Form 990-T Cand proxy tax under section 6033(e) For calendar year 2016 or other tax year beginning	Department of the Treasury Information about Form 99-0. Tail dis Instructions is available at www.trs.gov/form990. Tail information about Form 99-0. Tail dis Instructions is available at www.trs.gov/form990. Tail information about Form 99-0. Tail dis Instructions is available at www.trs.gov/form990. Tail information about Form 99-0. Tail dis Instructions is available at www.trs.gov/form990. Tail information about Form 99-0. Tail dis Instructions is available at www.trs.gov/form990. Tail information about Form 99-0. Tail dis Instructions is available at www.trs.gov/form990. Tail information about Form 99-0. Tail dis Instructions is 301(c)3. The books are in care of Post Stripe. The books are in care of Post Stripe. Tail information and identifying number of the parent corporation. Tail information addentifying number o	Department of the Treasury Internal Revenue Service A Check box if address changer B Exempt under section X 501(C)(03) 408(e) 220(in 408A 530(in 529(a)) C Book value of all assets at end of year 237, 668, 932. H Describe the organ if many many many many many many many many	For calendar year 2016 or other tax year beg Information about Form 990-T an Do not enter SSN numbers on this form Name of organization (Check CHAMPLAIN COLLEGE Number, street, and room or suite no 163 SOUTH WILLARD City or town, state or province, cour BURLINGTON, VT 054 F Group exemption number (See instru G Check organization type X 50 X 250 X 251 X 251 X 252 X 252 X 253 X 254 X 257 X 257 X 257 X 258	d its instruction as it may be box if name of INCORPO to If a P O box STREET entry, and ZIP of O1 excitons) D01(c) corpo CONF effiliated group corporation	7/01, 2016, and ending tions is available at www emade public if your organ hanged and see instructions. RATED see instructions or foreign postal code attion 501(c) ERENCE/EVENT CE or a parent-subsidiary co	06/30 , 20 1 7 Airs.gov/form990t. Ization is a 501(c)(3) 0	rer identification number ees' trust, see instructions) 20266 ted business activity codes tructions) 0 rust Other trust > Yes X No
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36 Trusts Taxable at Trust Rates. See instructions for tax computation income tax of the amount on line 34 from Tax rate schedule or Schedule D (Form 1041)		
members (sections 1561 and 1563) check here ▶ See instructions and a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order) (1) \$ (2) \$ (3) \$ b Enter organization's share of (1) Additional 5% tax (not more than \$11,750)\$ (2) Additional 3% tax (not more than \$100,000)\$ c Income tax on the amount on line 34		
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36 Trusts Taxable at Trust Rates. See instructions for tax computation income tax of the amount on line 34 from Tax rate schedule or Schedule D (Form 1041)	L 25 A	
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Form 990-T (2016)	CHAMPLAI									220266 Page
Schedule F - Interest, Annu	iities, Royalties	, and Ren	ts Fro	m Contro	lled Or	ganizati	ons (see	instructio	ons)	
		Exen	npt Co	ntrolled Or	ganızatıc	ons				
Name of controlled organization	2. Employer identification number	≓1		ated income nstructions)	1	of specified nts made	ıncluded	f column 4 the in the control ion's gross in	olling	6 Deductions directly connected with income in column 5
(1)						-				
(2)										
(3)										
(4)								<u>.</u>		
Nonexempt Controlled Organia	zations				·					
7 Taxable Income	8 Net unrelated in (loss) (see instruct			Total of specific payments made		ınclud	rt of column ed in the co ation's gross	ntrolling		Deductions directly nected with income in column 10
(1)										
(2)										
(3)		- 		· · · · ·	~	-	1.			
(4)									<u> </u>	
		1				Enter	columns 5 a here and on , line 8, colu	page 1,	Ent	dd columns 6 and 11 ter here and on page 1, irt I, line 8, column (B)
Totals	 			(0)	<u></u> ▶				<u> </u>	
Schedule G - Investment Ir	ncome of a Sec	tion 501(c)(7),			nızation	(see inst	tructions)		E T-4-1 di
1 Description of income	2. Amount of	ıncome		3. Deduction directly contact (attach sci	nnected			t-asides schedule)		5 Total deductions and set-asides (col 3 plus col 4)
(1)										
(2)	<u> </u>									
(3)									i	
(4)										
	Enter here and o Part I, line 9, co							_		Enter here and on page Part I, line 9, column (E
Totals ▶ Schedule I - Exploited Exe	empt Activity Inc	come, Oth	ner Th	an Advert	ising In	come (s	see instru	ictions)		
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3. Expendirectly connected production unrelated business in	ses ly d with on of ed	4 Net incor from unrela or business 2 minus co If a gain, c cols 5 thre	me (loss) ted trade (column dumn 3)	5. Gros from ac	s income tivity that unrelated ss income	6. Expe attributi colum	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
/1)				 						-
(1)	 					 		 		+
(2)	 	-						-		 -
(3)	ļ . — — —			ļ. —		ļ		 		
(4)	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, P line 10, co	art I,							Enter here and on page 1, Part II, line 26
Totals ▶										
Schedule J - Advertising Ir										
Part I Income From Per	iodicals Report	ed on a C	onso	idated Ba	sis					
1 Name of periodical	2 Gross advertising income	3 Dire advertising		4 Adver gain or (lo 2 minus c a gain, cc cols 5 thr	ss) (col ol 3) If ompute	1	culation come	6 Read cos		7 Excess readershi costs (column 6 minus column 5, bu not more than column 4)
(1)						 		1		
(2)				7						
(3)				7				 		-
(4)	 			-					_	\dashv
<u>_1</u>	-			<u> </u>		 -	 -	 		
Totals (carry to Part II, line (5))						1		1		
				<u>-1</u>		·			_	Form 990-T (20

Form **990-T** (2016)

unrelated business

business

CHAMPLAIN COLLEGE INCORPORATED Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2. Gross advertising income	3. Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
			cois 5 through 7			Column 4)
(1)						
(2)						
(3)				<u></u>		1
(4)						
Totals from Part I						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)		Ĺ				
Schedule K - Compensatio	n of Officers, D	irectors, and Tr	ustees (see instr	uctions)		
1. Name		<u> </u>	Title	3 Percent of time devoted to		on attributable to



-				
6/30/2008	(63,034)	38,497	-	(24,537)
6/30/2010	(12,221)	-	-	(12,221)
6/30/2011	(16,342)	-	-	(16,342)
6/30/2012	(34,319)	-	-	(34,319)
6/30/2013	-	-	-	-
6/30/2014	(153,919)	-	-	(153,919)
6/30/2015	(46,604)	_	-	(46,604)
6/30/2016	(223,175)	-	-	(223,175)
6/30/2017	(196,199)		-	(196,199)
TOTALS:	(745,813)	38,497		(707,316)
				

ATTACHMENT 1

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

OFFICE SUPPLIES	7,611.
FOOD	292,795.
EQUIPMENT	1,373.
CONTRACTUAL SERVICES	5,993.
PROFESSIONAL DUES	9,537.
POSTAGE	168.
PUBLICATION	29,160.
RENT	83,165.

PART II - LINE 28 - OTHER DEDUCTIONS 429,802.

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CHAMPLAIN COLLEGE INCORPORATED

	. 89	ALLOCABLE	DEDUCTIONS	6 * (3A + 3B)	113,500.	113,500
	7	GROSS INCOME	REPORTABLE	(2 x 6)	21,035	21,035
		9	8 4 IS	OF 5	100 000	
2	ī,	AVERAGE	ADJUSTED	BASIS	9,415,000 100 000	
ATTACHMENT 2	4.	AVERAGE	ACQUISITION	DEBT	9,415,000	TOTALS
		8	DEDUCTIONS DIRECTLY CONNECTED	(3B)	113,500	
			DEDUCTIONS D	(3A)		
			2	GROSS INCOME	21,035	
SCHEDULE E - UNRELATED DEBT-FINANCED INCOME			1	DESCRIPTION OF DEBT-FINANCED PROPERTY	TAXABLE BOND	

ATTACHMENT 2 PAGE 8

418702

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CHAMPLAIN COLLEGE INCORPORATED JUNE 30, 2017

03-0220266 ATTACHMENT 3

FORM 990T, LINE 31: NET OPERATING LOSS DEDUCTION SCHEDULE

VEN DIETIG	NOL	NOL UTILIZED	NOL AMOUNT	REMAINING
•				
	•			

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