Short Form Return of Organization Exempt From Income Tax

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

2016

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

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

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

AF	or the	2016 calend	er year, or tax year beginning July 1 , 20	16, and ending		une 30	, 20 17		
Вс	heck if ap	oplicable:	C Name of organization	•	D Empl	oyer identifi	cation number		
	Address c	hange	Dartmouth Class of 1976		04-3391559				
	lame cha	inge	Number and street (or P.O box, if mail is not delivered to street address)	Room/suite	E Telep	ar .			
=	nitial retur		6068 Blunt Alumni Center	103		503-35	2-9162		
_		n/terminated	City or town, state or province, country, and ZIP or foreign postal code		F Gro	p Exempti			
=	Amended Amelication	n pending	Hanover, NH 03755			nber ▶	8204		
_		ting Method:	✓ Cash Accrual Other (specify) ►	Ti	Check	√ if the	organization is not		
	/ebsite	_	dartmouth.org	"			Schedule B		
			eck only one) — ✓ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)	(1) or	•		, or 990-PF).		
			Corporation Trust Association Oth		(,		
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000		tal assets				
			w) are \$500,000 or more, file Form 990 instead of Form 990-EZ.			▶ e			
_	art I		e, Expenses, and Changes in Net Assets or Fund Bal			etione for	Part I\		
	ali L		the organization used Schedule O to respond to any questi						
	1		ons, gifts, grants, and similar amounts received			111			
	ĺ		ervice revenue including government fees and contracts			2	27,212		
	2	_				3			
	3	Investmen	ip dues and assessments			4			
	4			 5a		4	3,648		
	5a			5b					
	b		ss) from sale of assets other than inventory (Subtract line 5b from			5c			
	6	•	nd fundraising events	on line say .		30			
	1	•	ome from gaming (attach Schedule G if greater than						
<u>o</u>	а			6a					
Revenue			ome from fundraising events (not including \$	of contribution	one .				
ě	b		raising events reported on line 1) (attach Schedule G if the	01 contributi	JI 15				
Œ				6b					
	١.		· F	6c					
	d		e or (loss) from gaming and fundraising events		ubtract				
	ľ	line 6c)	e or (1000) from gaining and fundraising events (add lines od	and ob and s	ubuact	6d			
	70	•	s of inventory, less returns and allowances	7a					
	7a			7b					
	b		it or (loss) from sales of inventory (Subtract line 7b from line 7a	1		7c			
	C			9		8			
	8	Total reve	nue (describe in Schedule O)			9	132,247		
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 2	• • • • • • • • • • • • • • • • • • • 		10	163,107		
	10 11			1		11			
<i>t</i> A	12	Salarico o	aid to or for members	1		12			
86	13	Drofossion	al face and other navments to independent contractors	1		13			
Ę	1	Occupance	al fees and other payments to independent contractors.	·	. ; .	14			
Expense	14	Destina	y, rent, utilities, and maintenance						
ш	15		ublications, postage, and shipping			15	7,389		
	16	•	enses (describe in Schedule O)			16	85,752		
	17	ı otal expe	enses. Add lines 10 through 16	· · · · · ·	<u>P</u>	17	93,141		
\$	18					18	69,966		
388	19		s or fund balances at beginning of year (from line 27, column ar figure reported on prior year's return)			40			
₹		•	_			19	194,767		
Net Assets	20		nges in net assets or fund balances (explain in Schedule O) .			20			
	21		or fund balances at end of year. Combine lines 18 through 20		<u> • </u>	21	264,733		
For	Papen	work Reduct	ion Act Notice, see the separate instructions.	Cat. No. 10642I		Fo	m 990-EZ (2016)		

Form	ggn.	F7	(201	6

Page 2

_Pa	rt II Balance Sheets (see the instructions for	or Part II)				 -
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part II		🗵
	•			(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		[194,767	22	264,733
23	Land and buildings		[23	
24	Other assets (describe in Schedule O)		[24	
25	Total assets		· · · · · <u> </u>	194,767		<u>264,733</u>
26	Total liabilities (describe in Schedule O)	(7)			26	47,143
27	Net assets or fund balances (line 27 of column Statement of Program Service Accomp			194,766	27	217,590
Par	Check if the organization used Schedule					Expenses
Wha		See Schedule O	ly question in this	Part III		quired for section
	. , , , , ,		f An Alice a lace a Acc			(c)(3) and 501(c)(4)
as n	cribe the organization's program service accomplish neasured by expenses. In a clear and concise moons benefited, and other relevant information for ea	anner, describe the	e services provided	rogram services, I, the number of	_	anizations; optional for ers.)
28	Publication & Distribution of newsletters to 952 class	mates				
					l	
					l	
		includes foreign gra	ınts, check here .	▶ □	28:	6,527
29	Publication and distribution of requests for contribut	ions				
	(Grants \$) If this amount	includes foreign gra	ents check here		29:	962
30	Planning and managing the 40th Reunion of the Darti			· · · · ·		862
		includes foreign gra	ants, check here .	▶ 🗆	30	a 85,081
31	Other program services (describe in Schedule O)	· · · · · · · ·				
		includes foreign gra			31	
32					32	00,171
Par	List of Officers, Directors, Trustees, and Key Check if the organization used Schedule				ารเกน	ictions for Part IV)
	Check if the organization used ochecule		(c) Reportable	(d) Health benefits,	`	· · · · · <u>· · · · · · · · · · · · · · </u>
	(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MISC (If not paid, enter -0-)	contributions to employ) Estimated amount of other compensation
Stev	e Melikian, President				\top	
		10		<u> </u>	0	0
Naor	ni Kleinman, VP - Operations					
		10	ļ	<u> </u>	0	0
Dana	Rowan, VP - Communications					
		10	<u> </u>	<u> </u>	이	0
Sara	Hunter, Secretary	40	1		1	
	Windrath, Treasurer	10	 	 	╁	
roui	William I reason of	10				
				1	\top	
					- -	
			}		1	
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			<u> </u>		十	
)	1		
			<u> </u>			
	,					
		1	\$	1		

Part				_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	Yes	No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)			
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business	34		✓
_	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		✓
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		→
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
ь	Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	00-		
h	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	38a		
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		·
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ▶ Paul Windrath Telephone no. ▶			
	Located at ▶ 6068 Blunt Alumni Center, Hanover, NH ZIP + 4 ▶	03	755	
ь	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		No
	If "Yes," enter the name of the foreign country: ▶	723		V
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country: ▶	42c		√
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. 1	D
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		✓
þ	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
C	Did the organization receive any payments for indoor tanning services during the year?	44c		✓
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in School to O	44.		
AP -	explanation in Schedule O	44d	ļ.—	
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		
b	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		1

46	Did the organization engage, directly or in	idirectly, in political c	ampaign activities or	n behalf of or i	n opposit	ion	Yes	No
_	to candidates for public office? If "Yes," o		Part I	· · · ·	<u>· · · · · · · · · · · · · · · · · · · </u>	- 46		✓
Part V	Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51.		stions 47-49b and	52, and com	plete the	e tables f	or lin	es
	Check if the organization used Sci	nedule O to respond	to any question in t	this Part VI				П
			7 -				Yes	No
	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Part		section 501(h) election		iring the	tax 47		1
	ls the organization a school as described in					. 48	1	
	Did the organization make any transfers to		_			. 49a	<u> </u>	1
	If "Yes," was the related organization a se Complete this table for the organization's					. 49b	98 20	d key
	employees) who each received more than	\$100,000 of comper	sation from the orga	nization. If the	re is none	e, enter "N	lone."	,
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health b contributions to benefit plans, as compens	employee nd deferred	(e) Estimate other cor		
None								
					İ			
							_	
				 				
		i			1			
1	Total number of other employees paid ov	er \$100,000	. •					
	Complete this table for the organization			contractors	who each	received	more	e than
	\$100,000 of compensation from the orga		one, enter "None."					
	(a) Name and business address of each independ	dent contractor	(b) Type of ser	vice	(c)	Compensat	ion	
None								
			_ <u>.</u>					
		·		1				
								
	••••			1				
d	Total number of other independent contra	ectors each receiving	over \$100.000					
	Did the organization complete Schedu	_			st attach	a		
	completed Schedule A					.▶ ✓ Yes		No
	naities of perjury, I declare that I have examined this i ect, and complete. Declaration of preparer (other that					owledge an	belief,	, it is
	PO 140 to 144 of		The sort of which prepare	That drift to the Co	<u> </u>	/ ייי		
Sign	Signature of officer	.14		Date		1 1		
Here	Kul Windra	ith						
	Type or print name and title							
Paid	Print/Type preparer's name	Preparer's signature	D	ate	Check .	if PTIN		
Prepa	1 – .				self-employ	yed		
Use C	Inly Firm's name ► Firm's address ►			Phone	EIN ▶			
May the	e IRS discuss this return with the prepare	shown above? See i	nstructions			► ☐ Yes		No
						Form 99	0-EZ	(2016)

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545-0047 2017

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

Name of the organization Employer Identification number **Dartmouth Class of 1976** 04-3391559 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives: (1) more than 331/2% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having h control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with. its supported organization(s) (see instructions). You must complete Part IV. Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (lii) Type of organization (Iv) is the organization (v) Amount of monetan (vi) Amount of (described on lines 1-10 isted in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E) Total

Part							
	(Complete only if you checked the Part III. If the organization fails to	ne box on line	e 5, 7, or 8 of	Part I or IT the	e organizatio	n failed to qu	alify under
Secti	on A. Public Support	quality unde	er the tests is	steu below, p	lease comple	ete Part III.)	
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(a) 2017	46 Tetal
1	Gifts, grants, contributions, and	(a) 2013	(0) 2014	(6) 2013	(u) 2016	(e) 2017	(f) Total
•	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 behalf			-			
3	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						
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts 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 13	Gross receipts from related activities, etc First five years. If the Form 990 is for the organization, check this box and stop he	ne organizatio				ear as a section	on 501(c)(3)
Section	ion C. Computation of Public Suppor		<u></u>				
14	Public support percentage for 2017 (line			1. column (ft)		14	%
15	Public support percentage from 2016 Sci		•			15	// 6
16a	331/2% support test—2017. If the organibox and stop here. The organization qua	ization did not	check the box	x on line 13, a	nd line 14 is 3	31/3% or more,	check this
b	331/a% support test - 2016. If the organithis box and stop here. The organization						-
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the organization	eets the "facts facts-and-circ	-and-circumst cumstances" te	ances" test, ct est. The organi	heck this box a ization qualifie	and stop here s as a publicly	. Explain in supported
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization in Part VI how the organization is supported organization.	ation meets the "fac	ne "facts-and- ts-and-circum	circumstances stances" test.	" test, check The organizat	this box and ion qualifies as	stop here. s a publicly
18	Private foundation. If the organization dinstructions	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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	on A. Public Support		· ·				
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees			(4, 5, 10	(-/	(2, 2011	
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the				l		
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an					. ,	
	unrelated trade or business under section 513		i		ļ		
4	Tax revenues levied for the						
•	organization's benefit and either paid to						
	or expended on its behalf	i					
5	The value of services or facilities	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
9	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
74	received from disqualified persons .						
	·		-		 		
b	Amounts included on lines 2 and 3						
	received from other than disqualified persons that exceed the greater of \$5,000		1	1	ļ	ļ	
	or 1% of the amount on line 13 for the year			1			
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from				<u> </u>		
·	line 6.)						
Secti	on B. Total Support	_			 		
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6		_/	15/ = 3.15	(4) = 3 + 3	, , , , , , , , , , , , , , , , , , ,	(1) 10.2.
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,				ł		
	royalties, and income from similar sources .			,		ĺ	
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses				İ		
	acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether		j				•
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets					i	
	(Explain in Part VI.)					<u> </u>	
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	L					
14	First five years. If the Form 990 is for the						
	organization, check this box and stop he	re	<u> </u>	<u> </u>	<u> </u>	<u> </u>	▶ □
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2017 (line 8					15	%
16	Public support percentage from 2016 Sch			<u></u>	<u></u>	16	<u> </u>
	on D. Computation of Investment In						
17	Investment income percentage for 2017 (-			%
18	Investment income percentage from 2016					18	<u> </u>
19a	331/8% support tests—2017. If the organ						
	17 is not more than 331/3%, check this box	=	-	=		•	
b	331/3% support tests—2016. If the organiz						
	line 18 is not more than 331/2%, check this l		_		•		=
20	Private foundation. If the organization de	d not check a	box on line 14,	, 19a, or 19b, o	check this box	and see instru	ctions 🕨 🔲

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V,)

Section A. All Supporting Organizations

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **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.
- 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)? 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 77 if "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - 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.)

		Yes	No
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•	10b		

Part	IV Supporting Organizations (continued)			age 🔾
			Yes	No
11	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?			
h	A family member of a person described in (a) above?	11a	<u> </u>	-
	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.	11b		
Secti	on B. Type I Supporting Organizations	1110	L	<u> </u>
			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		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 carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on 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		
Secti	on D. All Type III Supporting Organizations	<u> </u>		Ь
			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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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.			
Secti	on E. Type III Functionally Integrated Supporting Organizations	3		L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	· 4 · · · ·		
-	The organization satisfied the Activities Test. Complete line 2 below.	nstruc	πιοπ	S).
a b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	tn ict	ionel
2	Activities Test. Answer (a) and (b) below.	أحيي	Yes	No
а	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		
þ	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.			
3	Parent of Supported Organizations. Answer (a) and (b) below.	2ь		
о 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		
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard	3h		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	j tru: iizati	st on Nov. 20, 1970 (expions must complete Sec	lain in Part VI). See tions A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recovenes 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):			
a 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			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to	П		
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall instructions).	y int	tegrated Type III support	ing organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1_	Amounts paid to supported organizations to accomplish	exempt purposes		
2		empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6_	Other distributions (describe in Part VI). See instructions.			
	Total annual distributions. Add lines 1 through 6.	· · · · · · · · · · · · · · · · · · ·		
8	Distributions to attentive supported organizations to which	th the organization is res	sponsive	
	(provide details in Part VI). See instructions.	 		
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		- an	
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
a				
<u>b</u>	From 2013			-
<u>c</u>	From 2014			
d	From 2015			
e	From 2016			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			<u></u>
<u>-</u>	Carryover from 2012 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: \$			
		•		
<u>a</u>	Applied to underdistributions of prior years Applied to 2017 distributable amount			
р				
<u>c</u>				
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3			
•	and 4c.			
-8	Breakdown of line 7:			
a	Excess from 2013			
b				
C				
d	Excess from 2016			
е	Excess from 2017			

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.)
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SCHEDULE E (Form 990 or 990-EZ)

Schools

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest Information.

OMB No. 1545-0047

201

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Dartmouth Class of 1976

Employer identification number

04-3391559 Part I YES NO 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? 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, 2 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 3 Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff? **4a** Records documenting that scholarships and other financial assistance are awarded on a racially 4b Copies of all catalogues, brochures, announcements, and other written communications to the public dealing 4c Copies of all material used by the organization or on its behalf to solicit contributions? 4d 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: 5a Admissions policies? . 5b Employment of faculty or administrative staff? . 5с Scholarships or other financial assistance? . 5d Educational policies? . Use of facilities? 5f Athletic programs? . 5g 5h If you answered "Yes" to any of the above, please explain. If you need more space, use Part II. Does the organization receive any financial aid or assistance from a governmental agency? . Has the organization's right to such aid ever been revoked or suspended? **6**b If you answered "Yes" on 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 Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II . . .

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.
Part I, Line	7
Rev Proc 7	5-50 does not apply to Dartmouth Class of 1976. We are an alumni group without any students.
,	
Part I, Line	3: Explanation of Nondiscrimination Policy
Dartmouth Class of 1976 is an alumni group and a subordinate organization of Trustees of Dartmouth College (EIN: 02-0222111). As part	
of a group	exemption with the Trustees of dartmouth College (Group Filing Number 8204), Dartmouth Class of 1976 is recognized as
exempt as	a school under IRC Section 509(a)(1) and Section 170 (b)(A)(iii). Dartmouth Class of 1976 is an alumni club that supports
the Trsutee	s of Dartmouth College under various activities.

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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2017
Open to Public

Inspection

Name of the organization Employer identification number **Dartmouth Class of 1976** 04-339-155 FORM 990EZ, Part I - Line 16 of Other Expenses: \$85,081 - Expenses related to the 40th Reunion of the Dartmouth Class of 1976 \$467 - Cost of the 2017 Feale Athlete of the Year Award \$204 - Cost associated with mailing a letter from the Cl;ass President to all classmates FORM 990 EZ, PART 1 - Line 26B of Total Liabilities: \$47,143 - 40th reunion expenses that were not paid in 2016 FORM 990EZ, Part 1 - Line 8 of Revenue: \$132247 - Reunion receipts FORM 990 EZ, PART V - Information regarding Personal Benefit Contracts The organization did not, at any time during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract. The organization did not, at any time, during the year, pay any premiums, directly or indirectly on a personal benefit contract. FORM 990EZ, Part III - Primary Exempt Purpose: Enhance Alumni Interest in Dartmouth College and enhance relationships with classmates