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DLN: 93493137059016

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047

2014

Open to Public Inspection

A Fo	r the	2014 cal	endar year, or tax year beginning 07-01-2	014 , and ending 06-30-	2015			
B Ch	eck ıf a	applicable	C Name of organization GEORGETOWN COLLEGE			D Empl	oyer id	entification number
☐ Add	dress cl	hange	GESKGET SIM SOLLESE			61-0	44469	95
∏ Na	me cha	ange	Doing business as					
┌ Ind	tial retu	ım				E Teleph	one nu	mher
Fin			Number and street (or P O box if mail is not d 400 EAST COLLEGE STREET	elivered to street address) Roor	n/suite	·		
		rmınated				(502)863-	8016
_		return n pending	City or town, state or province, country, and Z GEORGETOWN, KY 40324	P or foreign postal code		G Gross	receipts	\$ \$ 62,395,864
			F Name and address of principal offi	cer	H(a)	Is this a grou	p retur	n for
			DAVID WILHITE 400 EAST COLLEGE STREET			subordinates		┌ Yes 🗸 No
			GEORGETOWN, KY 40324		н(ь)	Are all subord	linates	
						included?	illates	1 1631 110
I Ta	x-exen	mpt status	▼ 501(c)(3)	☐ 4947(a)(1) or ☐ 527		If "No," attac	h a lıst	(see instructions)
J W	ebsit	e: 🕨 WW	W GEORGETOWNCOLLEGE EDU		H(c)	Group exemp	tion ni	umber 🟲
K For	m of or	rganization	Corporation Trust Association Other	*	L Ye	ear of formation 1	829	M State of legal domicile KY
	rt I		mary		1-1-	1		. I state of logal definions
	1		escribe the organization's mission or mos	t significant activities				
			TOWN COLLEGE IS A FULLY ACCRED		TITUTION	OF HIGHER L	EARNI	ING
ဗ								
ᅙ								
Governance	2	Check th	is box 🕶 if the organization discontinue	d its operations or dispos	ed of more	than 25% of its	s net a	ssets
် ၁			,					
	3	Number	of voting members of the governing body	(Part VI, line 1a)			3	2.5
<u>e</u>	4	Number	of independent voting members of the gov	erning body (Part VI, line	1b)		4	2.2
Activities &			nber of individuals employed in calendar				5	1,050
্ব	1		mber of volunteers (estimate if necessary		6	51		
	1		elated business revenue from Part VIII,				7a	216,355
	b	Net unre	lated business taxable income from Form	990-T, line 34	· · ·		7b	-69,033
						Prior Year	224	Current Year
ā			butions and grants (Part VIII, line 1h)			5,677		4,399,546
Rayenue	10	-	m service revenue (Part VIII, line 2g) ment income (Part VIII, column (A), line			34,379 8,138		32,529,152 2,701,579
Ž	11		revenue (Part VIII, column (A), lines 5, 6		•	7,624		7,694,992
	12		evenue—add lines 8 through 11 (must ed		, line	7,021	,000	7,031,332
	<u> </u>	12) .	 			55,819	,511	47,325,269
	13		and similar amounts paid (Part IX, colur			19,033	,099	18,859,987
	14		ts paid to or for members (Part IX, colum		—		0	0
ø	15	Saları 5-10)	es, other compensation, employee benefit	s (Part IX, column (A), lın	es	18,301	,958	16,822,279
Expenses	16a	-	sional fundraising fees (Part IX, column (24	,000	0	
Φ Ω	Ь		ndraising expenses (Part IX, column (D), line 25)					
Δ					_	4 4 4 7 -	773	1074007
	17 18		expenses (Part IX, column (A), lines 11a expenses Add lines 13–17 (must equal f			14,475 51,834		13,749,274
	19		ue less expenses Subtract line 18 from l			3,984		-2,106,271
<u>~~~~</u>	 • • • • • • • • • • • • • • • • • • •	WEACH	de less expenses Subtract fine to ffolio			ginning of Curre		
Not Assets or Fund Balances						Year		End of Year
3.55 B.25,	20	Total	assets (Part X, line 16)			98,964	,815	91,983,686
	21		iabilities (Part X, line 26)		· ·	57,467		55,115,967
	22	_	sets or fund balances Subtract line 21 fi	om line 20		41,497	,229	36,867,719
	rt II		ature Block					
my k	nowle		perjury, I declare that I have examined the pelief, it is true, correct, and complete Denowledge					
		****	**			2016-05-16		
Sigr	1	I II	ture of officer			Date		
Her			O WILHITE CFO					
		<u> </u>	or print name and title					
				's signature C CARTER	Date	Check if self-employed	PTIN P012	42412
Paid	d		Irm's name ► DEAN DORTON ALLEN FORD PLLC		1	Firm's EIN 🕨 2		
Pre	pare							

Use Only

Firm's address ► 106 W VINE STREET SUITE 600

LEXINGTON, KY 40507

Phone no (859) 255-2341

✓ Yes ☐ No

Par	3111	Statement of Pro			lishments o any line in this Part II	· · · · · · · · · · · · · · · · · · ·	
1	Brief	ly describe the organiz	•		·		<u> </u>
GEOF GEOF LEAR	RGET C RGET C NING	OWN COLLEGE IS A FO OWN, KENTUCKY THE UNDER CHRISTIAN I	ULLY ACCREDIT COLLEGE IS CO INFLUENCES SO	MMITTED AS TO AFF	TO PROVIDING OPPO ORD ITS STUDENTS A	OF HIGHER LEARNING LOCA PRTUNITIES FOR EXCELLENC QUALITY EDUCATION IN S THY INTEREST IN THE PROF	E IN HIGHER ELECTED BRANCHES
2	the pi	rıor Form 990 or 990-E	Z?			which were not listed on	┌ Yes ┌ No
	If "Y∈	es," describe these new	v services on Sch	edule O			
3	servi	ces?			t changes in how it con	ducts, any program	┌ Yes ┌ No
4	Desc exper		program service a) and 501(c)(4) o	ccomplishm rganizations	are required to report	ee largest program services, as the amount of grants and alloca	
	(Code	e) (Expenses \$	41,527,005	ıncludıng grants of \$	18,859,987) (Revenue \$	37,962,731)
-ru	OPER	ATION OF A HIGHER EDUCA	ATIONAL INSTITUTION	PROVIDING ED		OOD SERVICES TO STUDENTS AND FA	
4b	(Cod	e) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code	e)(Expenses \$		including grants of \$) (Revenue \$)
4d		er program services (D enses \$		le O) ing grants of	 f \$) (Revenue \$)
4e	Tota	ıl program service expe	enses 🕨 🗸	1,527,005			

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	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? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🦉	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	Yes	
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

art v	Statements Regarding Other 1KS Filings and Tax Compliance				_
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u></u>	Yes	.l No
a Ente	er the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a	2,030		res	NO
	er the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b	0			
	the organization comply with backup withholding rules for reportable payments to vendors and	rapartabla			
	ling (gambling) winnings to prize winners?		1c	Yes	
2a Ente	er the number of employees reported on Form W-3, Transmittal of Wage and Statements, filed for the calendar year ending with or within the year covered				
•	his return	1,050			
	: least one is reported on line 2a, did the organization file all required federal employment tax ri e. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruct		2b	Yes	
a Did	the organization have unrelated business gross income of \$1,000 or more during the year? .		3а	Yes	
	es," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule</i>	_	3b	Yes	
over	iny time during the calendar year, did the organization have an interest in, or a signature or other, a financial account in a foreign country (such as a bank account, securities account, or other bunt)?	financial	4a		No
	/es," enter the name of the foreign country ►				
See (FB <i>A</i>	instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	I Accounts			
a Was	the organization a party to a prohibited tax shelter transaction at any time during the tax year	~	5a		Νo
	any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra	ncaction?	5b		No
	es," to line 5a or 5b, did the organization file Form 8886-T?	H	56		
- 11 Y	cs, to fine 3a of 3b, and the organization me rottli 0000-1 '		5c		
	s the organization have annual gross receipts that are normally greater than \$100,000, and distributions that were not tax deductible as charitable contributions? \cdot		6a		No
	e not tax deductible?		6b		
Orga	anizations that may receive deductible contributions under section 170(c).				
serv	the organization receive a payment in excess of \$75 made partly as a contribution and partly to the payor?		7a	Yes	
	Yes," did the organization notify the donor of the value of the goods or services provided? \cdot		7b	Yes	
file F	the organization sell, exchange, or otherwise dispose of tangible personal property for which it	•	7c		No
If"Y	es," indicate the number of Forms 8282 filed during the year				
	the organization receive any funds, directly or indirectly, to pay premiums on a personal benefi		7e		No
Did	the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co	ntract?	7f		No
	e organization received a contribution of qualified intellectual property, did the organization file				
	ured ^o		7g		
	le organization received a contribution of cars, boats, airplanes, or other vehicles, did the orgai n 1098-C?		7h		
Did	nsoring organizations maintaining donor advised funds. a donor advised fund maintained by the sponsoring organization have excess business holding ng the year?	s at any time	8		
Did :	the sponsoring organization make any taxable distributions under section 4966?		9a		
	the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<u> </u>	9b		
	tion 501(c)(7) organizations. Enter				
	ation fees and capital contributions included on Part VIII, line 12 10a				
Gros	ss receipts, included on Form 990, Part VIII, line 12, for public use of club				
Sect	tion 501(c)(12) organizations. Enter				
	ss income from members or shareholders				
	ss income from other sources (Do not net amounts due or paid to other sources inst amounts due or received from them)				
Sect	t ion 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For	m 1041? 1	L2a		
If"Y year	Yes," enter the amount of tax-exempt interest received or accrued during the				
•	tion 501(c)(29) qualified nonprofit health insurance issuers.				
Isth	he organization licensed to issue qualified health plans in more than one state? e. See the instructions for additional information the organization must report on Schedule O	1	L3a		
	er the amount of reserves the organization is required to maintain by the states				
ın wl	hich the organization is licensed to issue qualified health plans				
Did	the organization receive any payments for indoor tanning services during the tax year?		L4a	İ	No
	res " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedu	<u> </u>	14b		

Section A. Governing Body and Management

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

	<u> </u>				Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	25			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	22			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2	Yes	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	rior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	atıon's assets? .	5		No
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?		elect or appoint one or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?			7b		No
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body? \cdot . \cdot .			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ction B. Policies (This Section B requests information about policies not	requi	red by the Internal R	eveni	ie Cod	e.)
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		No
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of it the form?	ts gov	erning body before filing	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	90			
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 annual rise to conflicts?	ly inte	rests that could give	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done	the p	olicy? If "Yes," describe	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 revindependent persons, comparability data, and contemporaneous substantiation of the					
а	The organization's CEO, Executive Director, or top management official			15a	Yes	
b	Other officers or key employees of the organization \ldots . \ldots . \ldots .			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 taxable entity during the year?	orsım • •	ılar arrangement wıth a	16a	Yes	
b	If "Yes," did the organization follow a written policy or procedure requiring the organ participation in joint venture arrangements under applicable federal tax law, and tak organization's exempt status with respect to such arrangements?	e step	s to safeguard the	16b		No
Se	ction C. Disclosure			100		NU
17	List the States with which a copy of this Form 990 is required to be filed▶KY					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable	e), 990	0, 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)

- 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 ►DAVID WILHITE

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

1b	Sub-Total	•			
C	Total from continuation sheets to Part VII, Section A	•			
d	Total (add lines 1b and 1c)	P	1,468,812	0	75,745

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶9

			Yes	NO
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	,		
	on the factor respectively for such marviaga.	3		No
4				
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SODEXO MANAGEMENT INC 1001 CHERRY BLOSSOM WAY GEORGETOWN, KY 40324	DINING SERVICES	2,600,418
JENZABAR INC 101 HUNTINGTON AVE 2200 BOSTON, MA 02205	SOFTWARE SUPPORT	372,325
MADE FROM SCRATCH INC 100 CRAWFORD DR GEORGETOWN, KY 40324	DINING	177,142
RUFFALOCODY HOLDINGS LLC 1025 KIRKWOOD PKWY SW CEDAR RAPIDS, IA 52404	ADMISSIONS CONSULTING SERVICES	152,808
TONY'S PAINTING INC 452 ANDERSON RD GEORGETOWN, KY 40324	PAINTING/REPAIRS	114,169
2 Total number of independent contractors (including but not limited to thos	e listed above) who received more than	

	1.		ile O contains a respor	ise of note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts I	_	Federated camp						
Grants Imounts	b	Membership du						
, Am	С	Fundraising eve	ents 1c	18,616				
ollic Iar	d	Related organiz	ations 1d					
in is	e	Government grants	(contributions) 1e	937,104				
continutions, onts, orans and Other Similar Amounts	f	All other contribution	ns, gifts, grants, and 1f t included above	3,443,826	j	į		
Oth	g	Noncash contribution 1a-1f \$	ons included in lines	116,042	j	į		
con and	h	Total. Add lines	:1a-1f		4,399,546			
				Business Code				
enu (2a	TUITION AND FEES		611710	32,529,152	32,529,152		
Pev€	b							
ce F	С							
ervi	d		_					
٦ 9	e							
Program Service Revenue	f	All other progra	m service revenue					
<u>ڄ</u>	g	Total. Add lines	;2a-2f		32,529,152			
	3		ome (ıncludıng dıvıden					1 607 620
			aramounts)	F	1,687,629			1,687,629
	4		tment of tax-exempt bond					
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	348,265	(II) I CISOIIdi				
	ь	Less rental	315,532					
	С	expenses Rental income	32,733					
	d	or (loss) [me or (loss)		32,733		32,733	
			(ı) Securities	(II) O ther	,			
	7a	Gross amount from sales of assets other than inventory	13,458,281	550				
	ь	Less cost or other basis and	12,346,739	98,142				
	c	sales expenses Gain or (loss)	1,111,542	-97,592				
	d	Net gain or (los	s)		1,013,950			1,013,950
an	8a	Gross income fr events (not incl	rom fundraising	·				
omer nevenue			reported on line 1c) e 18					
<u> </u>			a	3,059				
9 5			penses b	10,197	7.420			7 400
)	c 9a		loss) from fundraising of the following activities of the	events 🛌	-7,138			-7,138
	ь	Less direct evi	a penses b					
			loss) from gaming activ	vities				
	10a	Gross sales of i						
		. Scarns und allo	a a	4,352,181				
		Less cost of go	L	2,299,985				
	С		loss) from sales of inve		2,052,196			2,052,196
		Miscellaneous		Business Code 611710	4 400 724	4,498,731		
	11a	AUXILIARY EN REVENUE	TERPRISES	911/10	4,498,731	4,490,731		
	ь	OTHER REVEN	UE	900099	409,392	409,392		
	С	ATHLETICS		713940	160,765	160,765		
	d	All other revenu	ie		548,313	364,691	183,622	
	е	Total. Add lines	11a-11d	🕨	5,617,201			

Part IX Statement of Functional Expenses

CIGHA Statemen	nt of Tunicuonal Expenses	
Section 501(c)(3) and 50	01(c)(4) organizations must complete all columns All other organizations must complete column (A)	
Check if Sche	edule O contains a response or note to any line in this Part IX	

	Check if Schedule O contains a response or note to any line in this of include amounts reported on lines 6b, p, 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	18,859,987	18,859,987		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,205,842		973,028	232,814
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	13,314,538	10,770,795	2,052,618	491,125
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)				
9	Other employee benefits	2,301,899	1,811,196	394,999	95,704
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	124,508		124,508	
С	Accounting	87,740		87,740	
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)	526,380	319,107	207,273	
12	Advertising and promotion	71,719	8,535		63,184
13	Office expenses	3,206,382	3,038,102	99,928	68,352
14	Information technology	306,609	306,609		
15	Royalties				
16	Occupancy	1,584,039	495,428	1,088,611	
17	Travel	113,187	63,955	18,117	31,115
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	2,125,875	1,859,390	266,485	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,337,588	2,337,588		
23	Insurance	396,731	106,827	289,904	
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	ATHLETIC PROGRAMS	846,488	846,488		
b	REPAIRS & MAINTENANCE	709,916	8,652	701,264	
c	STUDENT PROGRAMS	662,984	662,984		
d	TUITION WAIVER REIMBURS	258,082		258,082	
е	All other expenses	391,046	31,362	218,925	140,759
25	Total functional expenses. Add lines 1 through 24e	49,431,540	41,527,005	6,781,482	1,123,053
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

r GII	τx	Check if Schedule O contains a response or note to any line in the	nis Pa	ırt X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			3,525,036	1	1,515,762
	2	Savings and temporary cash investments			65,300	2	65,300
	3	Pledges and grants receivable, net			1,461,774	3	1,421,264
	4	Accounts receivable, net			3,250,764	4	2,398,313
ts	5	Loans and other receivables from current and former officers, diemployees, and highest compensated employees Complete Passchedule L	rs, trustees, key of		5		
	6	Loans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and c and sponsoring organizations of section 501(c)(9) voluntary emorganizations (see instructions) Complete Part II of Schedule L	outing employers		6		
Assets	7	Notes and loans receivable, net				7	
₹ .	8	Inventories for sale or use		18,484	8	6,839	
					617,107	9	427,012
	9	Prepaid expenses and deferred charges		• • 	017,107	9	427,012
	10a	Late 12 of Belleville B	10a	95,725,299			
	b		10b	52,566,220	, ,	10c	43,159,079
	11	Investments—publicly traded securities		36,554,872	11	36,044,818	
	12	Investments—other securities See Part IV, line 11		•		12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets		·		14	
	15	Other assets See Part IV, line 11			9,393,492	15	6,945,299
	16	Total assets. Add lines 1 through 15 (must equal line 34)			98,964,815	16	91,983,686
	17	Accounts payable and accrued expenses			2,369,711	17	2,103,442
	18	Grants payable				18	
	19	Deferred revenue			1,487,737	19	1,261,139
	20	Tax-exempt bond liabilities			36,993,333	20	36,119,667
	21	Escrow or custodial account liability Complete Part IV of Sche				21	
lities	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi	rs, tr				
Liabiliti		persons Complete Part II of Schedule L				22	
ï	23	Secured mortgages and notes payable to unrelated third parties			5,576,824	23	5,065,966
	24	Unsecured notes and loans payable to unrelated third parties			, ,	24	<u> </u>
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par	ed thi	rd parties,			
		D			11,039,981	25	10,565,753
	26	Total liabilities. Add lines 17 through 25			57,467,586	26	55,115,967
s e		Organizations that follow SFAS 117 (ASC 958), check here ► □ lines 27 through 29, and lines 33 and 34.	and	complete			
Ĕ	27	Unrestricted net assets			-4,029,210	27	-6,651,567
<u></u>	28	Temporarily restricted net assets		12,577,910	28	11,222,676	
=	29	Permanently restricted net assets			32,948,529	29	32,296,610
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he					<u> </u>
ŏ		complete lines 30 through 34.					
똢	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu				32	
Ŋĕţ	33	Total net assets or fund balances			41,497,229	33	36,867,719
	34	Total liabilities and net assets/fund balances			98,964,815	34	91,983,686

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		47,3	325,269		
2	Total expenses (must equal Part IX, column (A), line 25)	2			431,540		
3	Revenue less expenses Subtract line 2 from line 1	3					
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			497,229		
5	Net unrealized gains (losses) on investments	5			513,961		
6	Donated services and use of facilities	6		۷,۰	713,501		
7	Investment expenses	7					
8	Prior period adjustments						
9	, , , , , , , , , , , , , , , , , , , ,						
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	9		26.6	-9,278		
Par	t XII Financial Statements and Reporting	10		30,8	367,719		
Fai	Check if Schedule O contains a response or note to any line in this Part XII				. 区		
				Yes	No		
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both Separate basis Both consolidated and separate basis	wed on					
h	Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?		2b	Yes			
J	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate	25	103			
_	Separate basis Consolidated basis Both consolidated and separate basis						
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n		i			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a	Yes			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	Yes			

Software ID: **Software Version:**

EIN: 61-0444695

Name: GEORGETOWN COLLEGE

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per week (list any hours for related	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1033-11130/	2/1033-1413-0	related organizations	
(1) EARL GOODE	2 00	×						0	0	0	
CHAIR, TRUSTEE (1) CARROLL STEVENS	2 00								_		
TRUSTEE		X						0	0	0	
(2) FRANK PENN TRUSTEE	2 00	х						0	0	0	
(3) GUTHRIE TRUE	2 00	x						0	0	0	
TRUSTEE		_ ^						Ů		<u> </u>	
(4) JAMES SHEPHERD	2 00	X						0	0	0	
TRUSTEE (5) JOHN STEMPEL	2 00										
TRUSTEE		X						0	0	0	
(6) JOHN WARD	2 00	×						0	0	0	
TRUSTEE								Ů	0	0	
(7) MISSY MATTHEWS	2 00	x						0	0	0	
TRUSTEE (8) NICOLE B COLLINSON	2 00										
TRUSTEE		X						0	0	0	
(9) NORMAN DANIELS	2 00							0	0	0	
TRUSTEE		X						0	0	0	
(10) RANDY FOX	2 00	X						0	0	0	
TRUSTEE (11) REZA HASHAMPOUR	2 00										
TRUSTEE		X						0	0	0	
(12) RICHARD GAINES	2 00	x						0	0	0	
TRUSTEE								Ů	0		
(13) RANDY FIELDS	2 00	X						0	0	0	
TRUSTEE (14) SHEILA BAILEY	2 00										
TRUSTEE		X						0	0	0	
(15) BOB HEIB	2 00	×						0	0	0	
TRUSTEE								, v			
(16) GRANETTA BLEVINS	2 00	X						0	0	0	
TRUSTEE (17) GREG BARR	2 00										
TRUSTEE		X						0	0	0	
(18) HOWARD ENSOR	2 00	×						0	0	0	
TRUSTEE		^		_				, v		•	
(19) ROBERT DOTY	2 00	X						0	0	0	
TRUSTEE (20) DAVE ADKISSON	2 00										
TRUSTEE		X						0	0	0	
(21) TUCKER BALLINGER	2 00	x						0	0	0	
TRUSTEE		<u> </u>			1		<u> </u>	ľ			
(22) DAVID KNOX	2 00	x						0	0	О	
TRUSTEE (23) SARAH WILSON	2 00										
TRUSTEE		Х						0	0	0	
(24) GUTHRIE ZARING	2 00	x						0	0	0	
TRUSTEE											

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	hours per mo		ion (d	ne booth a	ox, u an of trus	inless 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	Key employee	Highest compensated employee	Former	2/1099-M13C)	2/1099-MI3C)	related organizations		
(26) BI HOUSTONVICE-CHAIR, TRUSTEE	2 00	×						0	0	0		
(1) JOHN BLACKBURN TRUSTEE	2 00	х						0	0	0		
(2) NORMAN BROWN TRUSTEE	2 00	х						0	0	0		
(3) HORACE HAMBRICK TRUSTEE	2 00	х						0	0	0		
(4) JAMES ALLISON ASSOC VP COLLEGE RELATION	50 00			х				82,594	0	6,005		
(5) LAURA SUZANNE JOHNSON DEAN OF STUDENTS	50 00			x				65,135	0	4,595		
(6) JIM NEWBERRY GENERAL COUNSEL	50 00			х				23,627	0	1,273		
(7) M DWAINE GREENE	50 00			х				271,135	0	10,710		
PRESIDENT (8) ROSEMARY ALLEN	50 00			x				124,774	0	7,070		
PROVOST/DEAN OF COLLEGE (9) ROBIN OLDHAM	50 00								0	F 600		
SECRETARY TO BOARD OF TRUSTEES (10) BRIAN EVANS	50 00			Х				66,975	0	5,600		
VP FOR DIVERSITY & INCLUSION (11) MICHELLE LYNCH	50 00			X				103,249	0	6,210		
VP FOR ENROLLMENT MNGT				х				125,750	0	3,125		
(12) TODD RASBERRY VP FOR INSTITUTIONAL ADVANCEMENT	50 00			x				149,641	0	5,595		
(13) JAMES MOAK VP, CFO, TREASURER	50 00			х				136,578	0	7,357		
(14) WILLIAM CRONIN HEAD FOOTBALL COACH	50 00					х		112,472	0	6,760		
(15) PATRICK SHERIDAN	50 00					х		105,796	0	5,347		
CHEMISTRY FACULTY (16) ANDREA PEACH	50 00					х		101,086	0	6,098		
ASSOCIATE DEAN OF EDUCATION												

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DLN: 93493137059016

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

2014

Open to Public Inspection

Name of the organization
GEORGETOWN COLLEGE

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

The c	rganı	zation is not a private fo	oundation beca	ause it is (For lines 1	through 11, ch	eck only one b	ox)					
1	Γ	A church, convention	of churches, o	r association of churc	hes described i	n section 170(l	b)(1)(A)(i).					
2	굣	A school described in	section 170(b)(1)(A)(ii). (Attach S	chedule E)							
3	Γ	A hospital or a cooper	atıve hospıtal	service organization o	described in sec	tion 170(b)(1)	(A)(iii).					
4	Γ	A medical research or	ganızatıon ope	erated in conjunction v	vith a hospital d	lescribed in se c	ction 170(b)(1)(A)(iii). Enter the				
_	_	hospital's name, city,										
5	ı	An organization opera			versity owned o	or operated by	a governmental unit d	escribed in				
	_	section 170(b)(1)(A)(
6		A federal, state, or loc	-	_			,, ,, ,					
7 8	_	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)										
9	<u>'</u>	An organization that n					hutians mambarshin	foos and gross				
9	'	-	·	• •			·	· -				
		receipts from activitie		•	-	• •	` '					
		its support from gross						Dusinesses				
	_	acquired by the organi		•	. , , ,	` '	•					
10	<u> </u>	An organization organ	•	·	-	· ·						
11	ı	An organization organ one or more publicly s	•	•								
a	Γ	the box in lines 11a th Type I. A supporting o supported organization	rganization op n(s) the power	perated, supervised, or to regularly appoint o	r controlled by 1 r elect a majori	ts supported o	rganization(s), typical	ly by giving the				
	_	organization You mus	-	•								
b	ı	Type II. A supporting										
		management of the su must complete Part IV			same persons t	nat control of f	nanage the supported	organization(S) You				
С	Г	Type III functionally i	•		n operated in c	onnection with	, and functionally integ	grated with, its				
	•	supported organization	_		•		, , ,	,				
d	Γ	Type III non-function										
		not functionally integr					ement and an attentiv	eness requirement				
_	_	(see instructions) You Check this box if the o					catural Turall T	una III functionally				
е	,	integrated, or Type III	_				s a rype i, rype ii, r	ype III functionally				
f		Enter the number of su										
g		Provide the following i										
_		-			, ,							
		ame of supported organization			governing	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)					
				ınstructions))								
					Yes	No						
Tota	1											
				ı	<u> </u>	I						

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

Schedule A (Form 990 or 990-EZ) 2014 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2010 **(b)** 2011 (c) 2012 (d) 2013 (e) 2014 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f)) 15

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

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

Section D. Computation of Investment Income Percentage

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

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

18

19a 33 1/3% support tests—2014. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

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

11c

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

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

3b

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

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

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

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

Section C - Distributable Amount

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

	Current Year
1	
2	
3	
4	
5	
6	

Section D - Distributions	Current Year		
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 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: 93493137059016

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

Open to Public Inspection

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

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

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

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

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

	Section 501(c)(4), (5), or (6) orga	anizations Complete Part III			
	me of the organization ORGETOWN COLLEGE			Employer i	dentification number
				61-04446	
Par	t I-A Complete if the or	ganization is exempt unde	er section 501(c) or is a section 5	27 organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect pol	litical campaign act	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	er section 501(c)(3).	
1		e tax incurred by the organization			- \$
2	Enter the amount of any excise	e tax incurred by organization man	agers under sectio	n 4955	• \$
3	If the organization incurred a s	section 4955 tax, did it file Form 4	720 for this year?		☐ Yes ☐ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt unde	er section 501(c), except section	501(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exem	pt function activities 🕨	÷ \$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	other organization	s for section 527	¢
3		tures Add lines 1 and 2 Enter he	re and on Form 112	20-POL, line 17b ►	+
4	Did the filing organization file i	Form 1120-POL for this year?			→
5	organization made payments l amount of political contribution	nd employer identification number For each organization listed, enter ns received that were promptly and political action committee (PAC)	the amount paid fro d directly delivered	om the filing organization to a separate political o	n's funds Also enter the organization, such as a rmation in Part IV
	(a) Name	(b) Address	(c) EIN	(d) A mount paid fro filing organization's funds If none, enter	contributions received

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					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax				
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,	000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000				
	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

		ganization is exempt under section 501(c)(3) and has lelection under section 501(h)).	NOT			raye J
For e	ach "Yes" response to lines 1a throug	gh 1: below, provide in Part IV a detailed description of the lobbying	(;	a)	(b)
activ		gri 1, belen, provide in , are 10 a decarded decomposition on the rebby mg	Yes	No	Am	ount
1		anization attempt to influence foreign, national, state or local t to influence public opinion on a legislative matter or referendum,				
а	Volunteers?			No		
b	Paid staff or management (includ	e compensation in expenses reported on lines 1c through 1i)?		Νo		
С	Media advertisements?			No		
d	Mailings to members, legislators,	, or the public?		Νo		
e	Publications, or published or broa	adcast statements?		Νo		
f	Grants to other organizations for	lobbying purposes?		Νo		
g	Direct contact with legislators, th	neır staffs, government officials, or a legislative body?		Νo		
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, or any similar means?		No		
i	O ther activities?		Yes			597
j						597
2a b	Did the activities in line 1 cause If "Yes," enter the amount of any	the organization to be not described in section 501(c)(3)?		No		
c		tax incurred by organization managers under section 4912				
d		a section 4912 tax, did it file Form 4720 for this year?		ı		
		ganization is exempt under section 501(c)(4), section !	501/6	\ <u>\</u>	rsec	tion
T GI	501(c)(6).	gamzation is exempt and er section sortes(4), section t	301(0	,,,,,	. 500	
					Y	es No
1	Were substantially all (90% or m	ore) dues received nondeductible by members?		Γ	1	
2	Did the organization make only in	n-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to care	ry over lobbying and political expenditures from the prior year?			3	
Par		ganization is exempt under section 501(c)(4), section ! ither (a) BOTH Part III-A, lines 1 and 2, are answered " d "Yes."				
1	Dues, assessments and similar a	mounts from members	1			
2	Section 162(e) nondeductible lob expenses for which the section 5	obying and political expenditures (do not include amounts of political 27(f) tax was paid).				
a b	Current year Carryover from last year		2a 2b			
c	Total		2c			
3		ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amore does the organization agree to ca	unt on line 2c exceeds the amount on line 3, what portion of the excess arryover to the reasonable estimate of nondeductible lobbying and				
_	political expenditure next year?		4			
5		political expenditures (see instructions)	5			
	rt IV Supplemental Info					
		Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou e 1 Also, complete this part for any additional information	ıp lıst),	Part II	-A , line	s 1 and
	Return Reference	Explanation				
PAR	Γ II-B, LINE 1	THE COLLEGE PAYS DUES TO VARIOUS ASSOCIATIONS OF WHIC THOSE DUES ARE USED FOR LOBBYING PURPOSES DUES PAID TO ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES WAS USED FOR LOBBYING PURPOSES DUES PAID TO THE KENTUC COMMERCE WERE \$1,200 OF WHICH 15% WAS USED FOR LOBBYING TO THE KENTUCKY SOCIETY OF CPAS WERE \$550 OF WHICH 10% PURPOSES DUES PAID TO THE SOCIETY FOR HUMAN RESOURCE OF WHICH 4% WAS USED FOR LOBBYING EXPENSES DUES PAID TLEXINGTON WERE \$669 OF WHICH 5% WAS USED FOR LOBBYING	O THE I WERE S CKY CH NG PUF WAS U MANA	NATION \$4,581 HAMBER RPOSES JSED FO GEMEN COMM	IAL OF WH COF DUES OR LOB T WERE	ICH 7% PAID BYING
		OF WHICH 4% WAS USED FOR LOBBYING EXPENSES DUES PAID T	O THE	СО	ММ	MMERCE

Part IV Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule C (Form 990 or 990EZ) 2014

DLN: 93493137059016

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		Employer identificat	ion number
∍EO	RGETOWN COLLEGE		61-0444695	
Pai	rt I Organizations Maintaining Donor Advorganization answered "Yes" to Form 990,			Complete if the
		(a) Donor advised funds	(b) Funds and of	her 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 adviso funds are the organization's property, subject to the organization		nor advised	┌ Yes ┌ No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benefit conferring impermissible private benefit?			┌ Yes ┌ No
a r	t III Conservation Easements. Complete if	the organization answered "Yes" t	o Form 990, Part IV,	line 7.
	Purpose(s) of conservation easements held by the orga Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education)	n historically important certified historic structi	
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in t	the form of a conservati	on
	,		Held at the I	nd of the Year
	Total number of conservation easements		2a	
	Total acreage restricted by conservation easements		2b	
	Number of conservation easements on a certified histo	rıc structure ıncluded ın (a)	2c	
	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, transferre	ed, released, extinguished, or terminate	ed by the organization d	urıng
	the tax year ►			
	Number of states where property subject to conservati	on easement is located be		
	Does the organization have a written policy regarding t enforcement of the conservation easements it holds?		dling of violations, and	┌ Yes ┌ No
	Staff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation easer	ments during the year	
	A mount of expenses incurred in monitoring, inspecting		a during the week	
	► \$, and emorcing conservation easement	s during the year	
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(II)?) above satisfy the requirements of sec	ction 170(h)(4)(B)(ı)	┌ Yes ┌ No
	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financia		nd
ri	Organizations Maintaining Collections Complete if the organization answered "You		or Other Similar A	ssets.
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asset	16 (ASC 958), not to report in its reveits held for public exhibition, education,	or research in furtherar	
	service, provide, in Part XIII, the text of the footnote to If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asset service, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education,	statement and balance	
	(i) Revenue included in Form 990, Part VIII, line 1		► \$	16,000
	(ii) Assets included in Form 990, Part X			1,140,689
	If the organization received or held works of art, historic following amounts required to be reported under SFAS:		or financial gain, provide	
	Revenue included in Form 990, Part VIII, line 1	-	► \$	
ļ	Assets included in Form 990. Part X		▶ - \$	

Part	Organizations Maintaining Co	llections of Art, F	listorical	Treas	ures, or Ot	ther	Similar As	sets (d	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records,	check any	of the fo	llowing that a	re a s	ignificant use	of its	
а	Public exhibition	•	d V Lo	an or ex	change progra	ams			
b	Scholarly research		e 🔽 Ot	her AR	T HISTORY A	ND S	TUDIO		
c	Preservation for future generations								
4	Provide a description of the organization's co Part XIII	ollections and explain	how they fui	ther the	organization'	s exe	mpt purpose ı	n	
5	During the year, did the organization solicit							– .,	E
Dar	assets to be sold to raise funds rather than to the training to the training to the training assets to be sold to raise funds rather than to the training to the training assets to be sold to raise funds rather than to the training assets to be sold to raise funds rather than to the training assets to be sold to raise funds rather than to the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training assets to be sold to raise funds rather than the training as the training a	<u> </u>						Yes	✓ No
FGI	Part IV, line 9, or reported an ar	•			on answered	1 16	5 (0101111)	50,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	lian or other intermedia	ary for conti	ributions	or other asse	ets no	t J	_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	I and complete the fol	lowing table	!	_				
					_	_	Am	ount	
C	Beginning balance					1c			
d	Additions during the year				<u> </u>	1d			
e •	Distributions during the year				_	1e			
f	Ending balance				<u> </u>	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	1, for escro	worcus	todial accoun	it liab	ility?	Yes	□ No
b	If "Yes," explain the arrangement in Part XI.				-				<u> </u>
Pa	rt V Endowment Funds. Complete		inswered ' (b)Prior year	_	Form 990, Two years back			(e)Four	years back
1a	Beginning of year balance	33,733,926	36,181,9		35,100,755	(u)iii	36,832,066	(C)r our	30,044,170
b	Contributions	262,228	450,	516	722,480		200,795		1,043,184
c	Net investment earnings, gains, and losses	170,806	4,422,	.91	3,354,421		406,623		6,372,809
d	Grants or scholarships								
е	Other expenditures for facilities and programs	2,342,101	7,320,	'44	2,759,930		2,338,729		628,097
f	Administrative expenses	31,824,859	33,733,9	126	235,763 36,181,963		35,100,755		36,832,066
g	End of year balance	, ,					33,100,733		30,632,000
2	Provide the estimated percentage of the cur	rent year end balance (2 270 %	(line 1g, col	umn (a)) held as				
а	Board designated or quasi-endowment	2 2 7 0 %							
Ь	Permanent endowment ► 77 590 %								
С	remporarily reserved endowment F	140 %							
2-	The percentages in lines 2a, 2b, and 2c sho		an that ara l	ماط ممط	a dministere d	fa = +h			
3a	Are there endowment funds not in the posse organization by	ssion of the organization	on that are i	ieiu aiiu	aummstereu	וטו נו	ie	Yes	No
	(i) unrelated organizations						3a(i) Yes	
	(ii) related organizations						3a(No
_	If "Yes" to 3a(II), are the related organizatio						3b	<u> </u>	<u></u>
4	Describe in Part XIII the intended uses of the transfer of the				ward Was!	to E	000 Da	-+ T\/	ıno.
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line		e organiza	.1011 a115	wered res	to F	offii 990, Pa	1117, 1	пе
	Description of property			or other estment)	(b)Cost or other		(c) Accumulated depreciation	(d) B	ook value
1a	Land				1,122,	720		1	1,122,720
	Buildings				67,494,		30,410,823	3	37,083,309
c	Leasehold improvements								
d	Equipment				25,228,	365	21,569,066	5	3,659,299
	Other				1,880,	082	586,331	+	1,293,751
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part X, c	column (B), I	ne 10(c)	.)		•		43,159,079
							Schedule D	(Form	990) 2014

Part VII Investments—Other Securities. Co	omplete if the organization	answered 'Yes' to Form	990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valu	
(including name of security)		Cost or end-of-year ma	arket value
(1)Financial derivatives			
(2)Closely-held equity interests Other			
- Ciliei			
7 1-1 (Colored (b) count area (5 cm 200) Best V and (B) (co. 42)	<u> </u>		
Part VIII Investments—Program Related. (See Form 990, Part X, line 13.)	Complete if the organization	 n answered 'Yes' to Forr	n 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valu	ation
		Cost or end-of-year ma	arket value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	F		
Part IX Other Assets. Complete if the organizat), Part IV, line 11d See For	
(a) Desc	cription		(b) Book value
(1) FUNDS HELD IN TRUST BY OTHERS (2) OTHER ASSETS			6,642,727 302,572
(2) OTHER ASSETS			302,372
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		6,945,299
Part X Other Liabilities. Complete if the org			e 11e or 11f. See
Form 990, Part X, line 25.	(h) Daala wale		
1 (a) Description of liability	(b) Book value		
Federal income taxes			
DEPOSITS AND AGENCY FUNDS	349,597		
ADVANCES FOR STUDENT LOANS	1,580,863		
ASSET RETIREMENT OBLIGATION	1,330,165		
INTEREST RATE SWAP AGREEMENT	6,376,116		
ANNUITY PMT LIABILITY	929,012		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	10,565,753		
2 Liability for uncertain tax positions. In Part XIII. prov		h	

PART XII, LINE 2D - OTHER

PART XII, LINE 4B - OTHER

ADJUSTMENTS

ADJUSTMENTS

Part XI		Revenue per Audited Financial Statements With Revenue page 1985 wered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete If
1 To		ner support per audited financial statements	1	28,685,871
	· - ·	out not on Form 990, Part VIII, line 12		
) on investments 2a -2,513,961		
		facilities		
c Re	ecoveries of prior year gran	nts		
) 2d 2,734,550		
	dd lines 2a through 2d		2e	220,589
	3		3	28,465,282
		90, Part VIII, line 12, but not on line 1		, ,
		cluded on Form 990, Part VIII, line 7b . 4a		
	•)		
	dd lines 4a and 4b		4c	18,859,987
		nd 4c. (This must equal Form 990, Part I, line 12)	5	47,325,269
Part XI		Expenses per Audited Financial Statements With Expenses	_	
		nswered 'Yes' to Form 990, Part IV, line 12a.	· .	
			1	33,315,382
		out not on Form 990, Part IX, line 25		
		facilities	4	
		<u>2b</u>	4	
		<u>2c</u>	4	
	•)	4	
	-		2e	2,743,829
			3	30,571,553
		90, Part IX, line 25, but not on line 1:		
a In	vestment expenses not inc	cluded on Form 990, Part VIII, line 7b 4a	_	
b 01	ther (Describe in Part XIII)		
c A c	dd lines 4a and 4b		4c	18,859,987
		and 4c. (This must equal Form 990, Part I, line 18)	5	49,431,540
Provide	ine 4, Part X, line 2, Part X	or Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b (I, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		de any additional
	Return Reference	Explanation		
PART III,	LINE 4	THE DR DONALD L AND DOROTHY JACOBS COLLECTION AT GEOF PERMANENT GALLERY OF MORE THAN 100 MODERN AND CONTEM! ALONG WITH AN OUTSTANDING COLLECTION OF ARTIFACTS FRO PERMANENT COLLECTION AT GEORGETOWN COLLEGE COMPRISE: WORKS OF ART, DATING FROM THE SIXTEENTH-CENTURY THROUGH MAJORITY OF PIECES HAVING BEEN CREATED IN THE TWENTIETH COLLEGE ALUMNI AND THE ARTIST DONATED MANY OF THE PIECE COLLECTION CONTAINS A FEW PIECES FROM NOTED ARTISTS, SUANDO HIROSHIGE, JASPER JOHNS, PIERRE AUGUSTE RENOIR, AND ANN WRIGHT WILSON FINE ARTS GALLERY AND THE COCHENOUR GEORGETOWN COLLEGE OFFER TEMPORARY EXHIBITIONS YEAR WORK OF INTERNATIONAL, NATIONAL AND REGIONAL ARTISTS TO UTDOOR SCULPTURE EXHIBITION EXEMPLIFIES QUALITY SCULP COLLEGE CAMPUS, EXPOSES STUDENTS AND VISITORS TO ARTWORD ACCESSIBLE AND OUTSIDE OF CONVENTIONAL GALLERY SPACE, ENVIRONMENT FOR INTELLECTUAL GROWTH WHERE STUDENTS AND VIEW AND LEARN ABOUT ART THESE COLLECTIONS ARE AVAILABY THE COLLEGE AND COMMUNITY AND SUPPLEMENT THE ACADE A CULTURAL ENRICHMENT PROGRAM OFFERING INTELLECTUAL, CEXPERIENCES AND ENABLE MEMBERS OF THE COLLEGE COMMUNITY AWARENESS OF CULTURAL DIVERSITY	PORAL M FIV S APP GH 200 CENT ES, HC CH AS OGALLE TURE OND THE LI TURE OND THE MIC F ULTU ULTU	RY WORKS OF ART, E CONTINENTS THE ROXIMATELY 200 D9, WITH THE TURY GEORGETOWN DWEVER THE S SALVADOR DALI, RGE TURNER THE ERY AT D FEATURING THE VE LEARN BELIEVE , BEAUTIFIES THE HAT IS OPENLY PROVIDES AN E COMMUNITY CAN D R STUDY AND USE PROGRAM THROUGH RAL, AND RELIGIOUS
PART V, I	LINE 4	ENDOWMENT FUNDS ARE AMOUNTS RECEIVED FROM DONORS WH DESIGNATED FOR A SPECIFIC PURPOSE OF THE COLLEGE ALMOS INVESTMENT INCOME EARNED BY THESE FUNDS SUPPORTS SCHO BUDGET OF THE COLLEGE SOME SMALLER AMOUNTS ARE DESIGN AWARDS, FACULTY OR STUDENT SCHOLARSHIP TRAVEL AND OTH PURPOSES RELATED TO THE COLLEGE'S EDUCATIONAL MISSION	T ALL LARS ATED	OF THE HIPS AND THE FOR FACULTY
ADJUSTM		COST OF GOODS SOLD NETTED AGAINST REVENUE ON FORM 990 EXPENSES NETTED AGAINST REVENUE ON FORM 990 315,532 FUI AGAINST REVENUE ON FORM 990 10,197 CHANGE IN FMV INTERE	NDRAI ST RA	ISING NETTED ATE SWAP 108,836
PART XI, ADJUSTM	LINE 4B - OTHER IENTS	SCHOLARSHIPS NETTED AGAINST TUITION REVENUE ON FINANC 18.859.987	IALS	TATEMENTS

COST OF GOODS SOLD NETTED AGAINST REVENUE ON FORM 990 2,299,985 RENTAL

EXPENSES NETTED AGAINST REVENUE ON FORM 990 315,532 FUNDRAISING NETTED AGAINST REVENUE ON FORM 990 10,197 ADJUSTMENT FOR ACTUARIAL LIABILITY FOR

SCHOLARSHIPS NETTED AGAINST TUITION REVENUE ON FINANCIAL STATEMENTS

ANNUITIES AND LIFE INCOME FUNDS 118,115

18,859,987

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

Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493137059016

OMB No 1545-0047

Open to Public

Inspection

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization GEORGETOWN COLLEGE

▶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.

Schools

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

Employer identification number

61-0444695

Pai	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	Yes	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?	4d	Yes	
	If you answered "No" to any of the above, please explain If you need more space, use Part II	-		
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?	5a		No
b	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
d	Scholarships or other financial assistance?	5d		No
е	Educational policies?	5e		No
	Use of facilities?	5f		No
g	Athletic programs?	5g		Νo
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	5h		Νo
	Does the organization receive any financial aid or assistance from a governmental agency?	6a	Yes	
b	Has the organization's right to such aid ever been revoked or suspended?	6b		Νo
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Pay Pres. 75, 50, 1075, 3, C.B. 597, savering result pendicari mineral part II.	_	 ,,	
	of Rev Proc 75-50, 1975-2 CB 587, covering racial nondiscrimination? If "No," explain on Part II	7	Yes	

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

Return Reference	Explanation
SCHEDULE E, PART I, LINE 3	GEORGETOWN COLLEGE USES A COMBINATION OF PRINT (BROCHURES, FLYERS, COLLEGE CATALOG, DISPLAYS, POSTAL CORRESPONDENCE) AND ELECTRONIC (EMAIL, INTERNET, VIDEO) MESSAGES TO PROMOTE THE COLLEGE TO THE LOCAL COMMUNITY AND OVER 40,000 PROSPECTIVE STUDENTS GLOBALLY MESSAGES THAT TARGET PROSPECTIVE STUDENTS INCLUDE THE STATEMENT "GEORGETOWN COLLEGE ADMITS STUDENTS OF ANY RACE, COLOR AND NATIONAL ORIGIN OR ETHNIC ORIGIN" SPECIFICALLY, WE ANNUALLY RUN A FULL COLOR AD IN THE WHO'S WHO OF LOUISVILLE AFRICAN AMERICAN PROFILES THE COLLEGE HAS STRENGTHENED ITS PROMOTION OF DIVERSITY AND ACCESS PROGRAMS BY USING SOCIAL MEDIA
SCHEDULE E, PART I, LINE 6	THE COLLEGE RECEIVES FUNDS FROM THE FEDERAL GOVERNMENT, PRIMARILY FROM PROGRAMS OVERSEEN BY THE U.S. DEPARTMENT OF EDUCATION, WHICH ARE USED TO PROVIDE FINANCIAL AID AND/OR LOANS TO STUDENTS ATTENDING THE COLLEGE. IN ADDITION, THE COLLEGE RECEIVES OTHER FEDERAL FUNDS, AND FUNDS FROM THE KENTUCKY DEPARTMENT OF EDUCATION, WHICH ARE RELATED TO GRANTS THAT FURTHER THE COLLEGE'S EDUCATIONAL MISSION

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

efile GRAPHIC print	- DO NOT I	PROCESS	As Filed Dat	ta -	DLN:	93493137059016
SCHEDULE F (Form 990)	State	ement of A	Activities C	Outside the Uni	ted States	OMB No 1545-0047
Department of the Treasury Internal Revenue Service	► Information	·	Part IV, line 1 ► Attach to	n answered "Yes" to Form 14b, 15, or 16. o Form 990. nd its instructions is at v	·	2014 Open to Public Inspection
GEORGETOWN COLLEGE				Employer iden 61-0444695	tification number	
Part I General II "Yes" to Fo	nformation m 990, Part	on Activitie IV, line 14b.	es Outside th	ne United States. (Complete if the organi	zation answered
and other assista	nce, the gran	itees' eligibili	ty for the gran		amount of its grants the selection criteria	┌ Yes ┌ No
2 For grantmakers. assistance outside			ganızatıon's pı	rocedures for monito	ang the use of its gran	its and other
3 Activites per Region	n (The followir	ng Part I, line 3	table can be du	uplicated if additional s	pace 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, grant to recipients located in the region)		a (f) Total expenditures for and investments in region
(1) SOUTH AMERICA ARGENTINA, BOLI BRAZIL, CHILE, CO ECUADOR,	VIA,			PROGRAM SERVICE	STUDY ABROAD	100
(2) EUROPE (INCLUD) ICELAND & GREEN				PROGRAM SERVICE	STUDY ABROAD	143,617
(3) EUROPE (INCLUDI				PROGRAM SERVICE	REGENT'S PARK COLLEGE PROGRAMS	252,558
(4) CENTRAL AMERIC CARIBBEAN - ANT BARBUDA, ARUBA BAHAMAS,	IGUA &			PROGRAM SERVICE	STUDY ABROAD	27,320
(5)						
3a Sub-total b Total from continua to Part I c Totals (add lines 3a		0	0			423,595
For Paperwork Reduction Ad		<u> </u>		•	No 50082W Sche o	lule F (Form 990) 2014

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 addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

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>	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>\</u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u> </u>	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	⊽	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	▼	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Г	Yes	<u> </u>	Νo

Schedule F (Form 990) 2014

Additional Data

Software ID: Software Version:

EIN: 61-0444695

Name: GEORGETOWN 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).

DLN: 93493137059016

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

Open to Public Inspection

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GEOR	GETO	WN	СО	LLE	GI

(Form 990 or 990-EZ)

Employer identification number

GEORGETOWN COLLEGE	
LONGETOWN GOLLLOL	61-0444695
Fundraising Activities. Complete filers are not required to complete to	ıf the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-Ez his part.
a	e Solicitation of non-government grants f Solicitation of government grants g Special fundraising events eement with any individual (including officers, directors, trustees) or entity in connection with professional fundraising services? rentities (fundraisers) pursuant to agreements under which the fundraiser is ianization
(i) Name and address of individual or entity (fundraiser)	(iii) Did fundraiser have custody or control of contributions? (iv) Amount paid to (or retained by) fundraiser listed in col (i) (vi) Amount paid to (or retained by) organization
1	Yes No
2	
3	
4	
5	
6	
7	
8	
9	
10	
otal	▶
3 List all states in which the organization is regi registration or licensing	stered or licensed to solicit contributions or has been notified it is exempt from

		e G (Form 990 or 990-EZ) 2014				Page 2
Pai	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contributi			
			(a) Event #1 FB-GOLF SCRAMBLE	(b) Event #2 BB-GOLF SCRAMBLE	(c) O ther events	(d) Total events (add col (a) through col (c))
ф			(event type)	(event type)	(total number)	
Ě	1	Gross receipts	14,350	7,325		21,675
Revenue	2	Less Contributions	12,050	6,566	5	18,616
<u></u>	3	Gross income (line 1 minus line 2)	2,300	759)	3,059
	4	Cash prizes				
မွ	5	Noncash prizes	500	328	3	828
Expenses	6	Rent/facility costs				
	7	Food and beverages .	240)		240
Drea	8	Entertainment				
Δ	9	Other direct expenses .	7,241	1,888	3	9,129
	10	Direct expense summary Add lir	es 4 through 9 ın column	(d)		(10,197)
	11	Net income summary Subtract li	ne 10 from line 3, column	(d)		-7,138
Par	t II	Gaming. Complete if the oi \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	irt IV, line 19, or repo	orted more than
Revenue		\$13,000 ON TOTAL 330-L2, III	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
ses Ses	2	Cash prizes				
xpenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
ă	5	Other direct expenses				
	6	Volunteer labor	☐ Yes	│ Yes	│ Yes	
	7	Direct expense summary Add line	s 2 through 5 in column (d)	•	
	8	Net gaming income summary Subt	ract line 7 from line 1, co	lumn (d)		
9	Ent	ter the state(s) in which the organiza	ation conducts gaming ac	tivities		
a b	Is	the organization licensed to conduc	t gaming activities in eac	h of these states?		「Yes 「No
U	11					
10a b		re any of the organization's gaming	licenses revoked, suspen	ded or terminated during	the tax year?	

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493137059016 Schedule I OMB No 1545-0047 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 GEORGETOWN COLLEGE 61-0444695 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 grant cash orassistance 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) SCHOLARSHIPS	872	18,859,987			

Part IV Suppleme	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.											
Return Reference	Explanation											
PART I, LINE 2	FOR GRANTS RECEIVED BY THE COLLEGE, GRANTS ARE CONTROLLED BY A DESIGNATED RESPONSIBLE PERSON ON CAMPUS, WHO IS TYPICALLY THE PERSON WHO APPLIES FOR THE GRANT ALL PROPOSED EXPENDITURES FROM THE GRANT MUST BE APPROVED BY THAT PERSON THE ACCOUNTING DEPARTMENT REVIEWS THE INVOICE FOR APPROPRIATENESS WITH THE NATURE OF THE GRANT, REVIEWS THE ACTUAL TRANSACTION TO MAKE SURE THAT IT IS ADEQUATELY SUPPORTED, AND REVIEWS THE TRANSACTION TO BE SURE THAT IT IS AN ALLOWABLE EXPENSE UNDER FEDERAL LAW EACH GRANT IS ASSIGNED ITS OWN SET OF GENERAL LEDGER ACCOUNTS TO SEGREGATE THE EXPENSE AND GRANT INCOME FROM OTHER EXPENDITURES AND REVENUES OF THE COLLEGE IF THE GRANT IS A REIMBURSEMENT GRANT, THE COLLEGE PERIODICALLY DRAWS FUNDS DOWN FROM THE GRANTOR BASED ON THE ACTUAL EXPENSES INCURRED WHEN REPORTS ARE DUE TO THE GOVERNMENT OR OTHER GRANTOR, THE RESPONSIBLE PERSON PREPARES THE REPORT WITH ASSISTANCE OF THE ACCOUNTING DEPARTMENT TYPICALLY, THESE REPORTS ARE SIGNED BY THE RESPONSIBLE PERSON AND THE CFO OR PRESIDENT OF THE COLLEGE CERTIFYING THE ACCURACY OF THE REPORT GRANTS SHOWN ON PART III ARE SCHOLARSHIPS SCHOLARSHIPS ARE GRANTED IN TWO FORMS FIRST, SOME SCHOLARSHIPS ARE FUNDED BY DONOR GIFTS OR INVESTMENT INCOME FROM DONOR GIFTS THESE SCHOLARSHIPS MUST BE GRANTED AS THE DONOR HAS SPECIFIED AT THE TIME OF THE GIFT THE STUDENT MUST MEET THE DESIGNATED REQUIREMENTS OF THE DONOR SECOND, THE COLLEGE ALSO AWARDS SCHOLARSHIPS FROM GENERAL COLLEGE REVENUES THESE SCHOLARSHIPS ARE AWARDED BASED ON ACADEMIC ACHIEVEMENT AND FINANCIAL NEEDS WHICH IS CONSISTENT WITH INDUSTRY STANDARDS											

DLN: 93493137059016

OMB No 1545-0047

Schedule J (Form 990)

Internal Revenue Service

Department of the Treasury

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 GEORGETOWN COLLEGE

Employer identification number

61-0444695

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	▼ Travel for companions			
	▼ Tax idemnification and gross-up payments			
	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	
			165	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	▼ Compensation committee ▼ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
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		No
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, 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
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred in prior Form 990
	(i)	0	271,135	0	6,750	3,960	281,845	0
	(ii)	0	0	0	0	0	0	0
	(i)	0	149,641	0	2,625	2,970	155,236	0
ADVANCEMENT	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2014

Part IIII Supplemental Information

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

Return Reference	Explanation
	FIRST CLASS OR CHARTER TRAVEL IS PROVIDED ONLY IN CERTAIN LIMITED SITUATIONS THE PRESIDENT'S WIFE SOMETIMES ACCOMPANIES THE PRESIDENT ON OFFICIAL BUSINESS FOR THE COLLEGE IN THOSE INSTANCES, THE COLLEGE WILL SOMETIMES PAY THE TRAVEL EXPENSES THE PRESIDENT RESIDES IN A DWELLING OWNED BY THE COLLEGE, WHICH IS PROVIDED TO HIM FOR HIS USE

Schedule J (Form 990) 2014

DLN: 93493137059016

2014

OMB No 1545-0047

Schedule K (Form 990)

Department of the Treasury

Supplemental Information on Tax Exempt Bonds ► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions,

► Attach to Form 990.

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

explanations, and any additional information in Part VI.

Open to Public

Interr	rtment of the Treasury nal Revenue Service	► Informatio	n about Schedule	K (Form 990) and it	s instructions is at	: <u>www</u>	<u>w.irs.gov/forn</u>	<u>1990</u> .				Inspec		
	e of the organization ORGETOWN COLLEGE								Emį	ployer ic	Jentifica	ation nun	nber	
GEO	RGETOWN COLLEGE								61	-04446	95			
Pa	art I Bond Issues	T 1			1									
l	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price		(f) Descriptio	n of purpose	(g) De	efeased) Pool ancing
i	'	ļ	I		ſ						1	suer		
 			<u> </u>						Yes	No	Yes	No	Yes	No
A	CITY OF GEORGETOWN AND GEORGETOWN COLLEGE	61-6001830	372730CJ8	05-17-2006	39,640,00		FUNDING OF TUTSTANDING			X		X		X
l	PROJECT	ļ	I		1	200	000 AND 2002							
							NDS		+	 	—	\perp		<u> </u>
В	CITY OF GEORGETOWN AND GEORGETOWN COLLEGE	61-6001830	l	12-19-2011	1,780,00		NANCE DORM: DNSTRUCTION			×		X		×
l	PROJECT		l		1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•						
Da	rt III Proceeds													
Le	1111 Proceeds				Α		В	3		С	$\overline{}$	D		
1	Amount of bonds retired													
2	Amount of bonds legally defeas	sed					1							-
3	Total proceeds of issue	-			39,6	40,000	,000 1,780,000							-
4	Gross proceeds in reserve fund	ds					1							
5	Capitalized interest from proce	eds					1							
6	Proceeds in refunding escrows				39,1	26,304								
7	Issuance costs from proceeds				5	13,696	6	30,800						
8	Credit enhancement from proce	eeds												
9	Working capital expenditures fr	rom proceeds												
10	Capital expenditures from proc	eeds						1,749,200						
11	O ther spent proceeds													
12	O ther unspent proceeds													
13	Year of substantial completion	'			2006									
					Yes	No	Yes	No	Yes	<u> </u>	No	Yes		No
14	Were the bonds issued as part	of a current refundir	ng issue?			Χ		Х					\perp	
15	Were the bonds issued as part	X		Х										
16	Has the final allocation of proceeds been made?				Х		X							
17	Does the organization maintain allocation of proceeds?	ı adequate books ar	nd records to supp	ort the final	x		x							
Par	TE III Private Business Us	se												
l					A		В			С			D	
İ					Yes	No	Yes	No	Yes		No	Yes	\dashv	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-

Χ

	dule K (Form 990) 2014									Page 2	
Par	Private Business Use (Continued)										
			A		В			<u>c</u>		D	
		Į.	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							
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or outside counsel to review any management or service contracts relating to property?										
С	Are there any research agreements that may result in private business us financed property?	e of bond-		Х							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or outside counsel to review any research agreements relating to the finance										
4	Enter the percentage of financed property used in a private business use 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								
8a	Has there been a sale or disposition of any of the bond-financed property t nongovernmental person other than a 501(c)(3) organization since the bor issued?		Х								
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or	disposed of	•		•			•		•	
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations 1 141-12 and 1 145-2?										
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?			Х							
Par	t IV Arbitrage	•			·	•		•	•		
		Α		В			С			D	
		Yes	No	Yes	No	Yes	;	No	lo Yes		
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	Х		Х							
2	If "No" to line 1, did the following apply?										
а	Rebate not due yet?										
b	Exception to rebate?										
С	No rebate due?										
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed			•		•	•	•			
3	Is the bond issue a variable rate issue?	Х		Х							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	Х		Х							
b	Name of provider	FIFTH THIRD	BANK	FIFTH TH	IRD BANK						
С	Term of hedge	24 00000	0000000	15 00	000000000						
d	Was the hedge superintegrated?	х		Х							
e	Was the hedge terminated?		Х		Х						

Part IV Arbitrage (Continued)

Return Reference

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

Part V Procedures To Undertake Corrective Action

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

Explanation

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

FORM 990, SCHEDULE K, PART IV, LINE 1

ARBITRAGE CALCULATIONS HAVE BEEN PERFORMED, BUT NO AMOUNTS ARE DUE

DLN: 93493137059016

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

Open to Public Inspection

	ame of the organization ORGETOWN COLLEGE									Employer identification number					
SECRETIONIN CO	JEE OL							6	51-04	44695					
art I Exc	ess Benef	it Tra	nsactions	s (section	501(c)(3),	section 501(c	:)(4), and 501	(c)(29) orga	nızatıons	only)				
						, Part IV , line	25a or 25b,	or Form	1990-	EZ, Part	V, line	40b			
1 (a) Nam	ne of disqual	ıfıed per	rson (b)		hıp between ((c) Des	cription	of tra	nsaction	՝	rganization (i)Written agreement	rected?		
				person	and organiza	ation						Yes	No		
4958 . 3 Enter the Part II Loans to a	amount of ta nd/or Fro ne organizati	x, if any om Int on answ	erested F	above, re Persons on Form	mbursed by	isqualified per • • • • the organizati : V , line 38a, o	on			▶ \$		anızatıo	n		
(a) Name of interested person	(b) Relation	nship	(c) Purpose of loan	(d) Loa	n to the	(e)Original principal amount	(f) Balance due	(g) defa				(i)Written agreement?			
				То	From			Yes	No	Yes	No	40b (d) Corre Yes	No		
	mplete ıf t nterested	he orga (b) Re		nswered between and the		Persons. Form 990, Pate of assistance			ıstano	ce (e) Purpo	se of as	sıstanc		
L) FAMILY ME N OFFICER	MBER OF	OFFIC				29,66	4 TUITION		R						

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (b) Relationship (c) A mount of (d) Description of transaction (e) Sharing between interested transaction of person and the organization's revenues? organization Yes No Νo (1) DR TODD COKE HIS WIFE, DR 66,070 DR TODD COKE HAS BEEN A ROSEMARY ALLEN IS MEMBER OF THE THE PROVOST OF GEORGETOWN COLLEGE THE COLLEGE FACULTY FOR OVER 20 YEARS MS ALLEN IS THE PROVOST AND IS RESPONSIBLE FOR ACADEMIC PROGRAMS ON CAMPUS DR COKE'S COMPENSATION FOR THE YEAR ENDED 6/30/15 WAS \$66,070 IN SALARY PLUS THE COLLEGE'S STANDARD BENEFITS (2) MR BI HOUSTON TRUSTEE 50,000 MR BI HOUSTON'S WIFE, Nο DEBBIE, WAS ON THE BOARD OF THE KENTUCKY BAPTIST SEMINARY OF KENTUCKY BEGINNING IN JUNE 2010, THE KENTUCKY BAPTIST SEMINARY ENTERED INTO A LEASE AGREEMENT WITH RENTALS BEGINNING ON AUGUST 1, 2010 FOR SPACE IN THE COLLEGE'S LEARNING RESOURCE CENTER THE SEMINARY PAYS THE COLLEGE \$50,000 IN RENT ANNUALLY THIS AGREEMENT WAS NEGOTIATED IN GOOD FAITH BY THE MANAGEMENT OF BOTH PARTIES AND THEN SUBMITTED TO APPROVAL BY THE TRUSTEES IN ACCORDANCE WITH THE REQUIREMENTS OF THE

Part V Supplemental Information

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

Return Reference	Explanation
SCHEDULE L, PART III	\$29,664 OF TUITION WAIVER ASSISTANCE WAS PROVIDED TO THE SON OF AN OFFICER ON
	THE SAME TERMS AVAILABLE TO ALL QUALIFYING EMPLOYEES

RESPECTIVE ORGANIZATIONS

DLN: 93493137059016

OMB No 1545-0047

SCHEDULE M (Form 990)

7 Boats and planes . . .

Noncash Contributions

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

Department of the Treasury Internal Revenue Service	▶Information	about Sched	lule M (Form 990) and its in	nstructions is at <u>www.irs.g</u>	<u>ov/form990</u> .	Inspection
Name of the organizat GEORGETOWN COLLEGE	tion				Employer identi	fication number
Part I Types	of Property					
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line		(d) of determining ntribution amounts
1 Art—Works of art	t	Х	2	16,000	VALUE PER DO	NOR
2 Art—Historical t	reasures .					
3 Art—Fractional II	nterests					
4 Books and public	cations	Χ		41,745	VALUE PER DO	NOR
5 Clothing and hou goods	ısehold • • • • •	Х		1,925	VALUE PER DO) NOR
6 Cars and other v	ehicles		'			

8	Intellectual property				
9	Securities—Publicly traded .	Х	4	36,215	FAIR MARKET VALUE
LO	Securities—Closely held stock .				
L 1	Securities—Partnership, LLC, or trust interests				
L2	Securities—Miscellaneous				
L3	Qualified conservation				

	contribution—Historic structures		
	Q ualified conservation contribution—O ther		
15	Real estate—Residential .		
16	Real estate—Commercial		
17	Peal estate—Other		

18	Collectibles				
19	Food inventory	Х	1	20,157	VALUE PER DONOR
20	Drugs and medical supplies .				

21	Taxıdermy		
22	Historical artifacts		
23	Scientific specimens		

24 Archeological artifacts . O ther **►** (_____ 25 26 Other►(___

27 Other ►(___ 28 Other ► (_

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

			162	140
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used			
	for exempt purposes for the entire holding period?	30a		Νo
b	If "Yes," describe the arrangement in Part II			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	Yes	
b	If "Yes," describe in Part II			

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, th number of items received, or a combination of both. Also complete this part for any additional information.			
Return Reference	Explanation		
	THE INVESTMENT DEPARTMENT OF FIFTH THIRD BANK RECEIVES ALL OF OUR STOCK GIFTS, SELLS THEM ON OUR BEHALF, AND REMITS NET PROCEEDS TO THE COLLEGE		

Schedule M (Form 990) (2014)

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493137059016

OMB No 1545-0047

2014

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization GEORGETOWN COLLEGE	Employer identification number		
	61-0444695		

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	TRUSTEE REZA HASHAMPOUR AND TRUSTEE NICOLLE COLLINSON HAVE A JOINT BUSINESS OPPORTUNITY

Return Reference	Explanation				
FORM 990, PART VI, SECTION B, LINE 11	THE COLLEGE FORWARDS A PDF FILE TO THE TRUSTEES ON THE EXECUTIVE/FINANCE COMMITTEE AFTER THE RETURN IS FILED IN MAY IN THE EXECUTIVE/FINANCE COMMITTEE'S NEXT REGULARLY SCHEDULED MEETING, THE COLLEGE WILL ANSWER ANY QUESTIONS FROM THE EXECUTIVE/FINANCE COMMITTEE.				

Return Reference	Explanation					
PART VI, SECTION B, LINE 12C	ALL SENIOR MANAGERS ARE VERY CONSCIOUS OF ANY ARRANGEMENTS THAT MAY GIVE RISE TO A CONFLICT OF INTEREST, ESPECIALLY RELATED TO DOING ANY BUSINESS WITH A TRUSTEE. SENIOR MANAGERS REPORT ANY POTENTIAL TRANSACTIONS TO THE CFO, WHO IS A CPA ANNUALLY, THE CONFLICT OF INTEREST AND EXCESS BENEFIT POLICIES ARE DISTRIBUTED TO TRUSTEES. THE TRUSTEES ANNUALLY DISCLOSE ALL POTENTIAL CONFLICTS OF INTEREST, BUSINESS TRANSACTIONS WITH THE COLLEGE, AND ANY OWNERSHIP INTERESTS WHICH MIGHT GIVE RISE TO A CONFLICT. THE TRUSTEES AND OFFICERS OF THE COLLEGE RESPOND DIRECTLY AND INDIVIDUALLY TO THE QUESTIONS ON PART IV, QUESTION 28 (A) THROUGH (C) OF THIS RETURN					

Return Reference	Explanation					
FORM 990, PART VI, SECTION B, LINE 15	THE COLLEGE'S COMPENSATION COMMITTEE, COMPOSED OF THE TRUSTEES THAT SERVE ON THE BOARD OF TRUSTEE'S EXECUTIVE/FINANCE COMMITTEE REVIEWS THE PRESENT SALARY AND APPROVES THE BUDGETED SALARY FOR NEXT YEAR FOR THE EMPLOYEES WITH THE TOP FIVE SALARIES AT THE COLLEGE. THIS REVIEW INCLUDES A COMPARISON OF DATA FROM RECOGNIZED SALARY SURVEYS FOR SIMILAR POSITIONS IN THE REGION. THE COMPENSATION COMMITTEE ALSO REVIEWS THE SALARY OF SIMILAR POSITIONS IN PEER INSTITUTIONS IN KENTUCKY BY REFERENCE TO THEIR LATEST AVAILABLE TAX RETURNS.					

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE COLLEGE DOES NOT MAKE ITS FINANCIAL STATEMENTS PUBLIC, OTHER THAN IN RESPONSE TO A DONOR'S REQUEST OR A GRANT APPLICATION THE COLLEGE'S BUDGET IS AVAILABLE IN THE ENSOR LEARNING RESOURCE CENTER THE COLLEGE'S CONFLICT OF INTEREST POLICY IS PART OF THE COLLEGE'S POLICIES AND PROCEDURES, WHICH IS AVAILABLE ON THE COLLEGE'S WEBSITE GOVERNING DOCUMENTS ARE FILED WITH THE KENTUCKY SECRETARY OF STATE. THE COLLEGE'S FISCAL POLICIES ARE AVAILABLE TO ALL BOARD MEMBERS, THE FINANCIAL STATEMENTS AND AUDIT REPORTS ARE GIVEN TO ALL TRUSTEES EACH YEAR IN ITS OCTOBER MEETING. TRUSTEES ARE REQUIRED TO READ THE CONFLICT OF INTEREST POLICY OF THE COLLEGE AND COMPLETE THE FORM INDICATING WHETHER OR NOT THEY HAVE A CONFLICT.

Return Reference	Explanation				
FORM 990, PART XI, LINE 9	CHANGE IN FMV OF SWAP AGREEMENT 108,837 ADJUSTMENT FOR ACTUARIAL LIABILITY FOR ANNUITIES AND LIFE INCOME FUNDS -118,115				

Return Reference	Explanation
FORM 990, PART XII, LINE 2C	THE COLLEGE'S EXECUTIVE/FINANCE COMMITTEE OF THE BOARD OF TRUSTEES ASSUMES RESPONSIBILITY FOR THE OVERSIGHT OF THE AUDIT OF THE FINANCIAL STATEMENTS AND THE SELECTION OF THE INDEPENDENT ACCOUNTANT

Return Reference	n Reference Explanation					
FORM 990, PART VI, SECTION A, LINE 1A	BETWEEN BOARD MEETINGS, THE EXECUTIVE COMMITTEE IS EMPOWERED TO ACT ON BEHALF OF THE BOARD THE MINUTES OF ALL EXECUTIVE COMMITTEE MEETINGS ARE DISTRIBUTED TO THE FULL BOARD AT EACH REGULARLY SCHEDULED MEETING OF THE BOARD OF TRUSTEES					

Return Reference	Explanation					
FORM 990, PART VI, SECTION B, LINE 16B	THE COLLEGE ENTERED INTO AN LLC IN WHICH IT IS A 95% OWNER, THE OTHER OWNER IS AN INDIVIDUAL EXCEPT FOR A CASH CAPITAL CONTRIBUTION OF \$950, THE COLLEGE CONTRIBUTED NO ASSETS TO THE LLC THE LEGAL STRUCTURE AND TAX STATUS OF THE COLLEGE AND THE LLC WAS REVIEWED BY THE GENERAL COUNSEL SCHEDULE K-1S ARE MADE AVAILABLE TO THE PARTNERS AND ANY INCOME IS REPORTED ON THE 990-T OF THE COLLEGE THE COLLEGE HAS NO WRITTEN POLICY ON JOINT VENTURES SINCE THIS WAS THE ONLY ONE IT HAS DONE					

DLN: 93493137059016

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OMB No 1545-0047

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

► Attach to Form 990.

Name of the organization GEORGETOWN COLLEGE

Employer identification number

61-0444695

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
					_

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co	(g) ection 512(b) 13) controlled entity?	
						Yes	No	
	SUPPORTING ORGANIZATION FOR GEORGETOWN COLLEGE	кү	501(C)(3)	11A	N/A		No	

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j	i)	(k)
Name, address, and EIN of	Primary activity		Direct controlling	Predominant	Share of		Disprop	rtionate		Gene	ral or	Percentage
related organization		domicile	entity	ıncome(related,	total income	end-of-year	allocati	ions?	amount in	mana	agıng	ownership
l l	'	(state or		unrelated,		assets			box 20 of	partı	ner?	. 7
1	'	foreign		excluded from					Schedule K-1			. 7
		country)		tax under					(Form 1065)			
1	'	'		sections 512-								
				514)			Yes	No		V	No.	
							Yes	No		Yes	No	
(1) GEORGETOWN COLLEGE ALUMNI LLC	MARKETING	KY	GEORGETOWN	UNRELATED	-564	13,623		No			No	95 000 %
	SERVICES	'	COLLEGE									
400 EAST COLLEGE STREET												
GEORGETOWN, KY 40327												ľ
35-2417606	<u> </u>											

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

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

chedule it (1 offit 550) 2014				Ра	ge J
Part V Transactions With Related Organizations Complete if the organization answer	ered "Yes" on Form	n 990, Part IV, line	e 34, 35b, or 36.		
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more re-	ated organizations li	sted in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a		No
b Gift, grant, or capital contribution to related organization(s)			1b		No
c Gift, grant, or capital contribution from related organization(s)			1c		No
d Loans or loan guarantees to or for related organization(s)			1d		No
e Loans or loan guarantees by related organization(s)			1e		No
f Dividends from related organization(s)			1f		No
g Sale of assets to related organization(s)			1 g		No
h Purchase of assets from related organization(s)			1h		No
i Exchange of assets with related organization(s)			1i		No
j Lease of facilities, equipment, or other assets to related organization(s)			<u>1j</u>		No
k Lease of facilities, equipment, or other assets from related organization(s)			1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)			11		No
m Performance of services or membership or fundraising solicitations by related organization(s)			1m	•	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n		No
• Sharing of paid employees with related organization(s)			10		No
P Reimbursement paid to related organization(s) for expenses			1p		No
q Reimbursement paid by related organization(s) for expenses			1q		No
r Other transfer of cash or property to related organization(s)			1r		No
s Other transfer of cash or property from related organization(s)			1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	overed relationships	and transaction thresholds		
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount	involved	1
	1	1			

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>			'				

Schedule R (Form 990) 2014

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2014

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