					
<u>5</u>	9	SINCE	describe the organization's missior 1775, THE MISSION OF HAMPD MOSPHERE OF SOUND LEARNIN	EN-SYDNEY COLLEGE HAS BEEN	TO FORM	GOOD MEN	AND GC	OOD CITIZENS IN
<u>la</u>	-							
Governance	2 (Check	this box 🛏 if the organization disc	continued its operations or dispose	d of more th	an 25% of it	s net as	sets
ŝ			,	,				
Activities &	3 1	Numbe	r of voting members of the governir	ng body (Part VI, line 1a)			3	35
Ħ				f the governing body (Part VI, line 1			4	35
<u> </u>			. ,	alendar year 2014 (Part V, line 2a)			5	930
đ				cessary)			6	967
				rt VIII, column (C), line 12			7a	-143,609
	b N	Net unr	related business taxable income fro	om Form 990-T, line 34			7b	-154,673
						Prior Year		Current Year
a)	8			e 1h)		14,134 53,345		16,428,769
Rayenue		9 Program service revenue (Part VIII, line 2g)						57,911,361
歪	10 11		stment income (Part VIII, column r revenue (Part VIII, column (A), l		•	1,776	,278	1,809,496 963,419
	12		, , , , , , , , , , , , , , , , , , , ,	must equal Part VIII, column (A), I	ine	470	,702	903,419
	12					69,735	,490	77,113,045
	13			X, column (A), lines 1-3)		22,093	,915	24,137,624
	14	Bene	fits paid to or for members (Part IX	(, column (A), line 4)				0
	15			e benefits (Part IX, column (A), line	s	25,673	.948	26,547,081
Expenses	16-	5-10	,			•		· · ·
₹	16a			column (A), line 11e)	•			0
五	b	Total 1	fundraising expenses (Part IX, column (D),	line 25) •-2,306,033	-			
	17	Othe	r expenses (Part IX, column (A), lı	nes 11a-11d, 11f-24e)		20,668	,797	21,220,100
	18		·	t equal Part IX, column (A), line 25		68,436		71,904,805
	19	Reve	nue less expenses Subtract line 1	8 from line 12		1,298		5,208,240
Not Assets or Fund Balances					Begir	nning of Curro Year	ent	End of Year
Set	20	Total	l assets (Part X, line 16)		_	272,326	809	281,461,248
A As	21				`. 	27,483		26,292,158
2 2 2 3	22			ne 21 from line 20		244,843		255,169,090
Par	t II		nature Block			,	<u> </u>	, ,
my kr	owled	lge and		mined this return, including accomp plete Declaration of preparer (other				
		I B	***			2016-05-06		
Sign		F Sigi	nature of officer			Date		
Here			Glenn Culley Jr VP Business Aff pe or print name and title					
		F 'y P	pe or print name and title Print/Type preparer's name	Preparer's signature	Date		PTIN	
Deir			т ппу туре ргерагег з Паппе	т тератет э этупаците	Date	Check If self-employed		
Paid		_ [Firm's name			Firm's EIN 🕨		
	pare		Firm's address ►			Phone no		
use	Onl	y I						

1 0111	1 2 2 0 (2014)				raye Z
Par	t III	Statement of Program S Check if Schedule O contains a			II	
1	Brief	ly describe the organization's mi	ssion			
		75, THE MISSION OF HAMPDER ERE OF SOUND LEARNING	N-SYDNEY COLLEG	GE HAS BEEN TO FOR	M GOOD MEN AND GOOD CI	TIZENS IN AN
	Did th	he organization undertake any si	anificant program c	orwege during the year	which were not listed on	
2	the p	rior Form 990 or 990-EZ?				┌ Yes ┌ No
3	Did th	he organization cease conducting	g, or make significa	_		┌ Yes ┌ No
	If"Υ∈	es," describe these changes on S	Schedule O			
4	exper	ribe the organization's program s nses Section 501(c)(3) and 501 otal expenses, and revenue, if an	.(c)(4) organization	s are required to report	ree largest program services, a the amount of grants and alloo	as measured by cations to others,
4a	(Cod	e) (Expenses \$	59,759,528	ıncludıng grants of \$	24,137,624) (Revenue \$	58,839,192)
	ınstıll chara our p speci	pden-Sydney College is a lively commu in its students a commitment to sound acter and moral discemment rooted in the olace in it, to impart a comprehension of all interests and capacities for graduate age for men now enrolling approximately	scholarship through stud le Judeo-Christian tradit social institutions as a land professional study,	dies in the natural sciences, t tion, to develop clear thinkin basis for intelligent citizenshi and to equip graduates for a	the humanities, and the social science g and expression, to promote an und p and responsible leadership in a dem i rewarding and productive life Hamp	es, to cultivate qualities of lerstanding of the world and nocracy, to prepare those with den-Sydney is a liberal arts
4b	(Cod	e) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Cod	e) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
4d		er program services (Describe in	•			
		penses \$	including grants o	of \$) (Revenue \$)
4e	Tota	al program service expenses 🟲	59,759,528	3		

Part IV	Che	rklist	of Re	auired	Sche	dules
4:11.7.4	CHE	CRIISL	OI NO	uuncu	SCHE	uuics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{\circ}$	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? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
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		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			1
		28a	Yes	
D	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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
1 2	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 1,549		Yes	No
b	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
_	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
.	If "Yes," enter the name of the foreign country			
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
_		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N o
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_	.,	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			
02	Did the sponsoring organization make any taxable distributions under section 4966?	8 9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13				
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	i	Νo
h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

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

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records ►W Glenn Culley Jr
 - College Road
 - Hampden Sydney, VA 23943 (434) 223-6216

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 trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

	1	٦ [
c Total fro	om continuation sheets to Part VII, Section A	►			
d Total (a	dd lines 1b and 1c)	►	1,584,085	0	343,377

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►18

			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 I for such individual	3	Yes	
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	ı
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	·	No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Thompson Hospitality, 1741 Business Center Dr Suite 200 Reston, VA 20190	Food Service	3,302,248
Royal Company, 1920 East Parham Road Richmond, VA 232282206	Consultants	505,734
W M Jordan Company, 708 Bainbridge St P O Box 24366 Richmond, VA 232240366	Contractor	255,485
Jenzabar Inc, 1401 Technology Drive Harrisonburg, VA 22802	IT Service	160,587
WCW Earthworks, P O Box 287 Farmville, VA 23901	Contractor	156,001
2 Total number of independent contractors (including but not limited to those listed above) 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 \(\mathbb{F} 9 \)

		Check if Schedi	ule O contains a respor	nse or note to any lir		 ,		<u>l .</u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
0	1a	Federated camp	paigns 1a					
nts	ь	Membership du	es 1b					
Contributions, Gifts, Grants and Other Similar Amounts								
S, (С	Fundraising eve						
ᄩᆲ	d	Related organiz	rations 1d					
s, i	e	Government grants	s (contributions) 1e	3,529,571				
i i i i	f		ons, gifts, grants, and 1f	12,899,198	i			
풀필		sımılar amounts no			ļ			
# 5	g	Noncash contribute 1a-1f \$	ons included in lines	2,585,752				
Cont	h	Total. Add lines	s 1a-1f		16,428,769			
				Business Code				
Program Serwce Revenue	2a	Gross Tuition & Fee	ac		42.659.490	42.659.490		
.ver	_			611710	42,658,480	42,658,480		
윤	b	Auxiliary Enterprise	<u> </u>	611710	15,252,881	15,252,881		
90	С							
13.	d							
Ē	e		_					
Š	f	All other progra	am service revenue					
<u> </u>	g	Total. Add lines	s 2a-2f		57,911,361			
	3		ome (including dividen					
		and other simila	aramounts)	🟲	-76,318		-179,197	102,879
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties		🟲				
			(ı) Real	(II) Personal				
	6a	Gross rents	618					
	b	Less rental expenses						
	С	Rental income or (loss)	618					
	d	` '	me or (loss)		618		618	
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	5,267,105					
		assets other	3,207,103					
	ь	than inventory Less cost or						
		other basıs and sales expenses	3,381,291					
	С	Gain or (loss)	1,885,814					
	d	Net gain or (los	s)		1,885,814			1,885,814
	8a	Gross income f						
å		events (not inc	luding					
₹		\$ of contributions	reported on line 1c)					
æ		See Part IV, lin						
<u>.</u>			a					
Other Revenue			penses b	L				
٠	C Qa		(loss) from fundraising	events 🛌				
	9a	See Part IV, lin	rom gaming activities ie 19					
			а					
	b	Less direct ex	penses b					
	С	Net income or ((loss) from gamıng actı	vities				
	10a	Gross sales of						
		returns and allo	owances . a					
	b	less costofa	oods sold b					
			(loss) from sales of inv	entory .				
		Miscellaneous		Business Code				
	11a							
	ь		_					
	c							
	d	All other reven	ue		962,801	927,831	34,970	
	u e		s 11a-11d	🕨	- 32,001	7,001	,5.0	
					962,801			
	12	fotal revenue.	See Instructions .	🕨	77,113,045	58,839,192	-143,609	1,988,693

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to any line in this	Part IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	23,933,839	23,933,839		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	203,785	203,785		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	980,963		798,821	182,142
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	19,619,207	15,247,823	3,220,846	1,150,538
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	1,305,942	961,212	254,394	90,336
9	Other employee benefits	3,188,139	2,346,565	621,041	220,533
10	Payroll taxes	1,452,830	1,069,326	283,007	100,497
11	Fees for services (non-employees)				
а	Management				
b	Legal	136,711	434	136,277	
C	Accounting	90,264		90,264	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	2,581,710	1,477,033	949,398	155,279
14	Information technology	532,175	511,712	16,196	4,267
15	Royalties				
16	Occupancy	2,256,522	1,110,237	1,146,285	
17	Travel	1,123,729	826,772	209,041	87,916
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	439,360	439,360		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,662,147	3,662,147		
23	Insurance	296,575	129,411	167,164	
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	General	2,986,245	1,992,574	706,955	286,716
b	Consultants	280,375	117,892	160,283	2,200
С	Contract Services	5,393,970	4,289,089	1,077,272	27,609
d					
e	All other expenses	1,440,317	1,440,317		
25	Total functional expenses. Add lines 1 through 24e	71,904,805	59,759,528	9,837,244	2,308,033
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

Fai	τχ	Check if Schedule O contains a response or note to any line in	n this	Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			9,325,078	1	12,751,392
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			4,139,425	3	7,305,474
	4	Accounts receivable, net			822,850	4	835,663
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete F Schedule L	art II	of		5	333,010
Assets	6	Loans and other receivables from other disqualified persons ($4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedule	l contı emplo	ibuting employers		6	550,510
88	7	Notes and loans receivable, net			5,853,868	7	5,297,307
₹	8	Inventories for sale or use			1,240,958	8	1,198,917
	9	Prepaid expenses and deferred charges			755,831	9	856,636
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	157,728,080			
	ь	Less accumulated depreciation	10b	72,225,971	87,228,861	10c	85,502,109
	11	Investments—publicly traded securities			5,132,223	11	5,251,234
	12	Investments—other securities See Part IV, line 11			157,827,715	12	162,129,506
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			272,326,809	16	281,461,248
	17	Accounts payable and accrued expenses			6,883,952	17	7,415,579
	18	Grants payable			1,326,797	18	1,327,803
	19	Deferred revenue			313,167	19	320,500
	20	Tax-exempt bond liabilities			17,580,749	20	16,029,726
	21	Escrow or custodial account liability Complete Part IV of Sci			17,000,710	21	10,020,120
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqua	tors,			21	
Liabiliti		persons Complete Part II of Schedule L				22	
ä	23	Secured mortgages and notes payable to unrelated third parti			93.460	23	32,008
	24	Unsecured notes and loans payable to unrelated third parties			1,285,628	24	1,166,542
	25	Other liabilities (including federal income tax, payables to rel and other liabilities not included on lines 17-24) Complete P	ated t art X	hırd parties, of Schedule		25	
		D			07,400,750	25	20,202,450
	26	Total liabilities. Add lines 17 through 25			27,483,753	26	26,292,158
ces		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	✓ aı	nd complete			
an	27	Unrestricted net assets			69,214,482	27	70,268,368
<u>е</u>	28	Temporarily restricted net assets			92,338,940	28	96,989,761
됟	29	Permanently restricted net assets			83,289,634	29	87,910,961
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check complete lines 30 through 34.	here Þ	+			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
AS	32	Retained earnings, endowment, accumulated income, or other	funds			32	
Ŋet	33	Total net assets or fund balances			244,843,056	33	255,169,090
2	34	Total liabilities and net assets/fund balances			272,326,809	34	281,461,248
		· · · · · · · · · · · · · · · · · · ·			, ,		

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		77,:	13,045
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1				904,805
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		5,2	208,240
_		4		244,8	343,056
5	Net unrealized gains (losses) on investments	5		5,3	.17,794
6	Donated services and use of facilities	6			
7	Investment expenses				
		7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
-	column (B))	10		255,	69,090
Par	*t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		1	• F
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or rev a 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 sepass, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversi audit, review, or compilation of its financial statements and selection of an independent accountant?	ght of th	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t	he	3-	V	1
I-	Single Audit Act and OMB Circular A-133?		3a	Yes	
D	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	

Software ID: **Software Version:**

EIN: 54-0505906

Name: Hampden Sydney College

Form 990, Part VII - Compensation Compensated Employees, and Inde				Tru	ste	es, ŀ	(ey	Employees, Hig	hest	
(A) Name and Title	(B) Average Position (do not check hours per week (list person is both an officer any hours and a director/trustee) (by the first label) (C) (D) Reportable Reportable compensation from the organization (W-2/1000 MISC) (2/1000 MISC)		(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the						
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
(1) Thomas N Allen	10 00	X		X				0	0	0
Trustee-Chairman	0 00					-				
(1) John B Adams Jr	3 00	×		х				0	0	0
Trustee (2) J Trevor Boyce	0 00									
		×						0	0	0
Trustee (3) Lawrence B Caplin	0 00									
	0 00	×						0	0	0
Trustee (4) Bradley H Cary	3 00									
Trustee	0 00	×						0	0	0
(5) Cynthia L Citrone	3 00						\vdash			
Trustee	0 00	×						0	0	0
(6) Richard P Cook	3 00	.,								
Trustee	0 00	X						0	0	0
(7) Jon M Daly	3 00	V						0		0
Trustee	0 00	Х						0	0	0
(8) Nathan J DaPore	3 00	x						0	0	0
Trustee	0 00	_ ^						0	0	
(9) John W Drescher	3 00	Х						0	0	0
Trustee	0 00	_ ^						0	Ů	•
(10) John C Ellis Jr	3 00	l x						0	0	0
Trustee	0 00									
(11) H Todd Flemming	3 00	×						0	0	0
Trustee (12) And row W. Froston	0 00				_	-				
(12) Andrew W Freitas	3 00	×						0	0	0
Trustee (13) John L Gibson III	0 00					-				
		×						0	0	0
Trustee (14) Everett A Hellmuth III	0 00					+				
		×						0	0	0
Trustee (15) Eugene W Hickok Jr	0 00									
Trustee	0 00	х						0	0	0
(16) John Hillen	3 00									
Trustee	0 00	×						0	0	0
(17) John G Macfarlane III	3 00									
Trustee	0 00	×						0	0	0
(18) John E Mansfield Jr	3 00							_	_	_
Trustee	0 00	X						0	0	0
(19) David J McKittrick	3 00	,,		,,						
Trustee	0 00	X		X				0	0	0
(20) Charles V McPhillips	3 00	V						0		0
Trustee	0 00	Х						0	0	
(21) W Sheppard Miller III	3 00	х						0	0	0
Trustee	0 00	_ ^						0		
(22) Bartow Morgan Jr	3 00	x						0	0	0
Trustee	0 00								0	
(23) Gordon C Nash	3 00	X						0	0	0
Trustee	0 00						_		<u> </u>	
(24) Tayloe N Negus	3 00	X						0	0	0
Trustee	0 00									

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

Compensated Employees, and Inde (A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (e nan o n is b	ne b oth ctor/	ox, u an of trus	nless ficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Ke, emplojee	Highest compensated employee	Former	2/1099-M13C)	2/1099-MI3C)	related organizations
(26) Jon A Pace	3 00	l x						0	0	0
Trustee	0 00							, and the second		
(1) William I Pannill	3 00	l x						0	0	0
Trustee	0 00	^						· ·	· ·	
(2) Charles W Payne Jr	3 00	l x						0	0	0
Trustee	0 00	^						0	0	0
(3) Myron L Rolle	3 00							0	0	0
Trustee	0 00	X						0	U	U
(4) Gordon D Schreck	3 00	V		,				0	0	
Trustee	0 00	X		X				0	0	0
(5) David W Shelor	3 00	,,								
Trustee	0 00	X						0	0	0
(6) Robert D Taylor	3 00	v								
Trustee	0 00	X						0	0	0
(7) Navın Thukkaram	3 00							_		_
Trustee	0 00	×						0	0	0
(8) James C Wheat III	3 00							_	_	_
Trustee	0 00	X						0	0	0
(9) David G Wilson Jr	3 00							_	_	_
Trustee	0 00	×						0	0	0
(10) Christopher B Howard	50 00								_	
President	0 00			X				341,483	0	99,091
(11) W Glenn Culley Jr	50 00								_	
VP for Bus AffFinance	0 00			X				169,614	0	44,765
(12) Dennis G Stevens	50 00								_	
ProvostDean of Faculty	0 00				Х			158,329	0	49,932
(13) Herbert L Kıng	50 00				.,				_	=
VP Instit Advancement	0 00				Х			171,489	0	51,011
(14) Anita H Garland	50 00					,,				47.464
Dean of Admissions	0 00					X		144,134	0	17,164
(15) Kenneth Neal Townsend	50 00									
Professor	0 00					X		126,661	0	21,234
(16) Charles Beeler Brush	50 00									
Senior Major Gifts Officer	0 00					X		125,283	0	21,545
(17) William Albert Shear	50 00									
Professor	0 00					Х		123,762	0	19,279
(18) Justin Isaacs	50 00									
Professor	0 00					Х		120,040	0	8,914
(19) Vernon Dale Jones	50 00									
VP Admin	0 00						X	103,290	0	10,442
TI / MITHI	1 000	1			1	<u> </u>		I		

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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.

Open to Public Inspection

Employer identification number Name of the organization Hampden Sydney College 54-0505906 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). $\overline{\mathbf{v}}$ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. 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) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i)Name of supported (ii) EIN (iv) Is the organization (vi) A mount of (iii) Type of (v) A mount of listed in your governing other support (see organization organization monetary support (described on lines document? (see instructions) instructions) 1-9 above or IRC 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	cabox 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 Amounts 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 3j 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: 93493127010326

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

www.irs.gov/form990.

Political Campaign and Lobbying Activities

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

line 35c (Proxy Tax) (see separate instructions), then

• 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, ◆ Section 501(c)(4), (5), or (6) organizations Complete Part III **Employer identification number** Name of the organization Hampden Sydney College Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 2 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? Yes If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year?

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

Grassroots lobbying expenditures

			/-	1)		(b)	
For e		elow, provide in Part IV a detailed description of the lobbying	Yes	No	Aı	moun	ıt
1	legislation, including any attempt to inf through the use of	on attempt to influence foreign, national, state or local uence public opinion on a legislative matter or referendum,					
	Volunteers?			No			
b		pensation in expenses reported on lines 1c through 1i)?		No			
C	Media advertisements?	muhlin 2		No			
d	Mailings to members, legislators, or the	.		No			
e	Publications, or published or broadcast			No			
f	Grants to other organizations for lobbyi			No			
g		iffs, government officials, or a legislative body?		No			
h :	Other activities?	ventions, speeches, lectures, or any similar means?	Vac	No			1.00
:		•	Yes				1,66
j	Total Add lines 1c through 1	ganization to be not described in section 501(c)(3)?		N.o.			1,66
2a ⊾		• • • • • • • • • • • • • • • • • • • •		No			
Ь	If "Yes," enter the amount of any tax in						
C		curred by organization managers under section 4912 ion 4912 tax, did it file Form 4720 for this year?					
		zation is exempt under section 501(c)(4), section	F01/a	\/F\ -			
-6	501(c)(6).	zation is exempt under section 501(c)(4), section :	OT(C)(5), 0	ir se	CLIO	11
	302(0)(0).					Yes	No
1	Were substantially all (90% or more) d	ues received nondeductible by members?		Г	1		
2		e lobbying expenditures of \$2,000 or less?			2		
3		lobbying and political expenditures from the prior year?			3	-	
aı	t IIII-B Complete if the organi	zation is exempt under section 501(c)(4), section : (a) BOTH Part III-A, lines 1 and 2, are answered "					
1	Dues, assessments and similar amount		1				
2	Section 162(e) nondeductible lobbying expenses for which the section 527(f)	and political expenditures (do not include amounts of political tax was paid).					
а	Current year		2a				
b	Carryover from last year		2b				
C	Total		2c				
3		033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		line 2c exceeds the amount on line 3, what portion of the excess					
	does the organization agree to carryove political expenditure next year?	r to the reasonable estimate of nondeductible lobbying and	4				
5	Taxable amount of lobbying and political	d expenditures (see instructions)	5				
	art IV Supplemental Informa						
Pro	ovide the descriptions required for Part I-	A , line 1 , Part I-B , line 4 , Part I-C , line 5 , Part II-A (affiliated groi so , complete this part for any additional information	up list),	Part II	-A, lın	es 1	and
	Return Reference	Explanation					
	l l						

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

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DLN: 93493127010326

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 Inspection

ne of the organization upden Sydney College		Emp	loyer identifica	tion number
			0505906	
organizations Maintaining Donor A organization answered "Yes" to Form 99		ar Funds	or Accounts	. Complete if t
	(a) Donor advised funds		(b) Funds and	other accounts
Total number at end of year				
Aggregate value of contributions to (during year)				
Aggregate value of grants from (during year)				
Aggregate value at end of year				
Did the organization inform all donors and donor adv funds are the organization's property, subject to the			sed	┌ Yes ┌ N
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit?				┌ Yes ┌ N
t II Conservation Easements. Complete	if the organization answered "Y	'es" to Forn	n 990 Part IV	
Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreating Protection of natural habitat Preservation of open space	rganization (check all that apply) on or education)	n of an histori n of a certifie	cally important d historic struc	: land area ture
Complete lines 2a through 2d if the organization hele easement on the last day of the tax year	d a qualified conservation contribution	on in the form		
Total number of conservation easements		3-	neid at the	End of the Year
		2a		
Total acreage restricted by conservation easements		2b		
Number of conservation easements on a certified his	` '	2c		
Number of conservation easements included in (c) a historic structure listed in the National Register		2d		
Number of conservation easements modified, transfer the tax year -	erred, released, extinguished, or tern	ninated by tr	e organization	during
Number of states where property subject to conserv	ation easement is located 🛌			
Does the organization have a written policy regardin enforcement of the conservation easements it holds		n, handling of	violations, and	┌ Yes ┌ N
Staff and volunteer hours devoted to monitoring, ins	pecting, and enforcing conservation	easements o	luring the year	
Amount of expenses incurred in monitoring, inspecti	ing and enforcing conservation ease	ments durin	the vear	
►\$	ing, and emoreing conservation ease	inents during	g the year	
Does each conservation easement reported on line 2 and section 170(h)(4)(B)(II)?	2(d) above satisfy the requirements	of section 17	70(h)(4)(B)(ı)	┌ Yes ┌ N
In Part XIII, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation eases	the footnote to the organization's fina			
Complete if the organization answered			ner Similar	Assets.
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide, in Part XIII, the text of the footnote		revenue sta		ance sheet
	sets held for public exhibition, educa			
If the organization elected, as permitted under SFAS works of art, historical treasures, or other similar as service, provide the following amounts relating to the	sets held for public exhibition, educa e to its financial statements that des 5 116 (ASC 958), to report in its rev sets held for public exhibition, educa	scribes these enue statem	ent and balanc	nce of public e sheet
works of art, historical treasures, or other similar as	sets held for public exhibition, educa e to its financial statements that des 5 116 (ASC 958), to report in its rev sets held for public exhibition, educa	scribes these enue statem	e items ent and balanc arch in furthera	nce of public e sheet
works of art, historical treasures, or other similar as service, provide the following amounts relating to the	sets held for public exhibition, educa e to its financial statements that des 5 116 (ASC 958), to report in its rev sets held for public exhibition, educa	scribes these enue statem	ent and balanc arch in furthera	nce of public e sheet ince of public
(i) Revenue included in Form 990, Part VIII, line 1	sets held for public exhibition, educate to its financial statements that des 116 (ASC 958), to report in its revisets held for public exhibition, educates items	scribes these renue statem ation, or rese sets for finan	ent and balanc arch in furthera * \$	nce of public e sheet ince of public
works of art, historical treasures, or other similar as service, provide the following amounts relating to the (i) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, history	sets held for public exhibition, educate to its financial statements that des 116 (ASC 958), to report in its revisets held for public exhibition, educates items	scribes these renue statem ation, or rese sets for finan	ent and balanc arch in furthera * \$	nce of public e sheet ince of public

Part	Organizations Maintaining Co	llections of Art,	His	torica	<u>al Tr</u>	easure	<u>s, or O</u>	ther	<u>r Similar <i>I</i></u>	\sse	ts (cor	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, ch	eck an	y of t	he follow	ing that a	are a	sıgnıfıcant u	se of	ıts	
а	Public exhibition		d	Γι	_oan d	orexchai	nge progr	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's c Part XIII	ollections and explai	n how	they f	furthe	r the org	anızatıon	's ex	empt purpos	e ın		
5	During the year, did the organization solicit								ılar	_		_
Do	assets to be sold to raise funds rather than								!! t	<u> </u>		No
Par	Part IV, line 9, or reported an ar						inswere	a "Ye	es" to Form	990	<i>'</i>	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interme	dıary	for cor	ntrıbu	tions or (other ass	ets n	ot	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	ng tab	ole		_					
							-			4 mou	nt	
С	Beginning balance						-	1c				
d	Additions during the year						L	1d				
e	Distributions during the year						<u> </u>	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21,f	for esc	row o	r custodı	al accou	nt Iıa	bility?	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expla	nation	has l	been pro	vided in F	Part >	KIII			\sqcap
Pa	rt V Endowment Funds. Complete											
		(a)Current year		rıor yea	_				hree years bac	_		ars back
1a	Beginning of year balance	152,694,312		135,68	1,072	12	25,721,745	-	129,378,73	_		2,596,194
b	Contributions	4,476,130		3,132	2,469		2,149,090		1,042,88	1	2	2,651,842
С	Net investment earnings, gains, and losses	7,262,607		19,873	3,887	1	13,656,753		2,371,85	55	20	0,162,259
d	Grants or scholarships											
е	Other expenditures for facilities and programs	6,141,174		5,993	3,116		5,846,516		7,071,72	1	į	5,991,565
f	Administrative expenses	450.004.055								_		40,000
g	End of year balance	158,291,875		152,694			35,681,072		125,721,74	.5	129	9,378,730
2	Provide the estimated percentage of the cur	rent year end balanc	e (line	e 1g, c	olumi	n (a)) hel	d as					
а	Board designated or quasi-endowment ►	1 000 %										
b	Permanent endowment ► 52 000 %											
C	Temporarily restricted endowment ► 47 The percentages in lines 2a, 2b, and 2c sho	000 % uld equal 100%										
3a	Are there endowment funds not in the posse	ssion of the organiza	tion t	hat are	e held	l and adn	nınıstered	d for t	the			
	organization by								_		Yes	No
	(i) unrelated organizations			•				•		Sa(i)		No_
b	(ii) related organizations								[3	a(ii) 3b		No_
4	Describe in Part XIII the intended uses of t	· · · · · · · · · · · · · · · · · · ·						•		טכ		
	t VI Land, Buildings, and Equipme					answe	red 'Yes	' to	Form 990.	Part	TV. lın	e
	11a. See Form 990, Part X, line			94								
	Description of property			(a) Co basis (ost or o investr		Cost or of basis (othe		(c) Accumula depreciation		(d) Boo	k value
1a	_and						3,008	3,950			3	,008,950
b I	Buildings						123,051	_	45,185,	404		,866,562
c I	_easehold improvements						10,977	7,740	8,970,	152		,007,588
	Equipment						20,689	9,424	18,070,	415	2	,619,009
e	Other											
	I. Add lines 1a through 1e <i>(Column (d) must c</i>		, colui	mn (B),	, line .	10(c).)		. '			85	,502,109
									Schedule	D (F	orm 99	00) 2014

Part VII Investments—Other Securities. Con See Form 990, Part X, line 12.	nplete if the organization a	nswered 'Yes' to Form 990, Part IV, line 11b.
(a) Description of security or category	(b) Book value	(c) Method of valuation
(Including name of security) (1)Financial derivatives		Cost or end-of-year market value
(2)Closely-held equity interests		
(3)Other (A) Certificate of Deposit	50,000	F
(B) Real Estate	4,500,000	F
(C) Alternative Investments	148,475,287	F
(D) O ther	2,117,252	F
(E) Beneficial Int in Trust	6,986,967	F
	162 120 506	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Co	mplete if the organization	answered 'Yes' to Form 990. Part IV. line 11c.
See Form 990, Part X, line 13.		
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total (Column (2) must equal term 350, tare ty cor (2) mic 15)	a prowared 'Vee' to Form 000	Part IV, line 11d See Form 990, Part X, line 15
(a) Descri		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. Complete if the orga		
Form 990, Part X, line 25.		Tomin 990, Part IV, line Tie of Til. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)		
, , , , , , , , , , , , , , , , , , ,	ı	

Part		evenue per Audited Financial Stat vered 'Yes' to Form 990, Part IV, line 1		ts With Revenue բ	er Re	eturn Complete if
1		r support per audited financial statements			1	
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12				
а	Net unrealized gains (losses)	on investments	2a			
b	Donated services and use of f	acılıtıes	2b		1	
c	Recoveries of prior year grant	s	2c		1	
d	Other (Describe in Part XIII)		2d		1	
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 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		d 4c. (This must equal Form 990, Part I, line			5	
Part		xpenses per Audited Financial Sta swered 'Yes' to Form 990, Part IV, line		nts With Expenses	per	Return. Complete
1		r audited financial statements			1	
2	A mounts included on line 1 bu	t not on Form 990, Part IX, line 25				
а	Donated services and use of fa	acılıtıes	2a			
b	Prior year adjustments		2b			
C	Otherlosses		2c			
d	Other (Describe in Part XIII)		2d			
e	Add lines 2a through 2d				2e	
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	
4	Amounts included on Form 99	0, Part IX, line 25, 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		nd 4c. (This must equal Form 990, Part I, line	18)		5	
Part	XIII Supplemental Inf	ormation				
Part		Part II, lines 3, 5, and 9, Part III, lines 1a a lines 2d and 4b, and Part XII, lines 2d and		•	•	e any additional
	Return Reference	Explanation				
V , line	,	Hampden-Sydneys endowment funds are us demonstrated financial need, as well as, ac professorships, and other programs that su from financial support that the funds contril	ademic pport th	achievement The fund ne college as a whole	ds also The Co	support chairs,
	ote for uncertain tax position FIN 48 (Part X)	Management evaluated the Colleges tax pouncertain tax positions that require adjustr with the provisions of this guidance				

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: 93493127010326

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

mp	den Sydney College	4 0505006			
Pa	rtI	4-0505906		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its other governing instrument, or in a resolution of its governing body?		1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students brochures, catalogues, and other written communications with the public dealing with student admi programs, and scholarships?	ssions,	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadca the period of solicitation for students, or during the registration period if it has no solicitation progrethat makes the policy known to all parts of the general community it serves? If "Yes," please describes explain. If you need more space use Part II	ribe If "No,"	3	Yes	
					1
4	Does the organization maintain the following?				ı
	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially no	<u> </u>	4a	Yes	
_	basis?	•	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the published student admissions, programs, and scholarships?	_	4c	Yes	<u> </u>
d	Copies of all material used by the organization or on its behalf to solicit contributions?	<u> </u>	4d	Yes	
	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?	<u> </u>	5a		No
b	Admissions policies?	<u>.</u>	5b		Νo
c	Employment of faculty or administrative staff?	_ !	5c		No
d	Scholarships or other financial assistance?	<u>.</u>	5d		No
е	Educational policies?	<u> </u>	5e		Νo
f	Use of facilities?	<u> </u>	5f		Νo
g	Athletic programs?	<u> </u>	5g		Νo
h	O ther extracurricular activities?	!	5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II				
	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?	<u> </u>	6a 6b	Yes	No
	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 0 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No." explain on Part	1 through 4 05	7	Vas	110

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
Governmental Agency Financial Aid (Questions 6a and 6b)	Schedule E, Question 6aExplanation of financial aid or assistance from a governmental agency Students at Hampden-Sydney College received federal financial aid totaling \$8,675,418 for the 2014-2015 year. This included Pell Grants, Perkins Loans, subsidized and unsubsidized SSL, parent loans, and others. Students at Hampden-Sydney College received state financial aid totaling \$2,356,165 for the 2014-2015 year. Most of this aid was from TAGP.
Description of nondiscriminatory policy (Question 3)	Hampden-Sydney publicizes its racially nondiscriminatory policy through new spaper media. The College wiebsite also includes a statement that Hampden-Sydney does not discriminate on the basis of race, color, sex, religion, age, national origin, handicap, sexual orientation, or veteran status in the operation of its education programs and with respect to employment.

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

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As Filed Data -

DLN: 93493127010326

SCHEDULE F (Form 990)

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.

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization Hampden Sydney College							Employer identification number					
,	pacino, amo, comego				54-0	505906						
Pa	rt I General Information "Yes" to Form 990, Par			ne United States. Co	omplete if the	e organiza	ation answere	ed				
1	For grantmakers. Does the d	organization m	aıntaın record:	s to substantiate the a	mount of its	grants						
	and other assistance, the gra	antees' eligibili	ty for the gran	ts or assistance, and	the selection	criteria						
used to award the grants or assistance?							☐ Yes	┌ No				
2	For grantmakers. Describe in assistance outside the United		ganızatıon's pı	rocedures for monitorii	ng the use of	ts grant	s and other					
3	Activites per Region (The follow	ıng Part I, line 3	table can be du	iplicated if additional spa	ice is needed)							
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity liste program service specific ty service(s) in	e, describe pe of	(f) Total exper for and invest in region	ments				
(1)			g.	region,								
(2)												
(3)												
(4)												
(5)												
За	Sub-total											
	Total from continuation sheets to Part I											
C	: Totals (add lines 3a and 3b)	1										

123						duplicated if addition			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
2						les by the foreign co (c)(3) equivalency l			
3	Enter total nui	mber of other or	ganizations or ent	ities					

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 (d) A mount of (e) Manner of cash (a) Type of grant or (b) Region (f) A mount of (g) Description (h) Method of valuation assistance recipients cash grant disbursement non-cash of non-cash assistance assistance (book, FMV, appraisal, other) (1) Financial Aid Europe including 10 139,785 Student Acct Iceland and Greenland (2) Financial Aid 16,500 Student Acct East Asia and the 1 Pacific (3) Financial Aid 13,500 Student Acct Russia and 1 Neighboring States (4) Financial Aid Middle East and North 1 34,000 Student Acct A frica (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Part IV Foreign Forms

1	organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>\</u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<u>\</u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	▼	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	<u> </u>	Νo

Schedule F (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 54-0505906

Name: Hampden Sydney College

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).

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493127010326 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number Hampden Sydney College 54-0505906 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance or assistance grant cash or government assistance (book, FMV, appraisal, other)

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

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

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

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Grants and Scholarships	1092	20,784,599			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.							
Return Reference	Explanation						
	Form 990, Sch I,Line 2 Students who wish to be considered for financial aid complete an application - the PROFILE from the college scholarship service to apply for college grants and scholarships. Financial aid awards are reviewed at the end of each semester and may be withdrawn if a receipients citizenship or academic work does not meet the standards of the college. College-sponsored grants and scholarships are limited to 8 semesters and require full-time enrollment. Financial aid receipients must maintain minimum satisfactory academic progress. Hampden-Sydney offers several scholarships, awarded without regard to financial need, which recognize outstanding academic and extracurricular achievement. All applicants for admission are automatically considered for academic scholarships.						

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DLN: 93493127010326

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990.

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

Open to Public Inspection

Name of the organization Hampden Sydney College

Employer identification number

54-0505906

Pai	t I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a		No
	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		Νo
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

(A) Name and Title		(B) Breakdown of	FW-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
Christopher B Howard, President	(i) (ii)	341,483			22,640	76,451	440,574	
2 W Glenn Culley Jr, VP for Bus AffFinance	(i) (ii)	169,614			15,426	29,339	214,379	
3 Vernon Dale Jones, VP Admin	(i) (ii)	103,290			9,297	1,145	113,732	
4 Anıta H Garland, Dean of Admissions	(i) (ii)	144,134			13,025	4,139	161,298	
5 Dennis G Stevens, ProvostDean of Faculty	(i) (ii)	158,329			14,551	35,381	208,261	
6 Herbert L King, VP Instit Advancement	(i) (ii)	171,489			15,864	35,147	222,500	

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

T

Return Reference Explanation

Schedule J (Form 990) 2014

DLN: 93493127010326

Open to Public

OMB No 1545-0047

Schedule K (Form 990)

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.

Inspection

	e of the organization									Em	ployer id	lentifica	tion nu	nber	
Har	npden Sydney College									54	-05059	06			
P	art I Bond Issues														
	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue	price	(f) De	escriptio	n of purpose	(g) Defeased			(h) On (i) Pool behalf of financing		
													alf of financing suer		
										Yes	No	Yes	No	Yes	No
Α	IDA of Town of Farmville VA	54-6001272	311617aa2	03-06-2003	6,00		Construction buildings	_	l renovating		X		Х		Х
В	IDA of Town of Farmville VA	54-6001272		07-15-2004	1,21	10,000	Renovatı Hall	ing & equ	ııppıng Graham		X		X		Х
c _	IDA of Prince Edward County	54-1245781		11-10-2005	10,00		Construc library fa		iipping of a		Х		Х		Х
D	VCBA Revenue Bonds Ser 2010	54-1249154	927781UB8	05-13-2010	7,19		Refundin				Х		×		Х
Pā	rt II Proceeds					A			<u> </u>		С			D	
1	1 A mount of bonds retired				-	<u> </u>			,						
2	2 A mount of bonds legally defeased														
3	Total proceeds of issue					6,000,	,000		1,210,000	10,000,000			0 7,380,060		
4	4 Gross proceeds in reserve funds														
5	Capitalized interest from proc	eeds													
6	Proceeds in refunding escrow	rs												7	,238,095
7	Issuance costs from proceed	s			112,500 24,000		35,000		5,000	141,965					
8	Credit enhancement from prod	ceeds													
9	Working capital expenditures	from proceeds													
10	Capital expenditures from pro	oceeds													
11	Other spent proceeds					5,887,	,500		1,186,000		9,96	5,000			
12	Other unspent proceeds														
13	Year of substantial completio	n			20	05		20	06	2	006			2010	ı
					Yes	No		Yes	No	Yes	N N	ło	Yes		No
14	Were the bonds issued as par	t of a current refund	ing issue?			Х			X			×	Х		
15	Were the bonds issued as par	t of an advance refu	nding issue?			Х			X		;	×	Х		
16	Has the final allocation of pro-	ceeds been made?			Х			Х		X			Х		
Does the organization maintain adequate books and records to support the final allocation of proceeds?			×			x		X			Х				
Pa	rt IIII Private Business l	Jse													
						A 		E			C .			D	
					Yes	No		Yes	No	Yes	1	40	Yes		No

property financed by tax-exempt bonds?

financed property?

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

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

Х

Χ

Χ

Χ

Χ

Х

scne	dule K (Form 990) 2014									Page 2
Par	Private Business Use (Continued)									
				4		В		c		D
			Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private of bond-financed property?			Х		Х		×		Х
b	b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?									
С	Are there any research agreements that may result in private business use of bond-financed property?			Х		Х		Х		×
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?									
4	Enter the percentage of financed property used in a private business use be other 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		Х		X		X
8a				х		Х		х		Х
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of								
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?									
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		×		х
Par	t IV Arbitrage	•		•	•	•	•	•	•	•
		А			В		С		D	
		Yes	No	Yes	No	Y	es	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		×		Х			Х		Х
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?									X
b	Exception to rebate?									
С	No rebate due?	х		Х		>	(Х	
	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?		Х		Х			Х		Х
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?		Х		Х			Х		Х
b	Name of provider									
С	Term of hedge									
d	Was the hedge superintegrated?									
e	Was the hedge terminated?									

Part IV	Arbitrage	(Continued)
---------	-----------	-------------

	Albinage (commed)								
		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		Х		×		X		×
ь	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		Х		х		×
7	Has the organization established written procedures to monitor the requirements of section 148?		х		×		X		×

Part V Procedures To Undertake Corrective Action

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

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

Return Reference	Explanation
Bond purpose (Sch K, Part I, col f)	Schedule K Part 1, Bond Issues (A) Issuer Name Industrial Development Authority (IDA) of the Town of Farmville, VA(F) Description of Purpose Constructing and renovating buildings and installing underground power lines(A) Issuer Name Industrial Development Authority (IDA) of the Town of Farmville, VA(F) Description of Purpose Renovating and equipping Graham Hall(A) Issuer Name Industrial Development Authority (IDA) of Prince Edward County, VA(F) Description of Purpose Construction, equipping and development of a library facility(A) Issuer Name Virginia College Building Authority (VCBA)Refunding Revenue Bonds(F) Description of Purpose Refunding Bonds

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

► 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.

OMB No 1545-0047

DLN: 93493127010326

2014

Open to Public Inspection

Employer identification number

IT Exc									05906			
		Transactions anization answere									40b	
	me of disqualifie				disqualified	(c) Desc					(d) Corr	ected
(-)		(2)		and organi		(-,				-	Yes	No
Entortho	amount of tax i	ncurred by organ	uzation m	anadore or	disqualified poi	conc during th	30 V03r	undo	coction			
	amount of tax i		iization m	anagers or	disqualified per	sons during tr	ie year	under • •	* Section			
		if any, on line 2,	above, rei	mbursed by	y the organizati	on			F \$			
	,	,,			, g				• т			
rt II												
	ind/or From	Interested F	Persons	_								
omplete if t	he organization	Interested F answered "Yes" 990. Part X. line	on Form 9	990-EZ, Pa	rt V, line 38a, o	or Form 990, F	art IV	, line 2	26, or if	the org	anızatıon	1
omplete ıf t ported an a	he organization imount on Form	answered "Yes" 990, Part X, line	on Form 9 5, 6, or 2	990-EZ, Pa :2					1		_	
omplete if to ported an a	he organization imount on Form (b) Relations	answered "Yes" 990, Part X, line	on Form 9 5, 6, or 2 (d) Loar	990-EZ, Pa :2 n to	(e)O rıgınal	(f) Balance	(g)	In	(h)		(i)Wri	tten
omplete ıf t ported an a	he organization imount on Form	answered "Yes" 990, Part X, line	on Form 9 5, 6, or 2 (d) Loar	990-EZ, Pa :2 n to the				In	(h) A ppro	ved rd or	_	tten
omplete if to ported an a Name of interested	he organization imount on Form (b) Relations	answered "Yes" 990, Part X, line thip (c) tion Purpose of	on Form 9 5, 6, or 2 (d) Loar or from organizat	990-EZ, Pa 22 In to the lion?	(e)Original principal	(f) Balance	(g) defa	In ult?	(h) A ppro- by boar commit	ved d or tee?	(i)Wri agreem	tten nent?
omplete if to ported an a Name of terested	he organization imount on Form (b) Relations	answered "Yes" 990, Part X, line thip (c) tion Purpose of	on Form 9 5, 6, or 2 (d) Loar or from	990-EZ, Pa :2 n to the	(e)Original principal	(f) Balance	(g)	In	(h) A ppro	ved rd or	(i)Wri	tten nent?
omplete if ti ported an a) Name of iterested person stopher B	he organization imount on Form (b) Relations with organizat	answered "Yes" 990, Part X, line hip tion Purpose of loan	on Form 9 5, 6, or 2 (d) Loar or from organizat	990-EZ, Pa 20 1 to the 100n?	(e)Original principal amount	(f) Balance due	(g) defa	In ult?	(h) A pproby by boar commit Yes	ved d or tee?	(i)Wri	tten
omplete if tiported an a Name of terested person stopher B	he organization imount on Form (b) Relations with organizat	answered "Yes" 990, Part X, line thip (c) tion Purpose of loan Split dollar	on Form 9 5, 6, or 2 (d) Loar or from organizat	990-EZ, Pa 20 1 to the 100n?	(e)Original principal amount	(f) Balance due	(g) defa	In ult?	(h) A pproby by boar commit Yes	ved d or tee?	(i)Wri	tten nent?
omplete if tiported an a Name of terested person stopher B	he organization imount on Form (b) Relations with organizat	answered "Yes" 990, Part X, line thip (c) tion Purpose of loan Split dollar	on Form 9 5, 6, or 2 (d) Loar or from organizat	990-EZ, Pa 20 1 to the 100n?	(e)Original principal amount	(f) Balance due	(g) defa	In ult?	(h) A pproby by boar commit Yes	ved d or tee?	(i)Wri	tten nent?
omplete if tiported an a Name of terested person stopher B	he organization imount on Form (b) Relations with organizat	answered "Yes" 990, Part X, line thip (c) tion Purpose of loan Split dollar	on Form 9 5, 6, or 2 (d) Loar or from organizat	990-EZ, Pa 20 1 to the 100n?	(e)Original principal amount	(f) Balance due	(g) defa	In ult?	(h) A pproby by boar commit Yes	ved d or tee?	(i)Wri	tten nent?
omplete if to ported an a Name of terested person stopher B	he organization imount on Form (b) Relations with organizat	answered "Yes" 990, Part X, line thip (c) tion Purpose of loan Split dollar	on Form 9 5, 6, or 2 (d) Loar or from organizat	990-EZ, Pa 20 1 to the 100n?	(e)Original principal amount	(f) Balance due	(g) defa	In ult?	(h) A pproby by boar commit Yes	ved d or tee?	(i)Wri	tten nent?
omplete if toorted an	he organization imount on Form (b) Relations with organizat	answered "Yes" 990, Part X, line tion Co loan Split dollar Ins	on Form 9 5, 6, or 2 (d) Loar or from organizat	990-EZ, Pa 20 1 to the 100n?	(e)Original principal amount	(f) Balance due 333,010	(g) defa	In ult?	(h) A pproby by boar commit Yes	ved d or tee?	(i)Wri	tten nent?
omplete if tiported an a not	he organization imount on Form (b) Relations with organization organi	answered "Yes" 990, Part X, line thip (c) Purpose of loan Split dollar Ins	on Form 9 5, 6, or 2 (d) Loar or from organizat	990-EZ, Pa	(e)Original principal amount 333,010	(f)Balance due	(g) defa	In ult?	(h) A pproby by boar commit Yes	ved d or tee?	(i)Wri	tten nent?
omplete if tiported an a line of the stopher B ard Grand Gra	(b) Relations with organization President	answered "Yes" 990, Part X, line tion (c) Purpose of loan Split dollar Ins Ins	on Form 9 5, 6, or 2 (d) Loar or from organizat To fiting Ir	P90-EZ, Pa	(e)Original principal amount 333,010 Persons. Form 990, Page 1	(f)Balance due 333,010 art IV, line 2	(g) defa Yes	In ult?	(h) A pproby boar commit Yes Yes	ved rd or tee? No	(i)Wri agreem Yes Yes	tten nent?
omplete if tiported an a) Name of otherested person stopher Beard Grant Gr	(b) Relations with organization President rants or Assomplete if the interested (mount on Form	answered "Yes" 990, Part X, line tion (c) Purpose of loan Split dollar Ins Ins Split dollar Ins (c) Column (c)	on Form 9 5, 6, or 2 (d) Loar or from organizate To fiting Ir	P90-EZ, Pa	(e)Original principal amount 333,010	(f)Balance due 333,010 art IV, line 2	(g) defa Yes	In ult?	(h) A pproby boar commit Yes Yes	ved rd or tee? No	(i)Wri	tten nent?
omplete if tiported an a Name of atterested person stopher Beard	(b) Relations with organization President rants or Assomplete if the interested (mount on Form	answered "Yes" 990, Part X, line tion (c) Purpose of loan Split dollar Ins Ins	on Form 9 5, 6, or 2 (d) Loar or from organizate To fiting Ir nswered between and the	P90-EZ, Pa	(e)Original principal amount 333,010 Persons. Form 990, Page 1	(f)Balance due 333,010 art IV, line 2	(g) defa Yes	In ult?	(h) A pproby boar commit Yes Yes	ved rd or tee? No	(i)Wri agreem Yes Yes	tten nent?

Part IV Business Transactions Involving Interested Per	sons.
--	-------

· · · · · · · · · · · · · · · · · · ·	ition answered "Yes" on F		ie 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	f zatıon's
				Yes	No
(1) Maureen Culley	Spouse of W Glenn CulleyOfficer	32,493	Compensation paid as employee of College		No
(2) Patricia Townsend	Spouse of Kenneth TownsendHC Emplo	35,850	Compensation paid as employee of College		No
(3) Scott Harwood	Former Trustee	331,580	HSC purchased insurance from HarwoodSon Ins		No
(4) Charles Cabell	Former Trustee	104,409	HSC does business with Williams Mullen		No

Part V	Supplemental Information	1

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

Return Reference	Explanation
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Schedule L (Form 990 or 990-EZ) 2014

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OMB No 1545-0047

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SCHEDULE M (Form 990)

Noncash Contributions

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

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

Department of the Treasury Internal Revenue Service Name of the organization Hampden Sydney College

Employer identification number

54-0505906

Pa	Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	termining	_	;
1	Art—Works of art			-				
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications	Χ		1,000	Appraisal			
5	Clothing and household							
_	goods							
	Cars and other vehicles							
	Boats and planes							
	Intellectual property		126	2 505 752	EN4) /			
	Securities—Publicly traded . Securities—Closely held stock .	X	136	2,585,752	FMV			
	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							—
	Other ► ()							
	Other ► () Other ► ()							—
	Other ► ()							
	Number of Forms 8283 received	by the orga	nization during the tay year	r for contributions				
2.5	for which the organization comple				29			
				_	•	Ye	es	No
30a	During the year, did the organize	atıon receiv	e by contribution any prope	rty reported in Part I, lines	1 through 28, that			
	ıt must hold for at least three ye	ars from the	e date of the initial contribu	tion, and which is not requi	red to be used			
	for exempt purposes for the enti	re holding p	eriod?		[30a		N o
b	If "Yes," describe the arrangem	ent in Part 1	I					
31	Does the organization have a gi	t acceptano	ce policy that requires the r	eview of any non-standard	contributions?	31 Ye	s	
32a	Does the organization hire or us contributions?	· ·	es or related organizations	to solicit, process, or sell i	noncash 	32a		N o_
ь 33	If "Yes," describe in Part II If the organization did not report describe in Part II	: an amount	ın column (c) for a type of p	property for which column (a) is checked,			

Page 2

Schedule M (Form 990) (2014)

Part II Supplemental Information. Provide the information required by Part I, lines 30b,

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference Explanation

Schedule M (Form 990) (2014)

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SCHEDULE O

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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.

	Employer identification number
Hampden Sydney College	54-0505906

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990 governing body review Part VI line 11	
Conflict of interest policy compliance Part VI line 12c	Form 990, Part VI, Section B, Line 12c Each member of the board of trustees is expected to report promptly to the president of the college or to the chairman of the board of trust ees the existence of any relationship or interest, as it arises, which actually or potentially involves or may appear to involve a conflict of interest. In addition, each trustee will be asked to sign a statement annually reflecting his or her continuing awareness and uinderstanding of this policy. At the same time, the individual will report either the absence of potential conflicts or the possible areas of concern
CEO executive director top management comp Part VI line 15a	Form 990, Part VI, Section B, Line 15a Outside compensation consultants were hired to pro vide an opinion on the reasonableness of the total compensation paid to the president of H ampden-Sydney College, the study included review of the entire compensation arrangement in cluding cash and non-cash components, taxable and nontaxable benefits. The study included a survey of peer colleges and published survey information for tax-exempt and forprofit s ectors. In addition to the compensation study, the compensation for key employees is also reviewed by the board annually
Other officer or key employee compensation Part VI line 15b	See explanation for Part VI, Line 15a
Governing documents etc available to public Part VI line 19	FORM 990, PART VI, SECTION B, LINE 19 Hampden-Sydney College makes available, upon reques t, the three most recent Forms 990 and 990-T and other documents required to be open to pu blic inspection

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DLN: 93493127010326

OMB No 1545-0047

Open to Public Inspection

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.

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

Name of the organization **Employer identification number** Hampden Sydney College 54-0505906

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.									
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity				
(1) H-SC Poplar Hill LLC P O Box 127 Hampden Sydney, VA 23943	Real Estate	VA		4,500,000	Hampden-Sydney College				

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)	(b)	(c)	(d)	(e)	(f)	(g	ı)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state	Exempt Code section	Public charity status	Direct controlling	Section	512(b)
		or foreign country)		(If section 501(c)(3))	entity	(13) cor	ntrolled
					•	entı	ity?
						Yes	No

Part III	Identification of Related Organizations Taxable a	as a Partne	ership	Complete i	f the organiz	atıon ansv	ered "Ye	s" on Form	990, Part 1	[V, line 3	4
	because it had one or more related organizations treate	ed as a part	nership	during the	tax year.						
											$^{-}$

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

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

(a)	(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

ensactions with one or more related organizations listed in Parts II-IV?	1a 1b 1c 1d						
controlled entity	1b 1c 1d						
	1c 1d						
	1d						
	\vdash						
	1e						
	1f						
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)							
handari da							
· · · · · · · · · · · · · · · · · · ·							
d organization(s)	1n						
o Sharing of paid employees with related organization(s)							
	1p						
· · · · · · · · · · · · · · · · · · ·							
	1r						
	1s						
mation on who must complete this line, including covered relationships and transaction thresholds							
(a) (b) (c) (d) Name of related organization Transaction type (a-s)							
7 7	related organization(s) related organization(s) related organization(s) related organization(s) related organization(s) related organization(s) related organization(s) relation on who must complete this line, including covered relationships and transaction thresholds (b) (c) (d) Transaction Amount involved Method of determining amounts in the shoulds of determining amounts in the should be also as a should be a should be also as a should be also as a should be a should be also as a should be a sho	mation on who must complete this line, including covered relationships and transaction thresholds (b) (c) (d) Method of determining amount in motion of the state of the stat	the lated organization(s) Including covered relationships and transaction thresholds (b) (c) (d) (d) (monotone) (d) (d) (monotone) (e) (d) (formstead organization) (head organization)				

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

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	$\overline{}$	+	 				_
1			<u> </u>			'				

Part VII Supplemental Information

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

Return Reference Explanation

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