DLN: 93493135043148 OMB No 1545-0047 Return of Organization Exempt From Income Tax

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

2016

Open to Public

foundations)

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

Department of the Treasury ▶ Information about Form 990 and its instructions is at www.irs.gov/form990 Inspection Internal Revenue Service For the 2016 calendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017 C Name of organization NAZARETH COLLEGE OF ROCHESTER D Employer identification number B Check if applicable ☐ Address change 16-0743088 ☐ Name change Doing business as ☐ Initial return Fınal ☐eturn/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) ☐ Amended return 4245 EAST AVENUE (585) 389-2525 ☐ Application pending City or town, state or province, country, and ZIP or foreign postal code ROCHESTER, NY $\,$ 14618 $\,$ **G** Gross receipts \$ 135,799,822 Name and address of principal officer **H(a)** Is this a group return for DAAN BRAVEMAN ☐Yes **☑**No subordinates? 4245 EAST AVENUE H(b) Are all subordinates ROCHESTER, NY 14618 ☐ Yes ☐No included? Tax-exempt status **✓** 501(c)(3) 4947(a)(1) or If "No," attach a list (see instructions) 501(c)() **◄** (insert no) **H(c)** Group exemption number ▶ Website: ► WWW NAZ EDU L Year of formation 1924 M State of legal domicile NY Summary 1 Briefly describe the organization's mission or most significant activities NAZARETH COLLEGE OF ROCHESTER IS A COEDUCATIONAL, INDEPENDENT COLLEGE THAT CHALLENGES STUDENTS TO RISE TO THEIR POTENTIAL WITH A LIBERAL ARTS AND SCIENCES FOUNDATION, PROFESSIONAL PROGRAMS, EXPERIENTIAL LEARNING, AND INNOVATIVE Activities & Governance CURRICULUM THAT ADDRESSES THE CURRENT AND EMERGING NEEDS OF THE WORLD Check this box $\blacktriangleright \sqcup$ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 33 Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 2,251 Total number of volunteers (estimate if necessary) 6 310 Total unrelated business revenue from Part VIII, column (C), line 12 85.051 **b** Net unrelated business taxable income from Form 990-T, line 34 7h 45.677 **Current Year** 5,010,879 15,406,351 8 Contributions and grants (Part VIII, line 1h) . 98,065,750 101,551,625 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 2,509,394 2,051,827 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,071,536 852,876 106,657,559 119,862,679 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . 25,323,239 27,941,791 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . 44,862,523 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 43,201,132 16a Professional fundraising fees (Part IX, column (A), line 11e) . 103,500 92,550 **b** Total fundraising expenses (Part IX, column (D), line 25) ▶1,512,476 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 33,446,981 34,701,562 102,074,852 107,598,426 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 4,582,707 12,264,253 Revenue less expenses Subtract line 18 from line 12 . Net Assets or Fund Balances End of Year **Beginning of Current Year** 236,248,727 256,274,965 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 62,742,899 64,122,972 172,125,755 193,532,066 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2018-05-14 Signature of officer Sian Here PATRICK E RICHEY VP FOR FINANCE & ADMINISTRATIO Type or print name and title Print/Type preparer's name RICHARD LEICHT Preparer's signature RICHARD LEICHT Check 🔲 ıf P01378913 Paid self-employed Firm's name BONADIO & CO LLP Firm's EIN ► 16-1131146

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Firm's address ▶ 171 SULLYS TRAIL SUITE 201

PITTSFORD, NY 14534

Preparer

Use Only

☑ Yes ☐ No Form **990** (2016) Cat No 11282Y

Phone no (585) 381-1000

Form	990 (2	016)					Page 2
Par	t III	Statement	of Program Servic	e Accomplis	hments		
		Check If Sched	lule O contains a respo	onse or note to	any line in this Part III		🗹
1	Briefly	describe the oi	rganızatıon's mıssıon				
VISU SPIR DEDI OWN	IAL AND ITUAL, A ICATION I WORLD	PERFORMING A AND AESTHETIC TO THE IDEAL AND THE WOR	ARTS, AND PROFESSION VALUES, TO DEVELOR OF SERVICE TO THEIR	DNAL FIELDS, FO DP SKILLS NECE: R COMMUNITIES ND ENCOURAGE	DSTERING COMMITMEN SSARY FOR THE PURSU S NAZARETH SEEKS ST	EDUCATES STUDENTS IN THE IT TO A LIFE INFORMED BY IN IT OF MEANINGFUL CAREERS TUDENTS WHO WANT TO MAK THE UNDERSTANDING, COMM	ITELLECTUAL, ETHICAL, , AND TO INSPIRE
2	the pr	or Form 990 or	990-EZ?		vices during the year w	hich were not listed on	. □Yes ☑No
3		•	se new services on Sch cease conducting, or m		changes in how it cond	ucts, any program	
	service	es [?]					. 🗌 Yes 🗹 No
	If "Yes	s," describe the	se changes on Schedu	le O			
4	Sectio	n 501(c)(3) and		ons are required	to report the amount of	largest program services, as of grants and allocations to ot	
4a	(Code See Ad	dıtıonal Data) (Expenses \$	33,797,432	including grants of \$) (Revenue \$	84,127,170)
4b	(Code See Ad	ditional Data) (Expenses \$	27,941,791	including grants of \$	27,941,791) (Revenue \$)
4c	(Code See Ad	ditional Data) (Expenses \$	13,188,793	including grants of \$) (Revenue \$	17,073,394)
	(Code) (Expenses \$	21,247,912	including grants of \$) (Revenue \$	1,005,261)
	STUDE STUDE ADVISE	NTS INCLUDING F NT SUCCESS ATH EMENT, THE CENT	REGISTAR, STUDENT DEVI ILETIC EXPENSES ARE ALS ER FOR INTERNATIONAL I	ELOPMENT, CENTE SO REFLECTED IN EDUCATION AND T	R FOR CIVIC ENGAGEMENT THIS CATEGORY ACADEM: HE OFFICES OF THE DEAN	IC SUPPORT PERTAINS TO LIBRAR	T MANAGEMENT AND CENTER FOR Y SERVICES, ACADEMIC NTER IS A PREMIER PRESENTER OF
4d			es (Describe in Schedi	•			
	· '	nses \$, , ,	uding grants of	•) (Revenue \$	1,005,261)
4e	Total	program serv	ice expenses ▶	96,175,9	28		

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No

Nο

Nο

No

No

Nο

Nο

No

Nο

Nο

Νo

Nο

Nο

Nο

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to provide advice on the distribution or investment of amounts in such funds or accounts?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

4

5

6

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right Did the organization receive or hold a conservation easement, including easements to preserve open space,

Yes

11b

11c

11d

11e

11f

12a

12b

13

14a

14b

15

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18

19

- 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🛸 🔒 Did the organization maintain collections of works of art, historical treasures, or other similar assets? 8 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 9
- Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 11a

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

ın Part X, lıne 16? *If "Yes," complete Schedule D, Part IX* 😼

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

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

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

12a Did the organization obtain separate, independent audited financial statements for the tax year?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

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29

tm aan (5019)			Page 4	
Part IV Checklist of Required Schedules (continued)				
		Yes	No	
0a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		No	

Νo

Nο

No

No

No

Νo

No

Νo

Νo

Nο

Nο

Nο

Nο

Nο

Νo

No

Nο

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22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

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33

34

35a

35b

36

37

38

Yes

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Yes

Yes

Yes

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

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? If "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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

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?

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . 💆

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 4,028 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country ►FR , SP , IT See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
	If res, to line 3a of 3b, did the organization meronii 0000-1.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter]		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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Par	Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "I 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	lo" respo	nse to li	nes
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	34		
	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	33		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	on 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or mor members of the governing body?	e 7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	/		
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Reven	ue Code	∍.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participatio in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?			
	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ► CO , FL , GA , IL , LA , MA , MN , MS , N , WV	J, NC, C	R, PA,	RI , VA
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only available for public inspection. Indicate how you made these available. Check all that apply)		
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ▶PATRICK E RICHEY 4245 EAST AVENUE ROCHESTER, NY 14618 (585) 389-2525			

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Part VII	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	
La Complete	e 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(B)

(A)

• 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

(C)

(D)

Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensated employee Individual trustee or director Former organizations MISC) related Institutional Trustee below dotted employee organizations line) See Additional Data Table

(F)

(E)

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Part VII Section A. Officers, Direct	tors, Trustees	, Key	Emp	loye	es,	and I	High	nest Compensate	d Employees (co	ntinued)
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table										
1b Sub-Total				٠.		•	<u> </u>			
c Total from continuation sheets to F d Total (add lines 1b and 1c)	art VII, Sectio			٠.	•	▶		2,219,408	0	252,039
Total number of individuals (includin of reportable compensation from the			e list	ed a	bove	e) who	rec	eived more than \$10	00,000	

	Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c)	• •		2,21	19,408				0		252,039
2	Total number of individuals (including but not limited to those listed above) of reportable compensation from the organization ▶ 83	who	recei\	ved more	thar	\$100	,000				
										Yes	No
3	Did the organization list any former officer, director or trustee, key employ line 1a? <i>If "Yes," complete Schedule J for such individual</i>		_					ee on	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation a organization and related organizations greater than \$150,000? If "Yes," con individual						:he				
	maividual	•			•		•		4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any u			ganızatı	on or	ındıvı	dual f	or			

services rendered to the organization? If "Yes," complete Schedule J for such person . 5 Νo **Section B. Independent Contractors** 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

(C) Compensation (A) (B) Name and business address Description of services LEGAL SERVICES 256,712

HARTER SECREST & EMERY LLC 1600 BAUSH LOMB PL ROCHESTER, NY 14604

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \blacktriangleright 1

Form 990 (2016)

Part		I Statement of	Revenue										rage 3
		Check if Schedul		a respo	nse or no	te to any	line in th	ııs Part VII	ı				🗆
							(<i>A</i> Total re		Rela ex fur	(B) ated or empt action	Unrel busii reve	lated ness	(D) Revenue excluded from tax under sections
	18	a Federated campaigi	ns	1a					rev	renue			512-514
ributions, Gifts, Grants Other Similar Amounts		b Membership dues		1b									
ira nou		c Fundraising events		1c		40,385							
S. (An		d Related organizatio		1d									
Giff		e Government grants (co		1e	1	,832,187							
S. III		F All other contributions,											
tion er S		and similar amounts no above		1f	13	,533,779							
ë	۱,	g Noncash contribution	ons included										
Contributions, Gifts, Grants and Other Similar Amounts		ın lınes 1a-1f \$		732,	<u>,669</u>								
ರ ಕ	_ <u> </u>	Total.Add lines 1a-1	f		<u> </u>	<u> </u>		406,351					
માન	_					Business				0.4.40			
۳٧٠		TUITION AND FEES ROOM AND BOARD					611310 611310		127,170 341,572	84,127 16,34:	-		
ئد چې		OTHER AUXILIARY INCO)ME				611310		553,748		5,148	8,6	500
Service Revenue		PUBLIC SERVICES	···-				611310	4	429,135	380	,556	48,5	579
% =	e												
Program	f	All other program se	rvice revenue										
Æ	g	Total. Add lines 2a-2f	·		>	101,	551,625						
		Investment income (ir			nterest, a	nd other		1 211 00					1 211 000
		similar amounts). Income from investme				ا مام	`	1,211,90	U				1,211,900
		Royalties		-		eds 🕨							
		,	(ı) Rea		(II) Pe	ersonal			+				
	6a	Gross rents					1						
	ŀ	78,074 b Less rental expenses 0			-								
	_	,											
	c	Rental income or (loss)		78,074									
	d	l Net rental income of	r (loss) . .	•		•	1	78,07	4				78,074
			(ı) Securi	ies	(11)	Other							
	7a	Gross amount from sales of assets other than inventory	16,7	60,665		10	0						
	b	Less cost or other basis and sales expenses	15,9	19,820		1,01	8						
	c	Gain or (loss)	8	40,845		-91	8						
		Net gain or (loss) .		•		>		839,92	7				839,927
Other Revenue	8a	Gross income from fu (not including \$ contributions reporte See Part IV, line 18	40,385 ed on line 1c)	of		20,700							
ev.	b	Less direct expenses		ь		16,305	_						
erf		: Net income or (loss)		ıng ev	ents .	. •	_	4,39	5				4,395
Oth	9a	Gross income from g See Part IV, line 19		es									
_		See Fare IV, mile 19		а]								
	b	Less direct expenses	s	b									
		: Net income or (loss)		activit	ies	>							
	10	aGross sales of invent returns and allowand	es	a									
	b	Less cost of goods s	sold	b									
	c	Net income or (loss) Miscellaneous		invent									
	11	Miscellaneous AINDIRECT COST RA			Busine	ss Code 90009	9	31,15	6				31,156
		REIMBURSEMENT	16		-								5 2,200
	t	•											
	c	:				_							
	ď	All other revenue .						739,25	1	711,379		27,872	
		Total. Add lines 11a				>	1	· ·		,		,	
	12	! Total revenue. See	Instructions					770,40					
								119,862,67	9	102,205,825		85,051	2,165,452 Form 990 (2016)

IV, line 22

and 16

key employees

section 4958(c)(3)(B)

7 Other salaries and wages

9 Other employee benefits .

11 Fees for services (non-employees)

. . . e Professional fundraising services See Part IV, line 17

f Investment management fees .

12 Advertising and promotion

14 Information technology

13 Office expenses

15 Royalties .

16 Occupancy

17 Travel

20 Interest

23 Insurance .

b OTHER

d

10 Payroll taxes . .

a Management .

b Legal

c Accounting **d** Lobbying . . 298,496

558,868

41,002

118,119

61,309

92,550

167,425

100,349

4,507

24,464

3,271

36,245

3,172

2,640

1,512,476

Form 990 (2016)

59

+ TV	Statement	of Eunction	al Evnences

1 Grants and other assistance to domestic organizations and

2 Grants and other assistance to domestic individuals. See Part

3 Grants and other assistance to foreign organizations, foreign

governments, and foreign individuals See Part IV, line 15

Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

Pension plan accruals and contributions (include section 401

g Other (If line 11g amount exceeds 10% of line 25, column

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

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

25 Total functional expenses. Add lines 1 through 24e 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)

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . .

expenses on Schedule O)

c ACADEMIC COURSE WAIVERS

a FOOD SERVICE

e All other expenses

(k) and 403(b) employer contributions) .

domestic governments See Part IV, line 21

4 Benefits paid to or for members

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (B) (C) Do not include amounts reported on lines 6b, (A) (D) Program service Management and Fundraisingexpenses

27,559,586

382,205

1,616,372

33,309,919

2,327,623

5,056,660

2,551,949

297,852

65,620

92,550

324,443

1,192,930

1,355,383

2,992,008

1,225,218

6,499,713

1,072,977

192,736

1,973,371

8,444,422

4,132,531

3,482,607

831,415

107,598,426

610,873

7,463

27,559,586

382,205

598,142

28,400,102

1,987,888

4,222,058

2,127,141

728,903

1.021.314

2,292,745

1,117,192

6,110,246

973 421

100,654

1,863,332

8,013,756

3,987,580

3,295,838

801,451

96,175,928

584,911

7,463

719,734

4,350,949

298,733

716,483

363,499

297,852

65,620

324,443

296,602

334,069

598,914

103,519

389,408

75,092

88,811

110,039

430,666

25,962

108,706

183,597

27,324

9,910,022

Total expenses 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses

Page **11**

1.654.513

709.729

139,491,618

29.152.063

43.410.551

2.478.819

8,169,680

1,195,907

38,712,389

14.664.923

62,742,899

156,030,818

18,509,064

18.992.184

193,532,066

256.274.965

Form **990** (2016)

256.274.965

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	0 0 ,		1 ′
1 Cash-non-interest-bearing	0	1	326,292
2 Savings and temporary cash investments	22,386,069	2	26,464,725
3 Pledges and grants receivable, net	3,762,670	3	9,482,284
4 Accounts receivable, net	2,990,032	4	3,104,371
Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.	0	5	0
6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete	0	6	0

10a 10b

250,036,964

110,545,346

1.685.829

653.375

136.218.978

30.482.281

35.603.565

2,465,928

6,758,559

1,137,858

41,038,173

15.188.382

64,122,972

145.558.818

9.105.541

17.461.396

172,125,755

236.248.727

236,248,727

8

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10c

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33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Part II of Schedule L

Inventories for sale or use .

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Notes and loans receivable, net . . .

Prepaid expenses and deferred charges .

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11

Other assets See Part IV, line 11 . . .

Tax-exempt bond liabilities

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Accounts payable and accrued expenses

basis Complete Part VI of Schedule D

Intangible assets

Form 990 (2016)

☐ Both consolidated and separate basis

2c

3a

3b

Yes

Yes

Yes Form 990 (2016)

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Consolidated basis

consolidated basis, or both ✓ Separate basis

Audit Act and OMB Circular A-133?

Additional Data

Software ID:

Software Version: **EIN:** 16-0743088

HIGHER EDUCATION INSTRUCTION-REFLECTS EXPENSES DIRECTLY RELATING TO THE DELIVERY OF QUALITY INSTRUCTIONAL PROGRAMS AT THE UNDERGRADUATE, GRADUATE, AND CONTINUING EDUCATION LEVELS PROGRAMS OF STUDY ARE DELIVERED THROUGH THE COLLEGE OF ARTS AND SCIENCES, AND SCHOOLS OF

Name: NAZARETH COLLEGE OF ROCHESTER

Form 990, Part III, Line 4a:

Form 990 (2016)

EDUCATION, MANAGEMENT AND HEALTH AND HUMAN SERVICES (2,673 TOTAL STUDENT FTE'S)

Form 990, Part III, Line 4b: SCHOLARSHIP PROGRAMS SCHOLARSHIPS AND GRANTS-REFLECTS THE COMPETITIVE SCHOLARSHIPS, NEED BASED AID, AND HIGHER EDUCATION OPPORTUNITY GRANTS AWARDED TO STUDENTS IN ORDER TO MAKE THE TOTAL COST OF ATTENDANCE MORE AFFORDABLE (2,673 TOTAL STUDENT FTE'S)

Form 990, Part III, Line 4c: AUXILIARY ENTERPRISES-PERTAINS TO THE OPERATIONS OF THE INSTITUTION THAT EXIST TO FURNISH A SERVICE TO STUDENTS, FACULTY, OR STAFF, AND THAT

CHARGE A FEE THAT IS DIRECTLY RELATED TO, ALTHOUGH NOT NECESSARILY EQUAL TO, THE COST OF THE SERVICE AUXILIARY ENTERPRISES ARE MANAGED AS ESSENTIALLY SELF-SUPPORTING ACTIVITIES EXAMPLES ARE RESIDENCE HALLS, FOOD SERVICES, AND STUDENT HEALTH SERVICES (2,673 TOTAL STUDENT FTE'S)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related (W-2/1099-(W-2/1099organization and Highest compensated employee Former Individual trustee or director Key employee organizations Institutional MISC) related MISC) below dotted organizations line) Trustee

JACK ALLOCO	2 00	l ↓			0	0	0
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SHARON BAILEY SSJ	2 00	V			0	0	0
TRUSTEE		_ ^			J	0	0
YOLANDA RAMOS BENITEZ	2 00	V					
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TRUSTEE								
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BRIAN COOPER	2 00				Ī			
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JAMES COSTANZA

TRUSTEE

TRUSTEE

TRUSTEE

CHAIR

VICE CHAIR

EMIL DUDA

SERGIO ESTEBAN

TIMOTHY FOURNIER

JOHN DRAIN

Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer from related week (list from the compensation any hours and a director/trustee) organizations organization from the for related Highest compens (W-2/1099-(W-2/1099organization and Office Former Individual trustee or director key employee organizations Institutional MISC) MISC) related below dotted organizations line) Trus

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ANDREW GALLINA TRUSTEE	2 00	×				0	0	
KENNETH GLAZER TRUSTEE	2 00					0	0	
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WARREN HERN	2 00	l 🗸				0	
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CLEVE KILLINGSWORTH JR

TRUSTEE UNTIL 1/1/17

JUDY WILMOT LINEHAN

ELIZABETH MCANARNEY

GEORGIA LAMB

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensated employee Former Individual trustee or director Institutional organizations MISC) MISC) related below dotted organizations employee line) Trustee

KIM MCCLUSKI	2 00	l			_		
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STEPHEN NATAPOW	2 00	×			0	0	
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CORAL SURGEON

DAVID VIGREN

KEITH WILSON

LARRY PECKHAM

RICHARD PIERPONT

CYNTHIA REDDECK-LIDESTRI

Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless amount of other hours per compensation compensation week (list person is both an officer from related from the compensation any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and Off In High 1 5 organizations | MISC) MISC)

(F)

Estimated

from the

related

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22,577

21,223

16,749

19,511

22,955

192,553

203,460

198,163

185,895

136,941

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

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TRUSTEE

IAN MORTIMER

SARA VARHUS

PATRICK RICHEY

KELLY GAGAN

KEVIN WORTHEN

1/20/17

VICE PRESIDENT FOR ENROLLMENT MANAGEMENT

VICE PRESIDENT FOR ACADEMIC AFFAIRS UNTIL

VICE PRESIDENT FOR FINANCE AND ADMINISTRATION

VICE PRESIDENT FOR INSTITUTIONAL ADVANCEMENT

VICE PRESIDENT FOR STUDENT DEVELOPMENT

	below dotted line)	rwdual trustee director	stitutional Trustee	 0.€1	employee	hest compensated plovee	mer			organizations
FRANK YORK	2 00	l							0	
TRUSTEE		^						١	l o	
DAAN BRAVEMAN	50 00	x		x				415,614	0	57,36

				2			
FRANK YORK	2 00	V			0	0	
TRUSTEE		^			٥	0	
DAAN BRAVEMAN	50 00	l ↓	Ų		415,614	0	
PRESIDENT		_ ^	^		413,614	0	
COLLEEN ARNOLD	2 00						

DAAN BRAVEMAN	50 00	×	×		415,614	o	57,363
PRESIDENT					,		<u> </u>
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Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable hours per than one box, unless compensation compensation week (list person is both an officer from the from related and a director/trustee) any hours organization organizations

(F)

Estimated

amount of other

compensation

from the

15,932

13,881

22,939

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	6 1 1 1							444.000	(11) 2 (4 000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
ANDREA TALENTINO	50 00									
VICE PRESIDENT FOR ACADEMIC AFFAIRS AS OF 3/1/17	•••••			×				0	0	0
ELLEN HOROVITZ	50 00									
PROFESSOR AND DIRECTOR OF GRADUATE ART THERAPY PRO	•••••					×		348,751	0	17,493
DIANNE OLIVER	50 00					X		143,752	0	21,416
DEAN IN COLLEGE OF ARTS & SCIENCES						^		143,732	0	21,410

PROFESSOR AND DIRECTOR OF GRADUATE ART THERAPY PRO				х	348,751	0	
DIANNE OLIVER	50 00			×	143,752	0	
DEAN IN COLLEGE OF ARTS & SCIENCES				``	113,732		ı
BRIGID NOONAN	50 00						

DEAN IN COLLEGE OF ARTS & SCIENCES	•••••			Х	143,752	0	
BRIGID NOONAN	50 00			Х	135,941	0	
DEAN IN SCHOOL OF HEALTH & HUMAN SERVICES				^	133,311		

50 00 JO ELLEN PINKHAM

Х 130,352

ASSOCIATE VICE PRESIDENT FOR HUMAN RESOURCES

50 00 TRINA MARQUEZ

...... 127,986 Χ

ASSOCIATE VICE PRESIDENT FOR CAMPUS PROGRAMS

efile	GR/	APHIC prii	nt - DO NOT PROCE	SS	As Filed Data -		DLN: 9349313504314					
SCI	IED	ULE A	Publi	ic C	harity Statu	s and Pub	olic Supp	ort	OMB No 1545-0047			
(For	m 990			he org	anization is a secti	ion 501(c)(3) d	organization o		2016			
990E	(Z)				947(a)(1) nonexe ► Attach to Form 9				2010			
		the Treasury	► Information a		Schedule A (Form			ıctions is at	Open to Public Inspection			
Name	of th	ne Service ne organiza			<u>www.ns.ge</u>	<u> </u>		Employer identific	<u> </u>			
IAZAF	ETH CC	OLLEGE OF RO	CHESTER					16-0743088				
Pai			for Public Charity S					See instructions.				
	rganız		a private foundation become		•	•	,	/A>/:>				
1		•	onvention of churches, o					(A)(1).				
2	✓		scribed in section 170(·	• • • • • • • • • • • • • • • • • • • •					
3		•	or a cooperative hospital		_							
4			esearch organization op and state	erated	in conjunction with	a hospital descri	bed in section	170(b)(1)(A)(iii). E	nter the hospital's			
5			ation operated for the be (iv). (Complete Part II)		of a college or univer	sity owned or op	perated by a gov	ernmental unit descri	bed in section 170			
6		A federal, s	tate, or local governmer	nt or g	overnmental unit de	scribed in sectio	on 170(b)(1)(A	۱)(v).				
7		section 17	ation that normally receil $0(b)(1)(A)(vi)$. (Comp	plete P	art II)			ınıt or from the gener	al public described in			
8		A communi	ty trust described in sec	ction 1	l70(b)(1)(A)(vi)(Complete Part I	I)					
9			ural research organization rant college of agricultur						ege or university or a			
LO		from activit	ation that normally receing related to its exemption income and unrelated because section 509(a)(2).	t funct ousines	ions—subject to cert is taxable income (le	ain exceptions,	and (2) no more	than 331/3% of its su	pport from gross			
l 1	П	•	ation organized and oper	•		public safety S	ee section 509	(a)(4).				
12		more public	ation organized and oper ly supported organization through 12d that descr	ons de	scribed in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a				
а		Type I. A so	supporting organization on n(s) the power to regula Part IV, Sections A an	operate arly app	ed, supervised, or co	ontrolled by its si	upported organi	zation(s), typically by				
b		Type II. A manageme	supporting organization nt of the supporting organization plete Part IV, Sections	n super Janizati	on vested in the sam							
С		Type III f	unctionally integrated organization(s) (see inst	ı. A su	pporting organization				ted with, its			
d		Type III n functionally	on-functionally integrated The organizes The organizes The organizes The organizes The organizes The organizes	rated. zation (A supporting organi generally must satisf	zation operated i y a distribution i	ın connection wi	th its supported organ				
e		Check this	box if the organization re or Type III non-function	eceive	d a written determin	ation from the II	RS that it is a Ty	pe I, Type II, Type II	I functionally			
f	Enter		of supported organization		regrated supporting	organization						
g			ing information about th	he supp	ported organization(5)		•				
(i)N	ame of	f supported o	organization (ii)EIN		(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
						Yes	No					
				\dashv								
Total									I			

Sch	edule A (Form 990 or 990-EZ) 2016						Page 2
F	art II Support Schedule for	Organizations	Described in Se	ections 170(b)	(1)(A)(iv) and	170(b)(1)(A)	(vi)
	(Complete only if you ch						under Part
	III. If the organization fa	alls to qualify un	der the tests list	ed below, please	e complete Part	III.)	
	Section A. Public Support Calendar year					<u> </u>	
	(or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not	5,607,734	13,051,546	6,612,096	5,010,879	7,906,351	38,188,606
_	include any "unusual grant ")						
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	5,607,734	13,051,546	6,612,096	5,010,879	7,906,351	38,188,606
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						38,188,606
	Section B. Total Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f)Total
7	(or fiscal year beginning in) ► Amounts from line 4	5,607,734	13,051,546	6,612,096	5,010,879	7,906,351	38,188,606
8	_	3,007,734	13,031,340	0,012,030	3,010,073	7,500,551	30,100,000
•	dividends, payments received on	1,040,037	895,381	1,095,795	1,091,280	1,211,900	5,334,393
	securities loans, rents, royalties and	1,040,037	093,301	1,093,793	1,091,200	1,211,900	3,334,333
9	income from similar sources Net income from unrelated business						
9	activities, whether or not the	79,375	82,321	87,294	79,382	85,051	413,423
	business is regularly carried on	·		, i	·		<u> </u>
10		1 450 000	1 012 572	022 542	1 065 705	025 004	6 006 775
	or loss from the sale of capital assets (Explain in Part VI)	1,450,902	1,912,572	832,512	1,065,785	825,004	6,086,775
11	Total support. Add lines 7 through						50,023,197
	10		>			T T	
	Gross receipts from related activities,					12	438,596,755
13	First five years. If the Form 990 is fo	-			•	• • • • •	nization,
	check this box and stop here					▶ ⊔	
	Section C. Computation of Public	• •	•	1 (6)		T T	
	Public support percentage for 2016 (lin			olumn (r))		14	76 340 %
	Public support percentage for 2015 Sc				4.4 22	15	76 180 %
16a	33 1/3% support test—2016. If the				14 IS 33 1/3% or	more, cneck this b	
ŀ	and stop here. The organization quali 33 1/3% support test—2015. If th				nd line 15 is 33 1/3	3% or more. check	▶ ✓
_	box and stop here. The organization	-		•	2	21	▶ □
17:	10%-facts-and-circumstances test				13, 16a, or 16b,	and line 14	· <u>—</u>
	is 10% or more, and if the organizatio	n meets the "facts	-and-circumstance:	s" test, check this	box and stop her	e. Explaın	
	in Part VI how the organization meets	the "facts-and-circ	cumstances" test T	he organization q	ualifies as a public	ly supported	_
	organization 10%-facts-and-circumstances tes		rannization did not	chack a hay an li-	0 12 160 16h	17a and line	ightharpoons
t	, 10 /0-lacto-and-circumstances les	. Zoro. Il tile ol	garnzation did 110t	CHECK & DOX OH IIII	C 10, 100, 100, 01	ra, and inte	

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.**Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions

Schedule A (Form 990 or 990-EZ) 2016

Section A. Public Support	
the organization fails to qualify under the tests listed below, please complete Part II.)	
(Complete only if you checked the box on line 10 of Part 1 or if the organization failed to qualify under Part 11. I	ίT

Se	ection A. Public Support						
	Calendar year	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
_	membership fees received (Do not	I					
	ınclude any "unusual grants`")	<u> </u>					
2	Gross receipts from admissions,	I					
	merchandise sold or services performed, or facilities furnished in	I					
	any activity that is related to the	I					
	organization's tax-exempt purpose	I					
_	Cross receipts from activities that are						
3	Gross receipts from activities that are not an unrelated trade or business	I					
	under section 513	I					
4	Tax revenues levied for the						
	organization's benefit and either paid	I					
5	to or expended on its behalf The value of services or facilities						
,	furnished by a governmental unit to	I					
	the organization without charge	ļ					
6	Total. Add lines 1 through 5	<u></u>					
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	I					
	5 received from disqualified persons	<u> </u>					
b	Amounts included on lines 2 and 3						
	received from other than disqualified	I					
	persons that exceed the greater of \$5,000 or 1% of the amount on line	I					
	13 for the year	I					
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
31	ection B. Total Support	Г	1	T	Т		
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d) 2015	(e) 2016	(f)Total
9	Amounts from line 6						
.0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
ь	income from similar sources Unrelated business taxable income						
U	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
	Add lines 10a and 10b Net income from unrelated business						
11	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
	11, and 12) First five years. If the Form 990 is fo	r the organization	te first second the	hird fourth or fift	 	ction 501/c)(2) a:	raanization
14	check this box and stop here	Tale organización	r a mac, second, ti	ma, iourtii, or iiit	ii tax yeai as a se	CCOT 301(C)(3) 01	yanızatıon, ► □
<u> </u>	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2016 (lin			column (f))		15	
16	Public support percentage from 2015 S		· ·	(.,,		16	
	ection D. Computation of Invest	<u> </u>				10	
17	Investment income percentage for 20:			line 13, column (f))	17	
18	Investment income percentage from 2			,(••	18	
	331/3% support tests—2016. If the			on line 14, and lir	e 15 is more than		e 17 is not
	more than 33 1/3%, check this box and						▶ □
	33 1/3% support tests—2015. If the						. —

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

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Part IV Supporting Organizations (Complete only if you checked a box on line 12 of 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

7

8

10a

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V) Section 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			
	ın section 509(a)(1) or (2)	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	1 - '		l

	(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)	L
	W 20010 305 (4)(1) 01 (2)	L
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)	Ĺ
	below	ſ
•	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	

	III Section 309(a)(1) or (2)	2	i		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)				
	below	3a			
b	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	3с	Ī		

	below	3a	
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 12a or 12b in Part I, answer (b) and (c) below	4a	
	Did the eventualities have obtained and discussion in deciding whather to make make to the fewers commented	\Box	

		30	l
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	
a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you		
	checked 12a or 12b ın 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)? If "Yes," explain in Part VI what controls the organization used to ensure that all support		

	(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) If ype I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other.	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		
	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	
С	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 (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its		

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

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

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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Par	** Supporting Organizations (continued)							
			Yes	No				
11	Has the organization accepted a gift or contribution from any of the following persons?							
а								
	governing body of a supported organization?	11a						
b	A family member of a person described in (a) above?	11b						
11 Has the organization accepted a gift or contribution from any of the following persons? a 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. b A family member of a person described in (a) above? 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 Section B. Type I Supporting Organizations 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 directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's directors or be organization had more than one supported organization had more when one supported organization had more when one supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 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? Section C. Type II Supporting Organizations 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 was vested in the same persons that controlled or managed the supported 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 previousl								
C-	ection B. Type I Supporting Organizations							
se	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 of	ır 🗀	1.03	""				
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa							
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such							
	powers during the tax year	1						
2								
		2						
			•	•				
Se	ection C. Type II Supporting Organizations		Yes	N.				
1	Were a majority of the organization's directors or trustoes during the tay year also a majority of the directors as twistoes	of [res	No				
1		or						
		1						
				•				
Se	ection D. All Type III Supporting Organizations		T.					
	Did the appropriate analysis to each of the growth of annual to the last the second of the second of the	,	Yes	No				
T								
	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 or notification, to the extent not previously provided?	<u> </u>	-	<u> </u>				
2	Were any of the organization's officers, directors, or trustoss either (1) appointed or elected by the supported arrangement	n 1						
_	(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)	<u> </u>						
_	Divinion of the valeting described in (2) did the surround of	2						
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t							
	year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3						
			1					
	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 instr	actions)						
a								
b								
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instru	ictions))				
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 supporte organizations and explain how these activities directly furthered their exempt purposes, how the organization was	3						
	responsive to those supported organizations, and how the organization determined that these activities constituted	<u> </u>						
	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	Parent of Supported Organizations Answer (a) and (b) below.	_						
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI.	of 3a						
h	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its	<u> </u>	1					
,	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b						
	04FF0104 0. gammanon 2							

-	Add lifles 1 till odgif 5			
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	1 b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	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 emergency temporary reduction (see instructions)	6	

Schedule A (Form 990 or 990-EZ) (2016)

c Excess from 2014.

d Excess from 2015.

e Excess from 2016. . . .

Return Reference Explanation SCHEDULE A, PART II, LINE 10 OTHER INCOME CONSISTS OF GROSS INCOME FROM FUNDRAISING (NOT INCLUDING CONTRIBUTIONS REPORT ED ON LINE 1), COMMISSIONS AND OTHER INCOME NOT REPORTABLE ON SCHEDULE A PART II LINES 1-9

Schedule A (Form 990 or 990-F7) 2016

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

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

OMB No 1545-0047

DLN: 93493135043148

EZ)

SCHEDULE C (Form 990 or 990-

	tment of the Treasury al Revenue Service	71110111	<u>www.irs.gov/f</u>		ts mstruc	cions is ac		Inspe	ction			
• S • S • S f the • S • S f the	ection 501(c)(3) on Section 501(c) (othe Section 527 organize organization ans Section 501(c)(3) o Section 501(c)(3) o organization ans ky Tax) (see sepai	ganizations Coner than section 5 zations Complet wered "Yes" or rganizations that ganizations that wered "Yes" or rate instructions	n Form 990, Þart IV, Line 4, or Form 9 have filed Form 5768 (election under 9 have NOT filed Form 5768 (election und 1970) n Form 990, Part IV, Line 5 (Proxy Ta	e Part I-C is I-A and C below 990-EZ, Part VI, Iir section 501(h)) Co nder section 501(h	Do not conne 47 (Lobi emplete Par)) Comple	mplete Part bying Activ t II-A Do note Part II-B	Part I-B Activities), then Do not complete Part II-B t II-B Do not complete Part II-A					
Nar	ne of the organizat ARETH COLLEGE OF R	tion				Employer		fication nun	nber			
Par	t I-A Complet	te if the orga	nization is exempt under section	on 501(c) or is	a section			tion.				
1 2 3 Par	Political expendition Volunteer hours	ures	ization's direct and indirect political ca		n Part IV	•	\$.					
1 2 3 4a b	Enter the amount	of any excise ta n incurred a sect made?	x incurred by the organization under s x incurred by organization managers i tion 4955 tax, did it file Form 4720 for	ınder section 4955		>	\$. \$.	☐ Yes	□ No			
Par 1 2 3	Enter the amount Enter the amount function activities	directly expend of the filing org	nization is exempt under section ed by the filing organization for section anization's funds contributed to other of the section and 2. Enter here and of the section is set to be section.	n 527 exempt funct organizations for se	ion activitie ection 527 e	es 🕨	\$ \$ \$ \$					
4 5	Enter the names, organization mad of political contrib	addresses and e e payments For outions received	n 1120-POL for this year? employer identification number (EIN) o each organization listed, enter the am that were promptly and directly deliver ee (PAC) If additional space is needed,	iount paid from the red to a separate p	filing orga olitical orga	nization's fu anization, si	nds A	Iso enter the				
	(a) Nam	e	(b) Address	(c) EIN	filing o	ount paid fro rganization' if none, ento -0-	s	(e) Amount contributions and promp directly deliv separate organization enter	s received otly and vered to a political If none,			
2												
3												
4												
5												
6												

Schedule C (Form 990 or 990-EZ) 2016

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

For 4	For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying						
activ	,	gn II below, provide in Fart IV a detailed description of the lobbying	Yes	No	F	Amoui	nt
1							
а	Volunteers?			No			
b	Form 5768 (election under section 501(h)). th "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying of the year, did the filing organization attempt to influence foreign, national, state or local legislation including any attempt to influence public opinion on a legislative matter or referendum, through the us Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section (6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (1 answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).		Yes		1		
С	Media advertisements?			No	1		
d	Form 5768 (election under section 501(h)). "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying uring the year, did the filing organization attempt to influence foreign, national, state or local legislative cluding any attempt to influence public opinion on a legislative matter or referendum, through the use oblunteers? and staff or management (include compensation in expenses reported on lines 1c through 1i)? edia advertisements? allings to members, legislators, or the public? biliciations, or published or broadcast statements? rants to other organizations for lobbying purposes? riect contact with legislators, their staffs, government officials, or a legislative body? allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ther activities? total Add lines 1c through 1i d the activities in line 1 cause the organization to be not described in section 501(c)(3)? "Yes," enter the amount of any tax incurred under section 4912 "Yes," enter the amount of any tax incurred by organization managers under section 4912 the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III—A Complete if the organization is exempt under section 501(c)(4), section 1(6). The substantially all (90% or more) dues received nondeductible by members? did the organization make only in-house lobbying expenditures of \$2,000 or less? did the organization agree to carry over lobbying and political expenditures from the prior year? III—B Complete if the organization is exempt under section 501(c)(4), section 3 and if either (a) BOTH Part III—A, lines 1 and 2, are answered "No" OR (b answered "Yes." use, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). urrent year arryover from last year settle of the amount on line 2c exceeds the amount on line 3, what portion of t			No			
е	th "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying turing the year, did the filing organization attempt to influence foreign, national, state or local legislation, recluding any attempt to influence public opinion on a legislative matter or referendum, through the use of foliunteers? and staff or management (include compensation in expenses reported on lines 1c through 1i)? ledia advertisements? ledia advertisements? ublications, or published or broadcast statements? is irrate to other organizations for lobbying purposes? irrect contact with legislators, their staffs, government officials, or a legislative body? allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? their activities? allies 1c through 1i and the activities in line 1 cause the organization to be not described in section 501(c)(3)? "Yes," enter the amount of any tax incurred under section 4912 "Yes," enter the amount of any tax incurred by organization managers under section 4912 fits filling organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501 (6). Were substantially all (90% or more) dues received nondeductible by members? and the organization make only in-house lobbying expenditures of \$2,000 or less? the dre organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501 and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Panswered "Yes." IVES, assessments and similar amounts from members ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of political aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues from the provide of material provides and political expenditures of nondeductible lobbying and political expenditure set macunt of lobbyi			No			
f	Grants to other organizations for lob	obying purposes?		No			
g	· · · · · · · · · · · · · · · · · ·		Yes				1,404
h	· · · · · · · · · · · · · · · · · · ·	conventions, speeches, lectures, or any similar means?	Yes		<u> </u>		545
i				No	<u> </u>		
j n-	<u>-</u>			N			1,949
2a		- ' ' ' '		No	-		
b c	· · · · · · · · · · · · · · · · · · ·						
d	· · · · · · · · · · · · · · · · · · ·				_		
		· · · · · · · · · · · · · · · · · · ·	(5) 0	r secti	ion f	501//	.1
ΓŒI		mization is exempt under section 301(c)(+), section 301(c)	,(3), 0	1 SCCL	OII S	,01(0	.,
	•					Yes	No
1	· ·				1		
2	- '				2		
3					3	<u> </u>	
Pai	and if either (a) BOT					i01(c	:)(6)
1	•		1				
2							
a	Current year		2a				
b	•		2b				
с 3		on 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		* * * * * *	<u> </u>				
-	the organization agree to carryover						
_	· ·	itiaal aynandituraa (aaa inatriistiana)	5				
5	, -	, ,					
Pro	vide the descriptions required for Part	t l-A, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated group list),	Part II-	·A, lines	1 an	d 2 (s	 ee
ins							
		· · · · · · · · · · · · · · · · · · ·					
SCH	AC AC AC MI	HE COLLEGE IS A MEMBER OF A REGIONAL CHAMBER OF COMMERCE WHEF CTIVITIES ENGAGE IN STATE AND FEDERAL LOBBYING IN ADDITION, THE DDITIONAL STAFF MEMBER SPENT APPROXIMATELY 13 HOURS IN FISCAL YOUNG ACTIVITIES FOR THE COLLEGE THESE ACTIVITIES INCLUDED PHEFINGS WITH LEGISLATORS AND OTHER GOVERNMENT OFFICIALS, SEEK OR NAZARETH COLLEGE INITIATIVES	PRESID EAR 20 ONE CO	ENT AS 17 ENG NVERS	WEL AGED ATION	L AS A) IN NS ANI)

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

Supplemental Financial Statements

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

Attach to Form 990.

DLN: 93493135043148 OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990)

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

Open to Public **Inspection**

	ZARETH COLLEGE OF ROCHESTER			Employer identifica	ation num	Dei
				16-0743088		
Pa	Organizations Maintaining Donor Complete if the organization answere			ds or Accounts.		
	complete in the organization anowers	(a) Donor advised	·	(b)Funds and other	accounts	
1	Total number at end of year	(,				
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor funds are the organization's property, subject to			or advised	☐ Yes	 □ No
6	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?				☐ Yes	□ No
Pa	rt II Conservation Easements. Complet	te if the organization a	nswered "Yes" on	Form 990, Part IV, line	7.	
1	Purpose(s) of conservation easements held by the	e organization (check all t	hat apply)			
	\square Preservation of land for public use (e g , rec	creation or education)	Preservation of	of an historically important	land area	
	Protection of natural habitat		☐ Preservation of	of a certified historic structu	ire	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservat	on contribution in th	e form of a conservation Held at the I	End of the	Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easemen			2b		
С	Number of conservation easements on a certified		` '	2c		
d	Number of conservation easements included in (c structure listed in the National Register					
3	Number of conservation easements modified, traitax year ▶	nsferred, released, exting	uished, or terminated	d by the organization during	g the	
4	Number of states where property subject to cons	ervation easement is loca	:ed ▶			
5	Does the organization have a written policy regar and enforcement of the conservation easements		ng, inspection, hand	ling of violations,	es 🗆 I	No
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of vi	olations, and enforci	ng conservation easements	during the	year
7	Amount of expenses incurred in monitoring, insper	ecting, handling of violatio	ns, and enforcing co	nservation easements durir	ng the year	
8	Does each conservation easement reported on lin	ne 2(d) above satisfy the r	equirements of secti	on 170(h)(4)(B)(ı)		
	and section 170(h)(4)(B)(ii)?			□ Y	es 🗆 l	No
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the org				
Pai	Complete of the organization answers			Other Similar Assets.		
1a	If the organization elected, as permitted under SI art, historical treasures, or other similar assets his provide, in Part XIII, the text of the footnote to it	eld for public exhibition, e	ducation, or research	n in furtherance of public se		of
b	If the organization elected, as permitted under SI historical treasures, or other similar assets held following amounts relating to these items					
	(i) Revenue included on Form 990, Part VIII, line 1			▶ \$		
(ii)Assets included in Form 990, Part X			▶ \$		<u>-</u>
2	If the organization received or held works of art, following amounts required to be reported under					
а	Revenue included on Form 990, Part VIII, line 1			> \$		
b	Assets included in Form 990, Part X			▶ \$		_
For	Paperwork Reduction Act Notice, see the Insti	ructions for Form 990.	Cat	No 52283D Schedule	D (Form 99	90) 2016

Par	t III	Organizations Ma	aintaining Coll	ections of Art,	Histor	ical T	reas	ures, or	Other	Similar A	ssets (continued	')	
3		the organization's acq (check all that apply)	uisition, accessior	, and other records	s, check	any of	the fo	ollowing t	hat are a	sıgnıfıcant	use of its	collectio	n	
а		Public exhibition			d		Loar	or excha	ange prog	rams				
b		Scholarly research			е		Othe	er						
С	Preservation for future generations													
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII													
5		g the year, did the orga s to be sold to raise fur								ılar	☐ Ye	es 🗆	No	
Pa	rt IV	Escrow and Cust Complete if the org X, line 21.			rm 990), Part	IV, ا	ine 9, or	reporte	d an amo	unt on F	Form 99	O, Pai	t
1a		e organization an agent led on Form 990, Part)		an or other interme	diary foi	r contri	bution	ns or othe	er assets i	not	☐ Ye	es 🗌	No	
b	If "Ye	es," explain the arrange	ement in Part XIII	and complete the f	ollowing	table					Amount		_	
С	Begin	ning balance							1c					
d	Addıtı	ons during the year							1d					
е	Distri	butions during the year	r						1e					
f	Endın	g balance							1f					
2a	Did th	ne organization include	an amount on Fo	rm 990, Part X, line	21, for	escrov	or cu	ustodial a	ccount lia	bility?	Y€	.e П	Mo	
b	TE 1137 -	- 11		Charle barre of the					D \	/TTT		_	1	
		s," explain the arrange												
Pē	rt V	Endowment Fund	us. Complete if	(a)Current year		reu Y Prior yea				(d)Three ye		(e)Four y	oars ba	
1a	Beainn	ing of year balance .		59,596,542		65,163	_		7,836,654		,858,988		55,593,	
	-	outions		1,258,022		1,134	-		937,528		,697,216		617,	
		restment earnings, gair	ns and losses	8,062,599		-3,449			-490,231		,237,022		6,385,	
		or scholarships		839,103		954	1,091		978,883		893,094		664,	408
		expenditures for facilities		003,103			.,032		3,0,003		050,051			—
Ū		ograms		2,358,105		2,298	3,875		2,141,283	2	2,063,478		2,073,	620
f	Admını	strative expenses .					0		0		0			0
g	End of	year balance		65,719,955		59,596	5,542	6	5,163,785	67	,836,654	į	9,858,	988
2	Provid	de the estimated percei	ntage of the curre	nt year end balanc	e (line 1	g, colu	mn (a	a)) held a	s					
а	Board	l designated or quasi-e	ndowment >	64 190 %										
Ь	Perma	anent endowment 🕨	26 790 %											
С	Temp	orarily restricted endov	wment ► 9 02	20 %										
·		ercentages on lines 2a,		d equal 100%										
За	Are th	nere endowment funds	not in the posses:	sion of the organiza	ation tha	t are h	eld ar	nd admini	stered for	the				
	-	iization by									_	Ye	_	
	(i) ur	related organizations										a(i)	N ₁	
		elated organizations .			• •							a(ii)	N ₁	<u> </u>
b		s" on 3a(II), are the rel Tibe In Part XIII the Inte	-	·			· •				· L	3b		
4					whient	Tunus								
Pa	rt VI	Land, Buildings, Complete if the ord			m 990	Part	TV III	ne 11a	See Forr	n 990 Pa	rt X lın	e 10		
	Descri	ption of property	(a) Cost or oth (investme	er basıs (b)Cos	t or other		_			epreciation		(d) Book va	lue	
12	Land					8.2	32,974	,					8.23	2,974
	Buildin					109,10				37,486,999	1		71,61	
		old improvements				-	35,189	+		13,197	 			1,992
		nent					52,848	_		32,049,858	-		12,81	
		1				•	04,363	_		40,995,292			46,80	
		· · · · lines 1a through 1e (Co	l olumn (d) must er	ual Form 990 Pari	X colu				4	¥0,993,292 •			139,49	
	Auu	mics ta dirough te (CC	Julius (u) must et	fuul i Olilli 930, Fall	. A, COIU	(0)	,е	-0(0//	•	-			. 37,49.	1,010

Schedule D (Form 990) 2016 Part VII Investments—Other Securities. Complete if the org	anızatıon answer	ed 'Yes' on Form 990,	Page : Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category	(b)Book		of valuation
(Including name of security) (1)Financial derivatives	value 43,410,551		year market value
(2)Closely-held equity interests	43,410,331		'
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Complete if the or	43,410,551 ganization answe	ered 'Yes' on Form 99	0, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value		of valuation year market value
(1)			- *****
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered 'Yes'	on Form 000 Part	IV line 11d See Form 00	00 Part V line 15
(a) Description	on Form 990, Part.	iv, mie 11a Gee Form 9.	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			•
Part X Other Liabilities. Complete if the organization answe			
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Book	< value	
(1) Federal Income taxes			
ACCRUED POSTRETIREMENT BENEFIT COSTS		11,117,638	
ASSET RETIREMENT OBLIGATION		2,323,558	
GOVERNMENT LOAN PROGRAM REFUNDABLE ADVANCES (4)		1,223,727	
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	14,664,923	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the for organization's liability for uncertain tax positions under FIN 48 (ASC 740).	ootnote to the orga	nızatıon's fınancıal staten	_

Part XI

2

а

b

c

d

е

3

4

5

1

2

b

d

е 3

а

b

c

Part XIII

5

4

b

Part XII

Schedule D (Form 990) 2016

2e

3

4c

7,324,302

-27,941,791

324,443

-17,223

27.689

324,443

27.941.791

Page 4

-20,617,489

119,555,459

307,220

119,862,679

79,359,881

Other (Describe in Part XIII)

Total expenses and losses per audited financial statements .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Other (Describe in Part XIII)

Supplemental Information

Add lines 2a through 2d

Donated services and use of facilities .

Prior year adjustments

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Subtract line 2e from line 1 .

Add lines 4a and 4b . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Net unrealized gains (losses) on investments . . .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Amounts included on Form 990, Part VIII, line 12, but not on line 1

2d Investment expenses not included on Form 990, Part VIII, line 7b.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

2a

2b 2c

2d

4b

Explanation

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2a

2b

2c

27,689 2e 3 79.332.192 4c

5

28,266,234 107,598,426 Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2015

Page 5	Schedule D (Form 990) 2015
inued)	Part XIII Supplemental Information (co
Explanation	Return Reference

Schedule D (Form 990) 2016

Additional Data

EIN: 16-0743088

Name: NAZARETH COLLEGE OF ROCHESTER

Explanation

Software ID: **Software Version:**

Supplemental Information

PART XI, LINE 2D - OTHER

ADJUSTMENTS

Return Reference

SCHOLARSHIPS AND GRANTS -27,941,791

upplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	LOSS ON DISPOSAL OF ASSETS -918 SPECIAL EVENT EXPENSES -16,305

Supplemental Information Return Reference Explanation PART XII, LINE 2D - OTHER LOSS ON DISPOSAL OF ASSETS 918 SPECIAL EVENT EXPENSES 16,305 CHANGE IN CHARITABLE GIFT ADJUSTMENTS ANNUITIES 10.466

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	SCHOLARSHIPS AND GRANTS 27,941,791

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135043148 OMB No 1545-0047 SCHEDULE E **Schools** (Form 990 or 990-▶Complete if the organization answered "Yes" on Form 990, EZ) Part IV, line 13, or Form 990-EZ, Part VI, line 48. ▶ Attach to Form 990 or Form 990-EZ. Open to Public ▶ Information about Schedule E (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Inspection Department of the Treasury Namel & the corporation **Employer identification number** NAZARETH COLLEGE OF ROCHESTER 16-0743088 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? 1 Yes 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 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? a Records indicating the racial composition of the student body, faculty, and administrative staff? 4a Yes b 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 a Students' rights or privileges? 5a Nο b Admissions policies? 5b Nο c Employment of faculty or administrative staff? 5c Nο d Scholarships or other financial assistance? 5d Nο e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? 5g Nο h Other extracurricular activities? 5h Nο If you answered "Yes" to any of the above, please explain If you need more space, use Part II 6a 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 No If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 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 Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ. Schedule E (Form 990 or 990-EZ) (2016) Schedule E (Form 990 or 990EZ) (2016)

HIGHLY VISIBLE AND FREQUENTED BY STUDENTS SCHEDULE E. PART I. LINE 6 THE COLLEGE RECEIVES FUNDING FROM THE US DEPARTMENT OF EDUCATION FOR THE FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANT, FEDERAL WORK STUDY, FEDERAL PELL GRANT PROGRAM, AND TEACH GRANTS NEW YORK STATE FUNDS VARIOUS

PROGRAMS SUCH AS HIGHER EDUCATIONAL OPPORTUNITY PROGRAM. TEACHERS OPPORTUNITY CORP. EISENHOWER GRANT, NYS TAP. NYS

Page 2

Schedule F (Form 990 or 990-F7) (2016)

EXCELLENCE, AND NYS LOTTERY AND STATE APPROPRIATIONS IN THE FORM OF BUNDY AID AND HIGH NEEDS NURSING AID

b Total from continuation sheets to 0 0 14,156,275	efile GRAPHIC prin	t - DO NOT F	PROCESS	As Filed Data -	ta - DLN: 93493135043148				
Department of the Treasum Internal Revenue Service Name of the organization about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization NAZARETH COLLEGE OF ROCHESTER Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of offices in the region tregion (b) Number of offices in the region to recomplete in the organization answered "Yes" to Form 990, Part IV, line 14b. (c) Number of offices in the region to region (b) Number of offices in the region to region (b) Number of offices in the region to region (b) Number of offices in the region to recomplete in region (b) Number of offices in the region to region (b) Number of offices in the region to region (b) Number of the Organization answered "Yes" to Form 990, Part IV, line 14b. (c) Number of offices in the region to region (b) Number of offices in the region (b) Number of offices in the region (b) Number of the Organization of the Orga		State	Statement of Activities Outside the United States			_			
Part IV, line 14b, 15, 20 See separate instructions. Part IV, line 14b, 15, 20 See separate instructions. Part IV, line 14b, 15 See separate instructions. Part IV, line 14b, 15 See separate instructions is at www.irs.gov/form990. Comparison of the organization number 16-0743088	(► Complet	_		990,	2016		
Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Inspection			- A++						
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(3) (4) (5) 3a Sub-total b Total from continuation sheets to 0 0 14,156,275	(1) See Add'l Data				J ,				
(4) (5) 3a Sub-total b Total from continuation sheets to 0 0 0 363,046 14,156,275	(2)								
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b Total from continuation sheets to 0 0 14,156,275	(5)								
	3a Sub-total			0 0			363,046		
Part I	b Total from continual Part I	tion sheets to		0			14,156,275		
1 21 2	c Totals (add lines 3			<u> </u>			14,519,321		

(5) (6) (7)

(8) (9) (10) (11) (12)

(13) (14)

(15) (16) (17) (18) Page 3

Schedule F (Form 990) 2016

Part III can be duplicated if additional space is needed. (c) Number of (a) Type of grant or assistance (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement of non-cash valuation non-cash (book, FMV, assistance assistance appraisal, other)

(1) See Add'l Data (2)

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.

(3)

(4)

Sche	dule F (Form 990) 2016		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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)		
	Instructions for Forms 5520 and 5520 Ay	☐ Yes	✓ No
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)	☐Yes	☑ No
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)	✓ Yes	□No
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)		
		✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713)	☐ Yes	✓ No

ochedule i (i	orm 990) 2016 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).
Return Referenc	Explanation

Additional Data

MIDDLE EAST AND NORTH

AFRICA

Software ID: Software Version:

0

EIN: 16-0743088

Name: NAZARETH COLLEGE OF ROCHESTER

AWARDED FINANCIAL AID

6,500

rorm 990 Schedule r Par	t 1 - Activities	Outside The C	Inited States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING	AWARDED FINANCIAL AID	121,546
EUROPE	n	0	GRANTMAKING	AWARDED FINANCIAL AID	67,486

0 GRANTMAKING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) AWARDED FINANCIAL AID NORTH AMERICA 0 IGRANTMAKING 38.056 SOUTH AMERICA 0 IGRANTMAKING AWARDED FINANCIAL AID 45,424 SOUTH ASIA O IGRANTMAKING AWARDED FINANCIAL AID 12,000

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) ASIA 0 GRANTMAKING AWARDED FINANCIAL AID 69.394 2,640 EUROPE 0 PROGRAM SERVICES GRADUATE TUITION **LASSISTANCE** EAST ASIA 0 PROGRAM SERVICES GRADUATE TUITION 16,519 LASSISTANCE

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) SOUTH AMERICA 0 PROGRAM SERVICES GRADUATE TUITION 2,640 IASSISTANCE CENTRAL AMERICA AND THE 0 PASSIVE FOREIGN 14,137,116 CARIBBEAN INVESTMENTS

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, FMV, appraisal, recipients assistance assistance other) FINANCIAL AID 10 121,546 CREDIT ON THE FAIR MARKET EAST ASIA ISTUDENT VALUE AND THE PACIFIC 67.486 CREDIT ON THE FAIR MARKET FINANCIAL AID FUROPE ISTUDENT VALUE

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal. other) FINANCIAL AID 6,500 CREDIT ON THE FAIR MARKET MIDDLE EAST STUDENT IVALUE IAND NORTH IAFRICA 38.056 CREDIT ON THE FAIR MARKET FINANCIAL AID INORTH ISTUDENT IVALUE IAMERICA

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (e) Manner of cash (f) Amount of (q) Description of (h) Method of (c)Number (d) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) FINANCIAL AID 45,424 CREDIT ON THE FAIR MARKET ISOUTH ISTUDENT IVALUE IAMERICA FINANCIAL AID 12,000 CREDIT ON THE FAIR MARKET ISOUTH ASIA ISTUDENT IVALUE

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (h) Method of (f) Amount of (q) Description of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) FINANCIAL AID 69,394 CREDIT ON THE FAIR MARKET ASIA ISTUDENT IVALUE FINANCIAL AID 2,640 CREDIT ON THE IFAIR MARKET IEUROPE ISTUDENT VALUE

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (e) Manner of cash (f) Amount of (q) Description of (h) Method of (d) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) FINANCIAL AID 16,519 CREDIT ON THE FAIR MARKET LEAST ASIA ISTUDENT IVALUE FINANCIAL AID 2,640 CREDIT ON THE FAIR MARKET ISOUTH IVALUE ISTUDENT IAMERICA

SCHEDULE G

DLN: 93493135043148

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" on 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. Inspection

Nar	me of the organization ZARETH COLLEGE OF ROCHI	ESTER	date o (10	550 01 1	550 EZ, and its instructions	.s at <i>www m</i> s		entification number		
							16-0743088			
P		ctivities. Complete ers are not required			on answered "Yes" on s part.	Form 990,	, Part IV, line :	17.		
1	Indicate whether the orga	anızatıon raısed funds	through a	any of the	following activities Che	ck all that a	ıpply			
а	a ☑ Mail solicitations e ☑ Solicitation of non-government grants									
b	✓ Internet and email so	licitations			f 🗹 Solicitation of g	overnment	grants			
c	✓ Phone solicitations				g 🗸 Special fundrais	ing events				
d	✓ In-person solicitation:	s								
2 a	Did the organization have or key employees listed i							es 🗆 No		
b	If "Yes," list the ten higher to be compensated at lea			fundraisei	rs) pursuant to agreemer	nts under w				
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai custo cont contrib	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	or re fundra	ount paid to stained by) iser listed in sol (i)	(vi) Amount paid to (or retained by) organization		
1	RUFFALO NOEL LOVITZ PO BOX 3018 CEDAR RAPIDS, IA 52406	MANAGE THE COLLEGE PHONATHON SOLICITATIONS	Yes	No No	C		64,250	-64,250		
2										
3										
4										
5										
6										
7										
8										
9			1							
10			1							
Tot	tal		1	▶			64,250	-64,250		
3	List all states in which the o	organization is registe	red or lice	nsed to s	solicit contributions or ha	l s been notif	·	·		

licensing

Revenue

Direct Expenses

Revenue

Expenses |

Direct

If "Yes," explain _

Page 2 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (b) Event #2 (a)Event #1 (c)Other events (d) Total events ATHLETICS GOLF (add col (a) through **TOURNAMENT** (event type) (total number) col (c)) (event type) 1 Gross receipts. 61,085 61,085 2 Less Contributions. 40,385 40,385 3 Gross income (line 1 minus 20,700 20,700 line 2) 4 Cash prizes 465 465 5 Noncash prizes Rent/facility costs 15.524 15,524 7 Food and beverages 8 Entertainment Other direct expenses 316 316 **10** Direct expense summary Add lines 4 through 9 in column (d) . . . 16,305 11 Net income summary Subtract line 10 from line 3, column (d) 4,395 Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/Instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue . 2 Cash prizes Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes % Yes % Yes % 6 Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities _ ☐ Yes ☐ No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain . 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

Sche	dule G (Form 990 or 990-EZ) 2016					F	age
11	Does the organization conduct gaming	j activities with nonmember	s?		☐Yes	□No	
12	Is the organization a grantor, benefici- formed to administer charitable gamin		a member of a partnership or other entity		□Yes	□No	
13	Indicate the percentage of gaming act	ivity conducted in					
а	The organization's facility			13a			
b	An outside facility			13b			(
14	Enter the name and address of the pe	rson who prepares the orga	nization's gaming/special events books and re	ecords			
	Name •						
	Address >						
15a	Does the organization have a contract revenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b			ganization ▶ \$ and th	ne			
	amount of gaming revenue retained b	y the third party $ hildsymbol{ ho}$ \$					
С	If "Yes," enter name and address of the	ne third party					
	Name •						
	Address ►						
16	Gaming manager information						
	Name ►						
	Gaming manager compensation $ hilder$ $\$$						
	Description of services provided						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions						
а	,	te law to make charitable di	stributions from the gaming proceeds to		_		
_	retain the state gaming license?				☐ Yes	□ No	
b	·		uted to other exempt organizations or spent				
D.	in the organization's own exempt activ			- (···) -	and (). a	ad Dawt	
Pal		l5c, 16, and 17b, as app	tions required by Part I, line 2b, column licable. Also complete this part to provid				
	Return Reference		Explanation				
			<u>'</u>	ule G (F	orm 990 or	990-EZ)	201

efile GRAPHIC print - DO NOT PROCESS DLN: 93493135043148 As Filed Data OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) 2016 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** NAZARETH COLLEGE OF ROCHESTER 16-0743088 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 ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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) Amount of non-(f) Method of valuation (h) Purpose of grant (g) Description of (book, FMV, appraisal, organization if applicable non-cash assistance grant cash or assistance or government assistance other) (1) (3) (5) (6)(7) (8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2016

Explanation Return Reference

PART I, LINE 2 ALL COLLEGE SCHOLARSHIPS AND GRANTS ARE AWARDED THROUGH THE FINANCIAL AID PROCESS AND ARE RECORDED AS CREDITS ON THE STUDENTS' ACCOUNTS THESE AWARDS HELP TO OFFSET THE COST OF TUITION, FEES AND ROOM AND BOARD THE SCHOLARSHIPS AND GRANTS ARE TRACKED IN THE

COLLEGE'S ERP SYSTEM AND MONITORED FOR COMPLIANCE WITHIN THE FINANCIAL AID OFFICE TO COMPLY WITH INTERNAL AND EXTERNAL REGULATIONS Schedule I (Form 990) 2016 efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493135043148

OMB No 1545-0047

2015

Open to Public Inspection

Schedule J (Form 990)

Compensation Information

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

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

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization NAZARETH COLLEGE OF ROCHESTER 16-0743088 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) 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 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 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 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4h Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4c** 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. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5а Νo 5h Any related organization? Νo If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 67 If "Yes," describe in Part III 7 Yes Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

Schedule J (Form 990) 2015							Page Z		
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 on 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 W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Co							(F) Compensation in		
	Base (1) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990		

Cahadula 1 (Farm 000) 201 F

See Additional Data Table

Schedule J (Form 990) 2015	Page 3						
Part III Supplemental Information							
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information							
Return Reference Explanation							
Return Reference	Explanation						
	Explanation SOCIAL CLUB MEMBERSHIPS PROVIDED FOR BUSINESS USE						

Schedule J (Form 990) 2015

Software ID: Software Version:

EIN: 16-0743088

Name: NAZARETH COLLEGE OF ROCHESTER

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

(A) Name and Title (I (Ba Compe		(B) Breakdown of (i) Base Compensation	W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation		(C) Retirement and other deferred compensation	(D) Nontaxable benefits		(F) Compensation in column (B) reported as deferred on prior Form 990
1DAAN BRAVEMANPRESIDENT	(1)	320,255	0	95,359	47,390	9,973	472,977	0
	(11)	0	0	0	0	0	- 0	0
1IAN MORTIMER VICE PRESIDENT FOR	(1)	192,553	0	0	15,404	7,173	215,130	0
ENROLLMENT MANAGE	(11)	0	0	0	0		0	0
2SARA VARHUS VICE PRESIDENT FOR	(1)	202,500	0	960	20,250	973	224,683	0
ACADEMIC AFFAIRS	(11)	0	0	0	0			0
3PATRICK RICHEY VICE PRESIDENT FOR	(1)	197,203	0	960	15,776	973	214,912	0
FINANCE AND ADMIN	(11)	0	0	0	0		0	0
4KELLY GAGAN VICE PRESIDENT FOR	(1)	184,935	0	960	18,493	1,018	205,406	0
INSTITUTIONAL ADV	(11)	0	0	0	0			0
5KEVIN WORTHEN VICE PRESIDENT FOR	(1)	135,981	0	960	13,598	9,357	159,896	0
STUDENT DEVELOPME	(11)	0	0	0	0			0
6ELLEN HOROVITZ PROFESSOR AND DIRECTOR	(1)	84,345	0	264,406	8,434	9,059	366,244	0
OF GRADUATE A	(11)	0	0	0	0			0
7DIANNE OLIVER DEAN IN COLLEGE OF ARTS &	(1)	143,032	0	720	11,443	9,973	165,168	0
SCIENCES	(11)	0	0	0	0			0
8 BRIGID NOONAN DEAN IN SCHOOL OF HEALTH	(1)	135,941	0	0	10,717	5,215	151,873	0
& HUMAN SER	(11)	0	0	0	0			0
9TRINA MARQUEZ ASSOCIATE VICE PRESIDENT	(1)	127,026	0	960	12,703	10,236	150,925	0
FOR CAMPUS	(11)	0	0	0	0	. 0	0	0

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493135043148 OMB No 1545-0047 Schedule K Supplemental Information on Tax Exempt Bonds (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990. Open to Public Department of the Treasury ▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number NAZARETH COLLEGE OF ROCHESTER 16-0743088 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing ıssuer Yes No Yes No Yes No MONROE COUNTY INDUSTRIAL 51-0188852 61075TBE7 08-04-2011 23,765,000 NEW CONSTRUCTION OF A Χ Χ DEVELOPMENT CORPORATION BUILDING AND REFUNDING OF 2004B BONDS COUNTY OF MONROE 16-1005429 610752EK9 01-30-2008 9,030,000 TO FINANCE CONSTRUCTION OF A Х Х Х INDUSTRIAL DEVELOPMENT BUILDING AND SITE **AGENCY** IMPROVEMENTS Х MONROE COUNTY INDUSTRIAL 51-0188852 61075TFT0 06-13-2013 13,905,000 REFUNDING OF SERIES 2001 Χ Χ DEVELOPMENT CORPORATION Part II Proceeds 4,885,000 1,790,000 2,750,000 2 3 23,542,430 9,030,000 14,625,806 4 5 931,722 6 7 335,820 448,626 647,870 8 9 10 15,000,000 8,567,632 11 126,548 518 12 13 2012 2009 2013 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Х Χ Х 14 Were the bonds issued as part of an advance refunding issue? 15 Χ Χ Χ Х Х Х 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Χ Х Part III **Private Business Use** C Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Χ Χ Χ Are there any lease arrangements that may result in private business use of bond-financed Χ Χ Χ For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50193E Schedule K (Form 990) 2016 C

d

Yes

C

No

X

Χ

0 %

0 %

0 %

Χ

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D

Schedule K (Form 990) 2016

Nο

Yes

Yes

Page 2

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12

Has the organization established written procedures to ensure that all nongualified bonds of

counsel to review any research agreements relating to the financed property?

Penalty in Lieu of Arbitrage Rebate? . . .

If "No" to line 1, did the following apply?

Rebate not due yet?

hedge with respect to the bond issue?

Exception to rebate?

Was the hedge superintegrated?

Was the hedge terminated?

Arbitrage

Part IV

c

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Does the bond issue meet the private security or payment test? . . .

Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were

Yes

Nο

Χ

Χ

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0 %

0 %

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Yes

Χ

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X

X

BANK

JP MORGAN CHASE

В

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Yes

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Yes

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Χ

Yes

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C

No

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Χ

SCHEDULE K, PART II, LINE 3

(GIC)?

Yes

Page 3

No

D

No

Yes

Were gross proceeds invested in a quaranteed investment contract Χ Χ

Yes

No

В

No

Yes

No

Χ

No

C

Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? Were any gross proceeds invested beyond an available temporary Х Χ period? Has the organization established written procedures to monitor the

Yes

Χ Χ requirements of section 148? . . . Part V **Procedures To Undertake Corrective Action** В

				-	i			
			Yes	No	Yes	No	Yes	
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			
Part VI	Supplement	tal Information. Provide additional information for responses to questions on Schedule K (see instructions)						
Return Reference		Explanation						

08/04/2011 23,765,000 MONROE COUNTY INDUSTRIAL DEVELOPMENT CORPORATION - BOND ISSUES A AND C, AS REFERENCED IN SCHEDULE K PART I, EACH DISCLOSES AN ISSUE (PART I, E) THAT DIFFERS FROM THE PROCEEDS

OF ISSUE (PART II, LINE 3) EQUAL TO THAT OF THE DISOUNT OR PREMIUM ASSOCIATED WITH THE ISSUE

Return Reference	Explanation
SCHEDULE K, PART V	08/04/2011 23,765,000 MONROE COUNTY INDUSTRIAL DEVELOPMENT CORPORATION - CURRENTLY THE COLLEGE DOES NOT HAVE A WRITTEN POLICY IN PLACE, HOWEVER, THERE ARE PROCEDURES BEING FOLLOWED TO ENSURE COMPLIANCE

Return Reference	Explanation
SCHEDULE K, PART V	01/30/2008 - 9,030,000 COUNTY OF MONROE INDUSTRIAL DEVELOPMENT AGENCY - CURRENTLY THE COLLEGE DOES NOT HAVE A WRITTEN POLICY IN PLACE, HOWEVER, THERE ARE PROCEDURES BEING FOLLOWED TO ENSURE COMPLIANCE

Return Reference	Explanation
SCHEDULE K, PART V	06/13/2013 13,905,000 MONROE COUNTY INDUSTRIAL DEVELOPMENT CORPORATION - CURRENTLY THE COLLEGE DOES NOT HAVE A WRITTEN POLICY IN PLACE, HOWEVER, THERE ARE PROCEDURES BEING FOLLOWED TO ENSURE COMPLIANCE

efile GRAPHI	C print - DO NO	T PROCES	S As F	iled Data -					DI	_N: 93	4931	.3504	13148
Schedule L (Form 990 or 990	ı-EZ)	Transactions with Interested Persons ▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,					OMB No 1545-0047						
		105 01110	or Form	990-EZ, Part	V, line 38a o	r 40b.	, o. _	,			20		b
Department of the Tre Internal Revenue Serv	asurv	ormation abo		ch to Form 99 ule L (Form 99 <u>www.irs.gov</u>	90 or 990-EZ		ructio	ns is	at		pen		ıblic
Name of the org NAZARETH COLLEG								•	yer id 3088	entifica	ition r	umb	er
	ss Benefit Trar												
	lete if the organiza) Name of disquali										(4) Cor	octod?
1 (a) Name of disquair	squalified person		(b) Relationship between disqualified person and organization			iiu	(c) Description of transaction		(d) Corrected? Yes No			
Part II Loa Con rep (a) Name of	mount of tax, if and ans to and/or I an amount of the organization with organization	From Interestation answer n Form 990, F	ested Perred "Yes" o Part X, line (d) Loan	rsons. n Form 990-EZ 5, 6, or 22			90, Pai	Part IV, line 26, or i (g) In lefault? Approved b board or committee		h) ved by rd or	(i)Written by agreement?		
			То	From			Yes	No	Yes	No	Yes		No
										1			
Total Part IIII Gra	nts or Assistar	ce Renefiti	ina Inter		> \$ ne								
	nplete if the orga					line 27.							
(a) Name of inter	rested person (b) Relationship erested persoi organizati	n and the	(c) Amount	of assistance	(d) Type	of assı	stand	ce	(e) Pu	rpose (of assi	stance
									_				
									\dashv				
									$-\!\!\!\!+$				
For Danamuark Dad	luction Act Notice s	ee the Instruc	tions for Ea	rm 990 or 900-1	7 C-	at No 50056A		C - 1		I (Eorm	000 =	- 000	F7\ 201

	between interested person and the organization	transaction		of organization's revenues?	
				Yes	No
(1) SERGIO ESTEBAN	BOARD CHAIR		SERGIO ESTEBAN, CHAIR OF THE BOARD, IS THE CEO OF LABELLA ASSOCIATES, A CONSTRUCTION COMPANY USED BY THE COLLEGE FOR CAPITAL PROJECTS DURING THE YEAR		No

Return Reference

Supplemental Information

Part V

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

Explanation

Schedule L (Form 990 or 990-EZ) 2016

DLN: 93493135043148 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2016 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** NAZARETH COLLEGE OF ROCHESTER 16-0743088 Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line Art—Works of art . . 2 Art—Historical treasures Art-Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes . 8 Intellectual property Securities—Publicly traded . Χ 732,669 FAIR MARKET VALUE 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution-Historic structures 14 Qualified conservation contribution—Other . Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . 18 Collectibles . . Food inventory . . . 19 20 Drugs and medical supplies . 21 Taxidermy . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . Other ▶ (______ **26** Other ▶ (___ Other ▶ (_____ 27 Other ► (___ 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 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 Nο 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? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II Schedule M (Form 990) (2016) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2016)	Page 2				
Part II Supplemental Info					
Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.					
Return Reference	Explanation				
	Schedule M (Form 990) (2016)				

efile GRAPHIC print - DO NOT PROCESS As Filed Data -				DLN: 9349313504314				
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury Supplemental Information to Form 990 or 990- Supplemental Information for responses to specific questions or pounds any additional information. Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instruction www.irs.gov/form990.					ons on n.	2016 Open to Public Inspection		
Name of the org NAZARETH COLLECT	GE OF ROCHE	STER Dlemental Information			Employer iden 16-0743088	tification number		
Return Reference				Explanation				
FORM 990, PART VI, SECTION A, LINE 1	RUSTEES S ELECT YEAR AN E GOVEF BOARD IS H IN THE OF THE E	S, THE PRESIDENT OF THI ED BY THE BOARD OF TRI ID UNTIL THEIR SUCCESS RNING BOARD SCOPE OF S NOT IN SESSION, AND N JUDGMENT OF THE EXEC	E COLLEGE, AND N JSTEES THE EXEC ORS ARE ELECTED AUTHORITY - THE IAY EXERCISE ALL CUTIVE COMMITTE COMMITTEE SHALL	TS OF THE CHAIR AND VICE IO FEWER THAN TWO AND NO CUTIVE COMMITTEE SHALL S O AND QUALIFIED ALL COMM COMMITTEE SHALL HAVE TH THE POWERS OF THE BOAR E SHOULD NOT BE DELAYED MAKE A FORMAL REPORT O	O MORE THAN I ERVE FOR A TE ITTEE MEMBER IE POWER TO A D IN ALL MATTE UNTIL THE NEX	OUR TRUSTEE RM OF ONE S ARE ON TH CT WHEN THE RS WHIC (T MEETING		

Return Explanation
Reference

FORM 990, THE AUDIT COMMITTEE, A SUB-COMMITTEE OF THE GOVERNING BODY, REVIEWED THE 2016 FORM 990 IN PART VI, DETAIL PRIOR TO ITS FILING AFTER APPROVAL OF THE AUDIT COMMITTEE, A FINAL DRAFT OF THE FO SECTION B, RM 990 IS DISTRIBUTED TO THE ENTIRE BOARD OF TRUSTEES PRIOR TO FILING

LINE 11B

Return Explanation
Reference

FORM 990, WHILE VARIOUS DEPARTMENTS WITHIN THE COLLEGE HAVE SPECIFIC GUIDELINES THAT THEY FOLLOW REL PART VI, ATED TO DOCUMENT RETENTION AND DESTRUCTION, THERE IS NO INSTITUTION WIDE WRITTEN DOCUMENT SECTION B, RETENTION AND DESTRUCTION POLICY

Return Explanation

Reference

FORM 990.

PART VI,
SECTION B,
LINE 12C

IN THE ASSISTANT SECRETARY TO THE BOARD AND THE SECRETARY TO THE COLLEGE THE INFORMATION R
ECEIVED IS COMPILED, ANALYZED, MAINTAINED AND MONITORED BY THE COLLEGE'S GENERAL COUNSEL
ALL RESULTS ARE FORWARDED TO THE CHAIR OF THE BOARD OF TRUSTEES, THE CHAIR OF THE AUDIT CO
MMITTEE, THE CHAIR OF THE TRUSTEESHIP COMMITTEE, COLLEGE'S PRESIDENT, AND VICE PRESIDENT F
OR FINANCE AND ADMINISTRATION ON A QUARTERLY BASIS THE CONTROLLER'S OFFICE REVIEWS ALL VE
NDOR PAYMENTS FOR CONFLICTS AND DISCLOSES ALL ACTIVITY TO THE AUDIT COMMITTEE AT EACH MEET
ING

THE COLLEGE ANNUALLY DISTRIBUTES THE CONFLICT OF INTEREST POLICY TO THE TRUSTEES. OFFICERS

Return

Reference	·
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION SUB-COMMITTEE, A SUB-COMMITTEE OF THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES, MEETS ANNUALLY TO REVIEW THE PRESIDENT'S PERFORMANCE AS COMPARED TO THE GOALS S ET FORTH FOR HIM FROM THE PREVIOUS FISCAL YEAR IN ADDITION, THE SUB-COMMITTEE'S RECOMMEND ATIONS ALONG WITH DATA FROM AN INDEPENDENT COMPENSATION CONSULTANT ARE SUBMITTED TO THE EX ECUTIVE COMMITTEE FOR REVIEW AND ENDORSEMENT ONCE APPROVED BY THE EXECUTIVE COMMITTEE, THE RECOMMENDATIONS ARE CONSIDERED AND VOTED ON BY THE FULL BOARD OF TRUSTEES IN EXECUTIVE S ESSION COMPENSATION LEVELS FOR THE VICE PRESIDENTS OF THE COLLEGE ARE DETERMINED ANNUALLY BY THE PRESIDENT, WITH REVIEW AND ENDORSEMENT FROM THE EXECUTIVE COMMITTEE OF THE BOARD INPUTS INCLUDE PERFORMANCE TO ANNUAL GOALS, AN OVERALL ASSESSMENT OF SIGNIFICANT CONTRIBUTIONS TO AND LEADERSHIP OF THE COLLEGE, AS WELL AS COMPETITIVENESS OF PAY RELATIVE TO COMPA RABLE INSTITUTIONS ON A PERIODIC BASIS, AN INDEPENDENT CONSULTANT IS ENGAGED TO REVIEW FOR REACH VICE PRESIDENT, TO PROVIDE COMPETITIVE MARKET INFORMATION, AND TO RECOMMEND ADJUSTMENTS FOR CONSIDERATION BY THE PRESIDENT AND EXECUTIVE COMMITTEE

Explanation

Return Explanation

FORM 990, PART VI, SECTION C, LINE 19

Return Explanation Deference

Reference	
	OTHER CHANGES IN NET ASSETS 700,877 POST RETIREMENT CHANGES OTHER THAN NET PERIODIC BENEF IT COST 1.127.345 CHANGE IN CHARITABLE ANNUITIES -10.466
I AIXI AI,	11 COOT 1,121,040 CHANGE IN CHANTABLE ANNOTHES -10,400

LINE 9

Return Explanation Reference

FORM 990. NO CHANGES WERE MADE TO OVERSIGHT PROCESS OR SELECTION PROCESS RELATED TO INDEPENDENT AUDITORS DURING THE CURRENT YEAR PART XII.

LINE 2C

990 Schedule O, Supplemental Information